



# *Community Coalition: Implementing Asthma Interventions to Promote Local Policy Change*

**Rebecca Drummond, MA  
Senior Research Specialist  
U of A Zuckerman College of Public Health**

**Victoria Steinfeld MS  
Director, U of A Cooperative Extension Yuma County**

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# Presentation Outline

- Asthma in Arizona
- Overview of Yuma County, AZ
- Asthma in Yuma County
- Special Action Group for Asthma
- Open Airways for Schools
- Asthma Camp
- Future Policy Directions

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# Asthma in Arizona

- Arizona Asthma Coalition  
(<http://azasthma.org>)
  - 611,461 people with asthma
  - 80 deaths annually
  - Over 20,000 hospitalizations during 2001
  - 2001 Hospital costs over \$45 million



# Asthma in Arizona

- BRFSS 2004
  - Arizona 7%
  - Yuma 10%
- YRBS 2005
  - Arizona 21.8%
  - Yuma 17.8%



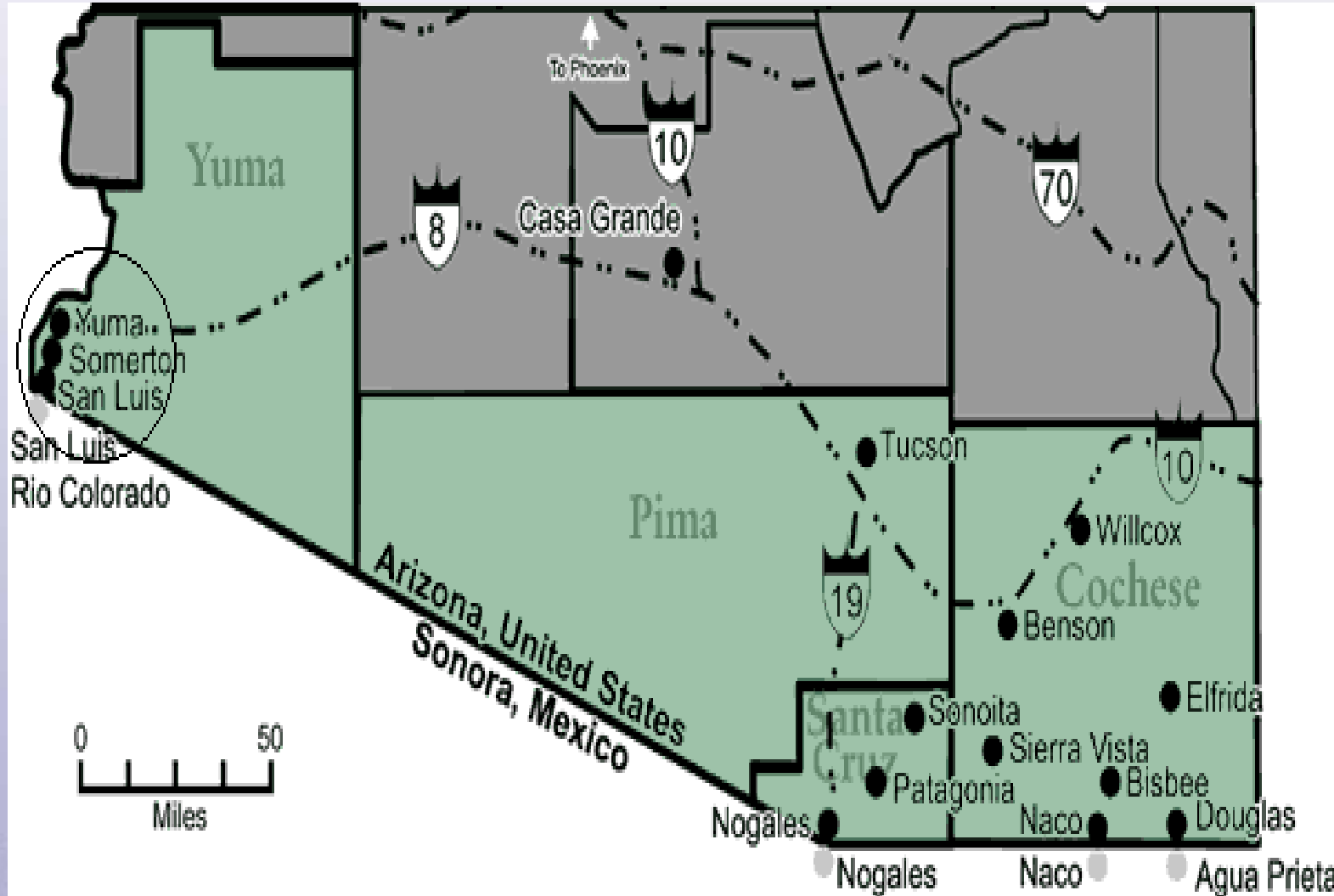
# Asthma in Arizona

- Policies and Legislation
  - ✓ House Bill 2229 (2005): allows a pupil to possess and self-administer handheld inhaler devices for breathing disorders so long as the pupil has written parental consent.

# Overview of Yuma County, AZ

❖ Along the U.S. Mexico Border

❖ Steps communities include Yuma, Somerton, San Luis, Wellton





# Overview of Yuma County, AZ

- Agriculture #1 Industry
  - 3.5 billion dollar impact on the community
- Unemployment rate (2005)
  - Annual rate 16%, State rate 4.7%
  - Seasonal rate 25% to 30%
- Household Income
  - 37.1% of Yuma households have income < \$25,000
  - State wide= 28.8%
- Population= 181,277(2005 Estimate)
  - 40.9% white, 2.6% African American, 54.6% Hispanic, 1.1% Asian

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# Asthma in Yuma County

- 2005 YRBS- Yuma County
  - 18.9% with asthma
  - 16.5% Hispanic
- 2005 Yuma Regional Medical Center Report
  - children ages 0 to 17
  - 437 Asthma Related ER Visits
  - 104 In-Patient Admissions with 2.54 average length of stay



# Asthma Special Action Group (SAG)

- Started January 2004
- Based on 2000 Border Health Strategic Initiative (diabetes) Model
