Transcript: How to Develop an Effective Logic Model

Presenter: Kyle Barrington
Recorded on October 19, 2021

ANN SCHENSKY: Hello, everyone and welcome, welcome. We will get started in just a minute. We're going to give everybody time to get in.

All right. It looks as though we've currently cleared the waiting room. So again, welcome everyone. Our training today is developing effective logic models, and our presenters are Kyle Barrington and Erin Ficker. This is brought to you by the Great Lakes PTTC and SAMHSA. The Great Lakes ATTC, MHTTC, and PTTC are all funded under the following cooperative agreements.

The opinions expressed in this trading are the views of the speakers and do not necessarily reflect the official position of DHHS or SAMHSA. The PTTC Network believes that words matter and uses affirming language that inspires hope to promote the application of evidence based and culturally informed practices. If you have any questions today or technical issues today, please feel free to individually message Stephanie Behlman, Kristina Spannbauer is out today, I apologize, and they will be happy to help you in the chat.

We are also using automated transcriptions for today's webinar. We will send a copy of the PowerPoint slides and any handouts following the presentation. Everyone who attends this session will be sent a link for the Learning Lab on November 1st. This link is for those who have attended this session. You will also be sent a direct link after the presentation to a very short survey. We would really appreciate it if you fill it out, it'll take about three minutes, and it's how we report back to SAMHSA.

Certificates of attendance will also be sent to all of those who attend the full session, and they can take up to two weeks to appear in your email. If you'd like to see what else we're up to, you can feel free to follow us on social media. And if you are on our mailing list, look for our weekly updates for events for the following week, they come out on Thursdays. Again, our speakers today are Kyle Barrington and Eric Ficker.

Kyle has over 30 years of experience in substance misuse, prevention, and treatment. His experiences include being a substance abuse counselor, counseling director for juvenile prison, director of a dual diagnosis hospital unit for adults and youth, director of an emergency shelter for runaway and homeless youth, and an evaluator for local and statewide organizations. Kyle is very proud that he is currently a new forester. And so he will-- that is one more title to add to Kyle's already impressive resume.

And Erin is with us as well. And Erin has 16 years of work in the substance use prevention supporting communities to use evidence-based strategies and data driven processes in substance use prevention, planning, and implementation. She works with community level prevention practitioners and schools in the development, implementation, evaluation, and sustainability of prevention interventions. So I'm going to put it both in their capable hands, and thank you.

ERIN FICKER: Thank you, Anne. And Kyle's going to pull up some slides for us so we can get started. Thank you all for being here, for being on time. And today, as Anne mentioned, we'll be discussing developing effective logic models, and it's-- oh, Kyle, we're seeing all your notes. So we'll be discussing that, and this will be followed by what we're referring to as a Learning Lab, and that'll be an opportunity to do breakout rooms in small groups and really dig into a case study and develop a logic model based on that case study with support from some experts.

So after we finish this webinar, you'll be given an opportunity to register for that. If you feel like, yeah, I've got this, don't need that, feel free to-- don't need to join us if you don't want to. If you feel like, yeah, I'd really like that extra support and would like to dig in some more, then please register for that so we can give you that extra practice.

So Kyle is amazing at this work, and we're really lucky to have him. So thank you, Kyle, for joining us and agreeing to be a part of this. So I want to ask you how you are today so we kind of get a temperature check. If you've been to any webinars with me, you know this is my favorite thing to do. So if you can use the annotate feature, if you can go up to maybe options, or maybe there's a dot, dot, dot, and there's an option for annotate, and you can use a stamp. You can just put a star or a checkmark on how you're feeling today. I'm going to put mine right around there. Maybe not quite the sad dog, but I need more coffee.

So it looks like we have people. So go ahead and take some time to do that so we get a temperature check on how our room's feeling today, how fast we're going to go. Maybe how chipper we are. We need a lot of coffees needed. A lot of still, it's going to be good day, but maybe we're still needing. God bless you who are having a mountaintop morning, because I am a little jealous. Oh, my goodness. You guys are so great at annotating. Thank you. I like the circle, thank you so much for taking that time.

We may be coming back to this as a means to interact later. It's one of my favorite ways to provide interaction where you don't have to talk if you don't want to talk. So we like to practice that and get a temperature check in the room. So we will go I'm a little slow, but not too slow, given that we all need a

little coffee, right? So I'm going to go ahead and clear our drawings. And you can turn off your annotate for the time being. And I'm going to just share-- turn it over to Kyle, actually, to talk about our objectives for the day.

KYLE BARRINGTON: Very good. So technically, is everything still good? All right, very good. So I want to make sure that the presentation looks right. As mentioned first and foremost, thank you Erin and Anne for the introductions, and thank you for everybody who is here now. And I appreciate you being on this call and during this training and technical assistance.

There are a couple of things to note about it, which is kind of unusual, and I think beneficial, is that this is the part one of a two part series. So part one is the background and just getting a better understanding of evaluation, and evaluation in program logic modeling. But then you're going to get a chance, I think on November 1, to actually have a follow up meeting to this, in which case, we're going to walk through a case study.

So in that case, you're going to take a real life example, a true example from a community. We de-identified the community, of course, but the data is accurate and what occurred in that community is almost 100% right on cue with a data that actually existed then, and walk through the process of creating a logic model. So it's not just you hear about it. But with the case study, you're actually going to get into small groups and actually create your own using that case study and that data. And the hope, then, is you can use that as a springboard to creating your own logic model.

Now there are a couple of things about logic modeling. And I love logic models. I've used them almost my entire professional career, and I would bet you that I probably even used them back in high school to get through high school, by putting out, hey, what is the goal of this class, what are the objectives, what are they do, what do I have to accomplish, and what are my outcomes. And the outcome wasn't just passing the class, but there were as additional ones. Like I would want to achieve an A in this class. Did I want to make sure that I got as much value out of it could. Some of the extracurricular activities as well.

So as we move through here, today's presentation really is about logic modeling and what we're trying to get out of it. Logic models are vital in our field, and we'll talk a little bit about why that is. You may not feel that way, but they are. I'll also tell you, you should also feel very comfortable with logic modeling, because you do it every day. If you are married and you selected your spouse or you at least agreed with your spouse to get married, then you do a logic model.

You had to go through pros and cons. What are the short term, long term outcomes to this. What do you expect. So if you can do those kinds of things,

and you're right in the process of where logic models are and what the benefit will be. So as we go through here today, a couple of learning objectives. We want to identify the basic pieces of a logic model. We want to be able to identify the components, what they are. And we want to be able to describe how logic models inform program evaluation.

So as we go through that process, that's kind of the goal of today with that springboard that we get to with your case study. In terms of a quick agenda, the agenda for today is evaluation framework. We're just going to put it out there as to where this fits in the evaluation framework and the programmatic process of the strategic prevention framework. We want to talk about the benefits of logic modeling. And I know some of you are sitting back chuckling saying, there are none. I guarantee you, there are. If you go through this process, you will be more-- your program will be more successful, generally. And if not, you will know where to find and fix your challenges.

It will also help you identify components and steps of the logic model. What are the steps and sequences. We'll also have a question and answer, which I think are the most beneficial. Remember, this is your training, your presentation, not mine. I have no objectives in this, other than getting you the information you need. So if there is a question or anything like that, do not be afraid to interject in the chat box, and we will have several people looking at that to make sure that we answer those questions as they come up.

I'm not one of those people who wait till the end. If you have a question during this, please do not hesitate. And then finally, there was that evaluation form.

Again, in order to make sure that the PTTC continues, we need to show SAMHSA that work is being done, and the quality of work is being done, and that's through that evaluation process. I will also go back to what Anne said with a disclaimer. I am a consultant in this role. If I say anything that you are offended by, disappointed in, or absolutely disagree with, my name is Kyle Barrington, and put all blame on me.

If you learn something from this presentation, and everything-- if anything in this goes well and you walk out saying, hey, that was good, then that is the Great Lakes PTTC and give them all the credit in the world. So as you go through that process, that's just the way that we work and as we move through these webinars.

