Logic Model of D&I Science Project: Rural Primary Care Smoking Cessation Implementation

Starting Conditions	Inputs	Proximal Outcomes	Distal Outcomes

Problem/Gap → **Evidence Based Program** ↔ **D&I Strategies** → **Mechanisms/ Mediators** → **D&I Outcomes** → **Long-term Outcomes**

Problem/Gap	Evidence Based Program	D&I Strategies	Mechanisms/ Mediators	D&I Outcomes	Long-term Outcomes
Disproportionate high prevalence of smoking combined with lower rates of cessation support in rural populations	5 A's - Assess, Advise, Agree, Assist and Arrange	education and training cultural and local adaptation	increased confidence or self-efficacy of clinical staff to successfully deliver the 5 As	broader reach low costs a system that can be sustained	reduced smoking rates decreased prevalence of smoking related illness: cancer, heart disease improved quality of life

Dynamic Context → **Sustainable System Infrastructure & Behaviors**

FIT & Adaptations