

# Prevention Plus Wellness (PPW) Screening & Brief Intervention (SBI) Opioid Prevention Logic Model for High-Risk Men (4.26.19)

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"> <li>1. Program manual.</li> <li>2. Digital downloads of PP slides &amp; reproducible program materials.</li> <li>3. Online or onsite program implementer training workshop (optional Training of Trainer workshop).</li> <li>4. Program implementation support via email and phone.</li> <li>5. Scannable surveys and program fidelity and effectiveness evaluation support.</li> <li>6. Program tailoring and promotion support and materials.</li> </ol>	<ol style="list-style-type: none"> <li>1. Screening of current nonmedical opioid use (NOU) &amp; protective health-enhancing behaviors.</li> <li>2. Feedback &amp; advice on NOU &amp; healthy behavior interactions, images &amp; personal risk &amp; responsibility.</li> <li>3. Recommended menu of multiple health behaviors to set &amp; monitor goals to avoid NOU &amp; increase health-promoting habits.</li> <li>4. Follow-up strategies (i.e., repeating the PPW SBI, revisiting &amp; revising goals set &amp; web-based resources).</li> </ol>	<p>Men at high-risk for opioid use disorder:</p> <ol style="list-style-type: none"> <li>1. Involved in the criminal justice system,</li> <li>2. Veterans,</li> <li>3. Blue collar workers.</li> </ol>	<ol style="list-style-type: none"> <li>1. Increased awareness of positive images and other benefits of wellness enhancing behaviors.</li> <li>2. Increased awareness of how NOU behaviors interfere with positive image and behavior achievement.</li> <li>3. Increased peer and future self-comparisons.</li> <li>4. Increased awareness of discrepancy between current habits and peer and desired future images.</li> <li>5. Increased multiple health behavior goal setting &amp; monitoring.</li> </ol>	<ol style="list-style-type: none"> <li>1. Increased intentions to avoid or reduce NOU and increase wellness habits.</li> <li>2. Continued multiple behavior goal setting and monitoring.</li> <li>3. Increased self-efficacy and capability to avoid or reduce NOU and increase wellness behaviors.</li> <li>4. Increased similarity to peers practicing wellness habits and decreased similarity to peers using opioids nonmedically.</li> <li>5. Decreased peer influenceability to initiate or use opioids nonmedically and increased influenceability to increase wellness behaviors.</li> <li>6. Decreased peer prevalence of NOU and increased peer prevalence of wellness behaviors.</li> <li>7. Increased perceived risk of NOU behaviors to health &amp; healthy behaviors.</li> </ol>	<ol style="list-style-type: none"> <li>1. Reduced nonmedical use of opioids and opioid use disorder.</li> <li>2. Reduced use of illegal opioids.</li> <li>3. Reduced heavy use of tobacco and e-cigarettes.</li> <li>4. Reduced heavy use of alcohol.</li> <li>5. Reduced use of other illegal substances.</li> <li>6. Increased physical activity.</li> <li>7. Increased healthy eating.</li> <li>8. Increased sleep.</li> <li>9. Increased stress control.</li> <li>10. Increased health-related quality of life.</li> </ol>

### 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 high-risk 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