

Using Established Initiatives to Reduce Disparities in Pediatric Asthma

The mission of AHRQ is to improve the quality, safety, efficiency, and effectiveness of health care by:

- Using evidence to improve health care.
- Improving health care outcomes through research.
- Transforming research into practice.

Introduction

The Agency for Healthcare Research and Quality is committed to improving access and quality of care for children with asthma, particularly children who are members of a priority population. These include children with special health care needs, minority children, socioeconomically disadvantaged and uninsured children, and children living in rural areas.

This AHRQ initiative is designed to help reduce disparities in pediatric asthma care by using existing research findings and methods, discovering new approaches to asthma care, and identifying areas where additional research is needed.

What is AHRQ doing?

Creating a learning network among State and community asthma coalitions to reduce disparities in pediatric asthma. The network will facilitate sharing of successful strategies to improve access and quality of care for children with asthma.

With whom?

- Existing State and community coalitions that are or will be focusing on pediatric asthma and disparities. AHRQ's partners are:
 - Allies Against Asthma (funded by the Robert Wood Johnson Foundation).
 - Centers for Disease Control and Prevention.
 - National Heart, Lung, and Blood Institute.

Why?

Disparities in pediatric asthma are substantial:

- Black children are one-third as likely as white children to be using daily inhaled antiinflammatory medications to help control their asthma. Hispanic children are two-thirds as likely as white children to be using daily inhaled antiinflammatory medications.¹





- Black children are about three times as likely as white children to be hospitalized for asthma—approximately 56 black children versus 16 white children per 10,000 children aged 0-17 in 2001.²
- Poor care for children with asthma results in a substantial burden to families. Focused programs can make an important difference.

How are AHRQ resources being used?

To form a learning partnership. The partnership will have one face-to-face meeting and quarterly Web-based meetings or conference calls. A Web site will be developed to facilitate interaction among partnership members and others working on similar goals. The partnership will:

- Develop and implement action strategies for reducing disparities in pediatric asthma.
- Promote sharing through group and peer-to-peer consulting.
- Document promising practices among leading States to share with other States.

How will we know success?

- A measurable reduction in disparities will be seen. Measures will be chosen by the learning partners based on specific strategies adopted by each State.

- Among learning partners (and broader audiences), there will be a rising level of:
 - Reported use of evidence in developing action strategies/interventions.
 - Awareness of promising practices and lessons learned among peers and researchers.
- New initiatives will emerge from knowledge exchange in the community.

Synergies with AHRQ programs

- AHRQ's multifaceted research portfolio on children and asthma is integrated across agency programs.
- Asthma workbook for States (derived from AHRQ's National Healthcare Quality and Disparities Reports).
- AHRQ Care Management Strategy.

When will we reassess?

Evaluation will take place every 6 months to permit mid-course corrections; formal evaluation will occur at the end of the project.

¹ Source: Lieu TA, Lozano P, Finkelstein JA, et al. *Pediatrics* 2002 May;190(5):857-865.

² Source: *National Healthcare Disparities Report*, 2004.



www.ahrq.gov

AHRQ Pub No. 05-P024-2
August 2005