Using Logic Models Grounded in Theory of Change to Support Trauma-Informed Initiatives

Trauma-Informed Approaches: Connecting Research, Policy, and Practice to Build Resilience in Children and Families
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Executive Summary

Child- and family-serving systems increasingly turn to trauma-informed (TI) initiatives to help prevent and address childhood trauma and build resilience among individuals. Despite increased implementation and federal, state, and local funding of TI efforts, limited consensus exists on what makes an initiative TI. There is also a lack of information on if, how, and why such endeavors lead to changes in child and family outcomes.

Logic models and theories of change can help TI initiatives conceptualize and operationalize their work to help build the evidence base for TI approaches. Specifically, theory-based logic models provide a detailed roadmap for anticipating, tracking, and demonstrating the pathways between activities and expected outcomes.¹

This special topic paper draws from diverse project activities (see sidebar) to address four main questions:

1. What are theory-based logic models?
2. How can theory-based logic models support TI initiatives?
3. What are common challenges to developing and using theory-based logic models?
4. What strategies can promote the use of theory-based logic models?

Suggested strategies to increase the use of theory-based logic models outlined in this paper may be of

In 2018, the Office of the Assistant Secretary for Planning and Evaluation (ASPE) within the U.S. Department of Health and Human Services (HHS) awarded James Bell Associates (JBA) and partner Education Development Center (EDC) a contract for the project, “Trauma-Informed Approaches: Connecting Research, Policy, and Practice to Build Resilience in Children and Families.”

This special topic paper presents key findings on the use of theories of change and logic models in TI initiatives gleaned from the following project activities:

- A research summary of TI systems-level initiatives
- A program scan featuring profiles of programs from diverse sectors, locations, and funding sources
- A convening of experts, including researchers, policy makers, community stakeholders, practitioners, and federal leaders, held in May 2019
- A series of key informant interviews with leaders in the field, federal leaders, and federal grantees, conducted in August 2019
- An issue brief summarizing key themes and considerations for future efforts
particular interest to federal, state, and organizational leaders and funders:

- Federal and other funding entities could prioritize TI initiatives that infuse rigorous theory into their logic models.
- TI initiatives can benefit from professional development and technical assistance opportunities that educate, support, and coach stakeholders on the use and benefits of theory-based logic models.
- Federal, state, and organizational leaders can promote cross-initiative learning by creating in-person and online venues that allow stakeholders to share theory-based logic models and lessons learned from their application.

To illustrate key points, we provide a sample, theory-based logic model for a cross-system initiative encompassing child welfare and behavioral health. We also present “logic model spotlights” detailing how Child & Family Services, a fictional agency, might use the logic model to guide its efforts. Appendix A includes two real-world examples of logic models from TI initiatives.
Introduction

Child- and family-serving systems increasingly see the need to become “trauma informed” (TI) to help prevent and address childhood trauma and build resilience among individuals. Federal, state, and local agencies also demonstrate their support for TI systems by funding the design and implementation of TI initiatives. Such initiatives currently operate within and across numerous fields, including child welfare, education, juvenile justice, and early care and education. For example, aspiring "trauma-informed states" work to integrate TI approaches and interventions into the philosophy, policies, and practices of all agencies and systems statewide.

Despite these trends, there is a lack of consensus on what it means to be TI. Limited information also exists on if, how, and why such endeavors lead to changes in child and family outcomes. Research has described the need for stakeholders involved with TI efforts to (1) articulate their theoretical frameworks and how their approach aligns with definitions of what makes efforts “trauma informed,” (2) document systems- and individual-level core components and practice changes, and (3) demonstrate linkages to outcomes and impacts.

Logic models based in rigorous theory provide the detailed roadmap TI initiatives need to anticipate, track, and demonstrate the pathways between activities and expected outcomes.