- Policy Focus
- Over 30 members
- ~ 19 community organizations

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# Asthma SAG: Community Partners



- Networks + Collaboration
- AZ Asthma Coalition
- Legislative Actions
- Data sharing
- Funding + Sponsorship



# Asthma SAG Action Plan: *Reintroduce Open Airways for Schools (OAS)*

- SAG sponsored 2 local OAS training for 33 participants
- 11 volunteers from 3 school districts and 4 community agencies
- SAG researched local statistics on ER admissions and school absenteeism
- SAG presented to 3 school boards and 2 principal meetings

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# Open Airways for Schools (OAS)

- Steps Years 2 & 3
- 8 schools, 3 communities
- 46 children
- Positive change in all areas
- Significant change:
  - ✓ ability to predict an attack
  - ✓ knowledge of how much medicine to take
  - ✓ when to go to the doctor
  - ✓ feelings about asthma



# Camp Not-A-Choo

- Steps Years 2 & 3
  - ✓ 2 annual asthma camps
  - ✓ 25 local youth
- Gaining Support
  - ✓ Sponsors increased: 9-13
  - ✓ Volunteers increased: 35-55

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# Camp Not-A-Choo

- Consortium of Asthma Camps ([www.asthmacamps.org](http://www.asthmacamps.org))
- Screening night 3 wks before camp
  - ✓ bedside screening
  - ✓ Dr. consultation
  - ✓ parent orientation

# Camp Not-A-Choo



## Friday Evening

1. Check in + Counselor Time
2. Ice Breaker + Dinner
3. Education: Peak Flow Meters and Inhalers
4. Camp Fire and Legends of the West

# Camp Not-A-Choo

## Saturday Morning



1. Breakfast + Medication
2. Education + Activity Stations
  - Feelings about asthma
  - Horse back riding
  - Finding triggers and controlling asthma
  - 4-H therapy dogs
  - Recognizing and managing symptoms
  - Arts and Crafts





# Camp Not-A-Choo

- Evaluation (first camp only)
  - Parent attitudes
  - Child self-management
  - Satisfaction with camp
- ✓ Increase in child decision making regarding medication
- ✓ Increase in child's knowledge of what to do when wheezing and coughing occur
- ✓ Action plans at home increased 55-100%



