

**COMMUNITY PLAN**  
Jones and Shackelford Counties  
FY2025-FY2028



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Fund Source: VOCA

Date Received  
by COG: 12 / 13 / 24

## COMMUNITY PLAN SUBMISSION FORM

**Instructions:** Complete this form (continued on next page) and attach it to the community plan when it is submitted to the regional council of governments. The **three-page Community Plan Submission form(s) must accompany all community plans.**

1. Name of Plan: Jones and Shackelford Counties Community 2026-2029

2. **Cities, counties**, or parts thereof covered by this plan:

Albany, Texas	Moran, Texas
Abilene, Texas	Stamford, Texas
Anson, Texas	Hamlin, Texas
Hawley, Texas	Avoca, Texas
Lueders, Texas	

3. List the types (general focuses) of projects currently funded by CJD that the community planning group agrees should continue. DO NOT list specific grant applications or agencies.

**Behavioral Health – Mental Health and Substance Abuse Issues**

**VICTIMS ISSUES**

**Noah Project**

Abilene Palm House Community Plan Contribution

4. List the gaps in services that would enhance the community plan if funding were available. List these gaps as types of services. DO NOT list specific grant applications or agencies.

Provide mental health and substance abuse treatment, protect victims of violent crimes

For more information about this community plan, contact:

Name: Jon Cook

Address: P.O. Box 45 Anson, Texas 79501

Phone: 325-823-2468



## COMMUNITY PLAN SUBMISSION FORM (CONTINUED)

All community plans must be accompanied by a brief written summary of the plan. The summary must meet the following criteria:

**Planning groups must submit a summary of the priorities, goals and objectives from the community plan relating to:**

- ***Juvenile Justice & Delinquency Prevention Issues***
- ***Criminal Justice Issues***
- ***Victims' Issues***
- ***Mental Health & Substance Abuse Issues***

This summary **must** accompany all community plans and must be submitted to the WCTCOG along with the other two *Community Plan Submission Forms*.

Please type in a brief summary (as outlined above) of your Community Plan in the space provided below. Please attach extra pages if needed.

The Jones and Shackelford Counties Planning Committee agree that funds will be utilized to have a safe place for victims of violent crime, trafficking, mental and substance abuse issues.



# Jones and Shackelford Counties Community Plan 2025-2029

November 21, 2024 of final revision

# Jones and Shackelford Counties Community Plan

## **What Is a Community Plan?**

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This plan is formally known as the Jones and Shackelford Counties Criminal Justice Community Plan, the purpose of which is to identify gaps in services regarding criminal justice issues. The Criminal Justice Division of the Governor's Office (CJD) requires that each county in Texas have a Criminal Justice Community Plan.

The document that is represented here reflects the efforts of many in Jones and Shackelford Counties that are concerned with assuring that any gaps in services that are identified are closed in a way that will both solve the problem and provide as great a benefit to the community as possible. It is with grateful acknowledgement that the names of those involved in the process of developing this plan are listed in the following page(s) under Part II (Community Planning Group).

Though the final draft of this plan was completed on **November 21, 2024** this is a work in progress. New criminal justice goals are identified, the Planning Group changes as a result of individual and agency circumstances, and requirements concerning the makeup of the Plan are subject to change from year to year. Thus, Jones and Shackelford Counties is interested in keeping up with these changes, and including such in updates that will be posted from time to time.

If you are reading this Plan and have not been involved in its development, you are invited to join in this ongoing effort. Any questions you may have can be addressed to either Jon Cook, Community Plan Coordinator for Jones and Shackelford Counties, or to the Criminal Justice Program of the Abilene Area Council. Contact information is provided within this document.

The Jones County Commissioners Court supports the concept of community planning by providing staff support and resources for development and implementation of the Jones County Community Plan. Additionally, the Commissioners Court supports grant applications from county departments as well as community organizations that address gaps in services identified in the Community Plan.



## Areas Represented

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### Incorporated Communities:

Anson	Stamford	Hamlin	Hawley
Lueders	Avoca	Albany	Moran
Hamby	Abilene		

### Unincorporated Communities:

Funston	Hodges	Tuxedo	Radium
Noodle	Nugent	Neinda	Truby
Stith	Ft. Griffin		

### School Districts:

Anson	Stamford
Lueders/Avoca	Hamlin
Hawley	Moran
Albany	Abilene
Roby	Merkel

### Brief description and history of Jones and Shackelford Counties:

**JONES COUNTY.** Jones County (E-13) is on the West Texas prairies, bounded on the north by Stonewall and Haskell counties, on the east by Shackelford County, on the south by Taylor County and the city of Abilene, and on the west by Fisher County. The center of the county lies at 32° 45' north latitude and 99° 54' west longitude. The county was named for Anson Jones,<sup>9v</sup> statesman of the Republic of Texas.<sup>9v</sup> Anson is the county seat. The county is crossed by U.S. highways 180, 83, and 277, State highways 6 and 92, and the Burlington Northern Railroad. Jones County covers 937 square miles of rolling plains with elevations that range from 1,600 to 1,900 feet above sea level. Annual rainfall is twenty-five inches. January's average minimum temperature is 31° F; July's average maximum is 97° F. The county has a growing season of 223 days, soils are black to sandy loam with clayey sub-soils, and between 51 and 60 percent of the land is considered prime farmland. Jones County is in the rolling plains vegetation area, with

tall grasses and mesquite trees. It is drained by the Clear Fork of the Brazos River and its tributaries.

In the years before Anglo settlement, several nomadic groups roamed the area that would eventually become Jones County, including the Comanche, Kiowa, and Tonkawa Indians. Caddos and Delawares camped along the Clear Fork, and Wichitas occasionally hunted in the area. Large herds of bison provided food and other necessities for these Indian groups. The earliest white settlement of Jones County was in 1851 when Fort Phantom Hill, near the site of present Hawley, was established as one of a line of forts from the Red River to the Rio Grande. These military outposts guarded the frontier and furnished protection to Forty-niners following the Randolph B. Marcy<sup>qv</sup> trail across Texas. Supplies were hauled from Austin. The fort was abandoned in 1854, and in 1858 the location was made a station on the Butterfield Overland Mail<sup>qv</sup> route from St. Louis to San Francisco. Jones County was established on February 1, 1858, from Bexar and Bosque counties. During the Civil War<sup>qv</sup> Indian raids forced the frontier back to the east, and the area was not settled for another fifteen years. In 1872 the military post was reestablished, and a settlement was made on a stream four miles distant. The actions of Ranald S. Mackenzie<sup>qv</sup> and federal troops removed the Indian threat in the mid-1870s. Buffalo hunters were followed by bone haulers, and the last buffalo was seen in the county in 1879. Owners of herds of longhorn cattle<sup>qv</sup> moved in to take advantage of the grass-covered range. In 1873 Creed, John, and Emmett Roberts and Mode and J. G. Johnson established ranches in the area of Fort Phantom Hill. Other early ranches included the T-Diamond, established in 1876, and the Ericsdale Ranch of the Swenson Land and Cattle Company, established in 1882 (*see SMS RANCHES*). In 1880 John Merchant built a mesquite corral at the site of the future county seat, and Henry Foster put up the first wire fence in the county. The population of Jones County reached 546 that year, and when the county was organized in 1881 Jones City was declared the county seat. In 1882 the name of the county seat was changed to Anson.

Farmers arrived in the county soon after the ranchers, and the area had 1,191 acres in cultivation by 1880. The population increased more than seven-fold during the 1880s, reaching 3,797 in 1890, while the number of cultivated acres increased to 60,120. In spite of occasional drought conditions, farmers grew cotton, corn, wheat, and oats. By 1900 Jones County had a population of 7,049 and 820 farms and ranches. Cattle ranching continued to grow alongside of farming, and the number of cattle increased from 20,779 in 1890 to 39,924 in 1900. The county experienced its most spectacular growth between 1900 and 1910, when the population increased to an all time high of 24,299 and a total of almost a quarter million acres were brought under cultivation. This dramatic growth was made possible by the extension of several railroads into the county. In 1900 the Texas Central Railroad built from Albany across the northeast corner of the county, leading to the growth of two new communities, Stamford and Lueders. The Wichita Valley Railroad built south through the middle of the county in 1907. In 1911 the Abilene and Southern built from Anson to Hamlin, a new community in the northwest corner of the county. Cotton had become the dominant crop by the early 1900s. Acreage devoted to cotton increased from just over 25,000 acres in 1900 to 110,458 acres in 1910 and 245,298 acres, more than two-thirds of the land in cultivation in the county, in 1930. Farm tenancy<sup>qv</sup> rates grew with the increased dependence on

cotton. While only 21 percent of the county's farmers rented their land in 1890, by 1910 57 percent were tenants, and by 1930, when tenant farming reached its peak, 68 percent of the 2,800 farmers were tenants. The county population fell slightly between 1910 and 1920 to 22,323, and then rose once more to 24,233 in 1930.

Oil was discovered in 1926 at the Noodle Creek oilfield southwest of Anson. While there was never a boom in the county, productive new fields continued to be opened in the 1930s, 1940s, and 1950s, and by 1990 a total of 206,770,955 barrels of oil had been produced. Several oil-processing plants were opened in the 1930s, and the development of the oil industry helped mitigate the effects of the Great Depression.<sup>qv</sup> While the value of farms dropped over 40 percent between 1930 and 1940 and there were 700 fewer farms at the end of the decade, the county population fell only slightly, to 23,378. In 1937 the construction of Fort Phantom Hill Dam was begun on Elm Creek near the southeast corner of the county. The area covered by the reservoir was annexed by the growing city of Abilene. The county economy became more diversified in the 1940s, as cattle ranching regained some of its importance and farmers increasingly turned to crops like sorghum and wheat. As the population slowly declined and the number of farms continued to drop, farm tenancy declined to 42 percent by 1950 and 36 percent in 1960.

In the 1970s, for the first time in the county's history, manufacturing made up a sizable part of the economy. In 1972 thirteen establishments employed 2,000 workers. Agriculture remained important. In 1982, 94 percent of the land was in farms and ranches, with 52 percent of the farmland under cultivation and 4 percent irrigated. Primary crops were wheat, cotton, sorghum, hay, and oats, and primary livestock and products were cattle, sheep, wool, and hogs. The industries with the most employment were agribusiness and trucking, oil and gas extraction, and the manufacturing of gypsum products. In 1990 the county remained a center of cotton, wheat, and cattle production. The most important minerals produced were oil, sand and gravel, and stone.

The population of the county continued to fall in the middle decades of the twentieth century, declining to 19,299 in 1960 and 16,106 in 1970. It recovered somewhat in the 1970s to reach 17,268 in 1980, then declined again to 16,490 in 1990. Since the 1870s the population has been overwhelmingly white. Blacks made up about 2 percent of the population in the 1920s and 1930s, rising to about 5 percent in 1950 and declining to 4 percent in 1990. The county was about 3 percent Hispanic by 1930 and almost 17 percent by 1990. From their first presidential election in 1884 through 1992 the voters in Jones County have generally chosen Democratic candidates. They supported Republican candidates in 1928, 1952, 1972, 1984, and 1988.