Our research summary and program scan revealed similar needs. Both showed a dearth of research examining whether and how systems-level TI efforts influence the health and well-being of children and families and community-level resiliency outcomes. Most of the initiatives reviewed presented the outcomes they hoped to achieve and related activities; few conveyed the linkages and paths that

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a The Family First Services Prevention Act, signed into law in 2018, reforms child welfare funding streams to provide services to families who are at risk of entering the child welfare system; it includes a provision for TI interventions that must be evidence informed. The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (2018) calls for a national, coordinated response to trauma and links funding to the provision of evidence-based TI services.
b For discussion and examples, see the Center for Health Care Strategies, Inc.’s “Policy Update: State and Federal Movement to Advance Trauma-Informed Care” and “Congress Points to Local Communities Adopting Trauma Informed Approaches” from the Network for Public Health Law.
c See the Office of the Assistant Secretary for Planning and Evaluation’s (ASPE) “Advancing Change to Support Trauma-Informed Initiatives and Build Evidence of Impacts” for further discussion.
would move them from “point A” to “point B” and the logic and theory behind their expected progression.

There is a growing call for initiatives to better conceptualize and operationalize their efforts to help build the evidence base for TI approaches. Logic models based in rigorous theory provide the detailed roadmap TI initiatives need to anticipate, track, and demonstrate the pathways between activities and expected outcomes. Logic models and theories of change are challenging to develop and apply in initiatives spanning multiple levels and sectors. Even initiatives using these tools may not articulate and leverage them to their full capacity.

This special topic paper outlines the rationale for using and supporting logic models grounded in theories of change to help build the TI evidence base. It draws from information gleaned from our research summary, program scan, key informant interviews, and observations as technical assistance providers to:

- Describe theories of change, logic models, and theory-based logic models
- Highlight the importance and benefits of a clearly specified roadmap throughout implementation
- Discuss common challenges to developing and implementing a theory-based logic model in TI initiatives
- Share strategies for federal, state, and organizational leaders and funders to facilitate the use of theory-based logic models

It also presents a sample, theory-based logic model and hypothetical scenarios illustrating its use by a fictional agency.
Question 1. What Are Theory-Based Logic Models?

Theories of change and logic models used together can help initiatives identify whether they are effective. They also lend insight into how, why, and under what conditions. Many federal grant applications require TI grantees to develop a logic model, but fewer request a theory of change. The most powerful use of both tools occurs when a TI initiative develops a theory-based logic model—i.e., a logic model that fully integrates and represents its underlying theory of change. As one key informant explained, “We can’t just go out there and just keep trying things with kids in need. With kids in crisis, we have to sit down and do some fact finding and develop some theories . . . before we’re out there doing [work with them]."

To create a logic model grounded in a theory of change, it is important to understand each tool’s purpose and key components (see exhibits 1 and 2).

A theory of change describes how a course of action will achieve its goals by articulating the pathways between activities/services and expected outcomes. It seeks to answer the question: How do we get to a specific long-term outcome? As one key informant explained, theories of change focus on “the why and [the] what.”

**Exhibit 1. Key Components of a Theory of Change**

- **Problem statement**—Core issue to be addressed
- **Etiology**—Factors that have caused the problem
- **Assumptions**—Contextual underpinnings that may require additional evidence to confirm
- **Outcomes**—Desired results of the strategies to address the problem
- **Pathways of change**—Directional relationships between strategies and desired outcomes

Theories of change are also nonlinear. They map the multiple ways components are expected to interact based on assumptions made by initiative leaders, frontline staff, researchers, and other stakeholders. According to some key informants, a theory of change is the necessary “critical thinking piece” for TI initiatives to specify a rigorous and useful logic model.
A logic model is a systematic and visual representation of a program’s theory of change. It communicates how an initiative works by depicting the intended relationships among the resources available to operate the program, program activities, and anticipated changes or results. A well-defined, rigorous logic model translates and integrates the theory of change into the “language” of data collection and evaluation.

**Exhibit 2. Key Components of a Logic Model**

- **Inputs**—Financial, material, personnel, and organizational resources needed to implement an initiative.
- **Activities**—Policies, practices, procedures, services, or activities implemented in response to the problem.
- **Outputs**—Immediate, concrete results of the services or activities.
- **Outcomes**—Short-, intermediate-, and long-term changes expected to occur as a result of program services and activities. These changes can occur at the client, worker, program, organizational, or community level.

A theory of change describes how a course of action will achieve its goals by articulating the pathways between activities/services and expected outcomes. A logic model is a systematic and visual representation of a program’s theory of change.

