The following 8 Logic Models were developed by state adolescent health coordinators (AHCs) during a 2010 orientation training hosted by the State Adolescent Health Resource Center. These Logic Models demonstrate the range of activities in which state AHCs engage, and the variety of funding sources, partnerships, and other supports that make their work possible.
## Example 1:

**REGION:** State in Region VI  
**SCOPE OF WORK:** Broad focus on adolescent health and youth development  
**LOCATION OF POSITION IN THE ORGANIZATION:** Office of Title V and Family Health  
**FUNDING SOURCE:** Title V MCH Block Grant, Medicaid

<table>
<thead>
<tr>
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<th>Key Activities &amp; Related Strategies</th>
<th>Current Partners</th>
<th>Long-Term Outcomes of the Adolescent Health Work</th>
</tr>
</thead>
</table>
| Title V Director  | **Provide Adolescent Health Expertise**  
| EPIs and SMEs     |  
| SAHRC             |  
| AMCHP             |  
| Two assistant commissioners who get it |  
| Youth development institute |  
| Six strong communities who want to make change |  
| State legislation |  
| Partners who share the Youth Development vision |  
| Room for creativity |  
| **State Healthy Adolescent Initiative** (grant program to 6 communities in the state around supporting healthy adolescents through a Youth Development approach; funded by state Title V block grant) |  
|  | Oversee contract development  
|  | Provide technical assistance  
|  | Seek opportunities for connections with grantee communities  
|  | Manage funding and budgets  
|  | Develop white papers on the state initiative concept and connection to outcomes  
|  | Engage sites in monthly support call and webinars  
|  | Educate state-level stakeholders the initiative  
|  | Develop and identify training needs/opportunities  
|  | Conduct site visits  
|  |  
|  | HIV/STD branch  
|  | EPIs  
|  | Mental Health/substance abuse  
|  | School health network  
|  | State Education Agency  
|  | Office of the Attorney General  
|  | Department of Family and Protective Services  
|  | State University’s Population Research Center  
|  | Social media company  
|  | State Healthy Steps regional staff  
|  | MCH regional staff  
|  | SAHRC  
|  | SMEs  
|  | NNSAHC  
|  | AMCHP  
|  | State juvenile probation commissioner  
|  | State Youth Commission  
|  | Local YWCA’s  
|  | Healthy Futures Alliance  
|  | Seasons of Change  
|  | Longview Wellness  
|  | City officials  
|  | State University’s Health Sciences Center  
|  |  
|  | Increase capacity to use evidence-based or best practice  
|  | Decrease rate of teen suicide  
|  | Increase capacity of workforce for mental health integration  
|  | Increase community capacity for youth development infusion  
|  | Increase awareness of youth development strategies  
|  | Decreased unintentional and intentional injuries  
|  | Slow rates of increased in adolescent obesity  
|  | Decrease teen pregnancy rate  
|  | Improve adolescent health in the state  
|  | Coordinate adolescent health structure  |
## Example 2: State Adolescent Health Coordinator Logic Model

<table>
<thead>
<tr>
<th>Resources/Support</th>
<th>Key Activities &amp; Related Strategies</th>
<th>Current Partners</th>
<th>Long-Term Outcomes of the Adolescent Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Supportive senior management</td>
<td><strong>Oversee Teen Pregnancy Prevention Programs</strong></td>
<td>- State family planning council</td>
<td>- Reduce teen pregnancy</td>
</tr>
<tr>
<td>- Hard working, skilled staff</td>
<td>- Coordinate grant applications</td>
<td>- March of Dimes</td>
<td>- Increase workforce knowledge RE: adolescent health/development</td>
</tr>
<tr>
<td>- Buy-in of a number of stakeholders</td>
<td>- Facilitate stakeholder meetings</td>
<td>- Black Nurses Association</td>
<td>- Increase knowledge about preconception health/life course</td>
</tr>
<tr>
<td>- Title V funds</td>
<td>- Seek and share resources</td>
<td>- County Health Department</td>
<td>- Improved health status of adolescents</td>
</tr>
<tr>
<td>- FTM (First Time Motherhood)</td>
<td>- Curriculum</td>
<td>- State Public Health Association (MCH section)</td>
<td></td>
</tr>
<tr>
<td>- Lottery money</td>
<td>- Risk specific</td>
<td>- Bureau of Nutrition and Physical Activity</td>
<td></td>
</tr>
<tr>
<td>- PREP and Title V TPP funds</td>
<td>- Education materials</td>
<td>- Local Community Development Corporation</td>
<td></td>
</tr>
<tr>
<td>- SAHRC, CDC, AMCHP, National Campaign to Prevent Teen Pregnancy</td>
<td>- Establish youth advisory group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Adolescent Health Network</td>
<td>- Collaborate with bureau evaluation staff on collection and analysis of data</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Keep current on national activities/research</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Promote Preconception Health Life Course Perspective</strong></td>
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</tr>
<tr>
<td></td>
<td>- Lead preconception health task force</td>
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<tr>
<td></td>
<td>- Make and/or coordinate presentations on PH/LCP to general public and health care providers</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>- Seek and share resources</td>
<td></td>
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<tr>
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<td>- Curriculum</td>
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</tr>
<tr>
<td></td>
<td>- Keep current on national activities/research</td>
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<td></td>
</tr>
</tbody>
</table>
### Example 3:

**REGION:** State in Region X  
**SCOPE OF WORK:** Teen pregnancy prevention  
**LOCATION OF POSITION IN THE ORGANIZATION:** Community and Environmental Health Bureau (chronic disease separate from MCH)  
**FUNDING SOURCE:** TANF, PREP

<table>
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<th>Key Activities &amp; Related Strategies</th>
<th>Current Partners</th>
<th>Long-Term Outcomes of the Adolescent Health Work</th>
</tr>
</thead>
</table>
| • SAHRC           | *Manage a Sexual Violence Prevention Statewide Coalition*  
                     • Recruit for a coalition chair  
                     • Review data and disseminate data  
                     • Monthly meeting with contractor  
                     • Schedule meeting with coalition members  
                     • Approve invoices  
                     • Provide technical assistance site visits  
                     • Develop agenda  
                     • Develop contract  
                     • Review, edit workplan  
                     • Monthly class with CDC  
                     • Continuation application  
                     • Contract negotiations  
                     • Facilitate meeting with coalition members  
                     • Write and disseminate meeting notes, Final report  
| • CDC             | *Run a Teen Pregnancy Prevention Program*  
                     • Develop contract, contract negotiations with at least 11 contractors, review/edit workplans, site visits  
                     • Approve invoices (monthly or quarterly)  
                     • Convene a task group (PREP funding)  
                     • Facilitate quarterly calls with contractor  
                     • Review H.D. quarterly workplans  
                     • Provide technical assistance to contractors  
| • Staff – Admin, APP, coordinator |  
• RPEG  
• TANF  
• PREP  
• Department of Education  
• State Start Strong program | • State Department of Education  
• Safe and drug free schools  
• HIV/AIDS coordination | • Decrease teen pregnancy rates  
| • Resources/Support |  
• SAHRC  
• CDC  
• Staff – Admin, APP, coordinator  
• RPEG  
• TANF  
• PREP  
• Department of Education  
• State Start Strong program | • Department of Health  
• HIV/AIDS program  
• STD program (Hepatitis C) | • Decrease the incidence of sexual violence among women  
| • Current Partners |  
| • Long-Term Outcomes of the Adolescent Health Work |  
• Start strong executive committee  
| • Current Partners |  
| • Long-Term Outcomes of the Adolescent Health Work |  
• Coworkers  
• Cultural liaison  
• Survey person  
| • Long-Term Outcomes of the Adolescent Health Work |  
| • Current Partners |  
| • Long-Term Outcomes of the Adolescent Health Work |  
• State youth ranch  
|  
| • Current Partners |  
| • Long-Term Outcomes of the Adolescent Health Work |  
• WOCA (Women of Color Alliance)  

- SAHRC
- CDC
- Staff – Admin, APP, coordinator
- RPEG
- TANF
- PREP
- Department of Education
- State Start Strong program

**Resources/Support**

- SAHRC
- CDC
- Staff – Admin, APP, coordinator
- RPEG
- TANF
- PREP
- Department of Education
- State Start Strong program

**Key Activities & Related Strategies**

- *Manage a Sexual Violence Prevention Statewide Coalition*
  - Recruit for a coalition chair
  - Review data and disseminate data
  - Monthly meeting with contractor
  - Schedule meeting with coalition members
  - Approve invoices
  - Provide technical assistance site visits
  - Develop agenda
  - Develop contract
  - Review, edit workplan
  - Monthly class with CDC
  - Continuation application
  - Contract negotiations
  - Facilitate meeting with coalition members
  - Write and disseminate meeting notes, Final report