Education has always been an important part of the history of Jones County, which by 1905 had forty-two schools serving 3,000 pupils. Educational levels improved dramatically in the second half of the twentieth century. While only 13 percent of the population had completed high school in 1950, some 58 percent were high school graduates in 1980. In 1990 Anson, the county seat, had 2,644 residents, or 16 percent of the county's population. Other incorporated communities included Stamford (3,781 in Jones County, partly in Haskell County), Hamlin (2,788 in Jones County, partly in Fisher County), Hawley (606), and Lueders (365 in Jones County, partly in Shackelford County). The portion of the city of Abilene that extends up into Jones County from

Taylor County has 797 residents. Jones County offers a number of historic events and recreational opportunities. At the site of old Fort Phantom Hill two events, the Cowboys' Christmas Ball and the Texas Cowboy Reunion,<sup>99v</sup> draw visitors. The Texas Forts trail passes through the county, and there are recreational parks for boating and fishing on several of the county's lakes and reservoirs, especially around Lake Phantom Hill.

**BIBLIOGRAPHY:** Hooper Shelton and Homer Hutto, *The First 100 Years of Jones County* (Stamford, Texas: Shelton, 1978).

*Mark Odintz*

**SHACKELFORD COUNTY.** Shackelford County (D-14) occupies 887 square miles of north central West Texas. The county seat, Albany, lies nearly in the center of the county, at 32°44' north latitude and 99°18' west longitude, about thirty-five miles northeast of Abilene. At an altitude ranging from 1,200 to 2,000 feet, the county lies on surface rock of Permian limestone, covered by two to fourteen inches of loamy clay topsoil. The northwest corner contains a strip of vegetation-locked blow sand one mile wide and twenty-five miles long. The eastern part of the county belongs to the Cross Timbers<sup>99v</sup> geographic region, and the western portion to the Lower Plains.<sup>99v</sup> The Clear Fork of the Brazos River crosses the northwest corner of the county, flowing northeast into Throckmorton County, then reentering at the northeast corner and exiting southeast into Stephens County. A number of Shackelford County creeks are tributaries of the Clear Fork. Temperature extremes range from an average January minimum of 31° F to an average maximum of 97°. The mean annual temperature is about 64°, and the annual rainfall averages 26.57 inches. The growing season is 224 days long. Originally open prairie, Shackelford County now consists predominantly of mesquite and chaparral savanna. Along the river and the creeks, pecan, elm, cottonwood, and hackberry trees mingle with mulberry and willow. Prickly pear and other cacti are common in the prairie sections. The land and its waterways also support populations of white-tailed deer, bobcats, opossums, raccoons, and smaller mammals. Great blue herons and kingfishers fish the streams; wild turkeys, roadrunners, and a variety of songbirds inhabit the uplands.

Athabascan Apaches once lived on the game in this area but were driven out by the Comanches, who controlled the region until whites began to settle there in the middle to late nineteenth century. In 1788 a Spanish expedition led by José Mares<sup>99v</sup> may have touched the southwest corner of the county, but the first real explorer of the region was Capt. Randolph B. Marcy,<sup>99v</sup> who investigated the area for the United States Army. The first white man to settle in Shackelford County was probably Jesse Stem,<sup>99v</sup> an Indian agent who established a farm in 1852 on the Clear Fork six miles downstream from the site of present Lueders. Two years after Stem arrived Captain Marcy looked over the area and suggested to the War Department that a fort be built on the Clear Fork. The establishment of a cordon of such protective frontier forts, including Camp Cooper just north of Shackelford County in Throckmorton County, brought the first influx of white

settlers into Shackelford County. Jesse Stem made the first attempt at agriculture in Shackelford County in 1853 by raising a good crop of corn and oats, which he sold at Fort Belknap in Young County. C. C. Cooper and John C. Lynch established ranches in Shackelford County, and in 1861, with employees and their families, established a fortified settlement that they called Fort Hubbard. Two years later W. H. Ledbetter-later the first judge of Shackelford County-began manufacturing salt by evaporating water of the Salt Prong of Hubbard Creek. In 1867 Joe Matthews settled on the Clear Fork in northeastern Shackelford County, about two miles downstream from where Fort Griffin was established the same year.

Below the hill on which Fort Griffin was constructed, the civilian community of Fort Griffin, commonly called the Flat or Hidetown, developed. This community served as a marketplace and supply point for buffalo<sup>qv</sup> hunters and as a watering place for soldiers, hunters, and trail hands driving cattle over the Western Trail,<sup>qv</sup> which crossed the Clear Fork nearby. The combination of buffalo hunters, soldiers, and cowboys, mixed with Indians from the nearby Tonkawa camp, was volatile, and law enforcement was erratic. The long trip to the county court in Jack County to do jury duty or deal with legal matters was hazardous; so in 1874 residents of the area petitioned the county court of Jack County for permission to organize their own county. The new county was named in honor of Dr. Jack Shackelford,<sup>qv</sup> a Texas revolutionary hero. Fort Griffin became the temporary county seat on October 12, 1874. On November 8 of that year the founders of the county called an election to determine the permanent location, and thus Albany-named by William R. Cruger<sup>qv</sup> for his hometown, Albany, Georgia-was founded. In 1884 the county finished construction of a courthouse, built of limestone quarried a few miles southwest of Albany. The structure still functions in its original capacity, and in 1962 was recorded as a Texas Historical Landmark. The county's population peaked at 6,695 in 1930, dropped to 3,323 by 1970, then climbed back to the 1980 figure of 3,915. Of the 1980 population 3,761 were white (including 211 Hispanics), 36 black, 6 Indian (in 1884 the federal government moved the Tonkawa Indians to Indian Territory), 4 Asian, and 108 of other origins. Of these residents, 2,450 lived in Albany; the remainder were in Lueders (which is partly in Jones County), Moran, and Spring Creek, or on farms and ranches. In 1990 Shackelford County had 3,316 inhabitants.

Railroad construction did not begin in the area until the 1880s. In 1882 the Texas Central Railroad Company completed its line into Albany, which became a central shipping point. In 1984 the county had 486 miles of public roads and one airport, the Taylor Airport in Albany. Farming, ranching, and oil production are the bases of the county's economy. Oil was discovered in Shackelford County in 1910, and in 1946 the discovery of oil in the Ellenberger formation encouraged exploration for deeper production. By 1982 the county was producing 5,659 barrels a day. In 1980, 50,000 acres of land were under cultivation, but the trend was away from row crops toward stock farming. The breeding of quarter horses<sup>qv</sup> had also become economically important in the county. In 1983 Shackelford County produced about \$12.5 million in agricultural goods. More than 78 percent came from livestock, mainly beef cattle. Cotton, grain, and hay accounted for 16.5 percent. Other significant income is derived from oil field equipment manufacture and supply, well service, and crude-oil hauling. A company manufacturing bits for bridles operates in Moran. The county takes great pride in its heritage and exhibits that

pride annually in June, when residents cooperate to produce a musical extravaganza called the Fort Griffin Fandangle,<sup>9\*</sup> based upon life and times during the county's early days. Solidly Democratic for many years, Shackelford County voted Republican in only four presidential elections-1928, 1952, 1956, and 1972-until the 1980s. From 1980 to 1992 county voters have consistently voted for Republican presidential candidates.

**BIBLIOGRAPHY:** Ben O. Grant, *The Early History of Shackelford County* (M.A. thesis, Hardin-Simmons University, 1936). Kathleen E. and Clifton R. St. Clair, eds., *Little Towns of Texas* (Jacksonville, Texas: Jayroe Graphic Arts, 1982). *Shackelford County* (Albany, Texas: Shackelford County Historical Survey Committee, 1974).

*Frank Beesley*

## **Community Planning Team**

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Community Plan Coordinator for Jones and Shackelford Counties: Jon Cook / Director of Adult and Juvenile Probation / 259<sup>th</sup> Judicial District Probation Department

In developing this Community Plan, members of the team were divided into several focus groups for the purpose of narrowing the scope of research and data that are incorporated into the Plan. Some members may serve in multiple capacities/categories.

### **Juvenile Services:**

<i>Name</i>	<i>Agency</i>
Jon Cook, Melissa Mosley,	259 <sup>th</sup> Judicial Probation Department

### **Victim Services:**

<i>Name</i>	<i>Agency</i>
Melissa Mosley	259 <sup>th</sup> Judicial Juvenile Probation Department
Peggy Morgensen	259th Judicial CSCD

### **Law Enforcement:**

<i>Name</i>	<i>Agency</i>
Danny Jimenez	Jones County Sheriff's Office
Ed Miller	Shackelford County Sheriff's Office

**Concerned Citizens:**

<i>Name</i>	<i>Name</i>
Greg Pinkston	

**Identification of Community Problems**

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**General Public Safety Needs and Issues**

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**Behavioral Health – Mental Health and Substance Abuse Issues**

The behavioral health needs in our community are well documented and are the focus of several collaborative health groups. During the preparation for this plan, several our community needs assessments and strategic plans documents were reviewed to identify strengths, weaknesses and opportunities for our community. In preparation for this year’s Community Justice Plan, consideration was given to the following points of reference–

- Statewide Data and Trends available through HHSC

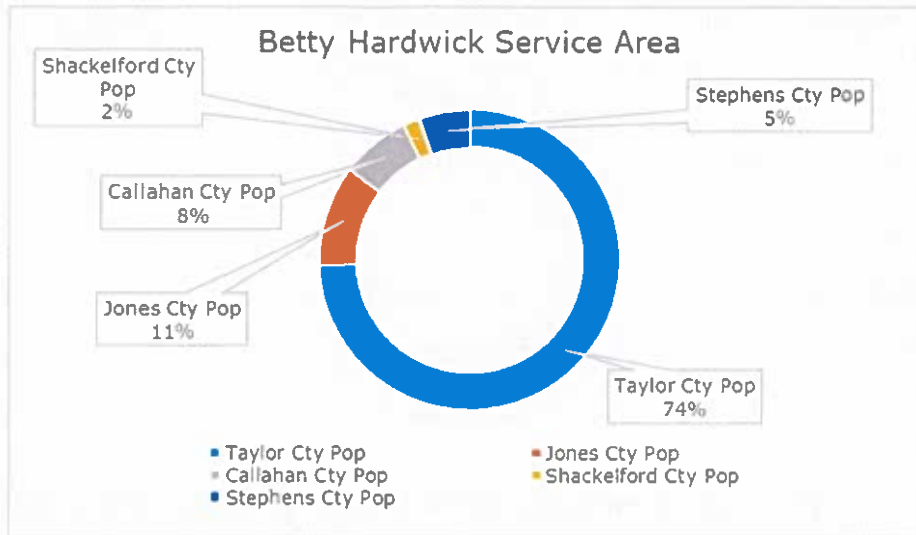
- Region 2 Prevention Resource Center’s Regional Needs Assessment
- Meadows Mental Health Policy Institute Needs Assessment
- Betty Hardwick Center’s Mental Health Task Force and LMHA data
- Homeless Needs in Abilene, Texas Report
- Community Justice Plan Survey of Stakeholders
- Hendrick Medical Center’s Community Needs Assessment

Each year, as we review this material to prepare the plan, we have opportunity to assess the program improvements made during the year. And 2019 is no exception – we have several positive developments in terms of programming and collaboration. However, this report focuses on unmet needs and service gaps.

According to the Mayo Clinic, “Mental illness, also called mental health disorders, refers to a wide range of mental health conditions — disorders that affect your mood, thinking and behavior. Examples of mental illness include depression, anxiety disorders, schizophrenia, eating disorders and addictive behaviors. Many people have mental health concerns from time to time. But a mental health concern becomes a mental illness when ongoing signs and symptoms cause frequent stress and affect your ability to function.” We often talk about mental health broadly. It is important to distinguish that people may have poor mental health, without having a serious mental illness.