**A Sample Theory-Based Logic Model for a Trauma-Informed Initiative**

**Theory-based logic models can take many forms and structures.** For illustrative purposes, exhibit 3 presents a hypothetical, systems-level logic model informed by a theory of change. The sample model relates to a hypothetical TI initiative that seeks to provide effective, TI mental and behavioral health services for children entering child protective services. It reflects a focus on screening and treatment referral to promote participants’ safety, permanency, and well-being.
Exhibit 3. Sample Systems-Level, Theory-Based Logic Model

Inputs
- Funding
  - Grant
  - State agencies
- Child welfare (CW) system
  - Leaders
  - Caseworkers
  - Supervisors
  - Trainers/coaches
  - Evaluation staff
- Mental health (MH) centers
  - Leaders
  - Clinicians
- Target population
  - Children, caregivers
- Resources
  - NCTSN Training
  - Screening tools
  - Learning collaboratives (LCs) to spread evidence-informed (EI) TI services
  - Data systems

Framework
- NCTSN activities
- SAMHSA TI Approach

Core Services and Activities
- Training and workforce development
  - TI training to all staff, caregivers
  - Training on new policy/practices to CW staff, MH clinicians
  - Strategies to address secondary stress
- Functional assessment and trauma screening
  - CW caseworkers administer instruments monthly
- Data-driven case planning
  - Refer children with positive screens and assessments to TI services
- Service and treatment array
  - Host LCs to train and implement EI services
  - Effective coordination between CW and MH providers
  - Modify services as needed
- Ongoing progress monitoring
  - Regular evaluation of trauma symptoms on aggregate and case level
  - Monthly data review to monitor service receipt and efficacy
- Policy and quality improvements
  - Integrate TI practices in policy
  - Annual TI organizational assessments
  - Data sharing
  - Modify policy and practice based on data
  - Collaboration between CW and MH organizations

Outputs
- Entire workforce trained
  - 60% of trained staff show knowledge and/or skills gains
- 85% of children initially screened
  - 65% screens entered into data system within 1 month
- 85% of children screened positive referred for TI services
- # of MH providers trained in EI services
  - 60% of children referred receive EI services
  - 60% of case plans demonstrate coordination and information shared across CW and MH systems
  - 60% of children in EI services show trauma symptom reduction, improved behavior
  - Data indicators of CW outcomes (removals, neglect) at child/family and aggregate level
- TI organizational assessment indicator changes
  - Implementation barriers - policy and practice - extend/effectiveness of collaboration

Short-Term
- Increased # and % of trainees report increased knowledge, skills, awareness of TI screening, assessment, and practices
- Increased % of children in CW receive trauma screening/assessments
- Increased # of MH providers report use and skilled implementation of EI services
- Increased access to EI services for children in need
- Improved child/family trauma symptoms and CW outcomes
- Decreased barriers to implementation
- Expanded TI policies and practices

Intermediate
- Sustainable infrastructure for training & developing CW staff in TI EI services
- Improved # and % of staff utilize staff training
- Sufficient match between % of children who need TI MH services and % receiving services at case and community level
- Integration of trauma and MH case information into data system(s)
- All relevant CW, MH policies are TI

Long-Term impacts
- Improved child and family outcomes
  - Decreased trauma symptoms
  - Increased well-being
  - Increased placement stability
- Coordinated, sustainable, and effective TI system

Constraints
- Lack of TI awareness, screening skills
- Caseworker workloads
- Limited # of trained clinicians in EI services

Assumptions

Facilitators
- Champions, leadership buy-in
- Dedicated staff time, incentives
- Implementation science strategies

Using Logic Models Grounded in Theory of Change to Support Trauma-Informed Initiatives
The hypothetical logic model’s “Core Services and Activities” draw from the National Child Traumatic Stress Network’s (NCTSN) key activities of a TI child- and family-serving system as its framework (exhibit 4). Comparable activities include screening (NCTSN activity 1), use of evidence-based services (NCTSN activity 2), training for caregivers and providers (NCTSN activity 3), and collaboration across systems (NCTSN activity 6). The logic model also maps the pathways from activities to corresponding outputs and outcomes.

