

Pediatric Asthma Guideline Checklist

Public Health Agency-Level 1



The current state of the issue

Asthma is the most common chronic disease among children, with many potential risk factors including smoking, obesity, family history, and environmental triggers, and adverse childhood experiences.^{1,2} In Washington state nearly 120,000 children have been diagnosed with asthma, accounting for between 8 to 11 percent of children in middle and high school.³ Over one year in Washington state, 28% of youth with asthma lacked routine healthcare visits, and one in five youth with asthma visited an emergency room to manage asthma symptoms.⁴ Poor control of pediatric asthma can lead to chronic absenteeism and affect the academic success of children. Frequently, the burden of asthma in the United States falls disproportionately on Black, Hispanic, and American Indian/Alaskan Native people.⁵ Asthma is a long-term disease that cannot be cured but can be effectively managed through guidelines-based treatment and mitigation plans.

Home Setting

- ☐ Consider supporting community health worker programs, whether developing new public health programs, providing funding for community-based programs, or offering reimbursement for care coordination as a health-related service.

Home-based, multi-trigger, multicomponent interventions can reduce exposure to many indoor asthma triggers, offer environmental mitigation strategies, and motivational interviewing and goal setting to improve asthma self-management.

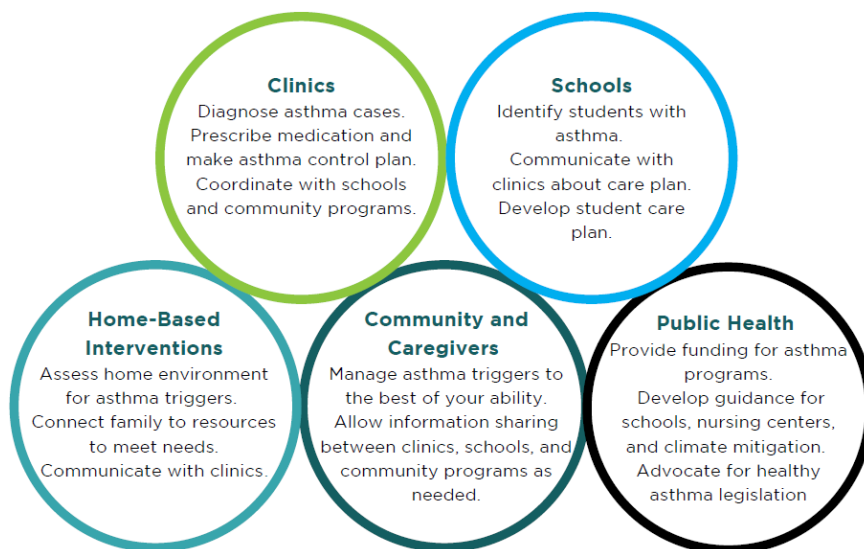
Environmental Exposures

- ☐ Provide education to the community about climate change, air pollution, and risks to health
- ☐ Advocate for a climate lens in healthcare policy including funded programs and research to prepare for the health impacts of a changing climate.

School Setting

- ☐ Advocate for legislation and funding to stock albuterol and spacers for school nurse offices, similar to current policy for epi pens.

Model for communication across health care stakeholders



Resources

- The Bree Report on Pediatric Asthma is meant to supplement these resources.
- Full Bree Report on Pediatric Asthma: <https://www.qualityhealth.org/bree/wp-content/uploads/sites/8/2023/01/Bree-Pediatric-Asthma-Report-Final.pdf>
- National Asthma Education and Prevention Program: <https://www.nhlbi.nih.gov/science/national-asthma-education-and-prevention-program-coordinating-committee-naeppcc>
- CDC's Community Preventative Service Task Force-Asthma Control: <https://www.thecommunityguide.org/media/pdf/Asthma-Home-Based-Children.pdf>
- Washington State's Asthma Management in Educational Settings Guide: <https://ospi.k12.wa.us/sites/default/files/public/healthservices/pubdocs/asthmanmanual.pdf>
- Asthma and Allergy Foundation of America: <https://aafa.org/asthma-allergy-research/our-research/climate-health/>

Read the full Bree Report on Pediatric Asthma online by scanning the QR code:



Connect with the Bree Collaborative at bree@qualityhealth.org

References: 1. Ferrante, G., & Grutta, S. 2018. The Burden of Pediatric Asthma. *Frontiers of Pediatrics*. <https://doi.org/10.3389/fped.2018.00186>. WA 2. Department of Health. (2010). Children and Youth with Asthma: Washington State 2009-2010. <https://www.doh.wa.gov/Portals/1/Documents/Pubs/345-305-ChildAsthmaFactSheet.pdf>. 3. WA Department of Health. (2022). Asthma Data <https://www.doh.wa.gov/dataandstatisticalreports/diseasesandchronicconditions/asthmadata>. 4. Washington State Department of Health. 2013. The Burden of Asthma in Washington State. Accessed August 2022. Available: <https://doh.wa.gov/sites/default/files/legacy/Documents/Pubs//345-240-AsthmaBurdenRept13.pdf> 5.5 Asthma and Allergy Foundation of America. 2020. Asthma Disparities in America: A Roadmap to Reducing Burden on Racial and Ethnic Minorities. Aafa.org. Accessed June 2022. Available: <https://www.aafa.org/media/2743/asthma-disparities-in-america-burden-on-racial-ethnic-minorities.pdf>