I will tell you, the world's coming back a little bit back to normal. I did a live, face-to-face training in Arkansas a couple of weeks ago, first one in about two years. I really miss that interaction and the dynamics of getting into a classroom and working with people in the prevention field again. That was great. So it's starting to make slow steps forward. And this last weekend, I ran

a half a marathon, a live half a marathon, no virtual half marathon. And so as you go through that, we had about 1,000 runners. And so that's great.

ERIN FICKER: Me too.

KYLE BARRINGTON: Way to go, Erin. So it is absolute neat to be back in that community. So I miss it, and I hope to get a chance to meet a lot of you in the near future. As we go through that process, it is important to note that evaluation and data collection is a part of the strategic prevention framework, the SPF. And every part of the framework involves some degree of data collection and evaluation. Whether that's the assessment of what's going on in your community, capacity assessments, do we have the right people, the right tools, the right practices. How am I going to do this, what am I missing, are all evaluation questions that require some degrees, a review of your logic model.

When I implement, am I implementing with fidelity, am I doing it correctly, is it the right audience, do I have the right targeted population. All of that is also a piece of the logic model, as well as you can imagine the evaluation piece. Around sustainability and cultural competence. Are we doing these practices ethically, and are we doing it morally, and are these the way that we should be doing it in order to sustain these practices and components.

Logic models are a form of communication, in a way, a form of language. And it will help you with sustainability down the line. An effective logic model that points to and can show outcomes that are effective have programs that are much more likely to be sustained. So as you go through that process, remember that evaluation logic model isn't something you do at the beginning or the end, it is a continuation throughout the whole strategic prevention framework.

So as we move through here, it's vital that we understand at least the beginnings of the evaluation logic model and program logic modeling and about why that becomes important, and how it can help you develop a better practice and better programs within your agency. So as we go through that process, we know that it's part of the strategic prevention framework. And so we also then want to talk about prevention practices. And this is one of the reasons why logic modeling came into being.

And it used to be in our field that we would always sit back and talk about prevention practices, and it was around this. And I've been in this field long enough now, since the 80s, to be able to tell you this is how it went. Hey, what works in your school or what works in your program? Oh, this does. X, Y, or Z works. How do you know? Because I do it. And that was it. As long as somebody said, hey I did it, then that made it effective.

And so as you go through that process, a lot of our time, energy, and efforts working toward prevention, was really based on this historical knowledge that, well, somebody did it before me, so therefore it must work. Or worse, somebody was funded to do this before, so therefore, it must be effective, because it was funded. And we now know that that is far from truth, right? Just because you were funded or a program or practice was funded does not make that effective.

Throughout history, we can't see, things are we put time, energy, and resources and treasure into ineffective programs and practices. And let me give you a case in point. Our field, prevention field, actually draws its history from prehistoric times. And so as you go through that process, one of the things that's important to note is that in prehistoric times, this was prevention.

And so one of the ways that we looked at prevention is that we had this trepanning tool, what you see on your right hand side. And as you go through that piece, one of the things that's important about that, is that this piece right here, was a way that we would do prevention.

And what happened is, let's say you have caveman Kyle, and he walks back into the back of the cave where he had stored fruits and vegetables for over the winter, and it's now growing season, but not yet harvesting season. He reaches back for the last bit of food and the last bit of fluids that may be in the back of that cave. And there was a bunch of fermented fruit that's set in this cold, damp cave for over the winter. And he reaches his hand back in there and he licks it, and he notices that it tastes different. And over time of licking that fluid, he begins to feel different.

Well, we now know that fermented fruits and so forth can lead to alcohol. And so one of the things that occurs is we believe that a lot of our first indoctrination with alcohol came in the cave. And when he walked out, he acted different. And so one of the first things they learned to do to prevent this from happening again, is they took this tool, right here, this trepanning tool, and they cut a hole in his head.

So here comes Kyle, he's coming out, he's acting different. So they set him down, took that tool and literally shaved off part of his skull to expose the brain. And the theory behind that was, hey, there's something inside Kyle. He is now possessed, and we need to let that possession, that demon out. Well, almost 20,000 years later, we got the same tool. So 20,000 years of human development, and we're still doing, basically, the same thing.

And what's sad is that these same little tools were still used up until the early 1900s. In fact, the latest one I can find is the last example, in the United States where we use a trepanning tool, by medical science, was in 1912. So just a little over 100 years ago, we were still cutting holes in heads as part of

our prevention practice. So some people will say, well, why did we do that? Why was that allowed?

Well, it was allowed simply because it was done before. No one actually did the science, no one actually did the research. They just said, oh, this is what we used to do, so we're going to do it again. And we need to move out of that practice. Now let me see if I can remove this and clear these. There we go, and move forward.

So that takes us into the current process of where we are today. And where we are today is much different than where we were even 30 or 40 years ago, where it was, well, if it was funded, it is effective. If you did it, it is effective. Now we want the science behind it. And we want to prove that it doesn't just work for college educated people. We need it to work inside our major cities, in our rural communities, and with diverse populations.

So as you go through that process we need to be able to show and demonstrate effectiveness. So we have an evaluation framework. You may not know this completely, but within our prevention field there is an evaluation framework. And today, we're going to focus on logic modeling, which deals with, describe the program, because a logic model, a program logic model should describe your program in almost a step by step process. And it should also focus on the evaluation design. What is it that you're doing to show that your program is effective. So as we go through that process, that is our evaluation framework for today.

So in a quick nutshell, one of the things that we want to talk about is the fact that we are moving away from, oh, we just did it before, therefore, that makes it effective now, to actually having some research or evidence that shows this as effective. A term you should already be familiar with is evidence based programs and practices. That means there are some science or really rigorous research that's been done, or it should be rigorous research that's done, that shows, hey, this is effective. And we now know that it's effective for population A and B, we can see if maybe it's going to be effective for D and E. And if it's not, we need to show that and document it, and then publish that information so others know what it is effective with and what it's not effective for.

So as we go to that process, the way we do that is something called logic modeling. And logic modeling really is nothing more than, really, a blueprint. What is it you do? So if you are funded by anyone, a grantee. So it could be SAMHSA, it could be a Department of Education, it could be your State Department, it could be a foundation. If you are funded, you presented to them a plan, and that plan was a business plan. And that business plan was really a blueprint of what you were going to do.

We're going to hire this many people, we're going to buy this amount of supplies, we're going to implement this strategy, and we're going to build a program up this way so that we achieve this outcome. The outcome wasn't just hiring somebody, the outcome wasn't just buying things, the outcome was some type of achievement related to whatever it is that you identified in your original proposal.

So if you're building a house, I have land, I know what my house needs to look like, it needs to be two stories, it needs to have three bedrooms, it needs to have two baths, it needs to have a kitchen, it needs have a contained garage. And you start putting all those pieces together, and eventually, over time, when you add in your goals, your objectives, and your activities relate to these outcomes here. And so everything in our logic model is about getting us to this outcome.

So as we move through this piece, we're going to identify goals, we're going to have objectives, and we're going to have activities. But those aren't what we do. What we're trying to do is achieve outcomes. So if you're dating. If you ever dated somebody and you ever were in like with somebody, you had a goal. Hey, I want to go out with that person. And you had an objective. Well, I want to go out with-- let's go to a dinner and a movie, or let's go out for an iced tea or a breakfast. Whatever that objective is.

The activity itself is, well, I want to be able to sit down and have a conversation with them that lasts more than an hour. So that becomes your activity. And the outcome, your first one, your short-term outcome, that A, they accept your invitation. But B, they accept your second invitation, that your intermediate outcome. And then over time, it could lead to a marriage proposal, or if the outcome is not positive, the severing that relationship and moving on to another. Still, an outcome. So if you go through those processes, goals, objectives, activities, equals our outcomes.

Now some people want to question, well, how do we put a lot of time, energy, and effort into our logic model, what's the benefit of it? Well, there are several, as I drink a sip of iced tea here. And to me, you can't do anything in this field without a logic model, because it really tells people what their goal is, where they fit in this process, why their job is important, and how their outcome, what they do, what their achievement is, leads to ultimate success.

So if I'm a business manager in a non-profit, then me being able to purchase, having money to purchase the correct supplies at the right time, means that my counselors can do the activities they need to do to reduce substance abuse or to increase a number of people who are in recovery. All positive steps. Logic models should help you do that.

