













Substance Abuse Prevention Logic Model Training

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Training Agenda

Introductions and Updates

Part I: Logic Model Basics

• What are they? Are they all the same? How can they help me?

Part II: AHCCCS Substance Abuse Prevention Logic Model

How do I align my logic model to the framework used by AHCCCS?

Discussion and Wrap-up



Introductions and Updates

- AHCCCS Team Members
- LeCroy & Milligan Associates
- Statewide Substance Abuse Prevention Strategic Planning Process



Part I. Logic Model Basics



Logic Model: What is it?



- Graphical representation of the program "theory" or "action"
- Bird's eye view of program components
- Relationship between situation, inputs, outputs, and outcomes
- Logical chain of if-then relationships
- At the core of effective program development



Why the Logic Model?

- Draws connections between problems, underlying factors, and programming
- Shows in a simple way why a program or practice is likely to succeed
- Builds consensus and a shared understanding among stakeholders
- Makes it clear what to evaluate
- Useful for grant applications/funders

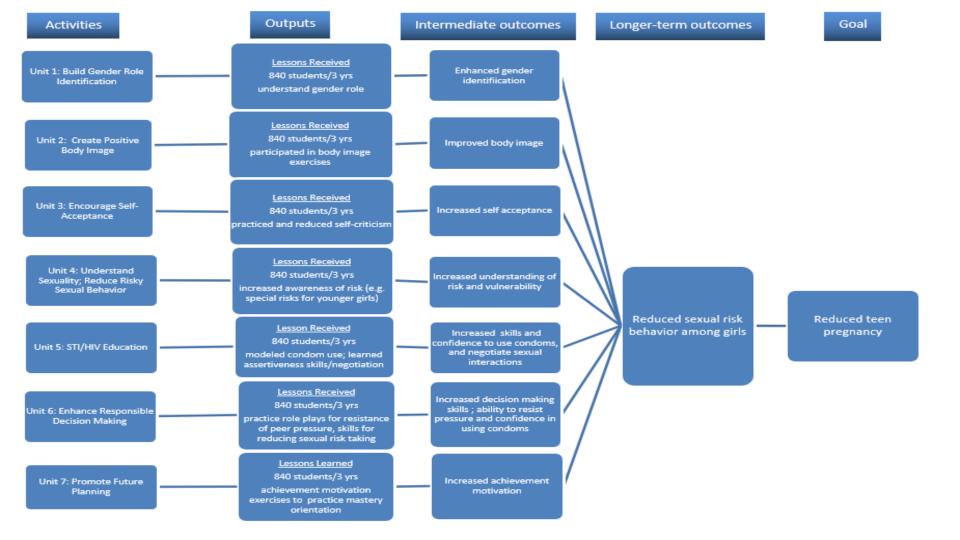


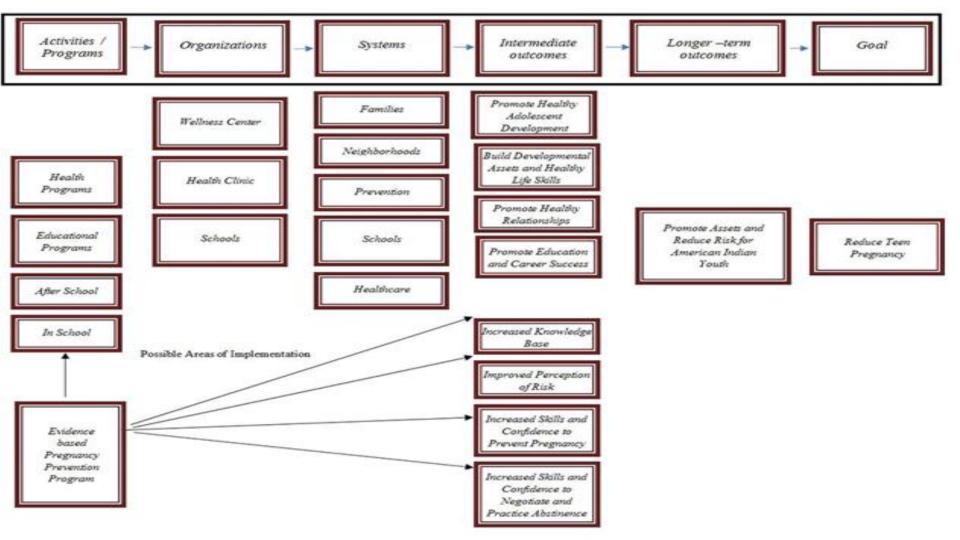
What is in a Logic Model?