- *Run a Teen Pregnancy Prevention Program*
  - Develop contract, contract negotiations with at least 11 contractors, review/edit workplans, site visits
  - Approve invoices (monthly or quarterly)
  - Convene a task group (PREP funding)
  - Facilitate quarterly calls with contractor
  - Review H.D. quarterly workplans
  - Provide technical assistance to contractors

**Current Partners**

- State Department of Education
  - Coordinated school health
  - Safe and drug free schools
  - HIV/AIDS coordination

- Department of Health
  - HIV/AIDS program
  - STD program (Hepatitis C)

- Start strong executive committee

- Coworkers
  - EPI
  - Vital stats
  - Cultural liaison
  - Survey person

- State youth ranch

- WOCA (Women of Color Alliance)

**Long-Term Outcomes of the Adolescent Health Work**

- Decrease teen pregnancy rates
- Decrease the incidence of sexual violence among women
- Implement state sexual violence primary prevention plan
### Example 4:

**REGION:** State in Region VI  
**SCOPE OF WORK:** School Based Health Centers  
**LOCATION OF POSITION IN THE ORGANIZATION:** Adolescent and School Health Division (separate from MCH)  
**FUNDING SOURCE:** State general funds; Tobacco settlement funds; very small portion of Title V MCH Block Grant funds

<table>
<thead>
<tr>
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<th>Current Partners</th>
<th>Long-Term Outcomes of the Adolescent Health Work</th>
</tr>
</thead>
</table>
| • My staff  
• SBHC sponsors (mostly)  
• Support from next level of administration  
• NP/MD consultant  
• Some resources in department – situation specific (EPI, e.g.) | **Manage 65 school based health centers (SBHC)**  
• Contract development  
• CFP process for new SBHC  
• Technical assistance  
• Behavioral health “consultant” to SBHC SWS  
• Policy/Best Practices/Standards  
• Certify for Medicaid  
• Site monitoring  
• Data Collection/Reporting (EMR)  
• Provide Info to advocacy groups  
• Legislative reports  
• Collaborate with other state agencies (DOE, OBH, etc.)  
**Participate in MCH Program Committees**  
• Child safety  
• Family planning  
• STD/HIV  
• Children with Special Health Services (SICC) etc. | • State Obesity Council  
• SBC sponsor network  
• State SBHC  
• State BC/BS (grant funder)  
• School health connection  
• DOE  
• NP consultant  
• MCH programs: EPI/STD; Family Planning, etc.  
• OPH pharmacy  
• State primary care association  
• State Bureau of Primary Care and Rural Health | • Very general improve overall health status of adolescents, reduce risky behavior  
• Decrease obesity rates  
• Decrease teen pregnancy rates (infant mortality)  
• Decrease emergency room/hospitalization for chronic disease (asthma, type 2 diabetes)\
### Example 5:

<table>
<thead>
<tr>
<th>REGION: State in Region III</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCOPE OF WORK: Teen pregnancy prevention</td>
</tr>
<tr>
<td>LOCATION OF POSITION IN THE ORGANIZATION: Maternal and Child Health</td>
</tr>
<tr>
<td>FUNDING SOURCE: Title V MCH Block Grant, Abstinence, PREP</td>
</tr>
</tbody>
</table>

#### Resources/Support
- The National Coalition to Prevent Teen and Unplanned Pregnancy (right next door in D.C.)
- AMCHP
- Access to data (VSA)
- Local University - Center for Adolescent Health
- The Afterschool Institute
- Partnerships with state
  - Department of Education
  - Department of Juvenile Services
  - Department of Human Resources (foster care)
- Passionate staff across the state
- Money (federal funds)
- State university School of Social Work
- SAHRC
- Healthy Teen Network (local)
- University of Arizona PYD/4-H

#### Key Activities & Related Strategies

**Oversee Funding of Teen Pregnancy Prevention (TPP) Programs (monitor)**
- Provide technical assistance to programs and TPP coalitions
- Educate stakeholders about funding opportunities for TPP
- Seek and secure funding for TPP programs statewide
- Collect/gather data for grants and share data with stakeholders
- Assist in establishing partnerships between counties, Community-based organizations, etc.