**Exhibit 4. Key Activities of a Trauma-Informed Approach (NCTSN)**

1. Routinely screens for trauma exposure and related symptoms
2. Uses evidence-based, culturally responsive assessment and treatment for traumatic stress and associated mental health symptoms
3. Makes resources available to children, families, and providers on trauma exposure, its impact, and treatment
4. Engages in efforts to strengthen the resilience and protective factors of children and families affected by and vulnerable to trauma
5. Addresses parent and caregiver trauma and its impact on the family system
6. Emphasizes continuity of care and collaboration across child service systems
7. Maintains an environment of care for staff that addresses, minimizes, and treats secondary traumatic stress and increases staff wellness

Similarly, the logic model incorporates assumptions, principles, and implementation domains from the Substance Abuse and Mental Health Services Administration’s (SAMHSA) concept of trauma and guidance for a TI approach (exhibit 5). For example, the logic model’s inclusion of “Policy and Continuous Quality Improvements” in its core services and activities incorporates SAMHSA’s operational guidance from its “Progress Monitoring and Quality Assurance” implementation domain and principle of “Trustworthiness and Transparency.”

“We can't just go out there and just keep trying things with kids in need. With kids in crisis, we have to sit down and do some fact finding and develop some theories . . . before we're out there doing [work with them].”
Exhibit 5. Assumptions, Principles, and Implementation Guidance of a Trauma-Informed Approach (SAMHSA)

Assumptions

- **Realizes** the widespread impact of trauma and understands potential paths for recovery
- **Recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system
- **Responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively
- **Resist retraumatization**

Principles

- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice, and choice
- Cultural, historical, and gender issues

Implementation Domains

- Governance and leadership
- Policy
- Physical environment
- Engagement and involvement
- Cross-sector collaboration
- Screening, assessment, and treatment services
- Training and workforce development
- Progress monitoring and quality assurance
- Financing
- Evaluation

The following pages include three “logic model spotlights” that highlight how agencies can use theory-based logic models for TI initiatives. Each spotlight includes a hypothetical scenario and detailed look at the relevant section of exhibit 3.
Question 2. How Can Theory-Based Logic Models Support Trauma-Informed Initiatives?

Evidence suggests that human services programs with plausible, well-articulated theories of change can produce better outcomes than programs without them. Research by Segal, Sara Opie, and Dalziel (2012) found that home visiting programs that aligned their theory of change, targeted populations, and program components were more likely to achieve success than programs that did not promote alignment. More research is needed to establish the evidence base for how logic models rooted in comprehensive theories of change can impact the effectiveness of TI initiatives.

The key informants we interviewed expressed support for theory-based logic models to support TI design, program implementation, and outcomes measurement by:

- Creating a shared understanding of how a TI initiative is intended to work
- Ensuring evaluability, rigorous measurement, and evaluation
- Supporting ongoing implementation and documentation of changes and impacts

Creating a Shared Understanding of How a TI Initiative Is Intended to Work

Inviting collaborators to review logic models early on can ensure that everyone has the same vision and understanding of how to achieve outcomes. Early review helps marry theory and real-world context by giving stakeholders the opportunity to examine assumptions and identify needs and gaps before implementation. Stakeholders can also review and specify their underlying theories or frameworks, definitions of trauma, target populations, and objectives. Aligning program components with these early decisions can help TI initiatives better position children and families to achieve desired outcomes.

See ASPE’s “Profiles of Select Trauma-Informed Programs” for discussion of commonly applied frameworks. These include the Substance Abuse and Mental Health Services Administration’s “SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach,” National Child Traumatic Stress Network’s (NCTSN) components of TI child and family service systems, and others based in science on adverse childhood experiences (ACEs).
Theory-based logic models can help stakeholders visually connect daily work to desired long-term outcomes. As one key informant explained, “If you understand why and what will happen, you can . . . see where you are making a difference.” Another informant elaborates, “[Focusing on theory of change and logic models] allows people to step outside of the day-to-day and really think about the things they care about and what would make a difference and how they can evaluate it along the way.”

### Logic Model Spotlight: Strengthening Staff Understanding and Morale

Child & Family Services wants to boost morale among intake workers by deepening their “big-picture” understanding of how their role can impact families’ outcomes. Looking at the logic model helps intake workers see how screening families can (1) help the TI initiative meet output benchmarks and (2) position the system to better identify children, match services to needs, and achieve positive outcomes.