- Does every logic model look the same?
- Why are they different?
- Are there different kinds?



Let's look at a few to get us thinking...

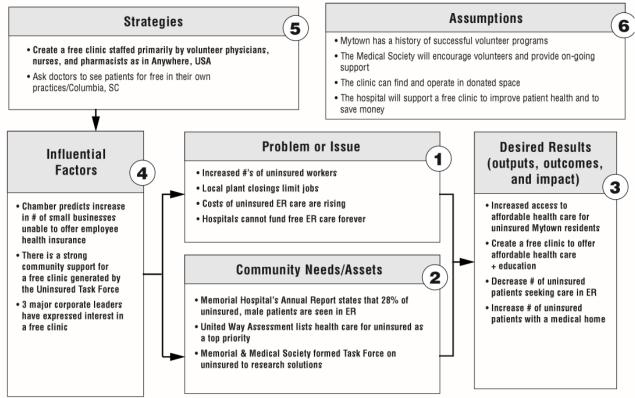




Objectives	Activities	Outputs	Examples of Success	Data Source
Navigate existing community support systems	Implement & market toll-free number & website Hire Navigators for all four sites	Number of families seeking assistance when in crisis Number of families enrolled in one or more services	• Families are able to meet children's physical, behavioral, and educational needs	Family Satisfaction Survey Navigation Database
	Train new Navigators; crosstrain existing Navigators			
	ID services & resources in Cochise & Pinal Counties			
	Coordinate partnership with Family Assistance Administration to receive referrals			
	Maintain connections with Child Protective Services			
	Establish relationship with new Child Protective Services Offices			
	Continue Children of Incarcerated Parents program	Number of families receiving assistance specific to Incarcerated Parents	Increased number of families receiving assistance specific to Incarcerated Parents	Family Satisfaction Survey
	Establish Children of Incarcerated			Jan 16y
	Parents program in select locations			 Navigation Database
Strengthen kinship families that are involved with the child welfare system	Continue Child Protective Services CORE trainings	• Number of Child Protective Services new employees receiving kinship training module	• Families are better able to meet children's physical, behavioral, and educational needs	• Family Satisfaction Survey
		 Number of families involved in welfare system 		Navigation Database



Logic Model Development Program Planning Template – Exercise 3







Observations?





Types of Logic Model

- Theory Approach Logic Models
- Outcomes Approach Logic Models
- Activities Approach Logic Models
- Or a blend or mixture of these three...



Theory Approach Logic Models

- Focus on the reasoning/assumptions behind the programming
- Show problems and issues addressed by the program
- How and why you think your program will work
- Big picture

Kellogg Foundation (2004)



Outcomes Approach Logic Models

- Connect the resources and activities with desired results
- Often have short-term, intermediate and long-term impacts
- Very useful in designing evaluation and reporting strategies

Kellogg Foundation (2004)



Activities Approach Logic Models

- Specifics on the implementation process
- Link various activities
- Detailed scope you will follow to implement program



Kellogg Foundation (2004)

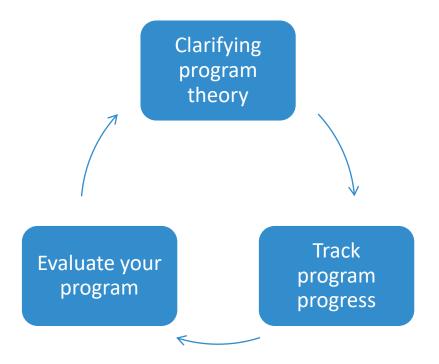


So what is the best?

- NO SINGLE BEST logic model template for every purpose
- Depends on how you hope to use it, what you want it to most clearly show, and what best aligns with other relevant frameworks



How do I use a logic model in my program?





Today we are going to cover the following...

