# **Logic Models as a Platform for Program Evaluation**

## Cases

**Session 20: Monday AM** 

## **Childhood Lead Poisoning Prevention**

Lead poisoning is a widespread environmental hazard facing young children, especially in older inner-city areas. Exposure lead has been linked to cognitive disruption and behavioral disorders, especially when exposure occurs early in life. The main sources of lead poisoning in children are paint and dust in older homes with lead-based paint. Lead poisoning effects can be ameliorated through medical interventions. But, ultimately, the source of lead in the environment must be contained/eliminated through renovation or removal of the lead-based paint by professionals. Short of that, families can reduce the bad effects on their children through intensive housekeeping practices and selected nutritional interventions. County X, with a high number of lead-poisoned children, has received money from CDC to support its Childhood Lead Poisoning Prevention Program. The program aims to do outreach and identify children to screen, identify those with elevated blood lead levels (EBLL), assess their environments for sources of lead, and case manage both their medical treatment and the correction of their environment. They will also train families in selected housekeeping and nutritional practices. While as a grantee they can assure medical treatment and reduction of lead in the home environment, the grant cannot directly pay for medical care or for renovation of homes.

### Student Case 1: Eastside HIV/AIDS Prevention Program

The Eastside Health Center (EHC), a large publicly funded community-based health services provider, will be implementing an HIV/AIDS prevention program focusing on minority young people in its urban community. The prevention program would attempt to raise knowledge about HIV and AIDS, change attitudes and beliefs, and reduce high-risk behaviors. The approach consists of:

- Prevention education in middle schools and high schools. The educational component would consist of a mix of formal presentations by outside persons, and teacher-led small group discussions, as well as the distribution of educational materials to be read and taken home to share with parents. Although the basic approach would be the same in high schools and middle schools, adjustments would be made based on reading levels, and in the content on high-risk behaviors.
- <u>Community-based education.</u> This approach would involve two steps: 1) the training of young adults from various community organizations and churches as peer educators; 2) trained peer educators would conduct educational programs at their organizations and at other community based sites. In addition, they would conduct one-on-one or small group street work approaches with hard to reach populations.
- <u>Community-wide publicity and advertising</u>. Publicity and advertising posters and brochures would be printed and displayed in various sites throughout the neighborhoods where young people might see them (e.g., community centers, schools, stores, barber shops, etc.). In addition, bus cards and billboards also would be used. PSAs would be prepared and aired on several radio stations.

#### **Raw Material for Logic Model**

<u>Activities</u>	<u>Outcomes</u>
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#### Age-appropriate prev education

- Formal presentations
- Small group discussions
- Education material dissemination

#### **Community-based education:**

- Train youth as peer educators
- Youth-led education in community settings
- Do 1-1 street education
- Problem solving skills training

#### **Community-wide publicity:**

- Develop materials and messages
- Display posters and brochures
- Broadcast PSAs
- Buscards and billboards

Educational materials shared at home

Increased knowledge about HIV and AIDS

Changes in attitudes and beliefs

Reduction in HIV risk behaviors