

SECURING A HEALTHIER FUTURE FOR CHILDREN WITH ASTHMA

Asthma is the single most common chronic condition among children in the United States. Approximately 6.13 million children under age 18 in the U.S. have asthma, with poor and minority children suffering a greater burden of the disease. The poorest children have an asthma prevalence of 11.7%, compared to 6-7% among higher income children.

Not only is pediatric asthma widespread, the economic burden is substantial. Researchers estimate that the annual cost burden of childhood asthma is \$5.92 billion annually in direct healthcare expenditures alone;⁵ this cost is expected to rise to approximately \$7.9 billion in 2020.⁶ Asthma is the third leading cause of hospitalization among children under the age of 17, and is associated with increased emergency department visits.^{7,8} With 49% of school-aged children missing school days, pediatric asthma is also one of the leading causes of school absenteeism, accounting for over 7.2 million missed days per year.^{9, 10}

Evidence suggests that improving asthma management and reducing exposure to triggers among vulnerable populations could save as much as 25% of total asthma costs, and help millions of children lead healthy, active lives. ^{11,12} Unfortunately, most children do not have well-controlled asthma, and 54% of children with diagnosed asthma have experienced an attack within the previous 12 months. ¹³ Increasing the number of children that have their asthma appropriately managed and addressing the underlying factors that cause asthma attacks should be priorities for the public health community.

CHILDHOOD ASTHMA LEADERSHIP COALITION MEMBERS

Asthma and Allergy Foundation of America Association of Asthma Educators Asthma and Allergy Network American Academy of Pediatrics

Association of Clinicians for the Underserved American Lung Association

Asthma Regional Council of New England Children's Environmental Health Network Children's National Medical Center

DC Asthma Coalition

Families USA First Focus

George Washington University Green & Healthy Homes Initiative Healthy Schools Campaign Healthy Schools Network, Inc.

Johns Hopkins Adherence Research Center Joint Council of Allergy, Asthma, & Immunology National Asthma Educator Certification Board National Association of School Nurses National Center for Healthy Housing National Medical Association

Nemours

Not One More Life

Regional Asthma Management & Prevention

School-Based Health Alliance Trust for America's Health





SECURING A HEALTHIER FUTURE FOR CHILDREN WITH ASTHMA

COLLABORATING TO PROTECT THE HEALTH OF KIDS WITH ASTHMA

In order to address the serious and pervasive problem of childhood asthma in the United States, in 2012 the Merck Childhood Asthma Network (MCAN) partnered with the Department of Health Policy at the George Washington University (GWU) to establish a new national multi-sector coalition to raise awareness and advance public policies to improve the health of children who suffer from asthma. In 2015, new funding was obtained through the Kresge Foundation, and in 2018, Families USA joined GWU to continue the work of the Coalition.

The Childhood Asthma Leadership Coalition consists of leading advocates and experts in childhood asthma, public health, environmental health, poverty, housing, health care, and health care economics. Members come from a variety of professional backgrounds, including clinical researchers, physicians and other providers, advocacy organizations, and policy experts. By working together, the Coalition aims to accelerate prevention and improve the diagnosis, treatment, and long-term management of childhood asthma through targeted state and federal efforts. The Coalition also works to address barriers that prevent children from accessing the health care services they need to control and manage asthma.

THE CHILDHOOD ASTHMA LEADERSHIP COALITION'S POLICY GOALS

Collaboration and leadership on childhood asthma is especially important at this critical time in Washington when policymakers are making important decisions about the future of federal investments in our nation's public health and health coverage systems. By establishing a unified and informed voice using credible experts, the Coalition sets a clear vision for policy solutions which relies on evidence-based research to improve health outcomes for children with asthma. The Coalition's leading policy goals include:

- Ensuring the availability of stable health insurance for children with asthma;
- Creating access to asthma services for disadvantaged populations by advancing
 Medicaid policies for reimbursement of community-based asthma services (including, but not limited to, home and school-based asthma management);
- Reducing asthma disparities by "braiding across disciplines" and fostering cross-sector partnerships and collaborations between the many sectors that are important to asthma policy;
- Identifying new opportunities to improve asthma care that arise from health reform;
- Improving community health by advancing programs and policies that ensure that the places where people live, work, and learn are supportive of good health. New this





SECURING A HEALTHIER FUTURE FOR CHILDREN WITH ASTHMA

funding cycle, CALC will actively work to improve population health in Washington, DC, the community in which the coalition is based.