In the U.S. there was a move toward deinstitutionalization of the mentally ill starting in the late 1800s and that was solidified in 1963 when the Community Mental Health Centers Act was passed that allowed for only persons who “posed an imminent danger to themselves or someone else” to be committed to psychiatric hospitals. This continues to be true today and while many people fare very well in community-based care, there are some who believe that as a result of underfunded community-based care programs have led to more mentally ill people being treated by the criminal justice system. The answer is probably more complex than that, because often the mentally ill may also have co-occurring substance use disorders, difficulty maintaining safe and affordable housing, and impacted by a host of these issues. Nevertheless, these issues contribute to the state of things for our neighbors living with mental illness and substance use disorders and it’s helpful for us to understand the complexity of their needs as we consider what service gaps exist and the types of solutions that our community desires to bridge those gaps.





According to the American Psychiatric Association, “Mental illnesses are health conditions involving changes in emotion, thinking or behavior (or a combination of these). Mental illnesses are associated with distress and/or problems functioning in social, work or family activities.

Mental illness is common. In any given year:

- nearly one in five (19 percent) U.S. adults experience some form of mental illness
- one in 24 (4.1 percent) has a serious mental illness
- one in 12 (8.5 percent) has a diagnosable substance use disorder

Mental illness is treatable. The vast majority of individuals with mental illness continue to function in their daily lives.”

When the prevalence data percentages are applied to the local population, projections would suggest that there are a considerable number of individuals, 7,526 who may have serious mental illness (SMI) in our local area. And considerably more, 34,881, who may have some form of mental illness. During FY19, Betty Hardwick Center served 5,534 adults in mental health services at least one time, including crisis and routine outpatient services. It can be expected that many of those persons fall into the SMI population, but often also include persons with other mental disorders or mental illness that co-occurs with substance use disorders or intellectual and developmental disabilities.

County	County Population	Prevalence Projected with SMI	Prevalence Projected with Substance Use Disorder

CALLAHAN	13,820	566	1,175
JONES	20,009	800	1,700
SHACKELFORD	3,315	135	281
STEPHENS	9,906	406	842
TAYLOR	136,535	5,597	11,605
Totals	183,585	7,526	15,604

In June 2018, the Centers for Disease Control published a report that indicated across the nation, rates of suicide are on the rise. In Texas, between 1999 and 2016, the increase was almost 19 %. Perhaps you've also recognized that to be true in our community as well. In Taylor County in 2016, there were 20.5 deaths per 100k in population, while the national age-adjusted suicide rate was 13.5 deaths per 100,000 population. Research indicates that demographics, access to care, the availability of firearms and cultural differences are among several factors that influence numbers of suicides. The CDC report includes three key data elements-

- 1) Nationally, nearly 45,000 lives were lost to suicide in 2016;
- 2) Suicide rates went up more than 30% in half of states since 1999; and,
- 3) More than half (54%) of people who died by suicide did not have a known mental health condition.

The report goes on to make clear that suicide is not just a mental health issue and should be considered a broader public health issue, bolstered by the point that many people who die by suicide were not known to have a diagnosed mental health condition at time of death. Data indicates that there are a host of variables that can contribute to suicidal ideation including financial crises, substance abuse, pending criminal legal issues, relationship problems, unstable housing, physical health problems and other types of impending crisis in one's life. These factors have implications for the broader prevention and education efforts across our whole community, and that means to be effective in prevention, everyone needs to be better educated about risk factors, warning signs and how to intervene.

Data reflects that suicide prevention efforts are effective. The National Council for Behavioral Healthcare reports "For every person who dies by suicide, there are 278 individuals annually who think seriously about suicide but do not die." Many of those people are connected to treatment and treatment is effective.

The latest statewide report about Substance Use Trends across the entire state continues to be UT School of Social Work's Substance Abuse Trends in Texas, 2018. According to this report –

- Methamphetamine is the #1 drug threat ranked by the Dallas, El Paso, and Houston DEA Field Divisions). Indicators of drug use (poison control calls, treatment admissions, deaths, and

toxicology reports on substances seized and identified) all show methamphetamine is a larger problem than heroin. Methamphetamine continues to be made using phenyl-2-propanone, not cold medicines, and major drug seizures of large quantities imported from Mexico are more commonly reported.

- Cocaine is ranked the #2-#3 threat by the DEA Field Divisions. Poison center calls and treatment admissions for cocaine continue to decrease while deaths and toxicological data are increasing. Use is more common among the marginalized and people experiencing homelessness. The expected flood of cocaine from Colombia is beginning to be seen.

- Pharmaceuticals, benzodiazepines, hydrocodone, and muscle relaxants remain problematic. Compared to other NDEWS sites, the number of fentanyl items seized and identified is increasing, but the number of cases involving heroin and fentanyl in combination is low, while the number of cases involving fentanyl and other opiates is high. The recent increase in the number of tramadol cases involved with other opiates is also a concern.

- Heroin in Texas is either black tar heroin or powdered brown heroin (diluted with diphenhydramine or other filler), with some white Mexican/South American heroin seen. In Texas, "tar" is sold in small balloons and the user then extracts the tar from the balloon, mixes it with water overheat, and then draws it up and injects it. In states north of Texas, the heroin tends to be powdered when it reaches the dealer, who then packages it (with or without powdered fentanyl) in cellophane envelopes to sell to the user. To prevent an overdose, fentanyl test strips should be used to determine if the package contains fentanyl. In Texas, of the top 25 items seized and identified in Texas laboratories reporting to the National Forensic Laboratory Information System (NFLIS), heroin ranks #4, at 5.2% of all items identified, and fentanyl ranks #21 (0.21% of all items identified).

- Cannabis indicators remain steady, with problems most often seen in the trafficking of decriminalized cannabis products from Colorado through Texas. Additional research is needed to analyze the problems from the use of these products and the effects of potency.

- Synthetic cannabinoid and cathinone poison calls have decreased but recent research by the author looking at treatment admissions and poison center call data has found statistically significant trends over time. The user population has changed from younger males hoping to use a cannabinoid that would not show positive in drug tests to an older population who are more likely to be experiencing homelessness and comorbid psychological problems.

- Texas needs an enlarged harm reduction campaign beyond the heroin+fentanyl emphasis. It needs to target people who are using a variety of prescription opiates, and their pharmacists and physicians. It should not only provide naloxone but to also train users and their family members on the signs of overdose.

Locally, our regional experts at Abilene Recovery Council compose a Regional Needs Assessment that summarizes statistics relevant to risk and protective factors associated with drug use, as well as consumption patterns, consequences data, insight into gaps in services and challenges with data.

Below are key findings of the 2019 Regional Needs Assessment –

**Main key findings from this assessment include:**

**Demographics:** Region 2 is generally made up of middle-aged to older adults. Approximately 48.5% of our population are ages 25-65+. Ethnicity is dominated by Anglos however there is a growing Hispanic and “Other Races” in our area. Our overall population has continued to increase since 2016.

**Socioeconomics:** The per capita income reports lower than state percentages. The region holds a low unemployment rates, and although our region reports single-parent households and households with public assistance above the state rate, both rates have decreased.

**Consumption:** Methamphetamines and marijuana are the most seized substances taken off the streets by law enforcement in our reported area from 2016-2018. Alcohol and marijuana are the most consumed substances among high school and college aged students within our region. There is also a high rate of prescriptions being issued to residents of our area.

**Consequences:** Child abuse, chronic disease, drug and alcohol poisoning deaths, drug related court cases and incarcerations exceed the state rates and/or are increasing over time. OSAR screenings and referrals to treatment have also increased over time.

**Protective Factors:** Our area is fortunate to have hundreds of non-profits and social service agencies within our counties. Many of these services provide basic needs such as food, water, clothes; others provide treatment for mental health, the mentally disabled, psychiatric treatment; others provide counseling inpatient/outpatient services; intervention services include drug and alcohol referrals and counseling, peer recovery coaching, pregnancy intervention for new and expecting mothers at-risk, and the numerous coalitions and community groups all willing to assist client or community members in needs. Region 2 has an atmosphere of a small town in which people truly do care in assisting one another. We are a community that truly cares. “

Finally, in preparation for this report, all stakeholders who participate in Betty Hardwick Center’s Mental Health Task Force and Behavioral Advisory Team were invited to weigh in on a survey regarding behavioral health needs in Abilene. 17 responses were recorded from a variety of stakeholders across the community including advocates, service providers, law enforcement, local officials, other nonprofit agencies, and hospital staff.

**Behavioral Health Issue #1:**

## Jail Diversion Services

### Supporting Statistics:

According to a nationwide 2017 study by the Bureau of Justice Statistics, 37 percent of state and federal prisoners "had been told by a mental health professional in the past that they had a mental health disorder." Among county and local jail inmates nationwide, the number climbed to 44 percent. Locally, in 2018, Meadows Mental Health Policy Institute completed a Smart Justice assessment in Abilene/Taylor County that stated, " the criminal justice system in Taylor County – as well as every other county in Texas and across the United State – is an integral part of the current mental health treatment system. People with mental illness on average, do not receive care until five years after the first onset of their illness, and too often, care is first delivered (and then repeatedly delivered) by law enforcement and the justice system."

Locally, all our area jails submit data that matches bookings against public mental health data. The Jails and local mental health authority look at this data daily and we know that routinely, there are about 30% of bookings that have a match. This means that many persons who are booked into our jails have at one time or another received services somewhere in the state from the public mental health system.

In 2019, we hired two Jail Navigators, who work out of Taylor County Jail and they provide pre-booking screening, crisis assessments and coordinate services for inmates with mental illness, some post booking diversion and they also can connect inmates with outpatient services at the time of release. The program began only in Taylor County, but is expanding in November 2019 to Jones, Callahan, Shackelford and Stephens. While this is a good program and meets an important need for our Jails, it is not the solution for Jail Diversion.

### Action Plan to Leverage Resources:

Abilene has a Behavioral Advisory Team (BAT) that is Co-Chaired by Chief of Police Stan Standridge and Taylor County Sheriff, Ricky Bishop. This group continues to build out collaborative responses to the Smart Justice report. We continue to work on increased awareness of the role law enforcement plays in local crisis mental health and substance abuse services. During 2019, we completed a Sequential Intercept Mapping exercise and initiated the first Community Response Team, comprised of a Police Officer, a Paramedic and a MH Caseworker. This team works with crisis calls, follows up with individuals who have high utilization of behavioral health services and is aimed at the pre-booking diversion intercepts. The BAT has a subcommittee on Jail Diversion that will continue to work on solutions at pre booking intercepts.

### Funding Priorities:

This issue is prioritized #1 of 3.

### Goals and Objectives Based on Problems:

We will seek to deploy a second Community Response Team in 2020.

We will work with the Texas Judicial Commission on Mental Health to educate local stakeholders about the Bench Book, best practices in community diversion practices, and to identify solutions and resources to implement good ideas locally.