So what are the benefits? Well, first and foremost, it develops understanding of what's going on within your program, and specifically, what that program is attempting to do. It should develop that level of understanding. It should also help expose assumptions. So as you go through that process, we all know what assumptions do to us, it's a very negative aspect if we just assume. So it should expose assumptions and say, no, we need very precise things.

For example, the assumption is, does cutting a hole in somebody's head actually help people reduce their substance use? We now know that isn't effective at all, it was just an assumption because it was done before. It also helps us monitor progress because it gives us short term, long term, and intermediate steps to monitor. And very importantly for a lot of us, it helps restrain overpromising.

We now know when we look at evidence based programs that we're not going to eliminate underage substance use for everyone, or generally, it will not. Very few programs right now can ever be shown to 100% reduce underage drinking. In fact, we've been doing it for hundreds of years, and we haven't been able to do it yet. As we go through that process, the other part of that piece is that as we restrain ourselves from overpromising, one of the pieces of that is it allows us then to fine tune exactly what it is that we are attempting to measure.

It also facilitates us in regards to project reporting, because we know exactly what we're collecting, it's going to allow us to be able to facilitate project reporting about how many people we serve, how many hours of training were provided, and then what was the ultimate short term, intermediate, and long term outcome. It promotes communication. In regards to, now it allows us to know what we're reporting, when we're going to report it and how we're going to report it. We're going to report it using this survey, for this group of kids or this group of adults, and this is the outcome we're looking for.

And it also serves as an evaluation framework for our own individual program. So as we go through that process, most important thing is, I believe, is that it helps us to expose those assumptions, and it also restrains us from overpromising. Two of the biggest issues we have within our field. If you go back to the 80s and 90s, we really believed we could eliminate underage drinking and underage drug use with just simply say no.

We now know, through evidence, that just saying no isn't the only way and isn't the effective way of reducing underage drinking. It is a tool along the way but it is not the end all be all, and we used to promise, hey, if you show an ad with an egg frying in a pan, this is your brain, this is your brain on drugs, that's going to stop use. We now know that that never really was going to work. But it was a step along the way.

So as we go through the process, logic modeling then allows us to work through steps to be able to get to the outcomes that we need to be able to report and we need to be able to show. So as we go through here, here's an example of one type of logic model. Now this is based off several different varieties. It's based off the Wisconsin extension as well as the Kellogg. But it has several different points to it that almost every logic model, whichever one and whichever version that you use, has.

So the first one is that it has these priorities. In the priorities are mixed include your needs. Now it's important here the needs are your needs and your community. I still do grant reviews occasionally when I have time, and I still am amazed. I'm getting a grant proposal from a rural community in Arizona who's only using national data. Well, I'm not applying national data to that rural community. Give me localized data where you can.

So that priorities should be addressed to your individual communities needs. Once you've identified those needs, you now have goals. We have an overreliance or an overuse of substances, particularly alcohol, in our community, within our middle school to high school youth, and more and more are driving under the influence. All right, so one of the things, one of our goals then is to reduce underage use and to reduce underage DUIs. Right, number of kids who are driving while intoxicated.

Then we also need to identify these objectives. And so as we go through that process, that all falls up under this concept of priorities. And as we go through that piece, one of the things that occurs, and once we've identified our needs, our goals, and our objectives, what is it that we're attempting to do, now I need to be able to know what my inputs are. Now if you're that dating example, my need is, hey, I want to have somebody to date. And for me, that was very difficult when I was younger. So one of the things that occurs is the goal was, is hey, I want to have somebody who will agree to go on a second date. My objective was to make the first date entertaining, was to make sure that it lasted an hour, and that they were willing to go on a second one.

Well, what do I need to do? Well, I'm going to need to make sure I pick a good restaurant or a good place to get a drink or a good place to go to breakfast. And so I need to make sure I have these inputs here. And those inputs are the resources that I would need for that to occur. In my programs, resources are going to be people and things. Institutional capacity and intellectual capital. Institutional capacity are going to be the computers, the software, the curriculum, the paper, the printers. The intellectual capital are the people and the training that they're going to need.

So do I need resources, and what kind? Human resources, do I need computer resources, do I need volunteers, do I need to send them out for training or bring trainers in for capacity building, do I need, as we mentioned,

staff? What level of funding to support that, what materials, and what promotion items? How I'm going to let the world know that, hey, I need this.

So as we go through the process, have these goals and these objectives, now I know, based on those goals and objectives, what I need to acquire. Those are inputs. And like with anything, we have consumable inputs, and then we have renewable or reusable inputs. So if you're a baker, for example, one of the things that it has is, I may need flour and eggs and milk, but I should be able to reuse my cake pan. And I should be able to reuse my whisk and my blender. I don't need a new one each time.

So I have these consumables that I have to replace every time I do something, and then I have reusable, those that I can reuse over and over again. So I have those inputs. Once I have inputs, I should have outputs. And outputs are going to be things like, well, once I hire these councilors or staff, then I need to train them. So the combination of training and staff together is an output, and we call that an activity.

Once I have my people trained, well, then I need to find my participants. And if I'm dealing with middle school to high school, I need to go in and find out where I can find middle school to high schoolers who are willing to participate, or school districts and parents who are willing to allow their children to participate in our program. So now I need to go out and do the promotion with the materials and get school districts and parents to agree.

Those would be the participants, but that's an output. How many participants do I need to be trained and how much time do they need in this curriculum or this activity. Those are all outputs. Those are all numbers and counts that I can have.
Once I have the staff that are trained and the activities being done with them and I know my participants, then that takes us to the next step, which is outcomes, right here. And those outcomes are short, intermediate, and long term. Just remember, as you go through this process, keep in mind that short term is usually knowledge based.

So if you're writing a grant or writing a report to the federal government or writing your first logic model, your first short term one is knowledge. That we increase knowledge about the harms of alcohol use or the harms of underage drinking, or do we increase knowledge related to where kids get alcohol, or do we increase knowledge related to where drop boxes are in our community. So short term outcome, usually knowledge.

Intermediate, attitude. I'm changing somebody's attitude. I believe I am more willing now to do this. I believe I'm more willing to ask for help. I believe I am more willing to go out and tell my kids, no, they can't use drugs in my house,

or they can't have access to my alcohol. So as you go through the process, attitude is your intermediate step.

Long term is behavior. So as you go through that one, that's actual reducing-- a reduction in the number of kids who drink, number of kids who have access to alcohol, number of kids who drive after drinking, or get in a car with somebody who has been drinking. So as you go through the process, short, intermediate, and long term. Knowledge, attitude, behavior.

So if you're ever in a stick, or ever in a situation where you're writing a grant or writing a report or trying to develop a logic model, always remember KAB, knowledge, attitude, and behavior. That's usually the only way humans learn. We have to increase our knowledge or change the knowledge level of something. That impacts our attitude, which changes their behavior, and we did it with cigarettes. We used to believe cigarettes weren't harmful. We change that attitude with a real big publicity scale that said, hey, tobacco causes cancer and cancer is deadly.

That got people to start thinking, hey, maybe I'm not going to smoke as much, and that reduced the number of people who are smoking. And that did great up until the vaping systems came into being. So we had significant reductions, particularly in underage kids who are using cigarettes. And now, we unfortunately are starting to see a significant increase in those who are vaping, so we need that same kind of knowledge. But that's how a logic model is constructed. Wherever you go, you're going to need those priorities, the inputs, the outputs, and the outcomes. They may call them slightly different, but those are all the key components.

So as we go through here, your step one is describing that first part there, describing the need, what is the problem in your community. You should already have this in your grant. What do you know is a problem or how do you know it's a problem. What are the consequences of this problem? What factors, importantly, contribute to that problem, and what are the gaps-- what gaps exist in addressing that problem. Because if you already have all the things you need to address the gap, then why do you need this additional funding or this new program.

So normally in a community, you identify a need, there's a significant consequence because of that need, you identify, specifically, how to address that need, those factors that contribute to it, and then you're saying, here's the gap. We don't have any of these kinds of services in our community. We're dealing with a rural community in South Texas who have a huge issue with overdose deaths related to opioids, and there is only one psychiatrist in that entire county. So that county is about the size of Rhode Island. There is only one psychiatrist.

