

# Triangulating Childhood Asthma Management: A Partnership Between Community, Family, and Provider

44<sup>TH</sup> BIENNIAL CONVENTION STTI FALL 2017 DR. LINDA GIBSON-YOUNG

#### Asthma

- One of the most common chronic diseases in children.
- ◆ Prevalence doubled over the past three decades, and currently affects over 12 million school-aged children (Moorman et al., 2012).
- ◆With more than 8% of US school-aged children currently living with asthma, there is a disproportionate burden in certain family populations managing childhood asthma.
  - ◆In the South Texas region, childhood asthma affects 11% of the population with the highest rates among diverse ethnic groups and, of special consideration, Hispanic children (Texas Asthma Control, 2015).

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# Healthy South Texas





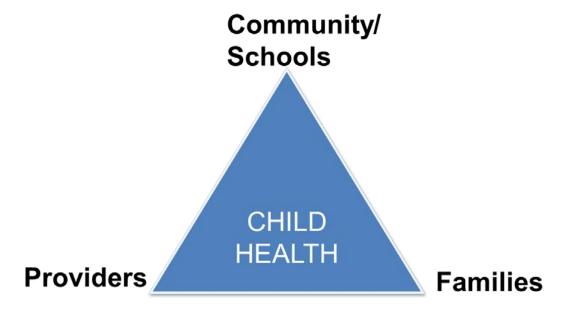
## Background

- ◆ Although healthcare and community providers routinely document education and intervention efforts regarding asthma management for children/families,
- gaps remain between hospital and home (Gibson-Young et al., 2014; Cataletto, 2015)
- suggesting that there is a problem with the current system of managing asthma.
  - Management of childhood asthma is multifaceted
  - Requires partnerships between healthcare providers to ensure adequate child outcomes.
  - Collaborative efforts with interdisciplinary teams

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## Conceptual Framework

- A triangulation framework was utilized when initiating this collaboration.
- Without this approach or efforts initiated, management of childhood asthma was limited and child morbidity was increased.





## Purpose

- ◆To address the collaborative approach with community partnership for childhood asthma management that facilitated rapid dissemination of evidence-based best practices from researcher to provider to beneficiary,
  - and critical data from beneficiary to provider to researcher resulting in significant cost savings to the national health care system.
- We will utilize evidence-based approaches and lessons learned in triangulating management of asthma.



#### Methods

The research was conducted by a mixed methods approach: Qualitative-

- perceptions of team members
- focus group feedback

Quantitative- not discussed

- attendance
- dissemination through presentations and publications

This collaboration project created an **interdisciplinary network** of providers and researchers examining chronic asthma research with nursing, public health, medicine, and beneficiaries in South Texas that provided benefits for the awareness and adoption of evidence-based best practices.

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## Sample

- We recruited from systems currently working with counties and community health workers who are already in partnership.
- ◆These community partners included: Extension/Community providers, Health Care Plans, Primary Care Providers, Acute Care Providers, Academic Center, Schools, Families/Patients, Community Health Workers, and Promotoras.
- ◆The target population had involvement with school-aged children ages 5-18 years of age currently enrolled in a public-school system.
- Productivity projection identified as 3800 children/ families with asthma and 15000 students served for all 27 South Texas counties.

### Qualitative Results

#### Perceptions of collaboration

- Why collaborate?
- How to collaborate?
- When to work in partnership?

#### Focus Group Feedback (N = 46)

- Stakeholders
  - Children
  - Parents
  - School Nurses
  - Nurses
  - Community Workers
  - Physicians





#### Themes

- More and better education is needed across the board
  - Health literacy required
- Better coordination and collaboration

Changes in school policies are required to better support students with asthma

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## Next step...Coalition

58 names identified in charter membership of Coalition

- ◆The mission to reduce the overall burden of asthma in children,
  - focus on minimizing the disproportionate impact of asthma in racial/ethnic and low-income populations,
  - by promoting asthma awareness and disease prevention at the community level and
  - expanding and improving the quality of asthma education, management, and services through system and policy changes.

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#### Reflect

- •identify lessons learned in building the collaboration and triangulating the asthma management approach.
- recognize lessons when building coalition and disseminating research findings.
- examine the literature in-depth, and discuss.



### Discussion

1. Schools/ After-school programs/ Daycare programs

2. Asthma Education

3. Coordination



# **Q&A Session**