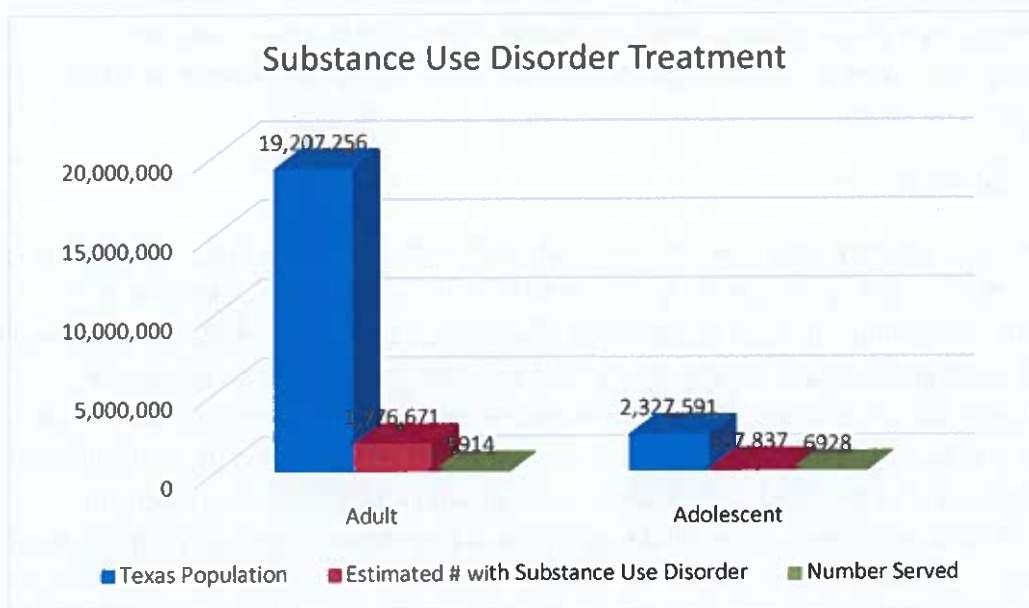
**Behavioral Health Issue #2**

Local Substance Abuse Services are inadequate to meet local need for treatment.

**Supporting Statistics –**

In terms of outpatient substance abuse care, for those with private insurance or the ability to private pay, there are several options for care. For those who have Medicaid, there are now some paid substance abuse benefits in their coverage, but this represents on a very small percentage of Texas adults. The indigent has limited access, which is a challenge in our state overall due to the number of uninsured persons.

State funding available to provide services to indigent Texans with Substance Use Disorders only serves between 3-4% of the need. This is woefully inadequate and contributes to the meager service availability in our community and across the state. The chart below demonstrates that for both adults and adolescents ages 12-17, there is a great deal of work to be done.



Hendrick Medical Centers' Community Health Needs Assessment identified "access to appropriate care," including mental health and substance use as a top-ranking issue in our community, and drug and other substance abuse early intervention as a crisis service need, ranking second overall.

Abilene Recovery Council has an outreach team that provides education and resources for the community. The outreach team makes harm reduction kits available, including naloxone. Additionally, ARC offers several critical programs, including Outreach, Screening, Assessment and Referral (OSAR)

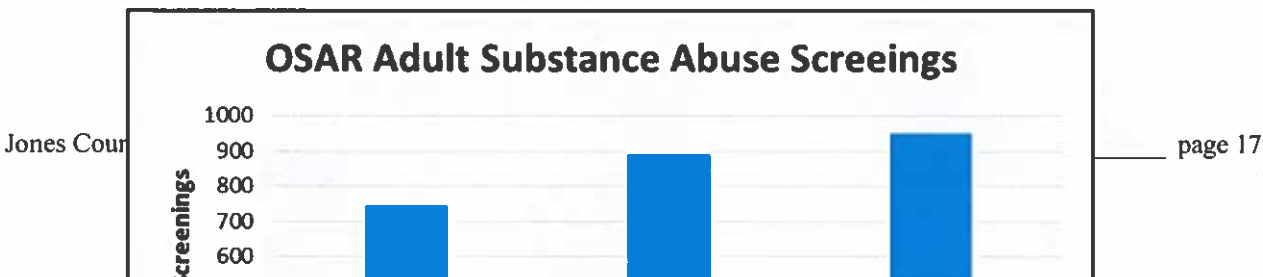
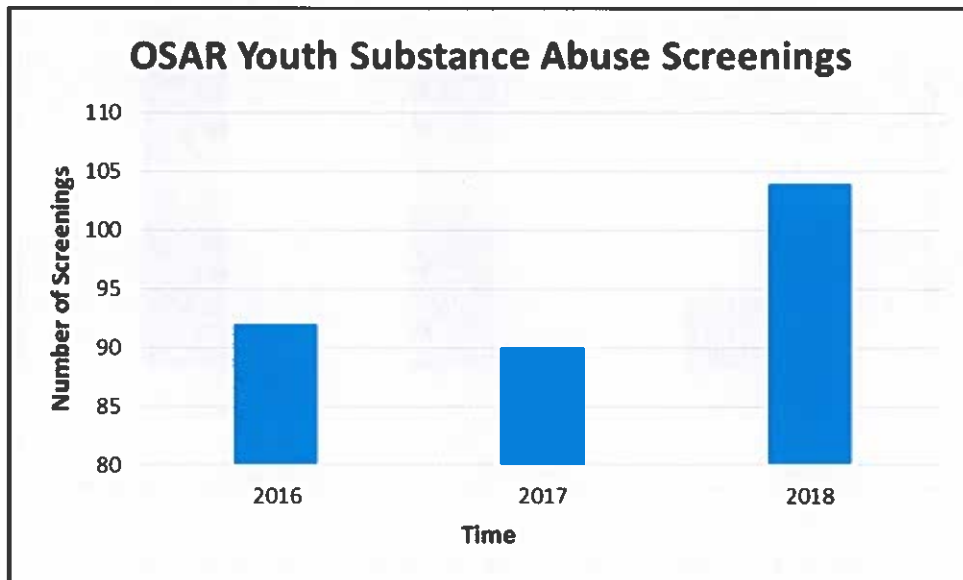
Jones County Community Plan \_\_\_\_\_ page 16

services, Recovery Support Services (RSS) which incorporate peer recovery coaches into service deliver, and Pregnant Postpartum Intervention (PPI).

Currently, there is no state funded Medication Assisted Therapy (MAT) provider, which can be a problem when coordinating care for individuals with Opioid addition.

According to ARC’s Regional Needs Assessment, “the following data reports the number of individuals screened through the state funded program Outreach Screening Assessment and Referral (OSAR) program. These services are free to the public and are offered throughout the state of Texas. Numbers reported only reflect adults screened. Region 2 had a total of 1,252 people screened in 2018, 1,056 people screened in 2017, and 3,169 in 2016. According to local OSAR records, in 2018 OSAR screened 951 adults and 104 youth, and in 2017 OSAR screened 891 adult and 90 youth. Individuals may be screened for alcohol, amphetamines, cannabis, cocaine, hallucinogens, inhalants, opioids, sedatives, PCP, and other categories. In Fiscal Year 2017, there were more individuals screened for amphetamines when compared to any other substance or category. **As of 2017 data, methamphetamine adult screenings have surpassed alcohol and marijuana screenings. Screenings for both youth and adults has increased since 2016. Additionally, youth and adults referred to substance abuse treatment has increased since 2016. The chart below describes the type of screenings conducted in FY 2016-2018.**

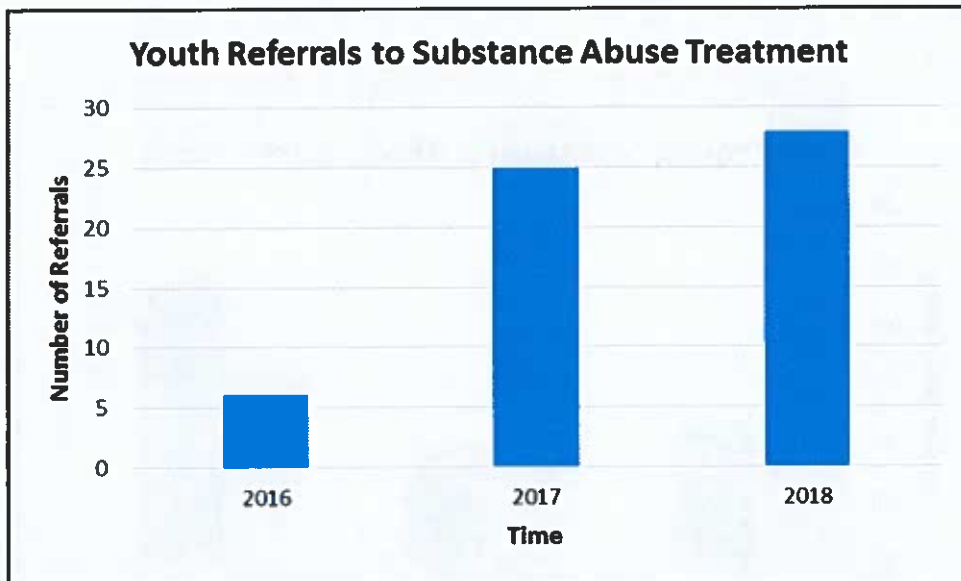
**Additionally, here are the number of individuals screened in FY 2019: Adults screened-1027 and adolescents-99.**



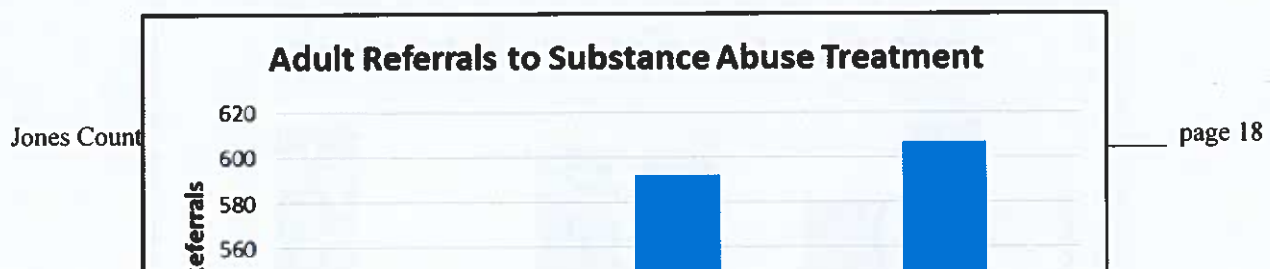
Source: Texas Department of State Health Services, Outreach, Screening, Assessment, and Referrals, 2016-2018.

**Treatment access data for Region 2**

State referrals:



Source: Texas Department of State Health Services, Outreach, Screening, Assessment, and Referrals, 2016-2018.





Source: Texas Department of State Health Services, Outreach, Screening, Assessment, and Referrals, 2016-2018.

Serenity House is a local, non-profit licensed substance use disorder treatment facility that provides medical detoxification and inpatient treatment, outpatient treatment and sober living opportunities in Abilene and Taylor County. The organization has capacity for 131 licensed beds, which includes state funding that can serve 20 men and 14 women on a daily average. Serenity House provides services to people on probation and parole, but not typically diversion services.

Other programs locally include the 180 House and Oxford House and the West Texas Harm Reduction Coalition.

**Action Plan to Leverage Resources:**

Agencies will explore ways to expand outpatient substance use services for adolescents and adults.

**Funding Priorities:**

This issue is prioritized #2 of 3.

**Goals and Objectives Based on Problems:**

Local leaders in behavioral health treatment community will continue to look for opportunities to build expertise and resources for both inpatient and outpatient substance abuse care for all ages.

The LMHA is seeking to become a Certified Community Behavioral Health Clinic (CCBHC) and has reapplied for licensure to do substance use treatment, focusing primarily on dually diagnosed MH/SUD patients, including ambulatory detox support.

Outpatient services might include Counseling, Peer Support, and Medication Assisted Therapy for Opioid dependence.

