Step One — Plan Your Program with a Logic Model

Logic models come in many different formats, but they all present the shared perspective of an "if...then" statement: "If we obtain the necessary resources and conduct certain activities, we will achieve our desired outcomes." In Figure 3, we present a basic logic model template that includes examples of typical health information outreach project inputs, activities, and outcomes. Inputs are the resources we need for the outreach project, including people, time, money, materials, equipment, and technology. Activities include what we do—conduct training sessions, provide services—and who is reached—participants, agencies, community-based organizations. Outcomes are the results or benefits of your project, including short-term outcomes such as changes in knowledge, intermediate outcomes such as changes in behavior, and long-term outcomes such as changes in individuals' health or medical access, social conditions or population health.

A logic model is read from left to right: You use certain resources to conduct planned activities that lead to desired results. However, you complete a logic model from right to left by starting with the outcomes columns and planning backward to the resources column. In other words, logic models promote use of one of Stephen Covey's highly effective habits: "Begin with the end in mind."[2]

Start with Outcomes

Begin your logic model by listing the intended outcomes (or results) in the last three columns. Outcomes are stated with an emphasis on the project recipients, such as "the participants will increase their ability to find information about health topics they hear about through the media" or "the agency staff will improve their ability to find health information for their clients."

Figure 3: Basic Logic Model Template*

Program: *Health Information Outreach Program*
Goal: *Improve community members' abilities to find, evaluate, and use health information*

Inputs	Activities		Outcomes		
What we invest	**What we do**	**Who we reach**	**Why we do it: Short-term results**	**Why we do it: Intermediate results**	**Why we do it: Long-term results**
• Staff • Volunteers • Time • Money • Research findings • Materials • Equipment • Technology • Partners	• Conduct workshops and meetings • Train • Deliver services • Develop products, curricula, resources • Facilitate access to information • Work with media	• Participants • Clients • Agencies and community-based organizations (CBOs) • Decision-makers • Customers • Clinical professionals • Members of CBOs	*Learning* • Awareness • Knowledge • Attitudes • Skills • Opinions • Aspirations • Motivations	*Action* • Behavior • Practice • Decision-making • Policies • Social Action	*Conditions* • Health • Social • Economic • Civic • Environmental

Assumptions
(Should be confirmed before beginning the program)
• Beliefs about the environment and community assumptions about availability of resources needed to implement the project
• Assumptions about availability of resources needed to implement the project

External Factors
(Should be identified before beginning the program)
• Positive and negative influences
• Culture, economics, politics, demographics

*Adapted from the U.S. Government Accounting Office [8], the University of Wisconsin-Extension [7], and the W.K. Kellogg Foundation [9]

[2] Covey, SR. The seven habits of highly effective people. New York (NY): Free Press, 2004.