COMMUNITY
CONVERSATION
ON
SUBSTANCE
ABUSE
IN
MONTGOMERY
COUNTY

November 6
Public Deliberation Report

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December 2013

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Introduction

The Wabash College Rhetoric Department, partnering with the Montgomery County Prescription Drug Task Force, the Montgomery County Probation Office, and the Montgomery County Youth Service Bureau, hosted a public deliberation on November 6, 2013. The deliberation, entitled "A Community Conversation on Substance Abuse in Montgomery County," was held at the 4-H Building on the Montgomery County Fairgrounds.

In the spring of 2013, members of the Wabash College Rhetoric Department became interested in holding a public deliberation on an issue of community concern. Faculty and students from the department interviewed a variety of community members and leaders, asking these individuals to identify issues that would benefit from public discussion. After more than twenty interviews, it became clear that substance abuse was a pressing and urgent issue in Montgomery County.

On November 6, more than 100 participants attended the Community Conversation event. When they arrived, participants were given a 4-page National Issues Forum-style[1] framing document that laid out the problem and three approaches to the problem.[2] This framing guide was created by Jennifer Abbott and Sara Drury (Wabash College Rhetoric faculty) after extensive research and interviews with community members. The Community Conversation began with a welcome from Sara Drury, who also explained the deliberative process and laid out ground rules for the conversation. Participants viewed a short video, created by Adam Bowen of the Wabash College Media Center, on the issue of substance abuse in Montgomery County, that featured interviews with key community leaders and discussed three approaches to the problem. Trained facilitators led their table through the discussion, and each table had a trained notetaker who kept track of the conversation on a flip chart.

This report analyzes the data from 10 sets of table notes and 78 individual participant worksheets gathered on November 6, 2013. All data collection was anonymous.[3] The raw data from table notes has been made available to the public via the Community Conversation website. Additionally, the worksheets were shared with partnering organizations. This report summarizes and interprets the data from the table notes and worksheets in order to provide information to the community for moving towards action on the issue of substance abuse. This report is *not* meant to be an accurate portrayal of public opinion in Montgomery County. The public deliberation event was not representative of all community members' opinions and ideas, as the participants in the public deliberation do not represent all stakeholders and concerned community members. As such, this document does not suggest a particular action or set of actions, but rather reports on the outcomes of the specific deliberation event with unbiased ground rules and trained facilitators to encourage productive conversation between community members. **This report therefore provides observations and analysis on the November 6 Community Conversation event, focusing on the facilitator-led conversations and insights from facilitator and participant feedback.**

The report is divided into four parts. First, the background section discusses the format and procedures of the conversation, as well as how data was collected. Second, the descriptive analysis section goes through each approach and identifies compelling arguments, concerns, tensions raised by participants within each approach, as well as common ground. Quotations

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[1] For more on the National Issues Forum, or NIF, go to http://www.nifi.org.
[2] The Montgomery County Community Conversations website hosts copies of the framing document, the framing video, and table notes and can be accessed at: https://sites.google.com/site/mccommunityconversations/.
[3] Data collection was approved on October 7, 2013 by Wabash College IRB, #1310201.

from the table notes and worksheets help to illustrate particular aspects of each approach. The third section is an assessment of the participants' reflections at the end of the deliberation. Finally, we offer some concluding remarks on the process and steps for moving forward on this public issue.

<div align="center">**Background**</div>

As mentioned above, this community conversation was initially organized by the Wabash College Rhetoric Department after interviews with community members about pressing public problems. In these interviews, the faculty and students asked community members to identify a range of public problems, then prioritize those problems, and then consider which problems would benefit from a public discussion. Substance abuse quickly emerged as a significant community problem that would benefit from public discussion. Such problems are called "wicked problems," or problems that require broad discussion, consideration, and participation from the community to implement positive change.

