Objectives

Participants will be able to:
- identify gaps in adult asthma education in their community
- describe the Breathe Well, Live Well program and how it was developed
- list benefits of implementing an adult asthma education program

Icebreaker Activity

Why do we need an Adult Asthma Education Program?

Introduction to Breathe Well, Live Well
Reducing the Burden of Asthma in Adults  
*Project Funded by CDC*

- **Purpose:** to address the gaps in asthma education
- **Project Aim:** to reduce illness and disability due to asthma by educating patients to manage their disease
- **Overall Goal:** to adopt and disseminate a validated asthma management education program for adults by Fall of 2006.

**Original Study: Winning With Asthma**

- **Hypothesis:** An asthma management program for adults will improve self-management practices and decrease the inappropriate use of health care services.
- **Developed by researchers at the University of Alabama at Birmingham Lung Health Center**
- **Supported by a grant funded by the National Heart, Lung and Blood Institute**

**Winning With Asthma: Summary**

- 101 usual care patients and 124 Self-Management patients
- Patients were recruited during regular clinic visits and randomly assigned into the two groups
- Usual care patients received a standardized set of asthma pamphlets that contained comprehensive information about asthma.

**Winning With Asthma: Results**

- Decrease in the severity of asthma symptoms
- Fewer respiratory problems (i.e., coughing, shortness of breath)
- Increase in adherence to treatment regimens

**Adaptation Process**

- Selected by American Lung Association Advisory Group of experts in the field of asthma
- Adapted from a clinic-based program for community-based implementation
- Copyrighted by the American Lung Association in 2005
- Pilot tested in five local Lung Associations
- Process and feasibility evaluation showed promising results

**2005 Pilot Evaluation**

*Participant Characteristics*

- 104 participants
- Mostly female (72%); between the ages of 36 – 64;
- Education level is 3 year college or less (79.6%)
- over 62% were on Medicare, Medicaid, or claimed no insurance
- 44.4% received their care through ED, public clinic or other means
2005 Pilot Evaluation

Evaluation Results
- Increase in asthma management knowledge
- Increase the frequency of asthma management practices (Changes were highest on items regarding tracking of peak flow meter readings and symptoms, avoidance of triggers, and communication with the patient’s healthcare provider)
- Significant changes in attitudes were also observed and remained significant after three months.
- 99% satisfaction with program

Study Citations

Program Overview
- Program Components:
  - Module 1: Orientation
  - Module 2: Workshop
  - Module 3: Follow-up/Reinforcement
  - Evaluation
- Program Format Options

Measuring Effectiveness: Participants
- Asthma Questionnaire (given as pre- and post-) measure changes in knowledge, attitude and skills of adults
- The Evaluation Instruments to be used for nationwide data collection and analysis
- Available tools (LungNet and DataTrack):
  - pre test (before intervention) – Intake Form, Registration Form, Asthma Questionnaire
  - post-test end of program – Asthma Questionnaire, Participant Evaluation
  - post-test/ follow up (6 weeks after Workshop Module) - Asthma Questionnaire

Nuts & Bolts
- Facilitator Training $300
- Participant Materials $18/each
- Spacers & Peak Flows
- Scholarships/Stipends
- Current Dissemination

Identifying Partners
Questions?

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