# Camp Not-A-Choo

- ✓ Improved parent attitudes
  - ✓ Having control over child's asthma
  - ✓ Not feeling helpless
  - ✓ Being able to make changes
- ✓ 100% parents agreed expectations were met
  - ✓ Saw increase in child's knowledge of asthma
  - ✓ Child learned asthma skills
  - ✓ Child felt differently about asthma
  - ✓ Child talked positively about camp

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## Camp Not-A-Choo

“Thank you. My child enjoyed the camp and learned a lot. Now she knows more about asthma than her father who is also asthmatic”

“Camp was great experience for son. The hands-on experience with other children who have asthma made him feel he is not the only one with asthma. He wants to participate next year”

“Instead of posters and pictures, my child has put up pages from his materials received at asthma camp”

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# Future Policy Directions: Asthma Action Plans

- Providers: encourage office policy that all asthma patients have an action plan
- Schools: school policies in place (i.e. HB 2229), but need to increase parent awareness, and use of action plans
- Families: work with local agencies to raise awareness of families and childcare providers about the use of action plans



# Asthma Action Plan

**Asthma Action Plan** **AMERICAN LUNG ASSOCIATION**

**General Information**

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone number \_\_\_\_\_

Physician/Health Care Provider \_\_\_\_\_ Phone number \_\_\_\_\_

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_

**Triggers/Exacerbations**

<input type="checkbox"/> Mold/Insecticides	<input type="checkbox"/> Moderate/Pollution	<input type="checkbox"/> Colds	<input type="checkbox"/> Smoke	<input type="checkbox"/> Weather
<input type="checkbox"/> Mild/Respirator	<input type="checkbox"/> Severe/Respirator	<input type="checkbox"/> Germs	<input type="checkbox"/> Dust	<input type="checkbox"/> Allergies
		<input type="checkbox"/> Animals	<input type="checkbox"/> Food	
		<input type="checkbox"/> Other		

**Medications**

1. (See medication [prescription and other]) \_\_\_\_\_

2. (See over-the-counter medications) \_\_\_\_\_

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**Green Zone: Doing Well** **Peak Flow Meter Personal Best = \_\_\_\_\_**

**Symptoms:**

- Nothing is going on
- No cough or wheeze
- Can work/exercise
- Sleeps all night

**Peak Flow Meter**  
 Minimum 60% of personal best at \_\_\_\_\_ to \_\_\_\_\_

**Control Medications**

Medication	How Much/How Often	When To Take It

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**Yellow Zone: Getting Worse** **Contact your physician if using quick relief more than 2 times per week.**

**Symptoms:**

- Some problems breathing
- Cough, wheeze or chest tight
- Problems working/exercising
- Wake at night

**Peak Flow Meter**  
 Between 50% to 60% of personal best at \_\_\_\_\_ to \_\_\_\_\_

**Control Medications and sick:**

Medication	How Much/How Often	When To Take It

**If your symptoms (and peak flow, if used) are in the Yellow Zone or after one hour of the quick relief treatment, THEN:**

- Take your oral medication every 4 hours for 1 to 2 days
- Change your long-term control medication by \_\_\_\_\_
- Contact your physician for follow-up care

**If your symptoms (and peak flow, if used) DO NOT get into the RED ZONE after 1 hour of the quick relief treatment, THEN:**

- Take your oral medication again
- Change your long-term control medication by \_\_\_\_\_
- Call your physician/Health Care Provider within \_\_\_\_\_ hours of modifying your medication(s)

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**Red Zone: Medical Alert** **An Inhaler/Emergency Phone Number: \_\_\_\_\_**

**Symptoms:**

- Lots of problems breathing
- Can't work/exercise
- Getting worse instead of better
- Not sleeping at night

**Peak Flow Meter**  
 Below 50% to 60% of personal best at \_\_\_\_\_ to \_\_\_\_\_

**Go to the hospital or call for an ambulance if:**

- Still in the red zone after 15 minutes
- Your doctor or inhaler can't help your physician/health care provider for help
- \_\_\_\_\_

**Call on a ambulance immediately if the following danger signs are present:**

- Trouble walking/talking due to shortness of breath
- Lips or fingernails turn blue

- American Lung Association
- One page
- Based on the use of peak flow meters
- Included in Arizona Asthma Coalition Physician's Tool Kit

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