A detailed logic model can generate buy-in and trust from community members, thereby supporting successful implementation and the achievement of outcomes. One key informant recounted a series of meetings held by a TI initiative to gather community feedback on its objectives and activities before creating a logic model. Questions ranged from, “What does trauma-informed mean?” to, “How are you going to help us when everything is so broken?” In response, the initiative developed and publicly disseminated a logic model detailing every program component. Discussing the level of detail included in the logic model, the informant explained, “We had such a demand for rebuilding community trust that I don’t think we had the luxury of putting down something simple.” Establishing a process for ongoing reflection and iterative feedback from community residents can also allow for continual improvement and reactions to evolving community needs.
Ensuring Evaluability, Rigorous Measurement, and Evaluation

A theory-based logic model improves a program’s readiness for evaluation—i.e., its evaluability—by driving collaborators to think about intended outcomes and to identify aligned indicators and measures. One key informant shared a recent experience helping an initiative that wished to implement a trauma screening tool. When leaders began asking what they should measure, the informant advised them to figure out their reasons for screening (e.g., their underlying theory and definition of trauma) and if the tool would help them meet their goals. Using theories of change and logic models would help such conversations occur more organically.

Logic models grounded in theory can help the field establish an evidence base that links TI program activities with short-, intermediate-, and long-term outcomes. One key informant explained that because the TI field of study is relatively new, TI efforts must continually demonstrate how they are “moving the dial” toward improved outcomes. According to the same informant, logic models can help communicate this progress at multiple points in time.

Supporting Ongoing Implementation and Documentation of Impacts

A detailed logic model can help stakeholders see exactly where program logic holds up and where it fails. The process of creating the logic model, and reviewing the logic model early on in program implementation, can help program staff and evaluators detect and address “logical breakdowns” while they can still improve program functioning and effectiveness. For example, stakeholders may notice that a specific desired outcome is not strongly linked to preceding activities that could reasonably lead to the outcome (gaps in theory of how change will occur).

Theory-based logic models can help TI initiatives foresee the impact of changes to program inputs and activities. Given their complexity, most TI initiatives require modifications to their initial plans. As one key informant explained, TI logic models must be iterative because they are responsive to circumstances and to people. Revisiting the logic model can help collaborators see if suggested changes adhere to the underlying theory and logic, and what ripple effects may occur as changes are made. One key informant stressed the importance of communicating the impact of funding changes on an initiative’s outcomes. “A logic model can really help articulate . . . if we remove this component, these are the activities that are connected to that, and those are the outcomes you are going to impact.”
Logic Model Spotlight: Communicating With Funders

Child & Family Services wishes to show funders the importance of Learning Communities (LCs) within its TI initiative. Using the logic model, program leaders convey how decreased funding for LCs would negatively impact output benchmarks and the initiative’s ability to achieve short-term and intermediate outcomes.

“A logic model can really help articulate . . . if we remove this component, these are the activities that are connected to that, and those are the outcomes you are going to impact.”

TI initiatives can identify needed improvements by overlaying real output and outcome data into the logic model. For example, a TI initiative might discover that enrollment numbers are lower than anticipated—perhaps leading to lower service engagement and diluting its ability to realize outcomes. Initiative stakeholders can address the issue by identifying additional referral sources or modifying eligibility criteria. According to one key informant, if initiatives are not realizing expected outcomes, “the [logic] model structures a conversation to go back and diagnose why [that’s the case].”
Logic Model Spotlight: Addressing Missed Benchmarks

Child & Family Services learns that only 60 percent of children who screened positive for trauma were referred to TI services compared to its goal of 85 percent. Working backward through the logic model, staff identify barriers to their performance and identify activities to strengthen implementation.

TI initiatives can communicate successes to stakeholders. Even basic visualizations of emerging impacts can remind stakeholders of what they are trying to accomplish and strengthen commitment and future implementation efforts.
Question 3. What Are Common Challenges to Developing and Using Theory-Based Logic Models?

Key informants also discussed several challenges to using logic models based on theories of change:

- Limited time
- Lack of expertise
- Need to develop and apply multi-level models

**Limited Time**

Many TI initiatives create simple logic models to meet the requirements of federal grant applications, often using a single evaluator to meet deadlines. These logic models typically focus on what can be accomplished within the grant parameters without fully illustrating the theoretical and logical framework or how efforts fit into the broader TI initiative.