So as you go through the process, now we've identified a problem, we know what the consequences are, we know what the factors are contributing to it, and we know there is a gap. So now there are some funding that we can apply for specific to that need. When we go through here, one of the things that we need to focus on are the factors that contribute to the problem, because funding that we get from the federal government foundations or the state, usually are addressing these factors. So as you go through the process, what are the factors in your community that are leading to these negative outcomes or negative consequences.

Now back when I first started, it used to believe that communities with need were the ones that were funded. Well, that's not true. When you go back and you do the analysis of grant funding, most competitive grant applications these days, of which most of you got funding for and will get funding for in the future, isn't because you have a problem in your community or you have a need. It's because you have a way of addressing that need that is unique or proven to be effective.

So one of the things that's important to note is you are funded because you have a solution, or potential solution to the problem you identify, not just because you had a problem. If that's the case, all we had to do is write the first thing. Hey, we have a problem in our community. Well, here's money. They won't ask you what are you going to do with it, because that would be irrelevant if it was just based on need. So as you go to the process, remember, you were funded because you have a need and because you have a good solution to that need.

We want to focus on factors that contribute to the problem. And the way we do that, those factors, we have two neat terms for them. One of those is that we start talking about identifying risk and protective factors. So we have risk factors and protective factors. So these are pretty straightforward nowadays, but they are still fairly new to our field. And that is that when you are working on your logic model and you're addressing one of those objectives, you've got to think, is this objective addressing, or is this goal addressing a risk factor or a protective factor.

So a risk factor in a community may be lack of parks. It could be high crime, could be a risk factor. In some cases, when you look at demographics and so forth, single parenthood can become a risk factor. Not that it leads to anything specifically, but there needs to be some additional support, particularly around early childhood care. Also, some additional after school programs, particularly if the single parent is working. So as you go through those processes, that can be a risk factor.

Protective factors can be anything that adds up to or helps out with the situation. Increase in parks. We already have active vocal advocacy groups,

we have equity initiatives to ensure that all members of our community are being addressed. Now in terms of exact definitions, we can't go through without that. So a risk factor is a characteristic, at the biological, psychological, family, community, or cultural level that precedes and is associated with a higher likelihood of a problem outcome.

All right. Fancy term for saying is, that in our community, whether it's at the individual level or at the community level or any strata in between, we have something that is causing these risks to be increased. Lack of parks, lack of funding, overly aggressive policing techniques, lack of curriculum development in our schools, lack of time to implement after-school programming, those kinds of pieces.

Conversely, protective factors. We have a characteristic at the biological, psychological level that is associated with a lower likelihood of the problem occurring. So in that case, that could be strong family engagement, advocacy, funding, group or leadership in your community level that's willing to support, for example, social host policies. So at this point in time, what I'd like to do in your chat box is just go ahead and put in some of your protective and risk factors in your community. Just type a few out of what in your community you identify as protective or risk factors.

I'll give me a chance not to have to talk for a second. And we've got a couple coming in. Low income, OK, yeah. Particularly in a lot of communities now, were having majority, minority communities. And there's been a lot of issues there in terms of, how do we make it more equitable for everyone involved in that community. A protective factor, lots of resources, lots of grassroots organizations.

Low risk perceived risk of drug use, yep. Yeah. So a risk is low, perceived risk of drug use meaning they don't believe it's harmful. Erin, you want to add something?

ERIN FICKER: No, I was just looking to make sure we were catching balls. They were flying in so fast.

KYLE BARRINGTON: Yep, I liked it.

ERIN FICKER: Yeah, it's great. All of the above, says Melissa.

KYLE BARRINGTON: High unemployment, very good, particularly among young women. Enabling. Boy, that's a big one. Familial enabling. Lack of access. Yes, service deserts. Man, yep. Density. Yeah, definitely the disconnected systems. I think a lot of communities are addressed by that. There's your all of the above, yep.

ERIN FICKER: These are great.

KYLE BARRINGTON: Very good, excellent. So it sounds like this group, I would say, Erin, is definitely very educated around protective and risk factors. So it sounds like they got a real good idea of those processes.

ERIN FICKER: Absolutely. And someone-- yeah. Someone asked, is the pandemic a risk factor, and someone asked, very much so, Chris. So I don't know if you wanted to speak to that, Kyle.

KYLE BARRINGTON: Yeah. And so a couple of things about the pandemic in and of itself, it can be, depending on what you're looking at. It can also be somewhat of a protective factor as well. So what I mean by that would be is if there is bullying and so forth going on at school, physical, right now a lot of home school. So it depends on what measure you're looking at. But generally, I would say that the pandemic has definitely been an overall risk factor for many of our youth.

And so outside of those outliers like we just talked about with bullying, because there is some evidence to show that physical, face to face bullying is decreasing, but anxiety, depression lack of socialization, all those issues that we know are addressed in our schools when kids come together definitely make that pandemic a risk factor. So we've got to break that down into the exact issue or factor that we are, and then look at it as, does this help or prevent it.

One of the case in point where there has been an increase, it's definitely been a protective factor for online schools. There are a lot of online schooling systems that were about to fail, pre 2019, 2020. So now we're seeing more and more online schooling options. Even things like Zoom. So as you go through that, overall though, in our line of work, definitely a negative. Very good.

All right, thank you all so much for taking time to do that. I appreciate it. So now that we know that we have these risk and protective factors in every community. And I just want to emphasize, every community has these. Don't get into this idea-- and I get this quite a bit when I talk to superintendents and mayors and city officials, they're like, well, Kyle, we don't want people to know we have problems in our community. Well, the issue is, people know there's problems in every community. So now that you know what it is and you've identified it, now you can go out to the community and say, and this is how we're going to address this need or this risk or protective factor.

So as you go through the process, remember in your logic model, you're either addressing a protective factor or you're addressing or trying to improve a risk factor, trying to increase that. So as you go through the process, try to

reduce that risk factor or improve the protective factor. So let me give you an example of an evidence based program and what they have. And this is SOS. It is a suicide prevention program, and it's specifically designed for teens. And these are their need statements, and they should look somewhat familiar to what we already saw.

And what they had here is that suicide among adolescents aged 15 to 19 was the third leading cause of death in the United States. Important, this is pre-pandemic. We now know post-pandemic, this is even worse. Key risk factors include suicidal thought, depression, no awareness of signs of suicide. So they weren't even aware, that's a knowledge thing. Protective factors are help seeking behaviors in schools that support help seeking. The importance there is when a school climate allows for people to seek help, people will find help.

Third bullet point is diverse programs have been implemented at the high school level, but few have been rigorously evaluated. That's kind of that same process we talked about. Oh, we've done it before, so we'll keep doing this, even though we don't know if it's effective. Furthermore, many of these programs are very complex and long term. So one of the strategies that SOS was trying to address was trying to make it short term. Now I'm not advocating SOS, I'm not saying this is a great program, I'm just using it as an example of how one program was able to identify the needs and statements and use risk and protective factors within those statements.

So when we looked at that logic model, that first side over there, we started looking at the needs. Well, now we have the needs for SOS and some of those needs in your community. So the next part of that is defining the goal. And so when we start looking at the goal, one of the things that's most important is a lot of cases, we get people who confuse goals and outputs. And remember, a goal isn't about number of people served.

Now I will admit that when I first wrote my first grant back in the 1980s, it was for a school district, and literally the goal was, we want to serve-- provide a presentation to 100 teachers. And that was the outcome. And we call that butts in seats today. So you have butts in seats was your outcome. We now know just putting somebody in a chair or attending a Zoom conference really doesn't mean that we're going to change long term outcomes. We can't even prove that by having a butt in a chair or you on the Zoom call that you're going to increase knowledge around logic modeling or that I'm going to increase my knowledge related to forestry.

Now I put forestry out there, because that was one of my goals, was to be able to purchase land that had a forest on it, because I wanted to make sure that I could plant more trees, long term, for both my children and my grandchildren. So I'm pleased to be a forester. But I am a prevention and

treatment advocate and professional first. And so if we go through that process, when I define my goals here, they're not about individual things and individual counts or about long term outcomes.

