

2021 SHCC LOGIC MODEL

| Goals | Objectives | R/P Factor | Strategies | Short-term Outcomes | Intermediate-term Outcomes | Long-term Outcomes | | |
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| What do we hope to change in the long-term? | Specifically, what can we change to bring about large change? | What risk or protective factor(s) are connected to the goal we are trying to address? | What is our strategy or strategies for reaching this goal? | Did it produce the immediate change? | Did the broader change produce the result we wanted? | Did it impact the goal/need we identified? | | |
| 1. Increase and Strengthen Community Collaboration | Enhance the effectiveness of the SHCC governance and processes. This objective will be measured by use of the Prevention Solutions Assessment: improving the average score by 10%. (Baseline to be determined by survey conducted in September 2021) | Community cohesion/connectedness | Strengthen the internal capacity and leadership of SHCC | <ul style="list-style-type: none"> Increased knowledge, skills and abilities among coalition members around substance misuse prevention Increased participation in coalition efforts Increased retention of coalition members | <ul style="list-style-type: none"> Increase in individual and organizational partners as coalition members: Increased members' active participation in coalition activities Increased access to data and other resources through membership Greater ability to implement prevention strategies (e.g., More organizational and community level policies passed | Increased community collaboration | | |
| | Increase youth coalition membership by 10% by 9/2022 as evidenced by Youth Ambassador membership and meeting attendance | <ul style="list-style-type: none"> •Opportunities to belong; •Opportunities for pro-social involvement | Involve youth ages 12-17 in all phases of the Strategic Prevention Framework. | <ul style="list-style-type: none"> • Increased awareness of and interest in coalition among youth •More youth actively participating in coalition activities •Increased youth followers on social media •Youth from different backgrounds join coalition | <ul style="list-style-type: none"> • More youth participating in coalition all through high school • Increased youth ownership of coalition activities • Youth leaders report increased confidence in facilitating Youth Ambassador program • Youth fill leadership roles on coalition • Diverse youth perspectives about substance misuse-related problems and root causes are heard and honored | | | |
| | Increase community participation and collaboration perceptions by 10% by 9/2022 as evidenced by event documentation | Community cohesion/connectedness | Provide targeted information across the community to increase adult membership (recruitment and retention) | <ul style="list-style-type: none"> •Increased reach to Cohasset community members through media channels •Increased awareness of initiatives among key stakeholder groups •Increased participation in coalition meetings and activities by key stakeholder groups (e.g., parents, business sector, program participants) | <ul style="list-style-type: none"> • Increased membership in the coalition from key stakeholder groups (business sector, program participants) in coalition activities • Increased buy-in in the coalition from key stakeholder groups • Enhanced ability to assess the community with individual perspectives • Enhanced sense of ownership of youth programs and curricula by Cohasset parents | | | |
| | 2. Reduce Youth Substance Use | Reduce 30 day use of alcohol by Cohasset youth ages 14-17 by 2% by 9/22 as measured by the Youth Risk Behavior Survey administered in Spring 2021 and compared to 2019 results. | <ul style="list-style-type: none"> •Social access to alcohol •Low perception of harm •Community norms favorable toward alcohol use •Parental attitudes favorable toward use/parental approval | Provide information concerning youth social access of alcohol | <ul style="list-style-type: none"> •Increased awareness of local and state laws •Increased awareness of alcohol-related harms •Increased awareness of actual youth alcohol use rates | | <ul style="list-style-type: none"> • Increased perception of harm among youth and parents •Decreased parental approval •Decreased social access to alcohol • Increase in positive social norms | Decreased Youth Alcohol Use |