Once grants are awarded, staff may not take the time to confirm all model components and assumptions before diving into implementation. As one key informant shared, “These [initiatives] are trying to get the services out into the community, into the hands of children and families who need them, and into the hands of the providers providing that care. So there’s just so many kinds of downstream pressures that sometimes it can be hard to set up that structure ahead of time . . . the framework and the accountability piece.”

**Lack of Expertise**

Theory-based logic models require a firm grasp on program theory, implementation, and evaluation. But key informants described a disconnect between program staff—who typically understand the needs and contexts of children and families experiencing trauma, program implementation, and what can realistically happen on the ground—and researchers, who understand theory and how to evaluate outcomes. One key informant expressed the need for teams to have “some experience at the table from both perspectives.” When developing a logic model as part of a
grant application, however, efforts don’t always have an interdisciplinary team available to help. One key informant who provides oversight to grants noted, “I don’t know that it’s always realistic to ask applicants to navigate [so many areas] on their own.”

Need to Develop and Apply Multi-Level Models

Many TI initiatives seek to implement activities that impact both systems-level and clinical-level (i.e., children and families) outcomes. Initiatives operate in ever-changing communities with assets and challenges that create unexpected impacts. Partners may also lead and implement different activities based on their respective areas of focus. One partner might target policy and practice changes at the organizational level, while another leads the work to implement interventions among a targeted population.

These layered and interrelated components can be challenging to depict in a single, linear logic model. Complex TI initiatives may need to specify a series of models, such as an overarching logic model with “zoomed-in” models detailing corresponding components, pathways, and outcomes. For example, a cross-systems initiative that aims to identify children experiencing trauma using screening tools may need to articulate different inputs, activities, and outputs depending upon the context of the screening (school environments versus public health or behavioral health contexts).

“These [initiatives] are trying to get the services out into the community, into the hands of children and families who need them, and into the hands of the providers providing that care. So there’s just so many kinds of downstream pressures that sometimes it can be hard to set up that structure ahead of time . . . the framework and the accountability piece.”
Question 4. What Strategies Can Promote the Use of Theory-Informed Logic Models?

Federal, state, and organizational leaders and funders can support the use of theory-driven logic models to build the TI evidence base and address recurring challenges. Indeed, many new programs and initiatives will need to document TI activities and account for outcomes because of recent legislation, such as the Family First Services Prevention Act. Leaders and funders can facilitate the development and application of rigorous, theory-based logic models in the evidence-building process by:

- Setting expectations and encouraging expanded use
- Supporting and providing opportunities to learn logic modeling skills
- Developing and promoting venues for TI initiatives to share logic models and lessons learned

Setting Expectations and Encouraging Expanded Use

Federal and other funding entities could prioritize TI initiatives that infuse rigorous theory into their logic models. Key informants suggested that funders could raise standards in the field by weighing theory-based logic models more heavily in their application processes and award determinations. Federal agencies, in particular, could craft Funding Opportunity Announcements to drive upfront conceptual thinking about trauma frameworks and theories of change and to promote greater collaboration.

Funders could also encourage stakeholders to build in time and resources to revisit their logic models post-award, and to infuse the theory of change in an intentional way. One federal TI initiative required grantees to adopt a “phased approach” in which they spent the first funding year on intensive implementation and evaluation planning. Stakeholders were required to articulate their theory of change, revisit and build out the logic models from their applications, and specify their evaluation plans to draw clear connections between TI activities and intended outcomes. The resulting logic models enabled federal leaders to better monitor grantee implementation. One key
informant cautioned that federal staff must receive their own training on logic models to enact similar requirements.

Supporting and Providing Opportunities to Learn Logic Modeling Skills

TI initiatives can benefit from professional development and technical assistance opportunities that educate, support, and coach stakeholders on the use and benefits of theory-based logic models. According to one key informant, there “hasn’t been a lot of training in the field about how to properly implement [logic models]” or how to revise and expand models over time.

Training should focus on:

- Benefits of theories of change and logic models in TI initiatives
- How to develop and apply a theory of change in logic model development
- How to utilize a logic model to guide implementation and evaluation
- How to revisit a logic model to understand whether a TI initiative or its components are having an effect (and if so, how, why, and under what conditions)
- How to communicate information from TI logic models into data-driven decision making (e.g., needs, funding allocations)

Resources explaining theories of change and logic models do exist; yet given the complexity of TI initiatives, there is added value to developing training and capacity-building resources tailored to the needs of TI efforts. A number of national technical assistance centers already work with TI grantees in different sectors. Federal agencies leading TI efforts, such as SAMHSA, could consider calling upon these resources to develop customized trainings and materials.