And in my programs, one of the things that we want to do is that goal should be really hard to get. I want to reduce underage drinking by 30%. Or I want to eliminate underage drinking as a goal, knowing that I'm going to have a lot of years to try to get there. Well, here's what SOS did with defining their goal. And remember, goal is really high up there. It's not really something that you're going to achieve in your first, second, third, maybe not even in your fifth year.

But as you go through that process, here's what SOS defined as their goal. To reduce suicidal behavior among high school students, 9th to 12th grade, in three school districts. So they had a very-- somewhat of a precise goal of reducing a behavior, and that behavior is the suicidal behavior in high school students. So as you go through the process, now we want to start looking at, if that's my goal, what are my objectives?

Well, if you're thinking about, if my goal is to make a cake that 80% of the people love, well, then I'm going to need to have specific recipes for that cake. Well, part of that recipe is mixing things in certain quantities. And in the logic model world, when we start mixing and matching that stuff in smaller quantities to eventually get to the goal, so multiple steps to get to this long term outcome of a cake, and you call those objectives. So objectives are smaller pieces that allow, when added together, equal my goal, or should achieve my goal.

And so when we start talking about objectives, that was also part of that far left hand side of our logic model around need, we want to make sure that they use, and that we use, a SMART objective. So when we start talking about objectives, objectives are really what you're going to start measuring first. So I'm going to have this many people hired. Once I get these people hired, I'm going to train them in this program. Once they are trained in that program, they're going to serve x number of students or parents or community members or whoever they're going to serve. And then once that service is done, then this outcome or this objective is going to be achieved.

We want to make sure that, as you see here, that we use SMART, that they are Specific, Measurable, Achievable, Time bound, within what time period, and also Realistic. So if I'll put in an order, Specific, Measurable, Achievable, Realistic, and Time. Bound Important part here is it's got to be measurable. So we know we have a lot of people that say feeling better. I want 23% of my kids to feel better. How do you measure that? Parenting skills are another one. I want to increase 50% the number of parents who complete this program who increase their parenting skills. Based on what?

So now we're going to get into surveys. What survey are we going to use to assess pre-parenting skills versus post-parenting skills. What does OK mean? Is there a survey that measures it? If not, we may need to improve self-esteem or improve self-concept, something that is more measurable.

So again, we want to make sure that they're specific, they're measurable, they're achievable, realistically achievable, that they have realistic, in regards to the resources we have and are time bound. What time period can this be done in?

Usually time bound is usually a year, possibly 18 to 24 months. But usually it's a one year cycle. In one year we want to achieve this increase. And don't be afraid. When we write our objectives, one of the things that we'll put in there is that we want to increase knowledge 5% in each year of the grant for the next five years. So we go from 5 to 10 to 15 to 20 to 25. So as you go through there, it's still time bound and it's still realistic. Because once we get better traction and our staff are fully up and running and trained, and we know exactly what participants we're looking for and how to get them, we should be able to achieve better results in the over time. So again, make sure they are specific, measurable, achievable, realistic, and time bound.

So here's an example of what SOS did. So as we go through this process, SOS increase the percentage-- their part was to increase the percentage of baseline of students in grades 9 to 12 who report improvements in knowledge and beliefs about depression and suicide. Now the important part here is they use this and. Because what that tells you is they're going to do a survey that it does knowledge and beliefs about depression and suicide.

Their next one is to increase the percentage in baseline of students in grades 9 to 12 who report feeling able to seek assistance. Feeling able is an attitude, not necessarily a knowledge, it is an attitude. I would seek help if it's available. I would seek help if I knew where to go. In this case, their attitude, intermediate, was they wanted to be able to report those feeling able to seek assistance, to increase it and to make sure that those things were good in terms of being able to feel it.

Their long term objectives should focus somewhat on behavior, and what do we have here is a behavior, and I'll clear the screen. To increase the percentage from baseline of students who report seeking help for depression or suicide. Seeking help, who actually did it, that's a behavior. And to reduce the percentage from baseline of students who report a suicide attempt, a behavior is reduced, in the past three months.

So as you go through the process, we're now looking at behavior, but it's from baseline. And so from baseline here, that could be the beginning of a school

year, that could be the beginning of a semester, that could be from the time they entered your program. So if you go through the process, in this one they're saying, hey, once the program became involved-- or they became involved in the program, to this time period, we should see these reductions or these increases. And that's how they did their long term outcomes and long term objectives.

And if they achieve an increase in knowledge and an increase in attitude, then they should have a corresponding change in behavior. And in one case, we're increasing those who are seeking help and they're decreasing the behavior of actual suicidal attempt or suicidal ideation. And we know that we can measure suicidal attempts, surveys, as well as checking with local EMS as well as hospitals. And we can also do a survey on suicidal ideation.

So as you go to the process, they've completed the first step of that logic model, the first bracket of it, if we go back and look at it. So we've just completed this piece. But we started to do some of this. And we started to look at some of this. So once we know what our needs, our goals, and our objectives are, we can start putting these pieces together pretty quickly.

The most important thing you can do in your field is to make sure that what your needs are in your community and you do, you already mentioned some of your risk and protective factors. What are the goal for this particular funding stream or this program you're about to implement, and what are the parts or sub pieces which we call objectives. So once you know those, then we go into these inputs. And so as we move into the inputs, we're going to be talking about the things we have to purchase and the things we have to buy.

So as we go through the process, in our logic modeling world, we call this step four, which is identifying inputs. So if you're building a cake or making a dinner, you need to have the right ingredients. The same thing occurs in your logic model. If I'm implementing a curriculum, if I'm going to do a treatment program, if I'm going to put in drop boxes, well, I need to know how many drop boxes to purchase, I need to know how many leases to get signed, I need to know how many MLUs I need to have in order for the police department to go and clean out those boxes. I need to make sure that I put them in places where there's monitoring so people can't steal from those boxes. Those kinds of pieces are put in place.

If I'm doing environmental strategies, I'm going to need to know how many meetings before city council I might need, how many press releases we might need to issue. Those are these inputs that we need to identify and need to identify in our budget in our plan. And those become things that we will track along our way of getting to our outcomes.

So as we go through this piece, here's an example of what SOS did. They needed to develop the teaching materials, both the video and discussion guide. They wanted to identify and adapt the self-screening tool. They needed to train clinical staff to implement the program, and then they needed to obtain permission of students. And so get parental permission of students. Do note that there is also federal laws out there under FERPA that also talk about the fact that if these kids are in high school, most of them are going to be of age of having to give assent to participating in these programs.

So if you're funded by the Department of Education, don't forget about the rule of FERPA and PPRA. And not even including HIPPA and the other issues that we normally deal with, for FERPA and PPRA are things we have to deal with at the local school level, particularly for dealing in school districts who receive funding from the US Department of Education.

So SOS inputs, very simply, develop those teaching materials. Once I do that, we need to identify and adapt self-screening tools, so I can give those out. Then I need to make sure my staff are ready to go and train, and then I have these participants. So when we look at these inputs, these are things I need to acquire. Well, what do we do after we acquire them? Well, then we start putting in our activity.

So Thanksgiving's coming up, Halloween's coming up, and I really like Thanksgiving, so we're going to have turkey at my house and I always cook two different kinds of turkey. I cook one that won the contest last year, and then I add one new this year. So this year, we're going to do a spatchcock turkey, because it won last year, which spatchcock is a fancy term for, you take out the backbone, you crush it as flat as you can get that turkey, and you put it in the oven at a high temperature. Or the other turkey I'm going to put in this year is a sous vide turkey. Sous vide means under pressure. So you put it in-- basically, you cook it in water in a bag, so that it's in a bag by itself and you drop it in precision temperature water and you cook it for so many hours. The turkey that I plan on cooking this year is going to take about 24 hours in sous vide.

So as you go through that process, let my kids and my wife decide which ones they like through a survey, and then that's going to dictate what turkey won this year, and then we'll do a different turkey next year along with this year's winner. And it's not the same turkey. I don't freeze the turkey, it's not like a wedding cake. I actually buy another turkey and we'll cook two next year.