To facilitate conversations on the issue and help community members identify preferable actions, the Community Conversation used a framing guide designed by Jennifer Abbott and Sara Drury. By framing guide, we mean a presentation of the problem in a localized context and then three broad approaches towards alleviating the problem. In order to create the framing guide, Jennifer Abbott and Sara Drury researched the problem of substance abuse in Montgomery County. Their research included documents from state health organizations, the Montgomery County Community Health Assessment, articles in *The Journal Review* and *The Paper of Montgomery County*, and interviews with community leaders. Before using the framing guide at the November 6th Community Conversation event, comments were solicited from partnering organizations and other community members to ensure that the framing was unbiased and representative of Montgomery County. When participants arrived at the November 6 Community Conversation event, they were given a copy of the framing guide to look at and use during the deliberation.

The framing guide presented the problem and the following three approaches to the public issue:

(1) We should build and protect a safe community by strengthening efforts that identify and punish drug offenders.
(2) We should develop the knowledge, habits, and community assets to prevent substance abuse in the first place.
(3) We should enable people who struggle with substance abuse to receive the treatment and help necessary to recover from addiction and re-enter the community as productive members.

While these approaches were not exclusive of one another in terms of engaging the problem, the facilitators encouraged their small table groups to discuss each approach separately to more fully investigate all the potential actions, concerns, and tensions.

When participants arrived, they were invited to sit at one of ten tables assembled in the 4-H Building main hall. There was no assigned seating, although community members were encouraged to sit with people they did not know. Each table had a trained facilitator and notetaker, who were students and faculty from Wabash College. The facilitators led their table first through a discussion of what motivations each person had for attending the event, then through consideration of each approach, and finally into a reflection period about discovered common ground, remaining questions, and significant actions. The notetaker took down abbreviated notes of the conversation. The deliberation process took about 90 minutes, and

then participants were invited to fill out an individual reflection worksheet. Each facilitator and notetaker also filled out a reflection worksheet about their table's conversation.

To write this report, we examined the table notes, participant worksheets, and facilitator worksheets. For most of our observations and insights, we are not trying to represent numerical public opinion or recount what was said at each table. In fact, we only asked four questions on the worksheet that have numeric value (these are included in the concluding remarks). Instead, in creating this report, we read and analyzed all of the available data, specifying the most frequent themes, supporting arguments, and also identifying less dominant but still significant topics.

<u>Analysis of Deliberation on Approaches</u>

Before turning to the analysis of each approach, it is worth noting the numerous reasons that brought participants to the Community Conversation. Many participants reported attending because they knew someone whose life had been personally affected by substance abuse, citing a family member or close friend who had or was still struggling; some identified as "in recovery" from substance abuse. The participants also included community members who stated their concerns about the seeing the effects of drugs near their homes or worries over children in Montgomery County. Participants also attended because of their professional connection to substance abuse (health care, education, social services, treatment). There were quite a few elected and government officials present. Still others stated they came because of a desire to help the community improve, seeking "practical solutions" where the "rubber meets the road."

Approach 1 Build a Safe Community

As participants considered the first approach, a few significant themes came to the forefront. In some ways, **increasing law enforcement** was seen as attractive because it might "remove dangers" from the community and hold people accountable for their actions. Some discussed a neighborhood watch as a way to combine self-policing with law enforcement, and reported that one street in Crawfordsville recently organized such a watch. A safer community might encourage "industry" to move to our community, providing jobs to help stabilize Montgomery County. Others suggested using canine narcotics units at business, public events, and schools, halting supplies and punishing users. Questions were raised about whether it is more effective to target those who abuse substances or those who deal substances. When considering these actions, however, participants also raised concerns about **limiting individual freedom and civil liberties** of law-abiding citizens. As one participant put it, it's hard to know "where do you drawn the line" with enforcement. Tables asked questions about current laws, probation programs, and law enforcement strategies.