**Develop and Implement a Statewide Teen Pregnancy Prevention Strategic Plan**
- Gather stakeholder input for state plan
- Provide information to stakeholders via Listserv

#### Current Partners
- The Afterschool Institute
- Local University - Center for Adolescent Health
- State/regional Planned Parenthood
- DHMH, VSA, HIV/STI Unit
- State university School of Social Work
- Local teen pregnancy prevention coalitions
- Healthy Teen Network
- State Department of Education

#### Long-Term Outcomes of the Adolescent Health Work
- Attempt to establish a state TPP advisory council/board
- Build partnerships
- Assist in the re-establishment of TPP coalitions across the state
- Improve TPP program infrastructure statewide
- Support youth program workers via education, training, resources
- Infuse positive youth development into all youth programming
- Fund and plan youth conferences
- Implement state TPP plan
- Reduce TPP
### Example 6:

**REGION:** State in Region IV  
**SCOPE OF WORK:** Teen pregnancy prevention; Youth development  
**LOCATION OF POSITION IN THE ORGANIZATION:** Health promotion/disease prevention program, within an adolescent health and Youth development unit (established as a result of the teenage pregnancy prevention initiative funded by the state general assembly in 1998)  
**FUNDING SOURCE:** Title V MCH Blockgrant, TANF

<table>
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</thead>
</table>
| *Funding (TANF)*  | **Teen Pregnancy Prevention**       | 18 youth development coordinators (funded by State Title V Blockgrant)  
*Limited* data | • Monitor delivery of activities/programs  
*Experienced* local staff with willingness to learn/grow | 31 teen centers/youth development programs  
*Commissioner* is passionate about teen pregnancy prevention | • Incorporate Youth Development in pregnancy prevention  
*CDC* | • Provide education and technical assistance on implementing related activities  
*SAHRC* | • Promote policy/systems change  
*Me* | • Assist with development of workplan/monitor progress  
| | • Conduct site visits  
| | • Plan and prepare for development of a state strategic plan |  
| | • Assess needs of coordinators and teen clinic staff |  
| | • Monitor spending of each Adolescent Health Youth Development program | • Decreased teen pregnancy (eliminate)  
| | • Provide technical assistance to local coordinators | • Maintain program sustainability  
| | • Collect and disseminate data | • Improve adolescent health  
| | **Youth Development** | • Youth | • Standardize AHYD program  
| | • Monitor programmatic function | Development |
# State Adolescent Health Coordinator Logic Model

### Example 7:

**REGION:** State in Region V  
**SCOPE OF WORK:** Broad focus; Youth Risk Behavior and Surveillance Survey (YRBSS); state adolescent health strategic plan.  
**LOCATION OF POSITION IN THE ORGANIZATION:** MCH Division, Bureau of Community Health, School and Adolescent Health section  
**FUNDING SOURCE:** Title V MCH Block Grant

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>- CDC training and technical assistance</td>
<td><strong>YRBSS</strong></td>
<td>- State department of mental health</td>
<td>- Established programs to address needs of adolescent population</td>
</tr>
<tr>
<td>- State EPI support for data analysis</td>
<td>- Provide technical assistance to schools to admin</td>
<td>- State department of youth services</td>
<td>- Improve health of adolescents in states: increase grade rate, decrease teen pregnancy/STIs, etc.</td>
</tr>
<tr>
<td>- State public affairs – graphics for report</td>
<td>- Manage time of intermittent</td>
<td>- Substance abuse/mental health</td>
<td>- Workforce development of professionals working with adolescents</td>
</tr>
<tr>
<td>- Funding for intermittent position</td>
<td>- Contact schools for recruitment</td>
<td>- State department of jobs and family services</td>
<td>- Workforce development and lay people within groups working with adolescents</td>
</tr>
<tr>
<td>- Stakeholders use YRBS data</td>
<td>- Provide supplies to schools</td>
<td>- ODJFS (Yolanda C. &amp; Susan W.)</td>
<td>- Established networks</td>
</tr>
<tr>
<td>- Stakeholders are supportive of data collection</td>
<td>- Oversee data analysis input</td>
<td>- State bureau of children with medical handicaps</td>
<td></td>
</tr>
<tr>
<td>- Previously network extinct, so some stakeholders known</td>
<td>- Write report – other ways to disseminate data</td>
<td>- Voices</td>
<td></td>
</tr>
<tr>
<td>- Time to devote to development</td>
<td>- Collect data and send to CDC</td>
<td>- State school based health care coalition</td>
<td></td>
</tr>
<tr>
<td>- Institutional knowledge of how to create and run coalitions</td>
<td></td>
<td>- My supervisor</td>
<td></td>
</tr>
<tr>
<td>- Supportive and knowledgeable supervisor</td>
<td></td>
<td>- State school nurse association</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>- Regional hospitals with adolescent medicine programs</td>
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<tr>
<td></td>
<td></td>
<td>- Society of Adolescent Medicine</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>- State department of education</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>- Local health departments</td>
<td></td>
</tr>
</tbody>
</table>