- Basic logic model components and what they mean
- AHCCCS-specific prevention template and how it aligns with the SAMHSA Strategic Prevention Framework



- Resources/Inputs
- Activities
- Outputs
- Outcomes
- Impact



Resources/Inputs

- Human, financial, organizational and community resources available
- What we are putting in

Examples: Grant to fund program; existing partnerships with state agencies



Activities

What the program does with the resources/inputs

Examples: Tools, trainings, events, counseling, mentoring, classes, conferences



Outputs

- Direct products of program activities
 - What do they lead to?
 - o Who do they reach?
- Can include types, levels and targets of services delivered

Examples: 25 community members trained in substance abuse prevention; formal agreement with local coalition



Outcomes

- Specific changes attributed to program (results)
- Often look at changes in attitude, knowledge and behavior

Examples: Participants showed increased knowledge of risks of substance abuse; reported reduced intention to use substances



More about outcomes...

Outcomes

 Can (and should) include short, intermediate and longterm

Short-term

e.g., Changes in Awareness, Opinions, Knowledge/Attitude/Skills, Motivations

Intermediate

e.g., Changes in Values, Behavior, Policies, System

Long-term (aka IMPACTS)

e.g., Changes in Conditions such as Social, Economic, Civic, Environmental



Goal/Impact

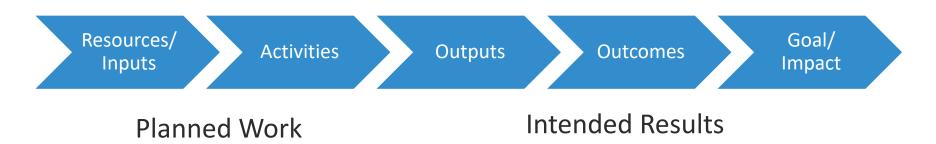
 What are you ultimately hoping will change because of the program outcomes

Example: 10% reduction in teen substance use in Maricopa County by 2030



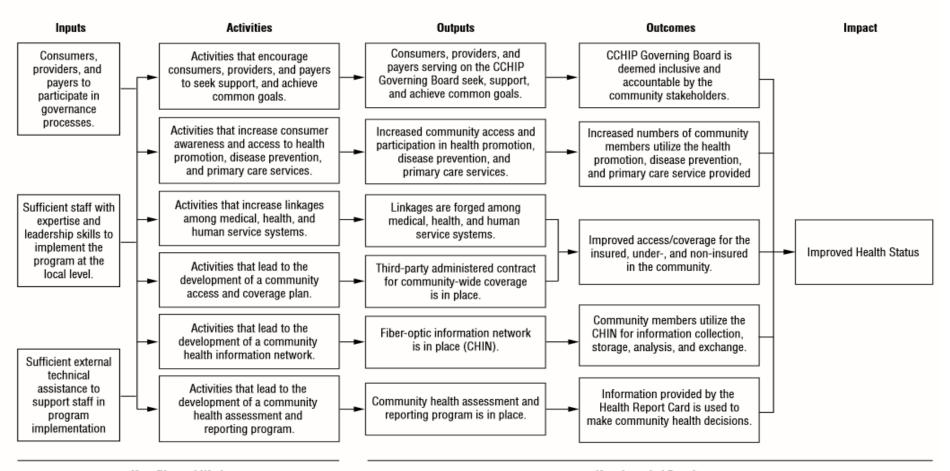
How to think about a logic model

- Think logically
- Typically read from left to right
- If, then statement format





Sample Basic Logic Model



How do I create one?

- Work backward from impact → input
 - Where are you going and what will it take to get there?
- Collaborate
- Review forward from input → impact
 - Does it make a case for how inputs and activities will lead to outputs, outcomes and impacts?
- Adjust and refine over time



Part II. AHCCCS Substance Abuse Prevention Logic Model



Laying the Groundwork

- AHCCCS process
- Current template
- More of a theory-based model
- Alignment with Strategic Prevention Framework

Remember logic models are ongoing and iterative.



Strategic Prevention Framework

What is it?

Comprehensive approach to understanding and addressing substance misuse and related behavioral health problems.

Why do we need it?

SAMHSA best practices for prevention.



Strategic Prevention Framework



- > Dynamic and iterative
- > Data-driven
- Reliant on and encourages a team approach



Socioecological Model

What is it?

