B5.1: Asthma Health Education and Counseling Research in Midwestern Urban School Districts

Author List:
Presenting Author: Eileen K. Kintner
Additional Author: Nicole Greenway, Gwendolyn D. Cook

Presenting Author: Eileen K Kintner
Address: 1700 Red River Street
Austin, Texas 78701-1499
United States
Ph: 512-471-2847
Fax:
Email: ekintner@mail.nur.utexas.edu
Institution: University of Texas at Austin

Additional Author: Nicole Greenway
Address: Kellogg Center
East Lansing, Michigan 48824
United States
Ph: 517-432-6713
Fax:
Email: greenw50@msu.edu
Institution: Michigan State University

Additional Author: Gwendolyn D Cook
Address: 1700 Red River Street
Austin, Texas 78701-1499
United States
Ph: 512-471-2847
Fax:
Email: gcook@utexas.edu
Institution: University of Texas at Austin

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Abstract:
Introduction: National guidelines recommend that part of a successful asthma management program includes education in schools and community settings. An academic
program was developed in collaboration with school personnel for older school age students with asthma and their social networks, “Staying Healthy-Asthma Responsible & Prepared.” The program addresses factors affecting outcomes for older students in ways that are developmentally appropriate and that integrate into schools in such a way that they are more likely to be embraced by schools pressured to demonstrate academic outcomes in this era of no child left behind. A Lifespan Development perspective and Acceptance of Asthma Model guided development of the program. Purpose: To describe strategies used to address issues and challenges confronted by researchers conducting health education studies in five Midwestern urban school districts.

Method(s): Method: Issues and challenges are categorized under negotiating entry, gaining approval, maintaining relationships, recruiting subjects, enrolling participants, retaining families, collecting data, delivering interventions, monitoring quality, evaluating outcomes, and reporting results. Strategies include care in selecting school districts, and using an insider approach to deliver clear, concise, and precise bulleted, talking-point summaries that target audience needs, desires, and requests specifically addressing the districts’ missions, outcome objectives, and academic benchmarks with minimal burden on resources, students, and families while allowing for optimal flexibility in scheduling.

Results: Results: Entry into the schools was accomplished with ease using protocols for identifying, hiring, training, and monitoring team members; recruiting, enrolling, and retaining participants; using the audio-linked data entry system in private home; matching schools before randomization; and delivering the programs to students during school hours and caregivers in the evenings and on weekends. Outcome scores demonstrated statistically and clinically significant improvement.

Discussion & Conclusions: Conclusion: Schools are the logical delivery system for health education programs. Strategies used for this program could be adapted for use in other locations.

Abstract History:
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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