**Manage State Adolescent Health Coalition**

- Identify adolescent stakeholders
- Convene meeting of stakeholders
- Develop goals for coalition
- Define role of coalition
- Define activities of coalition
- Establish communication strategies for coalition

**Resources/Support**

- CDC training and technical assistance
- State EPI support for data analysis
- State public affairs – graphics for report
- Funding for intermittent position
- Stakeholders use YRBS data
- Stakeholders are supportive of data collection
- Previously network extinct, so some stakeholders known
- Time to devote to development
- Institutional knowledge of how to create and run coalitions
- Supportive and knowledgeable supervisor

**Current Partners**

- State department of mental health
- State department of youth services
- Substance abuse/mental health
- State department of jobs and family services
- ODJFS (Yolanda C. & Susan W.)
- State bureau of children with medical handicaps
- Voices
- State school based health care coalition
- My supervisor
- State school nurse association
- Regional hospitals with adolescent medicine programs
- Society of Adolescent Medicine
- State department of education
- Local health departments

**Long-Term Outcomes of the Adolescent Health Work**

- Established programs to address needs of adolescent population
- Improve health of adolescents in states: increase grade rate, decrease teen pregnancy/STIs, etc.
- Appropriate training, etc.
- Workforce development of professionals working with adolescents
- Workforce development and lay people within groups working with adolescents
- Established networks
### Example 8:

**REGION:** State in Region IV  
**SCOPE OF WORK:** Teen pregnancy prevention  
**LOCATION OF POSITION IN THE ORGANIZATION:** Women’s Health Division (originally part of MCH until about 10 years ago, through state legislation became a separate division)  
**FUNDING SOURCE:** Abstinence and PREP Funds (also legislation in place to support the position from general state funds if abstinence and PREP funds are no longer available)

<table>
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<th>Long-Term Outcomes of the Adolescent Health Work</th>
</tr>
</thead>
</table>
| • Supportive commissioner and assistant director  
• Coordinate school health  
• Funding (Abst/PREP)  
• Konopka  
• AMCHP  
• Growing interest in local health departments to decrease teen pregnancy  
• Data, great epidemiologist  
• Partners across the state in TPP  
• state TPP team | • Teen Pregnancy Prevention (TPP)  
  • Board member state teen pregnancy coalition  
  • Develop resource publication and tool kit for local TPP  
  • Recourse to state and community agencies for TPP  
  • Develop and coordinate the key TPP team  
  • Implement activities to meet goals  
  • Administer abst. And PREP grants  
  • Develop strategies/goals to decrease teen pregnancy in state  
  • Collaborate with Adolescent-Health Related Groups  
  • Provide input to Title V MCH Blockgrant  
  • Develop a Sexual Abuse Prevention Plan  
  • State Suicide Prevention group  
  • Youth in transition for mentally challenged/SA/criminal youth  
  • Coordinated School Health Committee  
  o Youth Risk Behavior Surveillance Survey (YRBSS)  
  o Data Team  
  o HIV prevention education | • State teen pregnancy coalition  
• Coordinated School Health  
• state TPP team  
• local health department educators  
• Director of domestic violence  
• State university, department for adolescent health  
• Behavioral health/S.A. staff  
• State substance abuse program  
• Div of MCH  
• Div of Women’s Health staff  
• NNSAHC  
• SAHRC  
• schools  
• HHS  
• OAH/ACF | • Decrease teen birth rates, reproductive health promotion  
• Resource for adolescent-related programs  
• Collaborate with adolescent health program in the state  
  o Coordinate school health  
  o Suicide prevention  
  o Mental health/substance abuse  
• Support the work of DWH (F.P., breast, cervical, ovarian)  
• Others |

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**State Adolescent Health Coordinator Logic Model**