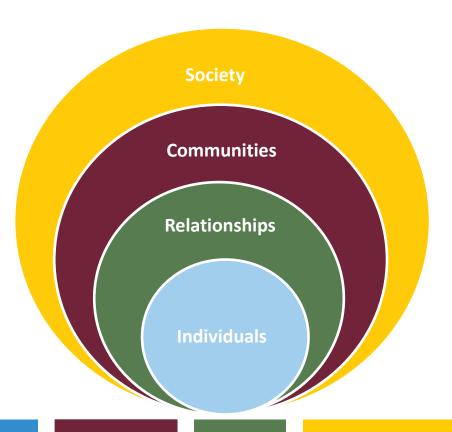
Multi-level framework to consider the context for risk and protective factors.

Why do we need it?

Highlights how it is important to work across levels to address these issues.



Socioecological Model





Socioecological Model





Risk and Protective Factors

According to SAMHSA...

Risk Factors are characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes.

Protective factors are characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events.



SAMHSA Prevention Strategies

What is it?

SAMHSA has identified six categories of strategies (sometimes referred to as "the six CSAP Strategies").

Why do we need it?

It's helpful to understand what strategies are effective for prevention.



SAMHSA Prevention Strategies





AHCCCS Logic Model Framework

What is it?

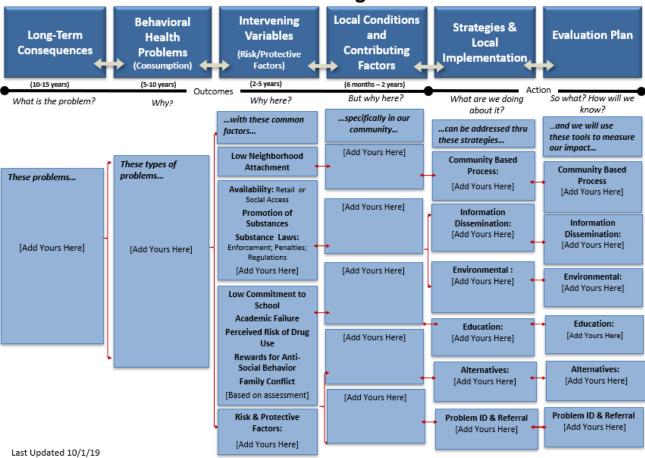
AHCCCS defined a logic model format for prevention providers they fund.

Why do we need it?

The state prevention plan will include a logic model in the same format. Consistency!



AZ Prevention Logic Model





Why use it?

- Modified theory of change logic model
- Helpful for program development and planning
- Alignment with SPF and related prevention frameworks
- AHCCCS currently requires it



Getting Started-Activity

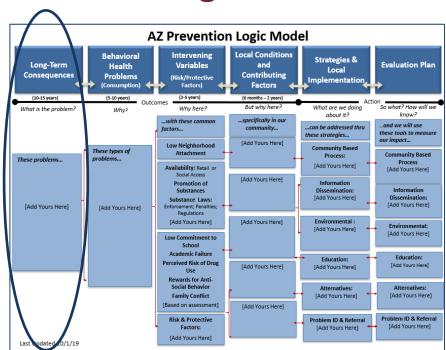
Brainstorm:

If your program was completely successful, what do you hope would change in your community?

What factors are going to help and hinder that from happening?

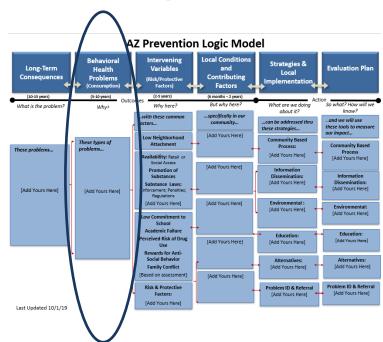


- Long-term Consequences (10-15 yrs.)
- Occur in the long run due to substance use issues
- Examples: overdose deaths, health problems, car accidents