A few participants stressed that there may be a need for **stronger penalties**, suggesting that those who abuse substances may need consequences to prompt them into getting help. For the young, a "shock penalty" might encourage them against this sort of behavior in the future. There was concern, however, that increased penalties **may not help curb substance abuse behavior**, and that individuals in jail or recently out of jail **need treatment or they will go back** to abusing illegal substances. One participant even wrote, "after awhile, jail doesn't help" stop the cycle. There were also questions about current laws and punishment standards.

Finally, conversation in this approach also focused on creating a safe, substance-free community for young people. There were calls for **tougher regulations for youth,** with suggestions that this is the intervention where the community might be able to make a difference due to students being at public schools**.** Some suggested mandatory drug testing for

all students in middle and high school, not just for athletes and students during the season. Testing could be coupled with "interviews" to find out more about why students are using, as well as counseling for students who test positive. Participants also discussed more random locker checks, with clear and strict penalties. However, a concern remained that if **parents are encouraging or using illegal substances**, then enforcement might not dissuade young people from substance abuse. Furthermore, there was a desire to focus on **treatment rather than punishment** in young people, who might be making a bad decision and still have time to change. "Suspension without help" sometimes "becomes a problem" for students, who turn to repetitive behavior; one table pointed to the need for "prosocial" programs with oversight to help students move away from substance abuse.

Underlying all three of the themes above was the concern of **cost**. In particular, the desire to implement more testing in the schools was often paired with a concern over the cost of these approaches, as well as questions about effectiveness for the cost paid. From the data, it seemed that while many cited this as a concern, few had time to push towards a deeper discussion about whether additional costs would be a tradeoff the community could or needed to live with.

Approach 2 Prevent Substance Abuse
Prevention was seen as an approach that might halt the growth of the problems of substance abuse in our community, particularly for the next generation. As one participant wrote, "This approach is proactive and if implemented in a way that works you can prevent problems … later." The participants' conversations reflect both compelling arguments for this action as well as remaining concerns about the effectiveness of prevention.

Public schools were identified as an important site for these preventive efforts. Participants encouraged broad-based prevention programs: "get in the schools every year from K through 12," starting in "early elementary," and suggesting that programs could be combined with life skills programs and "confidence"-building because "students who need it are the most at risk" for substance abuse. These programs were seen as more effective if **real-life examples** were used, perhaps even having former addicts come to school ("it's been done"). However, there was concern over the content of these programs, with some asking for an opt-out clause for **parents who do not want their children participating**. Along the lines of real-life examples, some encouraged the **media to publish statistics** about the dangerous effects of abuse: "every time" there is a drug death, the newspaper should "report it." Furthermore, it was noted that school-based programs rarely help the many **adults** in our community who might need the prevention message, and that adults may lessen the effectiveness if they are "getting high" or giving children space to drink or use drugs.

Other themes under this approach moved beyond school-based or adult preventive education, and instead looked towards lessening some of the **underlying causes** of substance abuse. Individuals with mental health problems may be at greater risk for developing substance abuse problems, and it seems there are a lack of low-cost mental health services. Others pointed to "mentoring programs" as making a difference because they can intervene with at-risk young people. Some expressed concern about family structures and broken homes, while others suggested that the problems of substance abuse in Montgomery County spread beyond struggling family units.

Participants identified a tension of who bears **responsibility** for substance abuse, and thus who might be targeted for prevention programs. A few participants stressed that substance abuse begins with a **choice**, but others suggested it is a problem that substance abuse is sometimes

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seen as an individual failure rather than an addiction or disease. Some expressed concern that portrayals of substance abuse as a choice can cause negative **stigmas** in the community that lead to further struggles with recovery.

The concern over **cost** also was present in this approach, although the bigger concern for prevention measures such as education was **effectiveness**. Participants wondered how do you find the most effective prevention programs, and worried about the "fruitless cycle" of repeat offenders. Community members also wondered how to reach the broadest group of people: "How do we get to families?" one wrote as a concern for this approach; another commented "How do you reach everyone? How much time, energy, and money will it require to make a significant change?" These comments suggested the community desires more research about current and best practices in preventive programs is needed. It is perhaps this lack of understanding that led to many of the tensions (children-adult, expanding programs-cost, choice-stigma) present in the conversations and reflections on this approach.