| | | Objective 2: Reduce 30 day use of marijuana by Cohasset youth ages 14-17 by 2% by 9/22 as measured by the Youth Risk Behavior Survey administered in Spring 2021 and compared to 2019 results. | <ul style="list-style-type: none"> •Peer attitudes favorable toward use •Psychological and emotional development •Clear parental expectations around substance use •Community collaboration (CBP) Lack of opportunities for prosocial activities | Present programs to develop skills to minimize risky decision making around alcohol. | <ul style="list-style-type: none"> •Increased knowledge of effective communication skills among parents •Increased knowledge of effective refusal skills among youth •Increased access to health-related information among youth | | <ul style="list-style-type: none"> •Decreased parental approval of alcohol use •Increased skills in refusing alcohol offered by peers •Increased knowledge of health-related information among youth | |
| | | | <ul style="list-style-type: none"> •Lack of enforcement of underage drinking rules and laws •Retail access •Social access •Opportunities to belong | Establish barriers to underage drinking or enhance access to treatment | <ul style="list-style-type: none"> •Increased opportunities for pro-social activities •Increased participation in alternative activities among youth and adults | | <ul style="list-style-type: none"> •Increased knowledge of healthy coping skills •Decreased social access to alcohol | |
| | | | <ul style="list-style-type: none"> •Community norms favorable toward youth •Lack of enforcement of underage drinking rules and laws •Retail access •Social access •Opportunities to belong | Change consequences (rewards/risks/entices) Change physical design Modify policies to inhibit youth alcohol use. | <ul style="list-style-type: none"> •Increased enforcement activities | | <ul style="list-style-type: none"> •Decreased social access to alcohol (including at home) at home •Decreased retail access •Decreased social access | |
| | | | <ul style="list-style-type: none"> •Social access to alcohol •Social access to alcohol •Retail access to alcohol | Provide information to educate parents and teens about the risks of marijuana | <ul style="list-style-type: none"> •Increased ability among youth to participate in prevention efforts •# of hotspots identified •Increased knowledge to decrease occurrence | | <ul style="list-style-type: none"> •Increase in youth that understand the importance of prevention •Reduced social access •Decreased social access to alcohol •Decreased retail access to alcohol | |
| | | Objective 3: Increase perception of parental disapproval of alcohol use among Cohasset youth (ages 12-17), by a 5% by 9/2022 as measured by the Youth Risk Behavior Survey administered in Spring 2021 and compared to 2019 results. | <ul style="list-style-type: none"> •Positive social norms (PF) •Parental attitudes favorable toward use •Positive youth development •Low perception of risk | Present programs to enhance skills/minimize risky marijuana decision making | <ul style="list-style-type: none"> •Increased awareness of risks relating to marijuana use among youth and parents •Increased parental skills to intervene | | <ul style="list-style-type: none"> •Increased perception of harm •Increased positive social norms | |
| | | | <ul style="list-style-type: none"> •Parental approval •Positive youth development •Low perception of harm | Provide support by creating opportunities to participate in activities that reduce risk or enhance protection. | <ul style="list-style-type: none"> •Increased youth reporting confidence with refusal skills and healthy coping skills •Increase in parents reporting improved communication skills with youth •Increase in youth leaders reporting improved skills in targeted capacity building areas, including creating prevention messaging •Increased opportunities for participation in prosocial activities among youth | | <ul style="list-style-type: none"> •Decreased parental approval •Increased perception of harm | |
| <ul style="list-style-type: none"> •Lack of opportunities for prosocial activities •Participation of peer use •Social norms favorable toward use •Community norms favorable toward substance use •Lack of access to treatment services | | | Establish barriers to youth marijuana use or enhance access to treatment. | <ul style="list-style-type: none"> •Decrease underage sales •Decrease in youth vaping incidents in school •Increased awareness of substance misuse related support and treatment services •Increased awareness of the need for more health personnel K-12 among key stakeholders •Increased awareness of the need to address sales loopholes among key stakeholders and decision makers •Increased awareness of the need to increase patrols on holidays | <ul style="list-style-type: none"> •Reduced perception of peer use •Reduced social norms favorable toward use | | | |