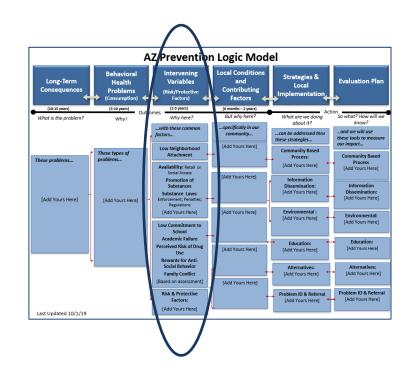
- Behavioral Health Problems (5-10 yrs.)
- Specific issues you hope to address and data sources used to measure impact (e.g., AYS, BRFFS)
- Examples: underage alcoholuse, binge drinking, opioid misuse





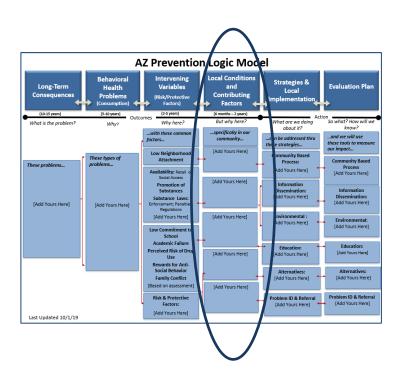
- Intervening Variables: Risk/Protective Factors (2-5 yrs.)
- AHCCCS identified common initial risk/protect factors
- Others may be added
- See <u>research on risk</u>

 and protective factors) for more information (Hawkins et al., 1992)

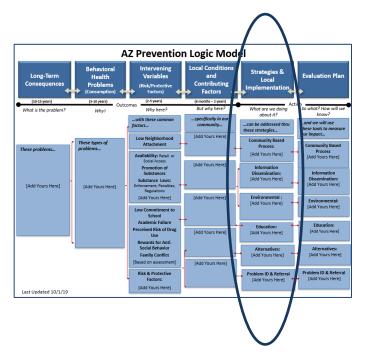




- Local Conditions and Contributing Factors (6 months-2 yrs.)
- What's specifically happening (or not) in communities related to behavioral health problems and intervening variables (e.g., lack of resources, high # of alcohol outlets)
- Think magnitude, severity, changeability, resources







- Strategies and Local Implementation
- Core of your logic model
- Should answer the question: What are we doing about it?
- Should ALL fall under one of SAMHSA's primary prevention strategies detailed here.



SAMSHA Prevention Strategies





Community-Based Processes

- Strengthen resources such as community coalitions to prevent substance use/misuse.
- Organizing, planning, and networking are included in this strategy to increase the community's ability to deliver effective prevention and treatment services.

(SAMHSA 2017)



Information Dissemination

- Increases knowledge and changes attitudes through communications
- Method of learning is mainly one-way (e.g., classroom speakers, media campaigns)

(SAMHSA 2017)



Environmental Strategies

- Aimed at the settings and conditions in which people live, work, and socialize
- Include call for change in policies to reduce risk factors and increase protective factors
- Examples: tighter zoning restrictions on alcohol outlets; stronger enforcement to prevent underage purchases of alcohol and tobacco products

(SAMHSA 2017



Prevention Education

- An interactive approach to teaching participants important social skills.
- Skills include resisting pressure to use drugs, looking at the intent behind advertising, or developing other skills used in making healthy choices.

(SAMHSA 2017)



Positive Alternatives

- Fun, challenging, and structured activities that provide people constructive, healthy ways to enjoy free time and learn skills.
- Activities help people (particularly young people) stay away from situations that encourage alcohol, tobacco, or drug use.

(SAMHSA 2017)



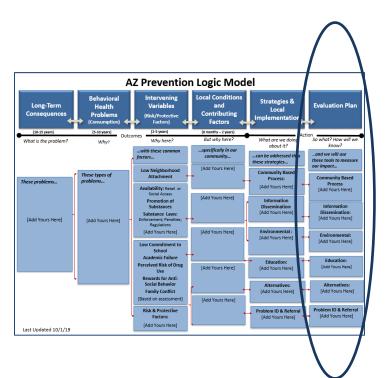
Identification of Problems and Referral to Services

 Includes the provision of assessment and referrals when the behavior of people at high risk of substance abuse may require education or other intensive interventions.

(SAMHSA 2017)

But keep in mind this is <u>STILL primary prevention</u> and should not drift into secondary/tertiary prevention or provision of treatment services





Evaluation

- How do you plan to measure your strategies and implementation?
- Cite assessments, data available, or note what information will be obtained and how you intend to do so (e.g., survey participants of education programs to assess knowledge gain).

