Asthma is a complicated disease, and we won’t see reductions in asthma complications until we can address both the asthma management and environmental factors that make it worse. This is where public health comes in – we offer population health approaches that can improve people’s quality of life and that you can’t get in a 15-minute visit with a doctor.

JEAN ZOTTER
director
MASSACHUSETTS ASTHMA PREVENTION AND CONTROL PROGRAM

THE PROBLEMS:

- As of 2010, more than 10 percent of Massachusetts adults and nearly 10 percent of children were living with asthma.
- About 74 percent of adults and 66 percent of children with the chronic respiratory disease were classified as having not well controlled or poorly controlled asthma.
- On an average day in Massachusetts, about 100 asthma-related emergency department visits and 26 hospitalizations occur.
- In 2010, asthma-related hospital costs in the state topped $157.7 million.
- Blacks and Hispanics are three times more likely to be hospitalized for asthma than whites.

THE PUBLIC HEALTH RESPONSE TO ASTHMA:

The Massachusetts Asthma Prevention and Control 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.

- Leveraging its CDC funding, the Massachusetts Asthma Prevention and Control Program raised an additional $2 million in grants for a cost analysis of a CDC-funded community health worker home intervention. The Reducing Ethnic/Racial Asthma Disparities in Youth study connects at-risk children and families with community health workers and provides in-home asthma education as well as low-cost tools, such as integrated pest management kits, to rid homes of asthma triggers. By spring 2013, about 200 children ages 2 through 13 had enrolled in the study. Preliminary results found a 94 percent reduction in asthma hospitalizations, 46 percent reduction in emergency room visits, and a two-day reduction in asthma symptoms.
- The Massachusetts asthma program partners with the Boston Public Health Commission to deliver an asthma home visitor training curriculum specifically for community health workers. The goal is to train community health workers who typically serve neighborhoods with high rates of asthma. Today, the curriculum is being used throughout New England.
- To help people most at risk, the Massachusetts asthma program’s Asthma Disparities Initiative builds collaborations between local asthma prevention coalitions and health care providers. The results? Broad systems changes in schools, child care, and housing in high-risk communities such as Boston and Springfield. In Springfield alone, 80 percent of children with asthma now have an asthma action plan on file with the school nurse.
- The asthma program’s efforts are cost-effective and good for health — and policymakers are taking notice. As of spring 2013, the state’s Medicaid program is piloting asthma interventions with its members.
- In Massachusetts, 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.

Massachusetts 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.