Prevention Plus Wellness (PPW)
Program Logic Model (4.9.16)

Inputs	Outputs		Outcomes -- Impact		
	Activities	*Participation*	*Short*	*Medium*	*Long*
1. Program manuals. **2.** Reproducible program materials. **3.** Training options: a) live online or onsite workshops for implementers, b) live online or onsite workshops for trainers, c) self-study PowerPoint slides for implementers, d) youth leadership training to implement PPW programs to peers. **4.** Program support via email and phone. **5.** Program site licenses. **6.** Parent lessons in PDF documents. **7.** Additional program services.	**1.** Screening of current health risk and wellness enhancing behaviors. **2.** Personalized feedback triggering positive peer and future images. **3.** Multiple behavior goal setting and monitoring. **4.** Follow-up strategies (i.e., repeating intervention protocol, follow-up goal setting, supplementary lessons, parent flyers, web-based resources). **5.** Implementer training and support.	**1.** All youth ages 8-18. **2.** All young adults ages 18-25. **3.** Adolescents in recovery or treatment. **4.** Adults in recovery or treatment. **5.** Parents with children or adolescents.	**1.** Increased awareness of positive images and other benefits of wellness enhancing behaviors. **2.** Increased awareness of how substance ab/use behaviors interfere with positive image and behavior achievement. **3.** Increased peer and self-comparisons. **4.** Increased awareness of discrepancy between current habits and desired peer and future images. **5.** Increased multiple behavior goal setting. **6.** Increased parent positive behavior-image comments and monitoring.	**1.** Increased willingness or intentions to avoid or reduce substance use behaviors, and initiate or increase wellness enhancing habits. **2.** Continued multiple behavior goal setting and monitoring. **3.** Increased self-efficacy to avoid or reduce substance ab/use behaviors, and increase wellness enhancing behaviors. **4.** Increased similarity to peers practicing wellness habits, and decreased similarity to peers using/abusing substances. **5.** Decreased peer influenceability to initiate or ab/use substances, and increased influenceability to initiate or increase wellness behaviors. **6.** Decreased peer prevalence of substance ab/use, and increased peer prevalence of wellness enhancing behaviors.	**1.** Reduced onset and use of alcohol and problems. **2.** Reduced onset and use of tobacco. **3.** Reduced onset and use of marijuana. **4.** Reduced onset and use of other illicit drugs. **5.** Increased physical activity. **6.** Increased healthy eating. **7.** Increased sleep. **8.** Increased stress control. **9.** Increased school success. **10.** Increased health-related quality of life. **11.** Increased mental and spiritual health habits.

Assumptions
1. Positive images can be triggered with vivid key words
2. Triggered positive peer and future images can integrate and motivate multiple behavior goal setting and behavior change via changes in risk and protective factors
3. The Behavior-Image Model can be used to create effective program content

External Factors
1. Access to youth/adult population(s)
2. Time availability of participants and implementers
3. Space and equipment availability to provide programs to participants