Abstract:

Introduction: Asthma is the most common chronic childhood condition requiring a daily treatment regimen to control symptoms. Peak flow monitoring (PFM) is recommended as part of
asthma self-management. Unfortunately, adherence to asthma self-management is low. Evaluating parent and child self-reports of adherence strategies found to be the most effective in promoting daily PFM was a secondary aim of a larger randomized, controlled, two-group clinical trial (N = 77) testing an intervention to promote children’s adherence to asthma self-management.

**Method(s):** Thirty-eight 7- through 11-year-old children with persistent asthma, randomized to the intervention group, received a nurse-initiated behavioral intervention to promote daily adherence to PFM. Guided by cognitive social learning theory, the intervention included self-monitoring (recording PF and asthma symptoms), reinforcing (a star for daily PFM and negotiated reward for fire stars earned), contracting (parent and child agreement for daily PFM performance), tailoring (placing the PF meter in a location where the child is likely to use it daily), cueing (strategically placing Post-It Notes around the house with PFM reminders) and parent reminders. At the conclusion of the 16-week study, child and parent responses to a program evaluation interview were descriptively analyzed for those strategies identified to be most effective in promoting adherence to PFM.

**Results:** Parents and children, respectively, reported parent reminders (100%, 100%), tailoring (89%, 89%), reinforcing (82%, 66%), self-monitoring (68%, 66%), cueing (61%, 55%), and contracting (55%, 47%) as the most effective adherence strategies.

**Discussion & Conclusions:** Parent reminders were reported by both parents and children as the most effective in promoting children’s adherence to PFM. This suggests that parent-child partnerships are integral for effective asthma self-management. The results of this study have important clinical implications supporting a multi-behavioral approach when teaching children and their parents to manage the child’s asthma at home. This study was supported by Grant #R15 NR08106-01 from the National Institute of Nursing Research, National Institutes of Health.

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

**Financial Disclosure:**
No, I (or a member of my immediate family) have not received something of value* from or own stock (or stock options) in a commercial company or institution related directly or indirectly to the subject of my presentation.

**FDA Disclosure:**
I will not be describing any pharmaceutical and/or medical device.

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