But as you go through that process, we call those activities, and that's step five. So we detail those activities. I need this many ingredients mixed in this bowl, sprinkled on top of that turkey. I need to cut the backbone out of that turkey. That's going to be an activity. So that's going to be part of my logic

modeling if I'm doing spatchcocking. I need to make sure I have an oven and that the oven is set at 450. So that's going to be part of the spatchcock.

If it's in my sous vide, I need to make sure I have all the equipment inputs. But then I need to make sure that I put all of the seasoning into the bag and that I seal the bag correctly, that's an activity. Then I need to place it in the water for the correct amount of time, activity. So I'm cooking it at a certain temperature for a certain duration, all activities.

These activity levels detail the target audience of these activities, in this case, for us, we're talking about turkey. If we're talking about SOS, here's theirs. What they want to do is their activities, show video to the students and the parents. They wanted to conduct discussions with students and parents, hopefully. They want to discuss and model help seeking behaviors, practice and role play. We know kids shrug at this, particularly the online variety kids who like to do everything through TikTok and just view things. But they actually need to participate and role play how they would seek help if it was their turn to do so or if they needed to.

They need to be able to distribute and collect student self-administered screening forms. They need to follow up on those results. They need a staff to be able to analyze that data. And they needed to contact parents to make referrals if needed for treatment. So those are all the activities that they had. Other ones could be, I have a 15 week curriculum, like too good for drugs, or reconnecting with youth, or coping for support training, or Botvin life skills, and I need to deliver it this many sessions over this many weeks and this time frame, and I need this many minutes each session. Those are all activities. Now before, we used to count those as outcomes, and they aren't. They are true outputs and activities related to those outputs. So I'm just counting.

So again, if you put that into the world of theory and evaluation theory, one of the things that is important to note, just like this cake here, my daughter does bake cakes. She works at the local grocery store in my town, and she's in the bakery department, but she used to make cakes and still does before. She used to make me this great chocolate ganache cake, and then she got of age where she started being interested in boys. And so now-- and she's 19, she only makes cakes for her boyfriend. I no longer get any.

So it is, just, I guess, part of that process. I've aged out of her life. And so now I talked to her boyfriend about every three months and say, isn't it time for a chocolate ganache cake? And so far he's been going-- willing to go along with that. So as we go through the process, though, when you go into the theory of evaluation logic models and we start talking about the theory of change, we want to concentrate attention on the resources, we want to facilitate understanding of how the practices or strategies bring about change. How does mixing these ingredients equal this? How does training staff in this

program equal this outcome? We need to be able to articulate that and a logic model does it.

We want to make assumptions explicit, meaning we don't want anybody to question. We've already shown it, this is what we're going to do and everybody has signed off that looks right, and we want to influence both policy and popular opinion. That's what theory of change does. Now I want to emphasize this, if you're new to the field of substance abuse prevention, you want to take a good note of this one. You want to define everything you can.

One of my first experiences was back in the 1990s where we were looking at reducing referral rates for juveniles. And so we said, we want to reduce recidivism rate back into the juvenile justice system. Well, that seems like a straightforward thing to measure until you try to define recidivism rate.
So is recidivism, is that re-arrest? So if they get rearrested, is that a recidivism? Does it mean that they have to be locked up? So they've got to be arrested and they can't be released to the parent, but they actually got to be in jail or in detention? Or is it that they actually have to go before a jury or before a judge and be adjudicated? So as you go through those, you need to know what one of those factors you want.

Same thing if you're dealing with a school with truancy. Go into a school district or a school campus that doesn't have real strong leadership and ask teachers what truancy is in their class or tardy is for their class, and you'll get, if you have 20 teachers, you'll get 20 different definitions. One teacher will say they need to be at their desk ready to work. Other one's will say, they just need to be at their desk, even if they're just putting up their books, they don't have to be quite ready. Other one's will say, they just need to be in the classroom. Other ones will say, well, I just need to be seeing them coming into the classroom. Other ones will say, well, they just need to be in the hallway.

So as you go through that process, you always need to make sure that you make sure those assumptions are explicit by defining those terms.
So here's what SOS did as their theories of change. They modeling a pro-social behavior. We know with young people, we have to get them to model it so that they feel comfortable. They do it once, they're much more likely to do it again in terms of proactive, protective factor of seeking help. Teach them how to do that. Don't assume they know. We want to change that social norm that we are all quiet, we don't have to talk, and we also want to tap into social networks, and that's exactly what they did by using those schools.

Now it's also important with any of our programs and practices that we identify the correct participants. So now, this is one where our field-- and we'll talk about it here in a minute-- but this is one where we need your help. You are in this field, you are the experts in the field, and you work in communities where

many times, we don't have any data as to whether or not these programs and practices are effective. We know that they were effective in inner city Washington or Seattle. A lot of them come out of the Seattle area or the West Coast.

And we know predominantly, that they're going to be upper middle class, predominantly white, and we know that these curriculum work. That's not the issue. Like in Texas, where a majority minority state. So as you go through that process, those curriculum don't always transfer down here. So how do we make that practice, that change, that model of behavior, that theory of change, work in our communities? That's something that we need to make sure that we do by identifying the right participants here, we need to make sure we're identifying them, and that we also know whether or not they are just as getting the benefit that the evidence based practice showed that they were in different environments.

So we need to make sure we identify participants who are peoples and organizations who participate in the activities. We also need to identify if we're training staff, and we need counselors, that we have staff who are truly counselors, or if we need a staff who are teachers, that they are truly teachers. We need participants, are those who deliver services and receive services. And participants are important sources of information about service delivery.

What we mean by that is, ask them, did you like it? What could be done to improve this? What would make this better? What did you like? What didn't you like? Those are questions, we call those at the end of all of our presentations, we give you out those surveys, that's how we drive additional information about making things better in the future. SOS is an example. This was theirs. School teachers and clinical staff, they were going to show the video to students and parents. And these were going to be high school. So if we got middle school students, we'd have to start questioning. Elementary, we would definitely question.

So we also want to make sure that school clinical staff here. We're making the referrals. Right, we don't want referrals from just anyone, we need to make sure they were using that self-assessment that we administered to make the treatment referrals, and that it could be for the student's parents, and it could also be the community health providers. Now, this is a great program if you have people to refer to. So one of the things that happens when you implement this evidence-based practice is to make sure that there are people in the community or that you hire staff to make that referral to.

There is a grant coming out, should be coming out, called elementary school counseling grant, and it allows you to hire counselors, social workers, and psychologists and psychiatrists. So as you go through that process, if you're

implementing programs like this, you want to make sure you have that full continuum within those grant funds. That we're going to hire the staff to do this or get volunteers to implement the training part, then we're going to hire these counselors and psychiatrists to address this need.

The way that we look at that, in terms of outcomes, if we do all these things, we get the right people with the right curriculum addressing the right population at the right time, using that, in this case, the self-assessment tool, then we should be able to achieve our outcomes. Short term-- we clear the screen. Short term, intermediate, and long term. And remember, it doesn't have to be this way, but the best way I look at that is short term is going to increase knowledge, we're going to change attitude, and we're going to impact behavior.

So short term links to intermediate links to long term, and they should all be connected, and it should make logical sense. How does changing that level of knowledge equals this change in attitude, will equal this change in behavior? That's part of the logic model, it makes those assumptions explicit, and here's how they do that, by linking all of your outcomes.

In the short term, they improve student and parent recognition of the signs in depression. The signs of depression, which was a knowledge change. They also, in an intermediate term, increased students' acceptance of self-help seeking behaviors, which is that attitude. Kids were saying, hey, I'm willing, more willing to seek help. And then they actually did, by changing the actual behavior. So if you go through that process, that is how we knew that this program-- and again, I'm not advocating this program specifically, I'm just saying this is an example of one that showed all these pieces coming together. And this is what a logic model would look like as we go through that process.

So as you go through that piece, we have these priorities here. That gets you into this needs. Gets us into a goal, and these were the objectives. Now one of the things that you should see is, look at this objective one. If I come all the way over here, the outcome. For each objective, you should have an outcome.

