What takes your breath away?
For children like Ryan Williams, it’s ASTHMA.

30,000 children in Milwaukee County suffer from asthma, a chronic and sometimes severe lung condition that adversely affects their quality of life.

$10 million is the annual estimated cost for Milwaukee children with asthma in medical expenses, lost work and missed days at school (Asthma and Allergy Foundation of America).

$10 million, a breath-taking sum, but only a small part of the picture. For the 30,000 children and their families in Milwaukee County, this life-changing and sometimes life-threatening condition disrupts their lives with emergency department visits, hospital stays, missed school and work days and limited physical activity. During the worst episodes, children suffering with asthma literally fight for each breath.

Today, asthma is the most common chronic childhood disease in the United States. It is the number one cause of pediatric emergency visits and preventable hospitalizations; a leading cause of school absenteeism; and the leading work-related lung disease – and the prevalence of asthma is on the rise.

Ten years ago, Fight Asthma Milwaukee (FAM) Allies was created to control asthma among Milwaukee’s children. Working under the leadership of the Children’s Hospital and Health System, FAM Allies now provides an integrated system of family, community and clinical education. In addition, care coordination and case management is provided through a coalition of specialized agencies and dedicated individuals. As a result, FAM Allies is responsible for beneficial community activities that have resulted in a better quality of life for the most needy of children with asthma and their families in Milwaukee.

But, we have a long way to go. Every year, more cases of asthma are diagnosed. Every year, more children need asthma care plans. Every year, we reach more families and every year there are more families to reach.

With your help as a volunteer or donor, FAM Allies can continue to help children in Milwaukee with asthma breathe a little easier. Thanks for your support.

Sincerely,

John Meurer, MD, MBA,
FAM Allies Coalition Director and Associate Professor of Pediatrics, Center for the Advancement of Urban Children, Medical College of Wisconsin, Milwaukee WI

“When Ryan was three he was diagnosed with asthma. The attack came on suddenly. He couldn’t breathe! Then he got scared and started to cry which made it worse. The hardest thing to do is be understanding and reassuring, even when you’re scared, too.”

Lakesha Wilson – Ryan’s mom
It’s All About the Children

Fight Asthma Milwaukee (FAM) Allies exists to help the thousands of children in Milwaukee who are burdened with asthma. As a coalition of healthcare professionals, community representatives, government officials and family members, FAM Allies’ goal is to support healthy lifestyles for children with asthma and their families through communication, education and development of strong partnerships.

By linking children with asthma, their families, other caregivers and health care providers to needed resources and services, FAM Allies provides tools to help children with asthma and their families achieve a better quality of life. Through these efforts, Milwaukee has obtained one of the lowest asthma hospitalization rates found in large urban cities.

FAM Allies’ Target Population and Geographic Focus

30,000 children with asthma reside in Milwaukee County

70% of those hospitalized live in the central city target area
84% are African American or Latino
66% are insured by Medicaid, BadgerCare or have no insurance

FAM Allies’ Goals

• Improve the quality of life for children with asthma and their families and caregivers who live in Milwaukee
• Reduce asthma emergency department visit and hospitalization rates thereby reducing the overall cost of healthcare for Wisconsin Medicaid, businesses and consumers
• Reduce missed childcare and school days by children with asthma
• Develop a sustainable strategy for asthma management in Milwaukee

We envision an excellent quality of life for all children with asthma and their families and strive to obtain the lowest asthma hospitalization rate in the Midwest.
Asthma is a chronic inflammatory lung disease, that, left untreated and uncontrolled, can become fatal. Cough is the most common asthma symptom, especially occurring during the night or after exercise.

Some children with asthma may experience wheezing, shortness of breath and/or chest tightness. Symptoms may occur suddenly and may be brought on by triggers such as allergens, irritants, exercise or weather changes. During severe attacks, children literally gasp and fight to move each breath in and out of their lungs.

Children with asthma have very sensitive airways. During an attack, the linings of the airway become swollen. The secretion of thick mucus combined with the tightening of the airway muscles narrows and obstructs the air passage. This inflammation increases repeat flare-ups.

There is no cure for asthma but asthma can be controlled! Through education and aggressive treatment plans, FAM Allies helps families living with asthma achieve and maintain a better quality of life.

**It’s All About Asthma Control**

The best way to control persistent asthma is through trigger avoidance, daily anti-inflammatory medication and frequent monitoring. A peak flow meter measures how well air can move out of the lungs. This tool, combined with a written asthma action plan, allows parents and caregivers to proactively prevent and manage asthma attacks.

Children who have persistent asthma must be treated daily with long-term controller medicines like inhaled corticosteroids, which reduce the airway inflammation. For acute episodes, a quick-relief, short-acting bronchodilator like albuterol reverses the airway narrowing.