Approach 3 Enable Treatment and Recovery
When discussing the third approach, many participants expressed a desire for **more recovery and support programs in the county**. Specifically, several tables and participants named the need for in-patient rehabilitative services along with sober living homes (in addition to the already existing Trinity Mission, a facility for men), an expansion of the Drug Court program, return-to-work services, and life-long programs for recovering addicts. There was an interest in enabling addicts to receive treatment in the community and in simply increasing the amount of treatment spaces available for people struggling with substance abuse. However, many participants recognized that such programs are **only likely to help addicts who are ready to change and recover**. Any treatment program will need to find a way to make those who abuse substances want help—to make the treatment "look more attractive than the high." One table identified the need for addicts to have a "big stake" in their own rehabilitation.

The third approach was seen as one **way of acknowledging**, rather than denying, the problem of substance abuse in Montgomery County. Yet, some worried that **treatment focuses on the problem rather than on preventing it** in the first place. Several possible underlying causes or contributing factors to substance abuse were named as needing attention, such as mental health issues, low self-esteem, shift work, and pressures at school. People suggested that these factors should be considered both in preventing and treating substance abuse.

Several people identified **faith-based recovery programs as effective** and churches as a necessary resource for tackling substance abuse. Some called for more faith-based programs through churches, targeting a range of populations. Yet others worried that faith-based programs fail to reach beyond faith-based communities and that, as the notes from one table at the forum put it, "religion as recovery may not be enough" for some users. **Interest in non faith-based recovery options** was voiced.

One of the greatest concerns named by participants for the third approach was the **high recidivism rate** of addicts. Several participants considered numerous reasons, such as lack of social support, return to the same environment, and doctors' willingness to give out prescriptions. Yet, many participants also noted that there **must be some means of hope** for people addicted to substances that they can become healthy and productive members of the community. Several participants suggested that rehabilitation can work for some users.

Much like the other approaches, another frequently identified concern with the third approach was **cost**. Several people acknowledged that the funding required for new treatment centers,

particularly an in-patient center, would be significant. Some people brainstormed **possible revenue streams** other than taxes, such as volunteers, churches, donations, and businesses, or using existing space in the community. Some considered partnering with one to three neighboring counties to create a shared center. Others indicated a **willingness to pay higher taxes to help solve the problem** of substance abuse. One table's notes said, "Willing to pay more taxes but need clear buy-in from addicts," suggesting that the cost would be worthwhile *if* it was likely to produce positive results. Alternatively, one participant weighed the financial cost of treatment services against other types of costs associated with addiction: "but perhaps the cost of addiction is more than the cost of treatment: unemployed, crime," suggesting that the unemployment and crime related to substance abuse is a worse price to pay than the financial expenditure to make treatment available. A somewhat related concern to the cost of creating new programs and centers was the **cost of these services to addicts and their families**. One table's notes said, "Insurance does not cover all/too costly. May break the family financially."

Several **questions arose** when considering the third approach, suggesting that finding and publicizing answers may benefit the community. The questions included: What treatment options currently exist? What do they cost, and who is paying for them? Why don't we have an in-treatment center? How can we get one? What types of recovery best encourage addicts to get help and change? What recovery programs are working in other communities in Indiana?

Reflections on Preferred Actions
A large number of ideas for moving forward to address substance abuse were named at tables and on individual worksheets, and a list is provided in the appendix. Here we will briefly summarize the types of actions raised.

Many people agreed that a **combination of efforts from all three approaches** is necessary to effectively combat the problem of substance abuse. Participants also frequently suggested the entire community must unite to accomplish this task. There seemed to be the will expressed for the community to do much more than it is currently doing to address substance abuse.

