

Prevention Plus Wellness (PPW) Screening & Brief Intervention (SBI) Logic Model (5.8.19)

Inputs	Outputs		Outcomes -- Impact		
	<i>Activities</i>	<i>Participation</i>	<i>Short</i>	<i>Medium</i>	<i>Long</i>
<ol style="list-style-type: none"> 1. Program manuals or optional booklets. 2. Digital downloads of PP slides & reproducible program materials. 3. Online or onsite program implementer training workshop (optional TOT and youth leadership training). 4. Program implementation support via email and phone. 5. Scannable surveys and program fidelity and effectiveness evaluation support. 6. Program tailoring and promotion support and materials. 	<ol style="list-style-type: none"> 1. Screening of current substance use (SU) & protective healthy behaviors. 2. Feedback & advice on SU & healthy behavior interactions, images & personal risk & responsibility. 3. Recommended menu of multiple health behaviors to set & monitor goals to avoid SU & increase health-promoting habits. 4. Follow-up strategies (i.e., repeating the PPW SBI, revisiting & revising goals set, providing parent flyers, web-based resources & offering additional lessons). 	<ol style="list-style-type: none"> 1. Youth ages 8-18. 2. Young adults ages 18-25. 3. High-risk adolescents and young adults. 4. High-risk adults. 	<ol style="list-style-type: none"> 1. Increased awareness of positive images & other benefits of wellness behaviors. 2. Increased awareness of how SU behaviors interfere with positive image & behavior achievement. 3. Increased peer & future self-comparisons. 4. Increased awareness of discrepancy between current habits & peer & desired future images. 5. Increased multiple health behavior goal setting. 6. Increased parent positive behavior-image communication. 	<ol style="list-style-type: none"> 1. Increased intentions to avoid or reduce SU and increase wellness habits. 2. Continued multiple behavior goal setting and monitoring. 3. Increased self-efficacy and capability to avoid or reduce SU and increase wellness behaviors. 4. Increased similarity to peers practicing wellness habits and decreased similarity to peers using substances. 5. Decreased peer influenceability to initiate or use substances and increased influenceability to increase wellness behaviors. 6. Decreased peer prevalence of SU and increased peer prevalence of wellness behaviors. 7. Increased perceived risk of SU behaviors to health & healthy behaviors. 	<ol style="list-style-type: none"> 1. Reduced onset and use of alcohol and problems. 2. Reduced onset and use of tobacco and e-cigarettes. 3. Reduced onset and use of marijuana. 4. Reduced onset and use of other illegal substances. 5. Increased physical activity. 6. Increased healthy eating. 7. Increased sleep. 8. Increased stress control. 9. Increased body image satisfaction. 10. Increased health-related quality of life. 11. Increased spiritual practices (IGI).

Assumptions:

1. Positive images can be triggered with vivid key words and illustrations
2. Triggered positive peer and desired future images can motivate multiple behavior goal setting and behavior change via changes in risk and protective factors
3. The PPW SBI Practice Model can be adopted to effectively influence various SU behaviors among diverse populations

External Factors:

1. Access to youth/young adult/adult population(s)
2. Time availability of participants and implementers
3. Space and equipment availability to provide SBI to participants
4. Time and staff availability to monitor program fidelity and effectiveness