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For additional resources on how to develop a logic model, see the following:


Developing and Promoting Venues for Trauma-Informed Initiatives to Share Logic Models and Lessons Learned

Federal, state, and organizational leaders can promote cross-initiative learning by creating in-person and online venues that allow stakeholders to share theory-based logic models and lessons learned from the application of these tools. Most TI initiatives do not share their logic models widely. More often, initiatives place logic models in final report appendices where they are not easily accessible. Even if initiatives do disseminate their logic models (e.g., by posting them online), they often neglect to update the model to reflect changes and rarely facilitate discussions on how the model is used over time. Such realities stymie potential learning.

Such collaborations can help to strengthen the evidence base. One key informant cited her participation in an online network of TI researchers and clinicians in which TI initiatives with fully developed and tested logic models sometimes share what they have learned with less experienced initiatives. Another key informant noted, “If the federal agencies and the initiatives put effort into these logic models, they should come back to it to ask themselves, ‘Did it work?’ ‘Did it not?’ . . . If they use and test it, then show it to others, we’ve got learning happening and we’ve got evidence that ensures the government investment that is desperately needed.”

Federal leaders are in a unique position to promote cross-sector learning and magnify existing collaborations by addressing a national audience. For example, a federal agency could host a federal repository of information from TI initiatives with a dedicated forum on TI theories of change and logic models. Formed in collaboration with other federal partners, this repository could serve as a go-to resource for TI initiatives looking to improve outcomes for children and families and to build the evidence base for the field at large.

“If the federal agencies and the initiatives put effort into these logic models, they should come back to it to ask themselves, ‘Did it work?’ ‘Did it not?’”
Conclusion

TI approaches involve intense, complex work. Theories of change and logic models can help stakeholders understand what they are doing, why they are doing it, and how their efforts will improve the lives of children and families. This special topic paper provides insight into detailing and applying theory-based logic models to help the field establish an evidence base that links TI program activities with short-, intermediate-, and long-term outcomes. Key findings draw on information gathered through a research summary of TI systems-level initiatives; a program scan featuring profiles of programs from diverse sectors, locations, and funding sources; a convening of experts, including researchers, policy makers, community stakeholders, practitioners, and federal leaders; and a series of key informant interviews with leaders in the field, federal leaders, and federal grantees.
References


4 Hanson & Lang, 2016.

5 Funnell & Rogers, 2011.


Appendix A. Real-World Logic Models

This appendix highlights two real-world examples of logic models from trauma-informed (TI) initiatives. Exhibit A-1 presents the logic model from Ohio Vision 21’s Linking Systems of Care for Children and Youth demonstration project, supported by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The project promotes healing for victims of crime, provides or coordinates prevention and intervention services to youth and families experiencing trauma, and builds communities’ capacity to meet the needs of youth exposed to violence. The logic model incorporates guiding principles outlining its underlying theory via values, goals, and actions.

Exhibit A-2 presents the logic model from the cross-site evaluation of Mobilizing Action for Resilient Communities (MARC). MARC brings together 14 communities committed to addressing early childhood adversity and building resilience by translating science on adverse childhood experiences (ACEs) to policy and practice. The logic model represents multiple levels illustrating how (1) each community works toward TI policy and systems change and (2) cross-site evaluation shapes a collective impact framework to help share the process with aspiring communities.
Exhibit A-1. Logic Model for Ohio Vision 21’s Linking Systems of Care for Children and Youth

**Inputs**
1. Project personnel
2. Research Team
3. Stakeholder groups and Work Group Chairs
4. Content consultants
5. Existing data and research
6. IT resources
7. Supplies and equipment
8. OVC Grant funds
9. OVC Technical Assistance

**Activities**
1. On-site study visit to Virginia to learn from planning/implementation phase.
3. Resource Mapping of major initiatives in Ohio including Ohio studies, data, reports, protocols, special initiatives, collaborations and projects.
4. Local Resources Survey of EBP services that assist child/youth victims.
5. Develop data-driven screening tool and associated training/screening/referral protocol.

