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ASTHMA GREEN LIGHT, AN INNER CITY COMMUNITY-BASED ASTHMA EDUCATION PROGRAM

Elgloria A. Harrison¹, Susan D. Lockwood¹, Felecia Moore Banks²; ¹Nursing and Allied Health, University of the District of Columbia, Washington, DC; ²Howard University, Washington, DC

Background: Asthma is considered the most common cause of chronic illness in children. In this community, pediatric asthma affects 11.8% of its children. The 2007 National Asthma guidelines suggests that asthma education is one key to maintaining control of asthma symptoms. This study seeks to determine if a single education program, coupled with individualized telephone follow-up for parents of low income, inner city asthmatic children will empower families to effectively manage their children's asthma and enhance their quality of life. Methods: This project was an educational intervention study with a pretest, posttest repeated measures design with no control group. Small, 112 hour focus groups of parents of children with asthma were conducted during the required, regular parent meetings of children enrolled in daycare at 15 Head Start program sites. 54 families participated. Prior to the intervention, each parent completed a pretest to establish baseline asthma management experience and quality of life. Following the pretest, parents engaged in discussions on asthma triggers and management, followed by hands-on demonstrations. Families were provided with ethnographically-designed selfcare kits containing an asthma action plan, educational materials and monitoring devices. Each family received a 30-day follow-up support call. 90-days later, the initial survey was repeated by telephone as a posttest. Results: Analysis revealed statistically significant improvement in participants' use of the asthma action plans (33% pretest to 82% posttest) and use of environmental actions to control symptoms (50% pretest to 89% posttest). Further, the number of sequential, symptom-free days increased from 2.16 to 4.57 days, and the number of hospital visits decreased radically, from 25 in the 90-day period prior to the intervention, to 2 days at the 90-day posttest. Conclusion: This educational intervention has generated improvements in the ability of families to manage their children's asthma. They have demonstrated an increase in the use of asthma action plans and taken environmental steps to reduce asthma symptoms. A single small-group educational program, accompanied by telephone follow-up can be an effective, low-cost means of enabling families to self manage asthma symptoms. Sponsored Research - None

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