How to Create a Program Description and Develop a Logic Model
Evaluation Learning Series Topic #2
**Evaluation Learning Series**

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Agenda

- Program Description
- Logic Models
- How to Create a Logic Model
- CDC Evaluation Framework Standards
Program Description
CDC Evaluation Framework

- Describes program theory
- Clarifies program’s purpose
- Information about the way your program/intervention is intended to function
- Discuss how activities will affect the proposed public health outcomes

What is a program description?

- Required for every evaluation
- Shared understanding between program and stakeholders
- Provides clarity on: the need, target population, the causal relationship between activities and outcomes

Source: Developing an Effective Evaluation Plan. Atlanta, Georgia: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; Division of Nutrition, Physical Activity, and Obesity, 2011
Tips

- Describe the **program**, not the evaluation itself
- Program and stakeholders should agree on the program description
- Sets the stage for identifying evaluation questions down the road
- Needs to be done before jumping into methods
Elements of a Program Description

- Need statement
- Goals and objectives
- Stage of development
- Target groups
- Activities and outcomes
- Logic model
- Context

Logic Models
What is a Logic Model?

- Graphic depiction of the relationship between activities and intended effects
- Don’t have to start from scratch
- Other methods – reverse mapping, forward mapping
- Can be broad or specific

Elements of a Logic Model

Assumptions

Inputs → Activities → Outputs → Outcomes

Context
How to Create a Logic Model
Step 1: Inputs

- Inputs: Think about all the resources that you have to put into your program
  - Before activities
- Not too broad or too specific
  - No direct identifiers
Examples of Inputs

- Dental Director, 1.0 FTE
  - Names are too specific

- Oral Health Program staff
  - Listing the secretary and accountant would be too specific

- Funding
  - Exact amount – too specific

- Stakeholders
Step 2: Identify Activities

- What your program intends to do in order to achieve goals
- Methods
  - Examine mission, vision, values
  - Forward mapping
  - Analyze inputs
Examples of Activities

- Develop strategic plan
- Implement policy plan
- Draft legislation to increase access to community water fluoridation
- Train sealant coordinators

Ineffective Activities

- Rent office space
- Increase number of students receiving sealants
- Advocate for water fluoridation
Step 3: Identify Outputs

- Tangible products that are directly produced by activities
- Activities with quality measures; “upgraded” activities
- They are NOT the outcomes of activities
Examples of Outputs

- State Oral health Strategic Plan
- 15 new dental sealant coordinators completed trainings
- 75 parents attended educational sessions
- 3 legislative proposals drafted that increase community water fluoridation

Instead of

- New dental sealant coordinators trained
- Parents gain knowledge about sealants
Step 4: Outcomes

- Benefits for participants and intended results your program expects to see due to the activities
- Short-term, intermediate (if appropriate) and long-term outcomes
  - Increases in beliefs, attitudes, knowledge that stem from intended activities (short-term)
  - Increases in incidence of persons who seek out health behaviors (intermediate/long-term)
  - Decreases in incidence of persons with disease/poor health outcome (long-term)


**Examples of Outcomes**

- Increased number of schools with competent dental sealant coordinators
- Parents have improved attitudes and knowledge towards their children receiving dental sealants
- Decreased incidence of caries among school-aged children

**Ineffective outcomes**

- Decreased number of caries
- More training implemented for trainers
- Continuing education on dental sealants
Discussion

- What is an outcome? What is the difference between outputs and outcomes?
Step 5: Elaborate

- **Activities**: Are more activities needed? Is more detail needed? Are they properly placed in order of occurrence?

- **Outputs**: What other data/information will I need to improve public health outcomes?

- **Outcomes**: Does your model end with short term outcomes? Are there any intermediate outcomes before we get to “improved oral health outcomes”?
Arrows

- Show the relationship between activities and outcomes
- You can draw arrows from:
  - One activity to another
  - One outcome to another
  - An activity to an outcome
Example Logic Model

**Logic Model Focus Area 1: Partnerships**

**Inputs**
- Oral health policy leadership
- Department of health
- Coalition members
- Partners such as government, communities, service providers, payers, academicians, public, volunteers
- Epidemiology/data management
- CDC technical support
- Currrent funding
- Data and data sources

**Activities**
- Engage stakeholders through continuous communication, oral health summit, meetings and workshops
- Conduct needs/resource assessment and prioritize needs with partners
- Conduct review of Minnesota Oral Health Plan with partners
- Coordinate and implement activities outlined in the plan with partners and coalition members
- Identify, develop and coordinate partnerships and collaborations
- Sustain diverse oral health coalition
- Raise awareness among community and policy makers through plan distribution, presentations, conferences and forum
- Develop and sustain interactive web-based Minnesota Oral Health surveillance System
- Develop plans to evaluate partnerships and collaborations

**Outputs**
- Summit, meetings and workshops
- Results of needs assessment and prioritization report
- Revised MOHP Work & Action Plan
- Partnerships and collaborations
- Statewide oral health coalition
- Communication and awareness campaigns
- Interactive web-based Surveillance system
- Evaluation Plan and Report

**Intermediate Outcomes**
- Increased coordination among partners to support oral health initiatives
- Increased policies to address oral health issues across sectors through partnerships and coalition efforts
- Increased knowledge and awareness of oral health issues including periodontal diseases and oral cancer

**Long-Term Outcomes**
- Increased local health departments that offer oral health prevention programs
- Increased accessibility to priority populations (low income, uninsured, people with developmental disabilities)

**Distal Outcomes**
- Reduced:
  - Caries
  - Oral cancer
  - Periodontal disease
  - Total tooth loss
  - Oral health disparities

**Assumptions:** Infrastructure and funding available and partnerships and coalitions sustained

**External Factors:** Supportive legislative environment, economy
CDC Evaluation Framework Standards
Program Descriptions and the 4 Standards

Utility
- Is the level of detail appropriate or is there too much/little detail?
- Is the program description intelligible to those who need to use it to make evaluation planning?
- How will evaluation results be used?

Feasibility
- How much impact is reasonable to expect?
- How much time, money, expertise are available?

Program Description and the 4 Standards

- **Propriety**
  - Is the evaluation complete and fair in assessing all aspects of the program, including strengths and weaknesses?
  - Does the program description include enough detail to examine both strengths and weaknesses, and unintended as well as intended outcomes?

- **Accuracy**
  - Is the description comprehensive?
  - Have you documented the context of the program so that likely influences on the program can be identified?

End of Topic #2: How to Create a Program Description and Develop a Logic Model

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the CDC.