| <ul style="list-style-type: none"> •Lack of enforcement •Lack of access to prevention services (e.g., school-based health education) | Modify policies to inhibit youth marijuana use. | | <ul style="list-style-type: none"> •Increased awareness of prevention efforts •Decrease in youth that understand the importance of prevention •Reduced social access •Decreased social access to alcohol •Decreased retail access to alcohol | | | | | |
| Objective 4: Reduce lifetime use of non-prescribed painkillers and stimulants by Cohasset youth ages 14-17 by 1% by 9/22 as measured by the Youth Risk Behavior Survey administered in Spring 2021 and compared to 2019 results | Parental attitudes favorable toward use | Increase parental knowledge-dangers of youth substance use by providing info | <ul style="list-style-type: none"> •Increased awareness of effective youth alcohol use prevention approaches among parents •Increased awareness of available resources to support parents in addressing youth alcohol use | <ul style="list-style-type: none"> •Decreased parental approval | Decreased Youth Alcohol Use | | | |
| | Lack of clear parental expectations | Develop parent's skill set --communications and role-modeling. | <ul style="list-style-type: none"> •Increased awareness of effective youth alcohol use prevention approaches among parents •Increased awareness of available resources to support parents in addressing youth alcohol use | <ul style="list-style-type: none"> •Increase in parents setting clear expectations for their children regarding alcohol use | | | | |
| | Parental attitudes favorable toward use | Provide support by creating opportunities to participate in activities that reduce risk or enhance protection. | <ul style="list-style-type: none"> •Reduction in number of supervised/unsupervised youth parties where alcohol is consumed | <ul style="list-style-type: none"> •Decrease in parents reporting attitudes favorable toward youth alcohol use | | | | |
| | Community norms favorable toward substance use | Educate community about the inherent dangers of opioids and stimulants. | <ul style="list-style-type: none"> •Increased awareness of risks relating to opioid and stimulant use | <ul style="list-style-type: none"> •Decrease in community members reporting favorable attitudes toward opioid and stimulant use | | | | |
| | <ul style="list-style-type: none"> •Community norms favorable to use •Ease of social access to opioids/stimulants | Present programs to enhance skills to combat prescription drug misuse. | <ul style="list-style-type: none"> •Youth and adults receive prevention messages from multiple sources (older peers, experts, etc.) •Increased refusal skills •Increased awareness of available resources (e.g., drug disposal kiosk at CPD) | <ul style="list-style-type: none"> •Decrease in community members reporting favorable attitudes toward opioid and stimulant use •Reduced ease of social access to opioids/stimulants | | | | |
| | <ul style="list-style-type: none"> •Ease of social access to opioids/stimulants •Lack of access to treatment services | Establish barriers to prescription drug abuse/enhance access to treatment. | <ul style="list-style-type: none"> •Increased awareness among community members about availability of DeTerra pouches and dropboxes •Increased availability of treatment services for Cohasset residents •Increased awareness about Narcan as | <ul style="list-style-type: none"> •Increased use of DeTerra pouches and dropboxes •Increased use of treatment services by Cohasset community members •Increased use of Narcan to reverse overdoses | | | | |
| Community attitudes favorable toward use | Change physical design | <ul style="list-style-type: none"> •Increased awareness of prevention efforts | <ul style="list-style-type: none"> •Decrease in community members reporting favorable attitudes toward opioid and stimulant use | | | | | |

Increased community collaboration

Decreased Youth Alcohol Use

Decreased Youth Marijuana Use

Decreased Youth Alcohol Use

Decreased lifetime use of non-prescribed painkillers and stimulants by youth

2021 SHCC Expanded Logic Model

Table with 11 columns: Goals, Objectives, R/P Factor(s), Strategies, Activity Categories, Activities, Process Measures, Process Measure Tools, Short-term Outcomes, Intermediate-term Outcomes, Long-term Outcomes. It details various community health initiatives including youth coalition membership, substance use reduction, and parental involvement.

Increased community collaboration

Decreased Youth Alcohol Use

Decreased Youth Marijuana Use

Decreased Youth Alcohol Use

Decreased lifetime use of non-prescribed painkillers and stimulants by youth