

Insight and Outlook Logic Model

PROGRAM CONCEPT THEORY

CHANGE-BASED MODEL ACTIVITIES/GOALS

IMMEDIATE OUTCOMES

INTERMEDIATE OUTCOMES

FINAL OUTCOMES

Open Group/Open Admissions program resources for:

- IOPs
- EOPs
- Psychiatric Hospitals
- Substance Abuse Programs
- Behavioral Health Programs
- Mental Health Facilities
- Community Agencies
- Probation/Parole
- Drug Courts
- Mental Health Courts
- Diversion Programs

Structured and monitored substance abuse and/or behavioral health interventions based on cognitive-behavioral (CBT), motivational interviewing (MI), and social learning philosophies. Stages-of-change model reduces the resistance to behavioral change and decreases dysfunctional or antisocial behaviors, including substance use and abuse.

Evidence-based resources

Pre-Contemplation (participants may be resistant, reluctant, resigned, rationalizing, or in severe denial)

Contemplation (participates with increased self-awareness, understanding, and insight)

Preparation/Determination (key turning points)

Action (actively addresses significant Behavioral Health issues)

Maintenance and Aftercare (maintains positive and productive lifestyle)

- Program curriculum and other resources including MI tools integrated in the materials, engage participants and enhance motivation and receptiveness.
- Increase importance, confidence, and readiness for change (MI).

- MI and CBT curriculum elements increase self-awareness and emotional recognition; realistic assessment of current thinking and behavior choices.
- Identify critical internal and external risk factors and explore more functional options.

- MI/CBT curriculum elements guide exploration of new cognitive and behavioral options and acquisition of new coping skills.
- Commitment to changes through documentation of action plans for specific changes, including effective ways to reduce impact of specific highest risk factors.
- Development of internal and external protective factors.

- Activities – program resources guide implementation of changes.
- Observable mastery - through continued practice and use - of new skills; success in handling highest risk factors, and implementation/development of key protective factors to build situational confidence going forward.

Continue and revise action plans dealing with risk factors; maintain and develop links with protective factors, including support systems.

Effective handling of highest internal and external risk factors.

Increase in resiliency factors targeted by program.

Demonstrated effectiveness:

- Specific coping skills for relapse prevention
- Anger management skills
- Life skills
- Self-management
- Symptoms and triggers awareness and management
- Problem solving
- Skills for dealing with dysfunctional thoughts, cravings, and feelings
- Communication skills
- Goal setting/action planning skills
- Development of personal safety nets
- Employability skills
- Recreation/leisure time skills
- Relationships
- Successful management of mental health issues

Participants:

- Recognize the negative consequences associated with high risk people, places, things, and situations
- Demonstrate expected prosocial behaviors
- Utilize their new skills and generalize them across situations
- Decrease specific negative behaviors (e.g., violence, substance use/abuse, acting out)
- Implement changes to increase internal and external protective factors
- Follow their action plans

Selected to fit specific program

- Decrease in negative or dysfunctional behaviors.
- Decrease in post-program substance use
- Decrease in symptoms-related crises
- Increase in adherence to medication and therapy
- Decrease in post-program infractions (any post-program regulations and/or requirements)
- Active participation in post-program treatment/aftercare/counseling/support groups activities as needed

Assessment of program effectiveness

Summary elements provide documentation of progress and achievement of behaviorally-stated objectives.

Included are fidelity monitoring and performance evaluation tools.