

ALLOCATION OF FUNDS TO HIGH NEED COMMUNITIES

Upon recommendations by the SEOW, the Council will allocate funds to high need communities based on a discrete set of allocation indicators. As noted above, 60% of the funds will be allocated to alcohol due to its more pervasive impact on the State, with 20% being set aside for communities facing significant problems with cocaine and methamphetamine (40% total). The allocation formulas used to identify high-need communities are described below:

ALCOHOL

To identify the highest need communities in Indiana, the Council examined the ranking of communities in terms of six indicators: 1) number of alcohol-related fatal auto accidents; 2) rate of alcohol-related fatal auto accidents; 3) number of alcohol-related crashes; 4) rate of alcohol-related crashes; 5) number of arrests for public intoxication; and 6) rate of public intoxication arrests. These indicators were selected by the Council, based on the advice and consent of the SEOW, because they represent the best proxy measures of our alcohol priority which highlights the underage drinking and binge drinking by 18-25 year olds at the county level. Further by using both the rate of occurrence (highest need) and the total number of events (highest contributor), we endeavor to empirically operationalize the Council's commitment to a highest need/highest contributor model for identifying communities. The indicators used and reported here reflect data from 2004 and come from the Uniform Crime Reports (UCR) and 2005 data provided by the Indiana State Police (e.g., alcohol related motor vehicle accidents and fatalities). For each of the six indicators, counties were given 4 points if they were in the top 10th percentile, 3 points if they were in the top 15th percentile, 2 points if they were in the top 25th percentile and 1 point if they were in the top 50th percentile. The total points were then summed to total an overall alcohol priority score. The counties identified as "high need" using this methodology are reported in Table 1.

Table 1. Communities Identified As "High Need" For Alcohol-Related SPF SIG Funding

COUNTY	ALCHOHOL PIORITY SCORE	COUNTY	ALCOHOL PRIORITY SCORE
Lake	21	Porter	14
Tippecanoe	20	Elkhart	13
Marion	19	Shelby	13
Allen	18	Wayne	12
La Porte	17	Delaware	11
St. Joseph	17	Jasper	10
Vanderburgh	17	Kosciusko	10
Floyd	16	Marshall	10
Vigo	15	Monroe	10
Madison	14	Newton	10

COCAINE AND METHAMPHETAMINE

For both cocaine and methamphetamine, a similar methodology was used to identify the “high need” communities. Because both of the original priorities highlighted rising rates of use, the Council used the rate and total number of arrests for possession as the proxy indicators. As noted above, UCR data represent the primary county-level data source available to the Council and SEOW. While there are cocaine-specific data, there are no such data available for methamphetamine (drug-specific reporting for methamphetamine began July 1, 2006 in accordance with new state law). Consequently, for methamphetamine, we used the rate and number of arrests for possession of synthetic drugs as a proxy. As with alcohol, we used 2004 UCR data as it was the only data available at the county-level at the time the State Strategic Plan was developed. For the list of “high need” communities for cocaine and methamphetamine, we selected the counties in the top 10th percentile of either high need (i.e., highest rate) or highest contributor (i.e., largest number) of arrests for possession. The counties identified based on this methodology are listed in Table 2.

Table 2. Communities Identified As “High Need” For Cocaine and Methamphetamine-Related SPF SIG Funding

COCAINE	METHAMPHETAMINE
Marion (HN/HC)	Gibson (HN)
Wayne (HN/HC)	Bartholomew (HN/HC)
St. Joseph (HN/HC)	Vigo (HN/HC)
Howard (HN/HC)	Daviess (HN)
Allen (HN/HC)	Warrick (HN/HC)
Grant (HC)	Greene (HN)
Elkhart (HN/HC)	Vanderburgh (HN/HC)
Lake (HC)	Tippecanoe (HC)
Tippecanoe (HC)	Elkhart (HC)
	Hamilton (HC)