**Behavioral Health Issue #3:**

More capacity is needed for Outpatient Child and Adolescent Services

### Supporting Statistics:

“Approximately one half of all mental illnesses begin by age 14. Each year, over 550,000 Texas children and adolescents experience severe mental health needs. Yet, many Texas children first receive mental health services while in foster care, juvenile justice system, or special education instead of through their family doctor, school, or community,” (Texas State of Mind).

During the 86<sup>th</sup> Texas Legislative Session, there were several bills related to the mental health of children. Some of these impacts our local areas in that we continue to offer Mental Health First Aid to all public school employees. Additionally, HB19 added a mental health professional to serve the Education Service Center region, which is anticipated to begin in 2020.

However, in our local area, there is a lack of Child Psychiatry. The LMHA employs 2 Child Psychiatrists who are serving over 300 youth, along with their adult caseloads. There are some smaller agency providers who offer Child Psychiatry to their client caseload using telemedicine as well. But, generally, most area children are treated by their pediatrician for behavioral health disorders. There are several Counseling resources, but financial resources and insurance are often a burden for families. Resources for youth with substances use disorders are very limited in the area but there is a need for this.

Hendrick Medical Centers’ Community Health Needs Assessment, 2019, highest ranking need was “access to appropriate care” and one of its top bullet points was “counseling services for mental health issues such as depression, anxiety and others for adolescents/children (including children with developmental disabilities.”

### Action Plan to Leverage Resources:

#### Funding Priorities:

This issue is prioritized #3 of 3.

#### Goals and Objectives Based on Problems:

Local leaders in behavioral health treatment community will continue advocate for change in the Ryan Haight Act, which limits telemedicine service for controlled substances, a significant issue for this population.

#### Additional Resources:

- 2019 Regional Needs Assessment, Region 2, Abilene Regional Council/Prevention Resource Center,
- [www.prc2.org](http://www.prc2.org)
- Hendrick Community Health Needs Assessment 2019, <http://www.hendrickhealth.org/Uploads/Public/Documents/AboutUs/CHNA%20Booklet%202019-Electronic.pdf>

- Meadows Mental Health Policy Institute Data Review and Needs Assessment

Community Input:

Throughout the year, we have a number of active local community groups met to discuss all the above documents with various stakeholder groups including West Texas Homeless Network, Recovery Oriented Systems of Care, Behavioral Action Team, Mental Health Task Force, etc. and reviewed the identified needs, gaps and service priorities mentioned in reports.

BAT and Mental Health Task Force members were asked to participate in a survey during October 2019 regarding community priorities, resources, service gaps, potential collaborations and potential community projects.

The collective input from those various groups, reports, meetings and surveys were included in this report.

Submitted by Jenny Goode LBSW, MS, Chief Executive Officer  
Betty Hardwick Center

## **VI. VICTIMS ISSUES**

### **Summary of notable findings in the current surveys – rankings**

- Tied for Priority #1: Survivors of violent crime needing continued assistance, awareness and involvement throughout the criminal justice process – and -  
Current funding sources are at risk of significant reductions or eliminations
- Priority #2: Training is imperative for victim assistance and crisis intervention professionals within the criminal justice system;
- Priority #3: Prevention awareness needed for parents, schools and neighborhoods.
- Priority #4: Insufficient programs to adequately address the growing problems faced by victims of violent crime

17 Representatives from 26 entities completed the survey: 13 law enforcement + (CAC); 3 non-profit victim services; 5 prosecutors; 2 state agency; 1 medical facility; 1 legal aid agency.

**Representative comments from surveys: *Please see individual surveys attached.***

**Narrative:** Violent crimes affect thousands of adults and children every year, and the need for victims' services has increased dramatically, as we increase our efforts to enhance awareness of services available and encourage public reporting of criminal activity. We still have a long way to go to reach every victim of every violent crime. While it is difficult to capture the factors responsible for decreases in some crimes and increases in others, various strategies to combat violence in our community may be having an impact; these include prevention education, reduced recidivism rates due to longer incarcerations of violent offenders and perhaps enhanced outreach to previously under-served populations. Enhanced training is needed for the professionals who regularly encounter victims, to provide those professionals with information and tools to assist victims in crisis and to refer victims to the appropriate community agencies and aid in reducing revictimization.

### **VICTIM ISSUE #1**

**Survivors of violent crime need continued assistance, awareness and involvement throughout the criminal justice process (tied with Current funding sources are at risk of significant reductions or eliminations)**

#### **Supporting Statistics:**

**Noah Project** assists primary and secondary victims of domestic violence and sexual assault in Abilene and the nine contiguous counties (Taylor, Eastland, Stephens, Callahan, Jones, Shackelford, Haskell, Knox, Stonewall, and Throckmorton). For Noah Project clients, services are provided free of charge, without regard to income. Noah Project provides services to victims of family violence, dating violence intimate partner sexual assault and stranger rape. Services are available to adult women and men, children accompanied by a parent, as well as unaccompanied youth. Services include a 24-hour crisis line/hotline, residential shelter/safe-house, domestic violence/sexual assault intervention, crisis counseling, emergency protective order advocacy, legal accompaniment, medical accompaniment, transportation, educational support, survivor support groups, children's programs, employment and vocational training assistance, justice support, sexual assault services, on site professional counseling, legal representation by an Attorney and assistance with crime victim's compensation. Noah Project

makes considerable and effective use of volunteers and student interns. In addition, Noah Project also operates a 24/7 outreach office in Haskell, Texas; offering the same services/advocacy, including emergency protective shelter through local resources or by transporting to the Abilene protective shelter. The Noah Project office in Haskell, provides life-saving services and advocacy to the five northern-most counties in Noah Project, Inc.'s ten-county service area including Haskell, Jones, Throckmorton, Stonewall, and Knox counties.

During fiscal year 2017-2018 (Sept. 1, 2017 to Aug. 31, 2018) Noah Project's unduplicated internal statistics include the following: Noah Project provided protective shelter to 1241 women, children and men who identified as family violence victims. Additionally, 997 child and adult victims received outreach face-to-face unduplicated services for some total of 2238 unduplicated clients. We had 2453 hotline calls from victims during the year in review. In addition to the direct client services provided, Noah Project staff conducts Primary Prevention professional and community presentations. These presentations are targeted at preventing violence before it starts, and to giving participants the tools necessary to stop the cycle of violence. During fiscal year 2017-2018 our Primary Presentation program provided 1105 prevention presentations to 30955 individual students. In addition, 54 essential training and awareness programs were provided to 3654 adults.

Summary: 2,238 (unduplicated) victims served  
2,453 hotline calls from victims  
3,654 individuals received Primary Prevention training

Continued funding is vital to maintain present services throughout the Big Country. Additional funding would enhance the ability of the project to provide comprehensive services.

**Regional Crime Victim Crisis Center dba Regional Victim Crisis Center (RVCC)** victim services include a 24/7 telephone crisis line and 43 certified volunteer victim advocates who stand by as emergency responders to crime scenes or the trauma center at the request of law enforcement or medical personnel to assist crime victims. Professional staff provide trauma-informed mental health care and counseling, advocacy and criminal justice support throughout the crisis. Specialized, age-appropriate, evidence-based counseling, individualized case management and comprehensive victim services are confidential and provided free of charge. RVCC provides services to Taylor, Jones, Shackelford, Callahan, Coleman and Haskell Counties, as well as other nearby counties when requested. During the fiscal year 2017-2018 (October 1, 2017 through September 31, 2018) RVCC provided services to a total of 1291 victims of violent crimes through VOCA funding. RVCC's VOCA funds were used to provide service to victims in the following categories:

162 child physical abuse	0 DUI/DWI Survivors
365 child sexual abuse	196 domestic violence
466 adult sexual assault	14 robbery
98 adults molested as children	68 assaults
43 survivors of homicide victims	0 elder abuse

In collaboration with law enforcement, justice, and other service providers in our region, RVCC provided the following services to victims through VOCA funding during the year in review:

680 crisis counseling  
78 follow-ups  
1172 information / referral (in person)  
91 justice support/advocacy  
40 assistance filing compensation claims  
510 personal advocacy  
1420 telephone contact info/referral

RVCC operates with 6 licensed counselors with continuing education and training in trauma informed therapy models. Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is an evidence-based treatment model designed to help children overcome traumatic stress due to child sexual abuse, exposure to domestic violence or other serious trauma(s). Certification requires successful completion of a year-long learning collaborative (supported by TXCAC and ATCAC) several RVCC counselors working with children have completed or are in a TF-CBT learning collaborative. In addition, training in Eye Movement Desensitization and Reprocessing (EMDR), an evidenced based method to treat victims of trauma is underway. RVCC will also collaborate with Mental Health Association of Abilene and other mental health professionals, along with the Abilene/Taylor County Child Advocacy Center, to encourage more Trauma Informed Care certification among local mental health care providers.

Continued and additional funding will sustain the standards of care and enhancement of services and number of clients that can be served.

**Mothers Against Drunk Driving (MADD)** is not included in this Plan because MADD does not serve this region of Texas. Victims of injury or families of victims killed by drunk drivers can be referred to Regional Victim Crisis Center for victim assistance services.

The **Abilene/Taylor County Child Advocacy Center (CAC)** works with law enforcement, including **Child Protective Services**, and victim service agencies to provide services to child victims of violence and their non-offending family members. During the 2018 fiscal year, (9/1/17-8/31/18) the Abilene / Taylor County Child Advocacy Center provided services to:

403 children  
256 female  
147 male

Cases involved:

319 sexual abuse  
63 physical abuse  
3 both sexual and physical abuse  
2 at-risk of harm due to physical or sexual abuse, neglect or drug exposure.  
16 witnesses to violent crime  
5 Commercial Sexual Exploitation

In addition, the Abilene/Taylor County Child Advocacy Center provided services to the Texas Department of Family and Protective Services, and law enforcement agencies from a variety of local and county jurisdictions throughout Texas, the Texas Rangers, the US Air Force OSI, and

various local, county and state law enforcement and child welfare agencies from around the country.

Further, the Abilene / Taylor County Child Advocacy Center provides referral to therapeutic and crisis counseling services to victims and their families as necessary. The CAC presently provides services off-site through collaboration with Regional Victim Crisis Center (RVCC) and Noah Project. Children, and their siblings and non-offending caregivers, receive counseling and family violence service referrals at the time of their visit. The CAC also facilitates and provides funding for training that allows therapists to become certified in Trauma-Focused Cognitive Behavioral Therapy.

In addition, during the 2018 fiscal year, RVCC's counselors and Noah Project advocates have participated in the multidisciplinary team case reviews. This has served to dramatically strengthen the quality, continuity and overall integrity of services the Center provides to victims and their families.

**Child Protective Services** responsibilities include:

- Investigating reports of abuse and neglect of children
- Providing services to children and families in their own homes
- Placing children in foster care
- Providing services to help youth in foster care make the transition to adulthood
- Placing children in adoptive homes

Child Protective Services is a program of the Texas Department of Family & Protective Services.

**Adult Protective Services** investigates allegations of abuse, neglect, and exploitation of the elderly or adults with disabilities. When reports are confirmed and protective services are appropriate, APS caseworkers provide or arrange for services to alleviate or prevent further maltreatment. Services may be provided directly by caseworkers, through arrangements with other community resources, or purchased by APS on a short-term, emergency basis.

Types of services provided include, but are not limited to, the following:

- Financial assistance for rent and utility restoration
- Social services
- Health services
- Referrals to the Texas Department of Aging and Disability Services (DADS) for guardianship services
- Referrals to other state or community services

Adult Protective Services is a program of the Texas Department of Family & Protective Services.