The Coalition strives to achieve these goals by examining the issues surrounding childhood asthma, identifying best practices, raising awareness through public education, and issuing policy recommendations.

THE BOTTOM LINE: CHILDREN WITH ASTHMA DESERVE A HEALTHIER FUTURE

Childhood asthma is a treatable and manageable disease. Coordinated federal engagement on asthma-related research and policy has the potential not only to save lives but also to spur the creation of cost-effective policies. Together we can work to ensure that the millions of children with asthma in the United States are able to grow up to become healthy and productive adults.

Resources from the Childhood Asthma Leadership Coalition are available at www.childhoodasthma.org.





SECURING A HEALTHIER FUTURE FOR CHILDREN WITH ASTHMA



¹ Centers for Disease Control and Prevention. Current Asthma Population Estimates by age (2016). 2016 National Health Interview Survey (NHIS) Data. Table 3-1. Available at: https://www.cdc.gov/asthma/nhis/2016/table3-1.htm#modalldString CDCTable 0

² Centers for Disease Control and Prevention. Figure 15.7—Sex-adjusted prevalence of current asthma among persons of all ages, by age group and race and ethnicity: United States, 2017. National Health Interview Survey (NHIS) Data. Available at: https://public.tableau.com/profile/nhis6957#!/vizhome/FIGURE15 6/Dashboard15 6

³ Akinbami, L.J., Mooreman, J.E., Bailey, C., Zahran, H., King, M., Johnson, C., & Liu, X. Centers for Disease Control and Prevention, National Center for Health Statistics. (2012). Trends in asthma prevalence, health care use, and mortality in the United States, 2001-2010. Retrieved from http://www.cdc. gov/nchs/data/databriefs/db94.pdf

⁴ Centers for Disease Control and Prevention. Current Asthma Prevalence Percents by age (2016). 2016 National Health Interview Survey (NHIS) Data. Table C1-a. Available at: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2016 SHS Table C-1.pdf

⁵ Sullivan, Patrick, et al. The national cost of asthma among school-aged children in the United States. *Annals of Allergy and Asthma Immunology*. Sept 2017; 119(3): 246-252. At: https://www.annallergy.org/article/S1081-1206(17)30542-2/pdf

⁶ Nurmagambetov, Tursynbek, Khavjou, Olga, Murphy, Louise and Diane Orentein. State-level medical and absenteeism cost of asthma in the United States. *Journal of Asthma*. 2017; 54(4). Available at: https://doi.org/10.1080/02770903.2016.1218013

⁷ Witt, Whitney P., Weiss, Audrey J., and Anne Elixhauser. Overview of Hospital Stays for Children in the United States, 2012. HCUP Statistical Brief #187. *Agency for Healthcare Research and Quality*. December 2014. Available at: https://www.hcup-us.ahrq.gov/reports/statbriefs/sb187-Hospital-Stays-Children-2012.pdf

⁸ Sullivan, Patrick W., et al. The national burden of poorly controlled asthma, school absence and parental work loss among school-aged children in the United States. *Journal of Asthma*. 2018; 55(6). Available at: https://www.tandfonline.com/doi/abs/10.1080/02770903.2017.1350972

⁹ National Health Interview Survey, 2003 and 2013. Cited by National Center for Environmental Health. Vital Signs. *Centers for Disease Control and Prevention*. Feb 2018. At: https://www.cdc.gov/vitalsigns/pdf/2018-02-vitalsigns.pdf

¹⁰ Sullivan, Patrick W., et al. The national burden of poorly controlled asthma, school absence and parental work loss among school-aged children in the United States. *Journal of Asthma*. 2018; 55(6). Available at: https://www.tandfonline.com/doi/abs/10.1080/02770903.2017.1350972

¹¹ Hoppin, P, Jacobs, M and Stillman, L. Investing in Best Practices for Asthma: A Business Case for Education and Environmental Interventions, *Asthma Regional Council of New England*, June 2010.

¹² Successes of the National Asthma Control Program, 2009-2014, Stories from "Addressing Asthma from a Public Health Perspective" Grantees. *CDC*. At: https://www.cdc.gov/asthma/pdfs/Success Stories Final 508.pdf

¹³ Zahran, Hatice S., et al. Vital Signs: Asthma in Children — United States, 2001–2016. *MMWR*. Feb 2018; 67(5): 149-155. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5812476/