Among the many ideas suggested, the areas of prevention and education received significant attention. **Prevention efforts** tended to focus on children, both in terms of teaching them the dangers and consequences of drugs sooner and "harder" and of providing more opportunities to give them positive role models and mentoring.

Mentoring was frequently mentioned as a positive way of preventing kids from turning to substance abuse. An increase in both informal and formal mentoring relationships was desired, and many people named mentoring, or simply reaching out to people who are struggling, as an action they plan to take after participating in the public deliberation.

Education targeted many different populations. Many people expressed the need to educate the larger community "about how bad the drug issue really is." Participants also voiced an interest in educating children and their parents about the dangers and signs of drugs; neighborhood watch groups about what to look for; addicts about their treatment options; businesses about people in recovery; and parents about how to be a better parent and strengthen their family. Some interest was expressed in the local media helping to educate the community about the problem of substance abuse (such as by publishing drug arrests and deaths) and about the possibility of recovery (such as by relating stories of people who have successfully recovered).

Parents and families were frequently named as significant means to addressing the problem of substance abuse. Action ideas ranged from providing more community activities for families to holding parents more accountable for their children's drug use. Many, or most, of these actions seemed interested in "strengthening families."

Participants also named actions related to **law enforcement**. Some emphasized increasing the number of officers or shifting officers' emphasis to producers and suppliers of drugs. Related actions included improving the likelihood of identifying those who abuse substances (such as through increased drug testing and use of narcotic canines) and/or strengthening the consequences for substance abuse (such as by passing tougher laws, requiring longer jail sentences). Some mentioned the idea of an anonymous tip line or website as a means for residents to report people who abuse drugs or suspicious activity. When asked what action they would personally take, several participants reported they would watch for and report suspicious activity, known drug use or sales, and impaired drivers, or start a neighborhood watch group.

Substantial interest was voiced for improving the **treatment options** for substance abuse in Montgomery County. Residential (in-patient) facilities were most frequently named, though many participants simply referred to increased "rehabilitation" facilities and funding or to "therapy." Some specified the need for transitional programs that help recovering addicts return to society as employed, productive members of society. And long-term support was also cited as important. In addition, several participants named mental health concerns as needing more attention through earlier diagnoses and increased funding.

Participants acknowledged and worried about the **costs for funding the ideas** named during the reflection period and on individual worksheets. Yet several also suggested a willingness to fund them if they actually improve the problem (such as by investing in existing programs with proven results), and/or they began to prioritize which ideas should receive funding, suggesting that such prioritization should continue to be discussed as should creative ways to find funding.

Participants named **a large range of individuals and groups** who should initiate the actions suggested. The range includes the community as a whole, parents and grandparents, law enforcement, churches, schools, people in active recovery, professionals, businesses, Wabash students, and courts.

Concluding Remarks

From the post-deliberation worksheets, community members pointed to the importance of the issue of substance abuse and the need for more conversation. Of the 78 survey respondents, 87% marked that they strongly agreed that substance abuse is an important problem in our community and we must do more to address it. An additional 5% marked they agreed, making for a total of 92% of respondents signaling that this issue is a significant one in our community. In some ways, this is hardly a surprising result—community members likely attended the forum *because* they were concerned about the issue.

Yet comments on the worksheet demonstrate that even for those who attended the public deliberation on substance abuse, participating in the deliberation clarified the issue's importance. A few participants noted that participating in the deliberation had confirmed beliefs that the issue is a significant problem in our community; for example, one wrote that his or her opinion had not "changed much, but I am more resolute to work for drug abuse treatment and prevention."

Many more suggested that the forum had helped them realize the importance of this problem for Montgomery County, writing comments such as:
- "Things can be worse than what we see."
- "The discussion helped me realize how big of an issue this is and how badly it needs changed."
- "I now know I am not alone in my feeling about need in this community and overall concern."
- "Made me even more aware of the problems in this community."
- "It's a huge problem that involves all areas of the community."
- "We need to take action. Period."
- "I realized we all need to do more!"

