

One Voice Empowerment Model: Addressing Alcohol and Other Drug Use Logic Model

PROBLEMS	GOALS	STRATEGIES & ACTIVITIES	“IF-THEN” STATEMENTS (THEORY OF CHANGE)	OUTCOME OBJECTIVES
<p>Youth are a key untapped resource and disenfranchised in the effort to prevent high risk behavior.</p> <p>Youth lack the knowledge and skills needed to effectively mobilize and develop their own voice and capacity to influence change in social norms and policies in their community.</p> <p>In the targeted risk behavior area of alcohol and other drug use (AOD), there are high rates of AOD use, low rates of perception of harm from AOD use and misperceptions about the consequences of use.</p>	<p>Develop knowledge and skills of youth to enhance their sense of empowerment.</p> <p>Create an environment where participants are empowered to take action to influence environmental changes around targeted risk behaviors.</p> <p>Change social norms around targeted risk behaviors among youth participants and the community at large.</p> <p>Reduce alcohol and other drug use among youth participants and their peers between ages of 12-18 by increasing perceptions of harm and misperceptions of use.</p>	<p><u>STRATEGY:</u> Build knowledge and skills of youth around the target area of AOD and allow them the opportunity to take action steps by implementing One Voice with 10-20 participants and 2 adult advisors in middle and high schools.</p> <p><u>ACTIVITIES:</u></p> <ul style="list-style-type: none"> • Get buy in from school administration • Identify advisors • Train advisors • Recruit students to Y2Y • Schedule initial meetings • Develop knowledge and skills of the youth, key staff, advisors • Develop and Implement action plan • Participate in summer institute • Periodic additional student training • Technical Assistance provided as needed by individual program sites. • Implement program process, monitoring and outcome evaluation • Promote and Publicize program and evaluation findings. 	<p><u>IF</u> One Voice is implemented</p> <p><u>THEN</u> youth advocates will increase their knowledge about the consequences of use and knowledge of industry practices; increase presentation skills; increase skills around media; increase knowledge of the legislative process aimed at changing the social norms around AOD use; and develop a network of pro-social peers</p> <p><u>IF</u> the above happens</p> <p><u>THEN</u> youth will increase their own perception of harm, increase feelings of self-efficacy and empowerment (perception that they can influence change, competency in skills), increase knowledge of the influence of media and industry in the targeted area, increase feeling accepted by non-using peers, increase engagement in pro-social activities.</p> <p><u>IF</u> the above happens</p> <p><u>THEN</u> youth will influence social norms and policies at the community level, decrease their own AOD use, increase perception of harm of AOD use among the community, and decrease AOD use at the community level.</p>	<p><u>SHORT TERM: Participants</u></p> <ul style="list-style-type: none"> • Increased knowledge (e.g., consequences, risks, industry practices, media, etc.) • Increased skills (e.g., presentation skills, critical thinking around media and industry practices, media development skills, etc.) • Increased engagement with pro-social peers <p><u>INTERMEDIATE: Participants</u></p> <ul style="list-style-type: none"> • Increased perception of harm among youth • Increased self-efficacy (perception that they can influence change, competency in skills) • Increase knowledge of the influence of media and industry • Increased engagement in pro-social activities <p><u>LONG TERM: Participants and Community</u></p> <ul style="list-style-type: none"> • Positively influence social norms at the individual participant and community level • Lower rate of initiation of AOD use among participants • Increased perception of harm among the community • Decrease AOD use among the community