**D.A.'s Victim/Witness Coordinators** in Taylor, Callahan and Coleman Counties handle all felony and misdemeanor cases that flow through the District Attorney's Office for criminal

prosecutions. They handle victim notifications of hearings, communications between victims, witnesses, and the D.A.'s Office prosecutorial staff. They provide court accompaniment and deal with protective orders. Similar services are also provided by the counties' Juvenile Probation Departments to victims in juvenile cases.

Action Plan to Leverage Resources:

Communication, with appropriate authorizations to release/exchange information from crime victims and witnesses, survivors of homicide victims, will enhance cooperation with law enforcement and the D.A.'s Offices for prosecution of violent crimes. This ensures that the priorities of victims' rights, Crime Victims' Compensation, and the Victim Impact Statement are as seamless as possible to reduce additional trauma to survivors. Enhancing communications and protocols in victim service referral processes among collaborating agencies will reduce victim frustration in getting appropriate professional victim services and encourage victim's utilizing victim services and resources.

Funding Priorities:

This issue is prioritized as #1 out of 4.

Goals and Objectives Based on Problems & Activities

- Ensure that victims and witnesses are well informed regarding victim rights, services and resources in a timely manner.
- Ensure that victims know who the detective is that is assigned to their case.
- Maintain the relationship with victims and witnesses once the case is transferred from law enforcement to the prosecutorial staff.
- Introduce and/or accompany crime victims to pre-trial hearings and the pre-trial conference with the assigned D.A. or Assistant D.A. and Victim-Witness Coordinators.
- Accompany victims and witnesses to trial on an as-needed basis.
- During criminal prosecutions, victims need assistance at every stage of the proceedings. Victims need adequate notice of all hearings and time to prepare for those hearings. Victims need support in attending hearings and in preparing to testify. Plea agreements, criminal penalties, early release procedures, crime victims' compensation benefits and the right to a victim impact statement should be thoroughly explained. Collaborative efforts are in place with Noah Project Victim Advocates, Regional Crime Victim Crisis Center dba Regional Victim Crisis Center (RVCC) advocates, and D.A.'s Victim/Witness Coordinators with appropriate authorizations to exchange information, to work toward realization of this goal.

**VICTIM ISSUE #1**

**Current funding sources are at risk of continued reduction or elimination (tied with Survivors of violent crime need continued assistance, awareness and involvement throughout the criminal justice process)**

Supporting Statistics:

All funding sources (federal, state, county, city) are facing heavy demands for funding. This in turn makes a dramatic impact on virtually every victim assistance agency throughout the region. Noah Project and Regional Crime Victim Crisis Center dba Regional Victim Crisis Center



(RVCC) continue to increase their services while facing funding reductions. With ever increasing pressures due to various funding streams with a variety of prioritizations at the state and national levels, funds may be further restricted while the numbers of crime victims needing supportive services continues to grow.

Given that VOCA funds are restricted for use to only direct crime victim assistance services, these reductions have, in turn, a direct impact on the level of services available to meet the growing numbers of victims requiring those services. Local foundation grant limitations and the decline in the oil and gas industry has affected the supplemental funding that are critical to supporting victim assistance, awareness and prevention programs and resources.

Action Plan to Leverage Resources:

With shrinking financial resources, agencies must work harder and for fewer financial resources, which becomes increasingly difficult in view of the policies of the current federal administration. The Action Plan includes: victim service providers continuing to collaborate to prevent duplication of services, to increase collaborative service to victims, to formulate strategies to diversify funding sources and enhance governmental awareness that termination of funding sources and decreased financial incentive for charitable donations results often in a lack of services for victims of violent crimes.

Funding Priorities:

This issue is prioritized as #1 of 4.

Goals and Objectives Based on Problems & Activities

- Continue to recruit and utilize highly trained and effective paraprofessional volunteers and interns.
- Establish a centralized basic training program for victim service providers, in order to maximize resources and avoid duplication of efforts.
- Continue to collaborate with other service providers and agencies.
- Evaluating current funding sources for available revenue.
- Direct resources to fund development and more diversification of funding sources.
- Educate legislators of the imperative need for funding for victim services and incentives for charitable donors.

**VICTIM ISSUE #2**

**Training for victim assistance and crisis intervention volunteers is imperative, as well as training for professionals with whom victims of violent crimes come into contact.**

Supporting Statistics:

**Noah Project, Inc.**, the regional domestic/family violence crisis center and protective shelter, seeks every opportunity to provide Primary Prevention training and education to victim advocates, criminal justice personnel, health care providers, faith communities, businesses, advocacy organizations, service providers and allied professionals in communities throughout this area of West Central Texas and the state. Noah Project schedules trainings that are designed to help organizations and communities work to end violence against women, men and children. Workshop topics cover a variety of issues including, but not limited to: advocacy, battering

intervention and prevention, legal issues, working with communities of faith and assisting law enforcement. Trainers focus on issues related to preventing the onslaught of violence, the immediate response to a family violence situation, as well as barriers facing victims and the necessary continuum of advocacy through restoration. During October, Domestic Violence Awareness Month, Noah Project strives to offer several opportunities to raise awareness regarding the issue of family violence and solutions to create safe homes and safe. Finally, Noah Project provides ongoing recruitment and training of volunteers. This specialized training prepares those willing to give of their time and skills to the service of victims of family/domestic and dating violence and training for specific professional groups in our service area. Training opportunities in the past have included; Criminal Justice Response Training for all area law enforcement personnel, training with APD Academy students, and Patty Hanks Shelton Nursing students. Topics are focused on family and domestic violence issues.

**Regional Crime Victim Crisis Center dba Regional Victim Crisis Center (RVCC)** offers assistance with in-service training for the Abilene Police Department and Taylor County Sheriff's Office, as well as offering it to other law enforcement agencies in our region. RVCC also offers sexual assault investigations training and victim sensitivity training for the WCTCOG Regional Police Academies and Hendrick Trauma Center. RVCC conducts intensive training for volunteer victim advocates in collaboration with law enforcement and criminal justice. In addition to RVCC volunteer advocates and staff, other victim service agencies send volunteers and staff to attend the RVCC training. RVCC certified advocates attend continuing training to remain current on minimum standards for direct victim services and emphasis on trauma informed approach for service providers and victims, including self-care, compassion fatigue, and psychoeducation regarding post traumatic and acute stress response system.

Action Plan to Leverage Resources:

Training will be continued for law enforcement, mental health, medical, educators and victim service providers throughout the region at any given opportunity.

Funding Priorities:

This is funding priority #2 out of 4.

Goals and Objectives Based on Problems & Activities

- Establish a centralized, standardized training academy for basic training in victim assistance and crisis intervention for professionals and volunteers.
- Continue to actively pursue liaison relationships with law enforcement educational providers to provide training in crisis intervention and victim assistance.
- Continue to update training materials and other informational resources concerning domestic violence batterers, victims, and sex offender dynamics as well as victimology, child abuse and trauma-informed care and systems.
- Continue to pursue opportunities for cross training among disciplines and agencies to enhance trauma informed systems and community response and collaborations for victim services.
- Continue to include training on utilizing statutory penalty enhancements in charging and punishing re-offenders, and to properly distinguish between misdemeanor and felony assaults. Pursuant to Texas Law, training may also include identifying primary aggressors in family violence crime and avoiding double arrests for "mutual combat."

### **VICTIM ISSUE #3**

#### **Prevention awareness needed for parents, schools and neighborhoods.**

##### **Supporting Statistics:**

**Noah Project, Inc.** promotes awareness of family violence issues through many avenues. Primary Prevention (as defined by the Centers for Disease Control and Health and Human Services) training has become a significant focus for Noah Project. Primary Prevention presentations and training are provided to schools, church and civic groups, law enforcement, judiciary, health care, employee groups, and professionals. Specialty programs, mandated by the Texas Legislature through HB 121, provided by Noah Project include the Bullying Prevention Program, Teen Dating Violence Program and the Healthy Relationships. These training opportunities are age-appropriate presentations on prevention of violence, existing family violence, bullying, and relationship/dating issues to students from kindergarten through college.

##### **Regional Crime Victim Crisis Center dba Regional Victim Crisis Center (RVCC)**

Back in 1987, RVCC began presenting anti-violence programs in schools reaching 7,976 students. Twenty years later we were among the first agencies in Texas, and the only one in Abilene, to receive the SAPCS-F (Sexual Assault Prevention and Crisis Services – Federal funds) grant for the Primary Prevention Education project. Although the grant only funds a portion of our cost each year, additional support in 2016-17 allowed our programs to reach 22,000 K-12<sup>th</sup> graders in local classrooms and provide training to another 7,000 young adults, community members and professionals in how to recognize and react to sexual violence and other violence.

Today our RVCC Primary Prevention Education program for 2016-17 is one of only two dozen programs in Texas and the only one in Abilene funded through the Office of the Attorney General of Texas, specifically tasked with researching the causes of sexual violence and determining how to stop it. Our additional Violence Prevention programs for individual grade levels use evidence based curricula designed to stop the cycle of sexual violence, bullying and other forms of violence.

RVCC Prevention staff and volunteers provided hundreds of programs (The WHO Program – We Help Ourselves) during the 2016-2017 school year. The curriculum is designed to assist children and adolescents throughout the region with identification of potentially dangerous situations, and equipping them with the assertiveness to say no, get away and talk to an adult about any disturbing experiences. Additionally, the WHO Program attempts to identify children who are being victimized, encourages them to disclose and offers help for those children. The WHO Program addresses touches, bullying, secrets, and confusion for the younger audiences. WHO also deals with bullying, premarital violence, dating violence, drugs, alcohol, peer pressure, teen pregnancy, eating disorders, depression and suicidal ideation with mature decision-making strategies for adolescents. In addition, RVCC is facilitating Primary Prevention programs (as defined by Centers for Disease Control), mandated for school districts by the state legislature, at local high schools, and providing violence prevention programs to thousands more children and young people in community organizations this year. This program is in collaboration with the Regional XIV Education Service Center, school districts and community

agencies. More than 22,000 students and young adults will have completed RVCC violence prevention programs during calendar year 2017; at least 7,000 professionals will also receive violence prevention training through RVCC in 2017.

Action Plan to Leverage Resources:

Agencies will continue collaborative efforts to educate students concerning the prevention of child abuse and facilitating communication between children, teens and authority figures such as school personnel, clergy, parents, and other trusted adults to reduce the incidence of child abuse in our communities. Parent education and appropriate responses to outcries of abuse are also emphasized.

Children who enter into care and protection at Noah Project have been clearly affected emotionally and often physically by the consequences of family/domestic violence. The agency will continue to provide services through the onsite children's advocacy program but will increase efforts to collaborate with agencies that have services available to children of family/domestic violence. These intervention efforts work toward ending the cycle that accompanies family/domestic or dating violence.

Given that Regional Victim Crisis Center continues to assist adults molested as children who are coming for counseling support, it is incumbent upon us to also provide the community education and support children and teens need for early disclosure and early intervention as opposed to adult life-styles of substance abuse and family dysfunction that may be cyclical when childhood abuse remains undisclosed into adulthood. Prevention of social norms that perpetuate sexual violence, child abuse and victim blaming/shaming are also targeted by awareness and primary prevention programs.

Funding Priorities:

This priority is #3 out of 4.

Goals and Objectives Based on Problems & Activities

- Continue to enhance educational efforts and prevention programs throughout our community concerning child physical/sexual abuse and violence prevention.
- Continue in education of appropriate reporting mandates and responses to child and elderly abuse.
- Maintain updated educational materials and disseminate to parents, schools, and community professionals.