So they have three objectives, ones related to knowledge, one's related to attitude, one's related to behavior. And they have a direct correspondence over here on the outcome side. Increased self-help behavior, two, increase self-help seeking behavior. Reduce suicidal thoughts, reduce suicidal thoughts. And if we did all three of these, then we had this bonus fourth of an outcome, which is actual reduction in suicide attempts. So that's one way of an organization using an evidence based program in practice that was able to put this all together.

So when I stop here, what I would like to do is open the chat back up, and I want you to identify, looking at this logic model, of priorities inputs, outputs, and outcomes, where is your greatest struggle for your program, for you personally, for your agency. What is it that is struggling, and you struggle with the most. Because it's two things. One, I want to make sure that we can address what we can here. But two, it will help us inform how we want to do that case study here in a little bit. So what I like is a checkbox. And let's see what area on these logic models are your greatest struggle. Is it priorities with needs, goals, and objectives. Is it inputs, outputs, or outcomes. And we have Erin here.

ERIN FICKER: Inputs. I'm not going to lie to you, that's always the one I struggle with, in terms of thinking out what really are my inputs. So Tory-- or excuse me, Troy also says inputs. Oh, and Kelly, too. A lot of-- inputs are hard. Others.

KYLE BARRINGTON: Now, the good news with inputs, and I know they struggle, is that one of the things that occurs is a lot of these evidence based programs and practices will identify what those inputs should be and what you have to have. So definitely do that. The other thing about that is, if you're-- particularly if you're dealing with federal funding, state funding, depending on the state you're in, is a little different. But federal funding is, if you realize you're missing a key input, all you have to do in most cases, if you have a little bit of lapsed funds, you have to be able to go and write your federal project officer that says, in our evaluation we found out we're missing this input, and we want to use this amount of money to remedy that. And so you can go back in and make those adjustments.

ERIN FICKER: Absolutely. And then Taylor says just collecting all the information and putting it into this logic model and figuring out short term, intermediate, and long term inputs is difficult. I think that's absolutely difficult. Sometimes teasing out the difference between short, intermediate, and long can be-- you gave some great clear examples, but sometimes it doesn't feel quite as clear in reality. Chris says, sometimes just convincing partners of the value of developing a logic model. I laughed, because it's so true.

It's so true. I used to have clients who I would say, I think what we need here really is-- and they would like duck under the table, because they knew I was going to say logic model. So yeah, it can be overwhelming for partners to take the time to go through that process. Also, outcomes and inputs we continue to see are difficult for folks.

KYLE BARRINGTON: Yeah, I would say that going back to that partnership piece. One of the things that is important, I believe, is once you have a fully developed logic model, the first one. And believe me, the first one you develop-- as with like contracts, have some friends who have been divorced

now multiple times. Not me. The same woman has agreed to marry me now for 30 plus years. And so, and I'm still trying to get to 60, so we're good. At least I am. So we'll reassess her evaluation here in a year.

But as we go through here, one of the things it's important to note is once you have an effective logic model or one that you can show, it makes things a lot clearer. So once you go through this once, remember, it's a living document, then you're just fine tuning and tweaking it. But once you get that first one done, and that's why I believe that case study will definitely help you along those way-- along the way, is that once you get that, it does really turns those partners into, where is that logic model, not why a logic model.

So the second thing is, is it really makes it, in that logic modeling, particularly if-- we used to have-- it goes back to a couple of the grants we worked with. We would have some agency partners who didn't want it because they didn't see the value until we made an objective specific to their effort. And so when we did that and we started measuring their input and their outcome related to it, they were able to see how much they attributed to the actual outcome. And that sustained their program.

And what they wanted to do is they wanted to send their probation officers into the school. So we set that up as an outcome and we created a specific objective, and it had three outcomes, a short, an intermediate, and a long term. We were able to take that showed that in the short term, the kids liked it. In the intermediate time, the schools really started to appreciate it, that was an attitude adjustment. In the long term, it actually cost the school district money when the probation officer wasn't there because absenteeism went up.

And so one of the things that we're able to do is the school district helped offset the cost by funding half the position. So as you go through it, ways of using logic modeling in helping to sustain. But absolutely, convincing people about the need of the logic model that first time through, definitely can be difficult. And Taylor says figuring outcomes. I definitely agree, definitely assumed that that's what you were talking about. Long, short, medium, and long term are difficult.

Remember that when we're talking about goals, that may be outside, even beyond our grant range. So you want to make sure that you have something knowledge-based that you can do. Even if it's an environmental strategy, you can find knowledge. And that could be number of city council members who believe that social host is worth discussing. Or the number of city council members who have heard of positive outcomes related to social host ordinances, just as an example.

So we can find those, you just need to sit down and get somebody who gone through a logic model before. I guarantee you, there's people in your

community who do that. Or at the Great Lakes PTTC, and you can sit back and they will help you work that through. But definitely, it is difficult the first time through, the first couple times through.

Oh, I like the fact that somebody says it's helping you clear it up. Very good. Remember, any positive comments goes to the Great Lakes PTTC, anything that you didn't like, Kyle Barrington, right. And Erin, she won't say it, but underneath that Conway statue in the back is a list of absolute last resort PT&A providers, and my name is the only one under there. So she will go through everybody else in the list, flip it over and say, I guess we've got to break him out.

ERIN FICKER: That's not true. Taylor does ask if there's a logic model template that can be shared with materials, Kyle?

KYLE BARRINGTON: Yeah, in fact, we're going to have one. We have a blank one in our case study. So what I would like to do, we'll get it to you. But I'd like to do that after the case study, so that way people can participate in the case study, and that will be something that will be given out. Is that good? Fair enough.

ERIN FICKER: I think that's fine. And also, just so you know, Taylor, so hopefully you'll be able to join us for that case study activity that we're going to do and sign up for on November 1st. But you can also-- there are a million templates for logic models available out there. There are different ways of doing this and talking about it, and I think I really like the way Kyle presents it. There's other ways that people talk about it, but you can also just go. If you can't make it to our follow up learning lab, then you can also kind of Google and look for or ask your funder or your agency if they have a template that they've used or they want you to use. A lot of times, your funder has one they want you to use. But there are a million logic model templates available out there.

KYLE BARRINGTON: Absolutely. And I like Jerry's comment and echoed by Valerie. Time and date is ever changing. So always collecting, absolutely. It is a living document, and so is the collection. And you've got to remember, I look at everything as pre-pandemic, PP, and post-pandemic. So pre post. Before, how we collect data and what that data was used for and what we needed to ask is different than what we need to ask today.

So if you go through that process, it is always ever changing, that's what makes this feel so important, that you're in it and that you're doing that work. But if you don't do something with that data, if you don't collect that data and report that data, then we really don't know, as a field, we can't move forward without it.

Or we're going to wait for people up in the universities and government to tell us what to do. And historically, that has not always been a good thing. In fact, that leads us into our next segue, as we wind up today's presentation. First and foremost, thank you for the chat. Thank you for your comments all along the way. But I do want to sit back and talk to you a little bit about the next couple of things.

And let me clear the screen. I always seem to be forgetting to do that. As you go through this process, one of the things that's important to note is the data that you collect is essential to moving us forward as a field. And I worked in University settings, I taught at universities, and I know quite a bit about universities. And they do a great job with what they have and what they're designed to do.

But historically, they are clinically sanitized, meaning that what they try to come up with, particularly people in the substance abuse field, is very rarely what is actually happening on the ground. They are theory based and not practice based. You are practice based. And what I advocate that you do is that you sit back and collect your data and then report that data via peer reviewed journal articles. I've written five now. And if I can do it, anybody can do it. So if you go through that process, collect your data and then use that data or get with somebody in your community who has a publication experience and published a data about what works in your community and what doesn't.

If we don't do that, if you don't do that, if we, as a collective field don't do that, we have advocated our responsibility to knowing what works in your community and what work for the population we hold most dear. Whatever that is in your community and in your professional life, to somebody else outside of our community. Right now, we'd have very few evidence based programs and practices, we need more, and we need those to come from the field.

Because one of the things that we know is that when we leave things to the state and the government to do for us, rarely does it go well. And so I want you to be alert that whatever you do in your field and in your community, be aware of the unintended consequences and stay alert. Now I have great pictures up here, but other people felt like this was a better one. So we're going to go with this one, but let me give you two examples.

