

LET'S GO! LOGIC MODEL FY24 AND FY25

Goal: Improve underlying health behaviors that impact overweight and obesity: healthy eating and active living (HEAL) for children, youth, and adults

INPUTS / RESOURCES

Financial

- State and local funders

Planning Partners

- Let's Go! Staff
- Site Champions
- Public Health Infrastructure (Local/ Statewide)

Community Sites

- Schools
- Early Care and Education
- Out-of-School Programs
- School Nutrition
- Employers
- Cities and Towns

Healthcare Sites

- Pediatrics
- School Based Health Centers
- Family Medicine
- Internal Medicine
- Specialty Practices
- Hospitals

People

- Children / Youth and Adults
- Policymakers

Materials/IT

- Best Practices, Tools, and National Guidelines
- Health information technologies

ACTIVITIES

CREATE: Environments that Support Healthy Behaviors

- Implement evidence based programming and HEAL equity-focused policy and environment changes to support children / youth and adults
- Implement standard of obesity care (prevention, assessment, treatment) for children / youth, adults, and pregnant individuals

EDUCATE: Using Evidence-Based Information

- Provide HEAL equity-focused professional development and resources to site champions, parents / caregivers and healthcare providers
- Implement 5-2-1-0 / Small Steps marketing campaign for parents / caregivers, adults, and community and healthcare sites

COLLABORATE: for Greater Impact

- Coordinate with state and national HEAL programs and local elected officials / leaders
- Engage in partnerships to address diversity, equity and inclusion
- Implement community-clinical linkages
- Engage patients and families with HEAL supports and resources

ADVOCATE: for Policy and Systems Change

- Advocate for local, state, and national HEAL policies
- Assist sites in developing and implementing HEAL policies
- Align reimbursement policy to support prevention and intervention efforts
- Use systems science to inform solutions

OUTPUTS

CREATE

- # of community sites or practices enrolled in programs
- # of community sites implementing community strategies
- # of practices implementing clinical strategies
- # of children / youth and staff reached
- # of patients and staff reached

EDUCATE

- # of HEAL equity-focused trainings conducted
- # training attendees
- # of individuals reached through marketing campaigns

COLLABORATE

- # of other HEAL programs engaged
- # of partners engaged to address diversity, equity, and inclusion
- # of cities and towns engaged
- # of multi-setting communities established (geo-zones)

ADVOCATE

- # of HEAL policies and environment changes advocated for

SHORT-TERM OUTCOMES

CREATE

- Increase in % of population exposed to 5-2-1-0 / Small Steps messages
- Increase in % of population participating in Let's Go!

EDUCATE

- Increase in knowledge and skills of community site staff in implementing HEAL strategies
- Increase in knowledge and skills of healthcare providers in implementing clinical strategies
- Increase in awareness and knowledge of Let's Go! and 5-2-1-0 for parents / caregivers, Small Steps for adults

COLLABORATE

- Increase collaboration with HEAL organizations
- Increase partnerships to address diversity, equity and inclusion
- Increase community-clinical linkages

ADVOCATE

- Increase HEAL equity-focused policies and environment changes adopted at sites or practices

MEDIUM-TERM OUTCOMES

- Increase in implementation of community and healthcare strategies
- Increase in HEAL behaviors for children / youth and adults
- Increase in provider applying standard of obesity care for all patients, 5-2-1-0 / and Small Steps
- Increase in patients engaged in obesity care
- Increase in HEAL policies and environment changes adopted at the school district, healthcare system, and state and federal level

LONG-TERM OUTCOME

- Decrease in childhood and adult obesity rates
- Increase in children, youth and adults at a healthy weight
- Decrease in obesity-related avoidable health care costs

External Factors (that may affect outcomes): overweight or obesity stigma and bias, SDOH, differences among communities and organizations engaged with Let's Go!, and local, state, and federal policies. **Assumptions** (for the logic model): continued funding as planned and healthy eating/active living and obesity guidelines will not change dramatically.

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Logic Model and Component Definitions

The logic model is a tool for planning, describing, managing, communicating, and evaluating a program or intervention. It's a graphic depiction of the relationship between the program's activities and its intended effects or outcomes. It shows the "if-then" relationships among the program elements. If I do this activity, then I expect this outcome. It helps ensure clarity and consensus about main strategies/activities and intended outcomes.

The logic model provides a single-page summary of the program that is easily shared with staff, partners, and funders. Logic models are not static documents. Stakeholders should review logic models on a regular basis (at least annually), and update periodically to reflect new evidence, lessons learned, and changes in resources, activities, evaluations and expectations.

Inputs / Resources:

- Inputs are the resources that go into a program or intervention—what the program needs to operate.

Activities:

- Strategies/activities are events undertaken by the program or partners to achieve desired outcomes—what the program will do.

Outputs:

- Outputs are the direct, tangible results of activities—what we will get. They are the measurement tool of process evaluation, basic data on program participation. Outputs serve as documentation of progress.

Short-term Outcomes:

- Short-term outcomes are the immediate effects of the program or intervention activities including increased awareness and knowledge.

Medium-term Outcomes:

- Intermediate outcomes are typically behavior, environment and/or policy changes.

Long-term Outcomes:

- Long-term outcomes refer to the desired or intended results of the program and can take years to accomplish.