

BREATHING EASIER *in*

VERMONT



SUCCESS STORIES
FROM THE VERMONT
ASTHMA PROGRAM



“Asthma requires a multimodal, multifaceted approach. It requires collaboration, vision, and implementation strategies that go across sectors, from school to community to medical systems to homes as well as to the environment and policy-making. That’s why the public health approach fits so well. We’re a small program in a small state, but we have a defined need and so our relationship with CDC is pivotal.”

JANE WOLFORTH

program manager

VERMONT ASTHMA PROGRAM

THE PROBLEMS:

- Since 2007, asthma prevalence among Vermont adults has been slightly higher than the national average.
- In 2010, Vermont had the highest rate of current asthma prevalence among adults in the United States. That year, 11 percent of Vermont adults and 10 percent of children were living with the chronic respiratory disease.
- In 2009, Vermont asthma-related emergency room visits and hospitalizations topped \$7 million.

THE PUBLIC HEALTH RESPONSE TO ASTHMA:

The Vermont Asthma Program and its partners focus on groups with the greatest needs. They increase asthma awareness, educate people on how to avoid environmental asthma triggers, partner with local stakeholders, and help residents manage their own health. And their efforts are paying off.

- In 2013, the Vermont Asthma Program began working closely with Support and Services at Home, or SASH, a local program of Vermont’s prevention and health improvement plan known as Blueprint for Health. SASH personnel are trained to provide culturally competent asthma education, link residents to specialty asthma care, and steer smokers with asthma to available cessation resources. In addition, asthma program staff provide guidance on the benefits of smoke-free housing policies.
- In 2013, the Vermont Asthma Program partnered with Idle-Free VT to help reduce motor vehicle emissions, a known asthma trigger. For example, in four rural counties, the Vermont Asthma Program supported presentations at local businesses to help employers implement formal no-idling policies for their fleets.
- Rutland County not only has high asthma prevalence rates but also high asthma-related hospital discharge rates. In response, the Vermont Asthma Program established Asthma in the Rutland Region, or AIRR, an in-home asthma education and environmental assessment program. Home-based asthma interventions often result in reduced emergency room visits and hospitalizations, especially among children. As of mid-2013, AIRR had recruited 16 families to participate in the year-long intervention. The long-term goal is to build capacity among local stakeholders so they can sustain the program on their own.
- The Vermont Asthma Program created the Asthma Learning Collaborative to engage clinical practices in improving delivery of asthma care. As of mid-2013, the effort had reached 15 practices.
- In Vermont, asthma results in millions of dollars in health care costs — costs that are largely preventable through an evidence-based, public health approach to asthma control.



All information and data provided by the Vermont Department of Health Asthma Program

CDC’s National Asthma Control Program

Vermont is one of 36 states that receives funding and technical support from the Centers for Disease Control and Prevention’s National Asthma Control Program. Since 1999, CDC has been leading public health efforts to prevent costly asthma complications, create asthma-friendly environments, and empower people living with asthma with the tools they need to better manage their own health. **Find out more at** www.cdc.gov/asthma.