**VICTIM ISSUE #4**

**Insufficient programs to adequately address the growing problems faced by victims of violent crime, including a need to expand mental health services, particularly, for victims who are mentally ill.**

Supporting Statistics:

In our urban areas an adequate number of programs, as detailed previously, are available among the various agencies that serve victims of violent crime. What is needed is further enhancement

and expansion of the current programs, particularly in our rural areas, as well as continued support and funding for collaboration among the various victim services entities and communications among the communities regarding available resources and victim services.

Action Plan to Leverage Resources:

Continued collaboration among the various agencies and organizations to provide training for professionals and volunteers, and to provide awareness of services available to victims of violent crime will help ensure that victims receive the assistance they need to recover from the trauma resulting from violent crimes.

Funding Priorities

This issue is prioritized as #4 of 4.

Goals and Objectives Based on Problems & Activities

We will continue to meet regularly in an interdisciplinary setting to ensure victim services are provided at a comprehensive level and that no victim or survivor “falls through the cracks.” In order to maximize services, resources, and avoid duplicity of services, we will continue pursuit of the following:

- Enhancing legislative and community awareness of services and support required in fulfilling service needs.
- Continuing community agency collaboration through timely meetings and services coordination.
- Attempting to reduce the incidences of violent crime in our communities.

**Victim Issue Survey requests were emailed to the following:**

Abilene Police Department  
Albany Police Department  
Baird City Marshall  
Clyde Police Department  
District Attorney for Callahan County  
District Attorney for Jones/Shackleford County  
District Attorney for Taylor County  
Hamlin Police Department  
Hawley Police Department  
Hendrick Medical Center  
Jones County Attorney  
Jones County Sheriff's Office  
Legal Aid of Northwest Texas  
Merkel Police Department  
Noah Project  
Regional Victim Crisis Center  
Santa Anna Police Department  
Shackleford County Attorney  
Shackleford County Sheriff's Office  
Stamford Police Department  
Taylor County Child Advocacy Center  
Taylor County Sheriff's Office  
Texas Department of Family and Protective Services – CPS and APS  
The Ark in Brownwood  
Tye Police Department

## Abilene Palm House Community Plan Contribution

The goal of the Abilene Palm House VAWA Grant Project is to help women who have been victims of violent crimes move past their trauma and decrease the rate of repeat victimization. We use proven mediation techniques and communication tools to address the challenges women face post-trauma. Supplemental training focused on communication and conflict resolution is also offered to organizations that support victims.

We do not duplicate the tremendous efforts of the existing organizations but address the subject from a unique perspective. As attorneys, therapists, psychologists, and mediators, we interviewed many victims and found the universal need not being met was that the women felt like they did not have a voice post-trauma. They felt like they were not believed, heard, or listened to and their trauma has caused them to question trust. As a result of our weekly empowerment group, we are building a strong community helping victims move forward by giving them a safe environment to realize that the Big Country community does care. We teach specific conflict resolution skills to help them feel empowered again and learn to trust the system. We train professionals and volunteers from the perspective of the victim by using communication and conflict resolution techniques when helping victims at the time of crisis or later during the recovery process. We offer one-on-one communication coaching for trauma victims. Also, a weekly Peer Support Group is offered at the Palm House to reduce secondary trauma for first responders, professionals and volunteers who work with victims.

The challenges that we face are the other community organizations becoming aware of the Palm House and the services offered to women and children. Because victims tend to have trust issues due to the nature of their trauma, they are at times unwilling to take advantage of the services offered at other local organizations. We have seen that because we are not associated with law enforcement/CPS, they seem to be willing to come to Palm House because we are "outside the typical victim services system." We find some victims are more willing to come and build community and trust at Palm House, which is one of the best ways to start to be able to meet the needs they have and provide the services that they require. We seek to fill a gap because some victims want a place that may be less stigmatized, or they are unwilling to accept the help offered at organizations that focus primarily on victims. Our services seek to complement services victims receive at other organizations or professional agencies. Another challenge that we faced was convincing the first responders to participate in our seminars. The number of people we have served every month has gone up as the word is getting out about our programs.

With the help of Resolution Solutions, a consulting firm, these challenges are being addressed through the VAWA grant providing the best training, resources, and support to victims and service providers. The Palm House gives victims one-on-one and group support, has created peer support groups for professionals and volunteers who work with victims and offers professionals and volunteers training and professional development to be able to serve victims effectively. The Palm House facilitates a weekly Communication Group for women who have been victims of violent crimes. Two professional Communication Coaches lead the group, and a Licensed Family Counselor attends to help facilitate intermittently. Recently a four week Anger

Management Course has been offered for victims. Palm House also holds a weekly Peer Support Group for individuals who work with victims. The group is meant to reduce secondary trauma and provide valuable resources for professionals and volunteers to use. Palm House gives training to organizations that support victims with trauma on how to better care for those victims by engaging in role plays, seminars, individual exercises, brain exercises, and exercises on how to help victims deal with the outside world. Professionals and volunteers also learn conflict resolution skills and communication skills to use with victims and their families so that revictimization rates are reduced and to prevent further trauma to victims. Continuing education credits have been provided to service agencies and organizations throughout workshops for the busy first responders.

Victims of violent crime report having trouble with effective communication in personal relationships and employment relationships but also with the justice system. We work with them individually teaching communication skills, assisting them in recognizing their triggers and other issues post-trauma. Also, we work with victim advocates on trauma-informed care so they will be better equipped to work with the victims in building trust and not causing revictimization. Monitoring the intended and unintended consequences of the training or interventions is part of the communication training approach. Formal evaluation of intervention effectiveness, especially using qualitative techniques, is a problematic component when working with post-trauma women; however, our surveys and interviews, although confidential, allow us to determine the effectiveness of the training. One victim statement regarding how our services have impacted her was, "Thank you so much. You have given me so much hope. I was so afraid of doing this on my own."

Our training sessions include interactive role plays involving all participants. These are tailor-made for each population we are serving. This assists the participants in making changes in reactions to circumstances and situations, improved decision making in the moment, and increased communication skills. These methods are proven to empower the client to employ problem-solving strategies, increase the client's ability to communicate more effectively in the future, and leads to a more effective personal and working environment, which will help reduce revictimization.

During this current grant cycle 2019-2020, we plan on training 350 criminal justice professionals, training 400 noncriminal justice professionals, providing 25 training events, and serving 800 victims or survivors.

Last year our agency made immense progress towards meeting our goals and objectives laid out in the grant.

Our volunteers have provided more than 440 hours of service, which was our target level.

We have provided over 432 hours of training and professional development, which was our target level by teaching 631 individuals.

We have mentored over 298 women victims at the Abilene Palm House through our Communication Group and personal coaching. We have almost hit our target of 800 (789 is what we accomplished) individuals receiving advocacy through our groups at Palm House and other organizations we provide services to.

We came close to our target for peer support groups by reaching around 206 individuals.

We have joined the 211 network for victims to contact us, and we have applied for the Texas Victim Resource Directory.

The following are some organizations we have worked with through the grant. We have provided either workshops, groups, or services for them. We have worked with victims they serve, or their staff, First Responders, or volunteers. Services for victims involve Communication Groups, Anger Management Courses, one-on-one personal Communication Coaching.

Abilene Regional Drug and Alcohol Council

Council of Governments

180 House

Stop the Violence Abilene

Oxford House

New Beginnings

Regional Victim Crisis Center

Noah Project

ARK Domestic Violence Shelter

Hope Haven

Abilene PD



Abilene Law Enforcement

Eastland Law Enforcement

Dyess Air Force Base

Mental Health America

Heavenly Rest Abilene

Sweetwater Law Enforcement

Aspermont Stonewall Law Enforcement

Snyder Law Enforcement

Sweetwater Law Enforcement

Santa Anna Law Enforcement

Breckenridge Law Enforcement

Hardin Simmons University

Cogdell Memorial

Brownwood Law Enforcement

Baird Law Enforcement

Hendrick Medical Center

Our services are open to all women in the community who have been victims of violent or sexual crimes. All volunteers or service providers in the community can attend our weekly peer support group for free. We involve community first responders by providing training to them several

times a year. We allow people in the community to volunteer to help in the services we provide. We promote our training and services throughout the community in hopes that people in the community can point others to our organization.

- **Thursday Communication Group for Women/ Domestic Violence Shelters and Transition Houses for Women Groups/ 1 on 1 Victim Communication Coaching Sessions:** the team has implemented several programs in order to ensure victims have available service outside of the criminal justice system and traditional therapy. Every Thursday at the Abilene Palm House, we facilitate a Communication Coaching group for women who have been victims of crimes. In the group, we do various communication exercises and activities to help women learn to communicate through their trauma more effectively. This equips them with the ability to express what they have gone through and potentially decrease communication conflicts in their lives. The hope is that their ability to express what has happened and express what they want/do not want moving forward would enable them to have tools to prevent revictimization in the future.
- Have set up similar periodic programs at local organizations that work with victims. The programs are communication-based, and we use communication tools to help victims learn to express themselves in an effective way to decrease trauma and conflict in their lives.
- We have also set up One on One Communication Coaching Sessions with women who desire or need more individualized support. Through communication activities and tools, women can express emotions or situations, and we help equip them with long term tools for specific instances in their lives.
- Programs have been more effective in addressing and fulfilling what we outlined in our problem statement. Our programs offer different services than what victims may typically receive through traditional counseling or therapy. We have seen how having proper communication tools can decrease the effects of trauma and equip victims to lessen the potential of becoming a victim again.
  
- **Friday Peer Support Group for Professionals and Volunteers:** Peer Support Group is a place for people who work with victims to come and confidentially share their feelings and difficulties with others who are in their line of work. We provide communication training as well as self care practices to equip the workers with tools to successfully serve victims and handle unique, challenging situations with them, as well as provide them a place where they are heard and supported. We have seen that the group has lessened secondary trauma for those working with victims and given individuals who attend stamina to continue in their work, so it lessens turn over as well. This group has fulfilled what we outlined in our problem statement.
  
- **First Responders Training:** Training focuses on the Neurology of Trauma and How it Affects Victims and First Responders in the Real World. We speak about how trauma affects various areas of the brain and how it may trigger the fight, flight, and freeze response. This enables trainees to better understand the effects of trauma and why victims sometimes act or respond the way they do. We then work through our specific tools of communication to equip First Responders for how to respond to women who

have been victims. We also talk through some self-care tips to lesson secondary trauma. We have received great feedback from attendees.

- We have had great success in adding an element of self-care to our training seminar for First Responders and people who work with victims. We have found that this can lead to less turnover, higher job satisfaction and reducing secondary trauma.
- We found that giving professionals insight into what happens to victims neurologically because of their trauma, and how that affects their behaviors, has provided professionals a better understanding and empathy for how to respond to them.