**Outputs**
1. Project Coordinator
2. Researcher
3. Project Team
4. Research Team
5. Stakeholders/Work Groups/Content Consultants:
   - Survivors/Families
   - Victim Services
   - DV
   - Sexual Assault
   - Anti-trafficking
   - Culturally-specific programs
   - Child welfare
   - CASA/GAL
   - Child Advocacy Ctr
   - Courts and legal
   - Law enforcement
   - Prosecutors
   - Foster agencies
   - Runaway and Homeless Youth Svcs.
   - Healthcare
   - Mental Health/Trauma/Grief and Loss
   - Academic/Research
   - Juvenile Corrections
   - Key informants and focus groups as needed.

**Participation**
Ohio systems will have an actively coordinated, informed and supported network of systems to address needs of child/youth victims.

**Short**
1. Victimized children/youth in Ohio are accurately identified in a wide range of community settings.

**Medium**
2. Victimized children/youth and their families in Ohio are effectively linked to resources in or near their communities.

**Long**
3. Systems impacting children/youth victims are linked at the state level for greater coordination to:
   a) Improve family outcomes, responsiveness and efficiency, and
   b) Increase leveraging and garnering of additional resources to support Ohio’s child/youth victims.

**Assumptions:** The model assumes that multiple screening tools exist across multiple systems with less than ideal coordination. The model also assumes that EBP and Victim Services exist and are accessible to varying degrees throughout Ohio.

**External Factors:** Ohio is an ideal state for a demonstration project, as it a microcosm of the nation. A mix of urban, suburban, rural and rural Appalachian communities comprise its 88 counties creating unparalleled regional diversity. The demographic composition of Ohio’s regions match the nation’s higher rates of poverty in the South, higher concentration of racial and ethnic minority groups in the Northeast.
Exhibit A-2. Logic Model for Mobilizing Action for Resilient Communities

**Initiative Goal:** To support communities using an ACEs framework to build the movement for a just, healthy and resilient world.

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Objectives</th>
<th>Activities</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resources</td>
<td>Organizations</td>
<td>Science &amp; Data</td>
<td>Resources</td>
</tr>
<tr>
<td>Funding and leadership: from state?</td>
<td>Strengthen the coherence of the initiative, multi-sector collaboration, and evaluation for individual MARC communities</td>
<td>• Develop MARCmeso to test strategies</td>
<td>MARC Communities</td>
</tr>
<tr>
<td>Health: federation of Philadelphia</td>
<td>Facilitate learning across the MARC Community</td>
<td>• Promote TA/capacity building on program development and evaluation</td>
<td>National level</td>
</tr>
<tr>
<td>MARC Advisory Committee</td>
<td>Strengthen broader national and regional change</td>
<td>• Promote peer learning and foster connections across grantees</td>
<td>National level</td>
</tr>
<tr>
<td>AECs Connection Network and state partners</td>
<td></td>
<td>• Encourage grantees to post on the MARC AEs Connection website</td>
<td></td>
</tr>
<tr>
<td>Matching funds from grantees’ networks</td>
<td></td>
<td>• Provide TA/translation and tenets regarding policy and systems change</td>
<td></td>
</tr>
<tr>
<td>Visitors</td>
<td></td>
<td>• Identify resources, research, people and opportunities and connect grantees with those</td>
<td></td>
</tr>
</tbody>
</table>

**Short term [2 years]**

- Increased funding for ACEs-informed policies and practices among communities and organizations
- Increased community engagement and deepening of the community base
- Increased evidence of trauma-informed policies and practices among communities and organizations
- Continued changes in systems that foster resilience (“systems change”)
- Increased evidence of trauma-related policies (trauma prevention, trauma informed, trauma specific) at the state and local level

**Intermediate [3-10 years]**

- Increased resilience and well-being of children, individuals, and families
- Decreased ACE scores
- Healthier children, individuals, families
- Healthier and more durable environments, workspaces, organizations, systems

**Long term [10+ years]**

- Increased presence of multi-sector networks focused on trauma-informed resilience building policies, practices, procedures, programs
- Increased evidence of trauma-informed policies at the national level
- Increased funding for ACEs/trauma-informed resilience building

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**Context:** Overall community and national context (e.g., economic, social and political); State collection of ACEs data through the BRFSS; Competing policy and funding priorities at local and national level; Historical and ongoing systemic trauma

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