Tying it all Together

- Arrows are important.
- Arrows should connect key concepts and provide a logical flow back and forth across the logic model.
- Arrows do not have to go in a single direction or only go horizontally.
- Make them logical!



SAMPLE Prevention Logic Model Local Strategies & **Behavioral** Intervening **Evaluation Conditions and** Local Long-Term Health **Variables** Plan **Contributing Implementatio** Consequences **Problems** (Risk/Protective (Consumption) **Factors** Factors) (10-15 years) (5-10 years) (2-5 years) (6 months - 2 years) Action Outcomes Underage drinking Low Neighborhood **Community Based** Lack of positive social **Community Based** (lifetime use and Attachment opportunities and Process: **Process** Multi-agency Tracking of 30-day use among relationships coordination and Alcohol-related car Availability: Retail community activities grades 8th, 10th collaboration crashes and injuries High density of or Social Access Coalition Strengthening and 12th) (AYS) (ADOT) establishments that Grassroots engagement Information Promotion of sell alcohol/marijuana Dissemination: Substances Marijuana Information Conduct local **Substance Laws:** misuse/abuse Dissemination: High density of alcohol evaluation to assess Alcohol and drug-Enforcement; Community (lifetime use and advertising within impact related ER visits (AZ presentations Penalties; Regulations community 30-day use among Social media Vital Statistics) grades 8th, 10th **Environmental:** Poor School Parental education and 12th) (AYS) **Environmental:** Local policy review level Attendance Support changes in policies, Death rates for procedures, and/or laws Tobacco Use Lack of access to afterthat benefit and protect youth ages 18-25 for Academic Failure Education: school programming (lifetime use and vouth and families Tracking of education drug overdoses 30-day use among programs offered and **Family Conflict** (BRFSS) Education: grades 8th, 10th impact on Classroom/small group (AYS) Lack of community knowledge/attitudes sessions and 12th) (AYS) resources Community education pre/post survey Risk factor: Lack of programs for parents Prescription Drug and youth parent Poor parenting skills Alternatives: Misuse/Abuse communication Alternatives: Survey participants (lifetime use and Drug-free dances and Family Trauma about impact of 30-day use among Protective factor: afterschool activities programs Parent events grades 8th, 10th Relationships with Historical Trauma and 12th) (AYS) positive peer Problem ID & Referral Problem ID & Negative peer mentors Referral to counseling Referral influences services with trauma Total referrals made to informed care services



Where to go from here: One Approach

- 1. Ensure you have a complete list (see earlier brainstorm) of what you hope to impact. Look up data to support it. Place these in the first two columns.
- 2. Create a list of all your current and upcoming strategies. Place them under the appropriate SAMHSA Strategies and Local Implementation categories.
- 3. Connect these ideas by filling in your Intervening Variables and Local Conditions.
- 4. Identify gaps and fill them (e.g., new programming needs?). And watch for areas that don't tie together.
- 5. Last, add how you will measure it in the Evaluation section.



Checklist for Final Review

- Is everything in the correct column?
 - Watch what goes in long-term consequences vs. behavioral health problems
- Do the arrows connect ideas in a logical fashion?
- Am I being succinct and summarizing key ideas?
 - Logic models should be 1-2 pages max.
- Am I being specific enough about what MY program is doing and trying to impact?



Discussion and Questions



Wrap-up



Next Steps

- Logic model development/refinement
- Upcoming technical assistance office hours

Every **Wednesday** at 3 PM, Sep 30 until Nov 18. (*No sessions on Nov 4 or 18*)

https://us02web.zoom.us/j/88008436315

Every **Friday** at 9 AM, Oct 2 until Nov 13. (*No session on Oct 9*)

https://us02web.zoom.us/j/89654001303



Thank You.

Remember logic models are helpful to you at all program stages and are continually being reviewed, updated and refined.



Resources

- Hawkins, J. Catalano, R., & Miller, J. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. American Psychological Associate Psychological Bulletin, Vol. 112, No. 1, 64-105.
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- W.K. Kellogg Foundation. Logic Model Development Guide January 2004.
 https://www.wkkf.org/resource-directory/resources/2004/01/logic-model-development-guide