Name \*

Marla Polk

Company \*

Abilene Palm House/ Resolution Solutions

Email \*

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**Noah Project** assists primary and secondary victims of domestic violence and sexual assault in Abilene and the nine contiguous counties (Taylor, Eastland, Stephens, Callahan, Jones, Shackelford, Haskell, Knox, Stonewall, and Throckmorton). For

Noah Project clients, services are provided free of charge, without regard to income. Noah Project provides services to victims of family or intimate partner violence, dating violence, sexual assault or human trafficking. Services are available to adult women and men with or without children, as well as unaccompanied youth aged 12-17. Services include a 24-hour crisis line/hotline, residential protective shelter, crisis counseling, emergency protective order advocacy, legal or medical accompaniment, transportation, educational support, survivor support groups, children's programs, employment and vocational training assistance, justice support, sexual assault services, including on-site professional counseling, and assistance with crime victim's compensation. Noah Project makes considerable and effective use of volunteers and student interns. In addition, Noah Project also operates an outreach office in Haskell, Texas; offering the same services and advocacy, including emergency protective shelter through local resources or by transporting to the Abilene protective shelter. The Noah Project outreach office in Haskell provides life-saving services and advocacy to the five northern-most counties in Noah Project, Inc.'s ten-county service area including Haskell, Jones, Throckmorton, Stonewall, and Knox counties.

During fiscal year 2024 (Sept. 1, 2023 to Aug. 31, 2024) Noah Project's unduplicated internal statistics include the following: Noah Project provided protective shelter to 497 women, children, and men who identified as family violence, sexual assault or human trafficking victims. Additionally, 530 child and adult victims received outreach face-to-throughout this same time period. We had 3,010 hotline calls from victims during the year in review. In addition to the direct client services provided, Noah Project staff conducts Primary Prevention professional and community presentations. These presentations are targeted at preventing violence before it starts, and to giving participants the tools necessary to stop the cycle of violence. During fiscal year 2024, our Primary Presentation program provided education on topics such as safe relationships, bullying, and internet safety to 2,319 students through prevention presentations for ages pre-k through college.

Continued funding is vital to maintain present services throughout the Big Country.

Law Enforcement Issues  
(listed in order of priority,  
greatest need first)*Identified  
Problem*

*Data Collection*

<p>Availability of adequate training</p>	<p>Over the past several decades there have been major changes in the training requirements for Texas Peace Officers. Some of the changes are mandatory; others are elective, but necessary for the successful completion of assigned duties. This training can be broken down into three categories:</p> <ol style="list-style-type: none"> <li>1. Initial Training- mandated to acquire Peace Officer Certification.</li> <li>2. Ongoing Training- mandatory to retain Certification.</li> <li>3. Specialized Training-necessary for specific job tasks</li> </ol> <p>Jones and Shackelford Counties have two sheriff's departments and five municipalities with law enforcement. In most of these jurisdictions the primary concern in proper training is having the proper funding for the training. Another issue also impacts an agency's ability to provide training is the lack of manpower. Municipalities have had major cut backs including layoffs.</p>
<p>Action Plan to Leverage Resources</p>	<p>Agencies will maximize the use of regularly budgeted funds to both pay for the necessary training and to provide adequate service while their officers attend the training.</p>
<p>Goals and Objectives Based on Problems and Activities</p>	<p>The Law Enforcement Community will stay current on TCLEOSE mandated training and become more familiar with juvenile issues such as runaways, truancy, and delinquent conduct.</p>
<p>Officer Safety</p>	<p>Jones and Shackelford Counties Sheriff Department's and municipalities current in-car video systems are 8+ years old, and are outdated, with some units being completely inoperable, which constitutes non-compliance with Texas' Racial Profiling legislation and poses a safety threat to deputies making violator and other contacts. In addition, some officers' safety</p>

<p>Action Plan To Leverage Resources</p>	<p>is currently being compromised because they are using worn-out, outdated, and unsafe personal body armor. Jones County has an estimated population of 20,785 population (2000 U S Census).  1,724 calls for service in 2008  595 traffic citations/warnings in 2008  In-car VHS video systems are 8+ years old  7 officers employed including Chief Deputy and Sheriff  \$29,572 median household income  16.8% of individuals live below poverty level  The Jones County Sheriff's Department has jurisdiction over 937 sq. miles.  Cities included in jurisdiction: Abilene (mostly in Taylor county), Anson, Avoca (unincorporated), Hamlin (partly in Fisher County), Hawley, Lueders, Nugent (unincorporated), and Stamford</p>
<p>Goals and Objectives</p>	<p>The goal of this project is to increase safety for the deputies of the Jones County Sheriff's Department and the citizens of Jones County by 1) providing digital in-car video systems, which will enhance officer safety as well as increase the quality and admissibility of evidence and maintain mandated requirements for Racial Profiling Legislation, and 2) providing adequate, safe ballistic vests for deputies, which will enhance officer safety.</p>

<i>Identified Problem</i>	<i>Data Collection</i>
<p>Maintain Security for Students and Staff At Jones and Shackelford Counties Schools</p>	<p>Jones and Shackelford Counties Schools</p> <ul style="list-style-type: none"> <li>• Located within 1 hour of 4 Federal/State Prisons.</li> <li>• Located within 1 hour of Dyess Air force Base.</li> <li>• ISD are one of the largest employers in the towns.</li> <li>• With these and other critical and strategic installations near our campus keeping the students and staff safe and playing a role in homeland security efforts is critical</li> </ul>
<p>Action Plan to Leverage Resources</p>	<p>Agencies will maximize the use of regularly budgeted funds to provide security for Students and Staff At Jones and Shackelford Counties Schools</p>
<p>Goals and Objectives Based on Problems and Activities</p>	<p>School districts will stay current on safety issues provided by the Region 14 Education Center. School districts receive training and mock lock downs.</p>

## **Resources Available:**

Included below are resources identified by the Jones and Shackelford Counties Community Planning Team that are available to provide Services that could potentially help in closing criminal justice gaps:

### **Juvenile Justice:**

<i>Name of Agency</i>	<i>Agency Type</i>	<i>Description</i>
259 <sup>th</sup> Judicial Juvenile Probation Department	Juvenile Probation	Supervision of Delinquent Juveniles

### **Law Enforcement:**

<i>Name of Agency</i>	<i>Agency Type</i>	<i>Description</i>
Jones County Sheriff's Department	Police	Public order
Shackelford County Sheriff's Office	Police	Public order
West Central Texas Law Enforcement Academy	Council of Government	Provide Basic Peace Officer Training Basic Corrections Officer Training In-service Training, Equipment Needs Basic Tele-communicators training

### **Victim Services:**

<i>Name of Agency</i>	<i>Agency Type</i>	<i>Description</i>
259 <sup>th</sup> Judicial Juvenile Probation Department	Juvenile Probation	Notification
Regional Victims Crisis Center	Victim services	1. Expand the list of services we provide: Crisis hotline, crisis response, counseling, advocacy, prevention programs, assistance with filing for Crime Victims Compensation.



Noah Project, Inc

Emergency shelter, transportation, crisis hotline, advocacy, Attorney and therapist on site/staff. Primary prevention presentation in the schools, pre k thru 12<sup>th</sup> to help stop the violence before it starts and educate kids to recognize the signs

### Health / Medical / Substance Abuse:

<i>Name of Agency</i>	<i>Agency Type</i>	<i>Description</i>
Betty Hardwick Center	Mental Health and Mental Retardation	Mental health screening, counseling, skills training, psychiatric services
ARCADA & PRC Prev	Substance abuse	Screenings, assessments, education and treatment
Texas Workforce Commission	TWC	Service for transition student in high school. Rehab Services for TBI and spinal cord injuries. Vocational services for disabled adults who want to work. Medical services to enable people to go to work
Oceans Behavior Health	Mental Health	In patient, Partial hospitalization, Intensive Out Patient, Outpatient behavioral health for ages 5 and up.
Resource Care-Albany	Medical/Dental	Federally funded Medical/Dental Clinic Medication
Oceans Behavioral Hospital Aspermont Hospital Helen Farabee	Mental Health	Counseling

### Prevention / Intervention:

<i>Name of Agency</i>	<i>Agency Type</i>	<i>Description</i>
Resource Care-Albany	Resource Center	Central Location in Shackelford County that provides a place for citizens to access multiple resources. <ol style="list-style-type: none"><li>1. ASPIRE</li><li>2. Chips enrollment/ACA</li><li>3. Food Pantry</li></ol>

4. Closet Angels
5. Adopt A Buddy
6. WIC
7. Medicaid
8. Vittles by Vehicle
9. C.A.R.
10. Summer Food Program
11. Federally funded medical clinic
12. Day Camp(July) at risk kids

Advisory Council  
Child Protective Service

Social Services

staff cases of available resources

CRCG

Family services

New Horizons/Fosters  
Homes

Refer children 0-17 for truancy, family conflict, run-a-way, respite, STAR

Faith Based Service  
Ministerial Alliance

Religion

AWANAS, Common Ground, Feed Store, Young Life, Local Youth groups  
Utility bills assistance, food pantry/baskets

Albany Drug Task Force

AA/NA, funds project graduation, substance abuse education and awareness

Independent School  
Districts  
Tri-County Education Co-  
Op

Civic Organizations

Lions Club, Kiwanian

Volunteer Fire Department

Regional Law  
Enforcement Academy

Crime prevention

Provide Peace Officer Academy, additional training

4-H and FFA

Crime Stoppers

Child Care Associates

Noah Project

victims

Care for domestic violence victims

HHSC

health

Medicaid, chips,

Department of State  
Health Services

Case management for children and  
pregnant women, personal care services  
and children with special health care  
needs.

Family Career and  
Community Leaders of  
America

United Way

Region 14 Education  
Center

Education

211 Texas-Information  
and Referral Line

Resource line

County Extension Office

PTA

West Texas Rehab

Jones County Child  
Welfare Board

County Extension

Joseph Tomas Foundation

Provides assistance  
for medically fragile  
children with a  
mental or physical  
impairment that  
limits one or more  
major life activity

Prevention Recourse  
Center. [www.prc2.org](http://www.prc2.org)

Resource Center

Data Collection and Training

Regional Victim Crisis  
Center (See page 21)

Methodist Home

Love and Care Ministries

## **Interagency Cooperation**

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In the space below write a description of how the various resources listed in the previous pages could cooperatively work together to accomplish the goal of closing identified gaps in services:

In order to accomplish the goals of closing identified gaps in services, interagency cooperation of various resources cooperatively work together. We need to increase communication between agencies and forge partnerships and network together. To educate ourselves on each entities services, polices, and eligibility requirements by attending community resource coordination groups. Increase accountability among agencies by following up on referrals made to the agency to improve referral success.

## **Long-Range Plan Development, Monitoring and Evaluation**

The Jones and Shackelford Counties Community Planning Team works in conjunction with other planning groups in the county to ensure a regular exchange of ideas. Individuals active in the planning process generally serve on many of these committees and share mutual concerns.

The Jones and Shackelford Counties Community Planning Team strive to meet periodically to review the plan and make necessary additions and deletions. At least one formal meeting of the entire group is held each fall, but agency and community representatives typically submit suggestions and changes via telephone and e-mail throughout the year to the Community Planning Coordinator.

Drafts and annual updates of the Community Plan are circulated by e-mail with requests for comments, changes, etc. Wherever possible e-mail is used to reduce the need for meetings, printing, postage, etc.

It is the intent of the Community Planning Group to improve outcomes for Jones and Shackelford Counties families struggling with problems described in the plan's focus areas. Efforts are being made by many Jones and Shackelford County agencies and organizations to address problems with local funds as well as grant funds from multiple state and federal sources. To the extent that these funds are available, the Community Planning Team will continue to urge agencies to provide programming that addresses the outlined focus areas.

## **Contact Information**

### **Jones and Shackelford Counties Community Planning Coordinator**

Jon Cook

### **Jones and Shackelford Counties Community Planning Liaison from Abilene Area Council**

Irene Laurance

This Plan is available on-line at address [www.wctcog.org](http://www.wctcog.org)