In World War II, just as one example, unfortunately, Germany was bombing England. And one of the things that occurred during that bombing is they banned lights at night. They didn't ban driving cars, they just banned no headlights. And so one of the theories was that they saw a headlight, that a bomber could drop bombs, and that could hurt that person in the car. It wound up that more people were killed by auto pedestrian accidents at night during

World War II than were killed by bombs in England. So again, it's a good idea, but in practice, it didn't work, and somebody needed to get that evidence out that says, hey, maybe we need to come up with something different.

The other one was after the Titanic disaster. And when Titanic went down, everybody scrambled and said, though, this is the worst tragedy in the world, and what we need is more lifeboats. And you have to have a lifeboat for every single passenger on a ship. That makes sense. Make some logical sense, doesn't it? Except ships weren't designed for that. Ships, prior to the Titanic, weren't designed for it. But the law said, every ship had to carry enough lifeboats for everyone on it.

So they had the Eastland, and the Eastland ran the Great Lakes. And I love the Great Lakes, got those pictures in the front that I really like that Erin was showing as they introduced this presentation. And the lighthouse out there with the waves crashing over it. But the Eason was taking a group of people on a family picnic for a company that was allowing their family to go for an all expense paid picnic to an island in the Great Lakes. And one of the things that occurred in that process is they had just installed new lifeboats for every passenger on the Eastland. There were 800-- almost over 1,000 people on the Eastland, and there was a wind. And because the lifeboats were never designed to be on that ship, the ship was top heavy and it tipped, and it sank, killing 800 people.

So just because the government says, this is good for us and it makes logical sense, doesn't make it so. Test it, retest it. Be aware that whatever we do could have an unanticipated consequence. Some cases good, some cases bad. But if we don't look for them and we're not observant of them in assessing for it, we got to make sure we don't repeat the histories of the past. So as you go through the process, stay alert for those unanticipated consequences. And I know it's hard, but continue to collect that data continuously until we know it's an evidence based practice and that all unanticipated consequences have been identified.

The other thing that I want to make sure that we get into as we go through this process is that we are talking about just the beginning of a two part process. The next part is going to be the case study. We'll actually dive in and break out into small groups. And as we get into that, one of the things that we normally talk about and hear from is people will say, well, Kyle, and I get this from anybody when I tell them what I do. They'll say, man, we have been doing this for years and we still don't know what we're doing, and we don't have all this money going out there to address these prevention issues and treatment issues and it just doesn't seem to be effective.

And my argument back is always the same. And that is, as we have just now begun to put money where we're the problem is, and it's still not nearly where

it needs to be, in terms of the quantity, but we're seeing more of it coming in to field prevention and treatment. But one of the things that we need to know is that our field is new. This is not a field that has millennia behind it. As you go through that process, again, medical science was still cutting holes in our heads as a treatment for mental health and substance abuse.

But we have this notion, because it was in our lifetime, that we've always, as a country valued kids, that we've always been trying to fight substance abuse. And that is just wrong. Remember, we have had red lights and airports longer than we've had compulsory education. So we are just beginning to learn, how do you educate people generationally? We have not even begun to do that with prevention.

We have had an-- and I love our cat here-- but we have had societies for prevention of cruelty to animals longer than we have had child welfare agencies. We created our first agency to protect animals before we had any society to protect our children. Part of the reason is that we've always kind of believed that our nation and this world has always valued children. But the reality is that's not always the case. Just look at these pictures, historical pictures of, in the United States, that we haven't always protected our children.

And so as you go through these pieces, we put them in the field to make them work, we made them seamstresses, we've actually employed them in inner city jobs. There's other pictures of them in the mines as well as losing fingers in factories. But more importantly than that, as we go through this, is that we also have not always valued them as individuals. In that in the 1930s, we had orphan trains. Parents abandoned their kids so often that the government's decision was, we're going to put them all on a train and ship them West. And we're going to stop at every little city, and anybody who wanted a kid could just reach up and grab one, literally. No paperwork, nothing.

And with that orphan train went to the West Coast and kids were, truly, just taken off the train and told where they were going to live and with whom. That is not valuing children. So what we have done is actually fairly new. In the last 60 years, we have started to put the adage that we value children first. When we go through these pieces, remember that our history with children involves the selling of them, that's what that sign means. And it used to be, this is how we would swaddle our kids.

I have a granddaughter now, and when I tell my daughter about this, she always kind of smirks and can't believe it. But it is true. We used to just hang them up like that in factory shifts, and you would come back 12 hours later and you'd take your kid and you'd clean him up or her, and then you would move on. And other ones would sell them. The other thing that we had in our country is we used to have, for about the last 100 years, just in the last 100

years, 100 years ago, we changed this up, where we said, you know what, maybe we need some laws around what we put in our kids' mouths and even our adult mouths, but this was kids cough syrup.

Now having had three children with a lot of ear infections and a lot of teething issues and those kind of things, I can tell you, if I gave them alcohol, cannabis, chloroform, and morphine, they would sleep good, I just don't know if I can wake them up. And many didn't.

So when you start thinking about what you're doing in your field and if it makes a difference, it does. What you do makes a difference, because we are moving from that to informed, evidence based programs and practices. We need you and we need your data. Collect it and report it, because when you report it, it changes the scope and trajectory of this program in our field and our practice.

Remember that an evidence based program in practice is simply one that's been published in a peer reviewed journal article. So if you're doing something in your community that's worked, publish it, so everybody else knows what to do. If you're adapting a program that worked in a predominantly middle class or upper class white community, but it's working in your community with these alterations, after you've got approval from the curriculum developed, publish it so that we know what works. So that that becomes an evidence based program or practice.

This field cannot move forward without you. You are going to be the leaders of this group and of this field in the future, and we desperately need you to do these logic models so we can collect this data and these data to make important announcements and improvements in our field. You truly are the future of it. It is a great and bright field. I think we can make differences, but as we go through this process, I'm going to turn it back over to Erin for any questions.

ERIN FICKER: Great. So we will open the floor for questions for Kyle, but also, as you can see, Stephanie has posted in the chat just that link there for if you want to do that learning lab, that two hour learning lab where we'll be actually doing hands on logic model development. Please click that link and go ahead and register. But as we do that, I will open the floor for questions.

Feel free to type in your questions if you have any at this point. We have the reference slide to review our discussion. Yeah, I think we will. We'll send you a link after this event and I believe it'll have the slides attached. We will not be releasing the recording of this event until after we've done the Learning Lab. We don't want to confuse anyone between now and then. So we'll finish the Learning Lab and then release the recording but yeah.

So thank you. Yeah, sorry, Leon, that you couldn't keep up. I can't keep up with Kyle either. So we will send you the slides. I believe we can get that done before then.

But, yeah, thank you, Stephanie, we'll share the PowerPoint via email. But like I said, the recording won't be available until after that November 1st event, mostly so that we can prevent any confusion. Does Kyle provide training for organizations? Well, I can have Kyle type his email address in the chat, and you can reach out directly to him if you're interested in that. Thank you so much. I got a couple of thank yous. Thank you guys for being here. You have made this a better presentation and a better event with your questions and comments.

Anything else while we have Kyle here on the line? I do hope to see you guys for that in person-- or that's not in person, in my dreams-- for the Learning Lab that we will be doing on the first. And I'm so glad this was a needed training for you and that you were able to get it. And there's Kyle's email address if you want to reach out to him directly. Mine, usually, is at the end of the slides, I think, but I will put mine in there as well, if you want to reach out to me for anything related to the PTTC.

I forgot my email address for a quick moment. If you need anything related to the PTTC I am one of the two prevention managers there. So feel free to reach out. Thank you so much, everybody. Thank you. And if there aren't any questions, we can close out with-- just give you three extra minutes back to your day.

KYLE BARRINGTON: Well, Erin, thank you very much. I appreciate it.

ERIN FICKER: Thank you, Kyle.

KYLE BARRINGTON: And Stephanie and Anne, thank you as well.

ERIN FICKER: Thanks, everyone.

KYLE BARRINGTON: Y'all have a good one.

ANN SCHENSKY: Have a great day.