For those who attended, the deliberation helped to show multiple viewpoints and highlight key information about the problem in our community. When responding to a question asking if they had learned something new from the deliberation, 82% of marked that they strongly agreed or agreed that they had. Several also commented in their feedback that the deliberation had helped expose them to "numerous perspectives" on the issue.

Participants at the Community Conversation deliberation had a high degree of satisfaction with the discussion around their tables. When prompted with the statement "I was satisfied with today's discussion," 88% of respondents marked they strongly agreed or agreed. Participants also wrote feedback about their desire for more deliberations about this issue and others facing Montgomery County, with a few commenting that they felt encouraged or more hopeful after the conversation.

The Wabash College Rhetoric Department convened a follow-up meeting on December 2, 2013 at the Crawfordsville Public Library, from 7-8:30 p.m. This meeting, attended by 34 community members, was for individuals interested in hearing a brief report on the November 2 forum and brainstorming about action priorities. The major result of this follow-up meeting was that participants asked the Rhetoric Department to convene a third meeting that would feature a panel of local leaders on the issues of substance abuse (law enforcement, schools, the Probation Department, treatment organizations, etc.) and then have time devoted to organizing into small action committees. This proposed third meeting will be held in January 2014. The December 2nd meeting will be the subject of its own brief report.

APPENDIX
Actions Named During Small Groups' Reflection Period and on Individual Worksheets

Stand together as a community
- Come to an agreement like on drunk driving
- Unified effort
- Be pro-active
- Don't enable a community of users
- Change the culture of acceptability of drug use

Create a centralized authority on substance abuse; one entity as the hub, pulling in spokes

Strengthen families
- More community activities for families

Improve parents' responsibility
- Parents should have to go to probation meetings with kids who abuse substances
- Get to know their kids' friends
- Spend time with children; be parents

Prevent substance abuse by targeting youth
- Harder hitting youth programs about dangers of substance abuse
- Increase K-6th prevention programs
- Faith-based programs
- Wabash student visits to schools
- Let kids know they have options
- Create programs for youth seeking help
- Make it clear you disapprove of use

Mentoring
- Increase mentoring programs
- Recruit mentors
- Use Wabash students
- Create community-wide, informal mentoring relationships

Wabash can study what is most effective for curbing substance abuse

Educate
- Invest $ in education
- Educate addicts about their treatment options
- Educate adults/parents about the effects of drugs and what to watch out for
- Educate neighborhood watch groups about what to look for
- Offer education about prescription drugs
- Newspaper stories about successful stories
- Media recognition of drug arrests and deaths

Improve law enforcement
- Hire more public safety officers
- Create a drug task force
- More undercover enforcement

- Crackdown on producers/suppliers
- Offer support for law enforcement through volunteers and neighborhood watch groups
- Create and/or publicize a hotline or anonymous website

Create tougher consequences
- Tougher laws
- Stronger jail sentences
- Hold parents accountable for their children's substance abuse

Create stricter regulations on prescription drugs

Catch more drug users
- Drug testing in schools
- Canine units at schools and sporting events

Focus on mental health
- Diagnose mental health issues (earlier)
- Greater funding for mental health

Improve treatment options for substance abuse and accessibility to them
- Invest $ in treatment
- Create a clinic that offers counseling, education, and medication
- Establish a residential (in-patient, intensive)
    - --in Montgomery County
    - --in partnership with other counties
- Sober living homes
- Expand drug court
- Faith-based and non faith-based treatment
- More support groups inside the county
- Offer childcare at AA meetings
- Long-term support with transitional steps to go back to life without relapsing
- More follow-up support
- Increase transition from jail programs
- A rehab place to give self-esteem
- Add capacity to current treatment programs

Address the cost for programs
- Access grant funding
- Share resources in community
- Be creative identifying resources (like businesses)