

## Logic Model: I am Moving, I am Learning

Situation: Increasing childhood obesity is a public health threat that affects children, families, and communities in Indiana and in America. Almost 15% of 2-5 year olds from low income families are obese in Indiana and over 16% are overweight (CDC data).

INPUTS	OUTPUTS		OUTCOMES – IMPACT		
	Activities	Participation	Short-term	Medium-term	Longer-term
What we invest	What we do	Who is reached	What do we think participants will know, feel, or be able to do after participating in program?	How do we think participants will behave or act differently after participating in program?	What kind of impact can result if participants behave or act differently after participating in program?
Trained and knowledgeable HHS Extension Educators  Research-based curriculum and facilitation tools (IMIL curriculum, resources, and materials)  Program evaluation  Marketing materials	Build collaborations with community partners  Conduct IMIL workshops and activities for caregivers and parents of young children in Indiana	Child care providers, teachers, and other education professionals that work with young children  Parents/families  After-school program staff  Volunteers and others who work with children and youth	Understanding of appropriate strategies to promote physical activity in children (Q1)  Understanding of how motor development influences children's overall health (Q2)  Using appropriate verbal cues to encourage various movement activities (Q3)  Understanding of health benefits associated with moderate to vigorous physical activity (MVPA) practices daily (Q4)  Use strategies to support children, families and staff in applying MVPA activities (Q5)  Using MVPA to support school-readiness skills (Q6)  Use music to encourage movement and physical activity in children (Q7)  Understanding the impact of good nutrition on children's overall health and development (Q8)	Designed environments to include all children in physical activity (Q12)  Increase in vocabulary to support children's daily physical activity (Q13)  Discussed strategies with parents to support MVPA with children at home (Q14)  Increase in children's quantity of time spent in moderate to vigorous physical activity (MVPA) during daily routines to meet national guidelines for physical activity (Q15)  Improvement in the quality of movement activities, intentionally planned and facilitated by adults which are age appropriate (Q16)  Improved healthy food choices for young children and their families (Q17)	Increased collaboration between groups  Reduce public health threat of childhood obesity in Indiana  Changed attitudes and behaviors of making healthy food choices  Increased daily MVPA by children

			<p>Use strategies to promote healthy food choices with children (Q9)</p> <p>Understand the benefits of outdoor play and time in nature for increasing children's motor skill development (Q10)</p> <p>Understand how unique experiences of children and families influence children's healthy development (Q11)</p>	<p>Expand and enhance networks to support and nurture changed behaviors</p>	
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Assumptions	External Factors
<ol style="list-style-type: none"> <li>1. Parents want their children to be in good health.</li> <li>2. Children in low-income areas are less likely to be physically active due to indoor and outdoor space limitations and lack of active play materials.</li> <li>3. Many adults don't like children being physically active because of the noise volume and activity level of the children that can lead to undesirable behaviors.</li> </ol>	<ol style="list-style-type: none"> <li>1. Poverty and food insecurity lead to less healthy food choices and options.</li> <li>2. Children in low-income areas are less likely to be physically active due to indoor and outdoor space limitations and lack of active play materials.</li> <li>3. Children don't play outside due to safety concerns by adults, especially in low-income areas that have high crime rates.</li> </ol>