Trigger identification is key. Since triggers are unique to each child, individualized assessment and care are essential. Once triggers are identified, every effort needs to be made to reduce

**Common asthma triggers:**
- Common colds, influenza and other respiratory infections
- Cigarette or cigar smoke
- Air pollution and ozone
- Dust mites and cockroaches
- Animals with fur (like cats)
- Molds and pollen
- Exercise
- Changes in weather or temperature

Displays demonstrate healthy lung function.
exposure, which can minimize the frequency of asthma exacerbations and may enable the child to be prescribed a lower dose of daily controller medication.

FAM Allies works with children and their families to obtain and to effectively use every means to control asthma. This includes asthma and allergy medications, spacers for inhalers, nebulizers and peak flow meters. FAM Allies also helps families minimize indoor allergens and encourages smoke-free homes.

**Quality of Life for 110 Children with Asthma Surveyed in Milwaukee Public Schools**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very bothered by asthma during activities</td>
<td>33%</td>
</tr>
<tr>
<td>Felt tired during all or most of week</td>
<td>32%</td>
</tr>
<tr>
<td>Felt frustrated, unable to keep up with others</td>
<td>24%</td>
</tr>
<tr>
<td>Felt helpless or frightened when coughing, wheezing or breathless</td>
<td>19%</td>
</tr>
</tbody>
</table>


**Use of Controller Medications Among Medicaid Children with Persistent Asthma**

**Explanation:** Wisconsin Medicaid children age 5-17 years from 10 selected counties including Milwaukee had an overall appropriate asthma medication use rate based on modified HEDIS criteria in the top 10th percentile for US children in Medicaid health plans reporting to NCQA in 2002.

<table>
<thead>
<tr>
<th>Year</th>
<th>United States</th>
<th>Wisconsin</th>
<th>Milwaukee</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>69.7%</td>
<td>70.7%</td>
<td>74.1%</td>
</tr>
<tr>
<td>2001</td>
<td>74.0%</td>
<td>74.1%</td>
<td>77.4%</td>
</tr>
<tr>
<td>2002</td>
<td>77.4%</td>
<td>77.6%</td>
<td>77.6%</td>
</tr>
</tbody>
</table>


Ryan, who is now 12, was diagnosed with asthma in 1995 at the age of three. His symptoms came on suddenly one afternoon. Ryan was gasping for breath when the ambulance transported him to the hospital. At first, Lakesha, Ryan’s mom, didn’t know what caused Ryan’s attacks.

After working with his doctors, they determined that allergies were his predominant triggers. Because Ryan has severe allergies, FAM Allies’ educators worked with the family to create an aggressive management plan including environmental controls. A FAM Allies’ nurse conducted home visits to help identify and minimize Ryan’s exposure to triggers.

“I didn’t know about all the triggers that can set off asthma. Ryan has extreme allergies to food, everything outdoors and bugs, including dust mites, which live in beds and pillows.”

Lakesha Wilson

“FAM Allies helped with many little things that keep Ryan healthy. We loved the visits. They taught Ryan what to do when he feels an attack coming on. If the peak flow meter is low, we call the doctor to increase his medication. Ryan monitors the peak flow meter by himself so we catch his asthma before it becomes a really bad attack. Now I know when to call the doctor and when to head for the hospital.”

Lakesha Wilson – Ryan’s mom
“I would highly encourage any family dealing with asthma to participate with FAM Allies. You learn about the disease and learn how to be a better parent for your child. Our pediatrician was not familiar with FAM Allies. When I told her about FAM Allies, she was thrilled. I’m sure it will be a resource she uses with other families of asthmatic children.”

— Parent of Child with Asthma

FAM Allies envisions a community asthma network of education, clinical services, care coordination, case management, community support and parent mentoring to optimize asthma self-management for children. In an effort to reduce racial, ethnic and socioeconomic disparities in asthma outcomes, FAM Allies has implemented several strategies to significantly improve the quality of life and health care, especially for high-risk children.

**Family and Community Education**

FAM Allies initiated a parent and neighborhood planning process to involve the grassroots community in decision-making and the development of new community activities. Since grassroots involvement is essential to FAM Allies’ success, African American and Latino parents and teens participated in focus groups to share their ideas, priorities and recommendations for desired activities.

Using their suggestions, FAM Allies created and implemented various educational programs and training sessions to help many audiences within our community better understand and manage asthma.

FAM Allies uses a variety of educational tools to teach asthma care and management.
The following FAM Allies’ education programs were offered in 2003:

FAM’s education and advocacy programs included specific education, training, environmental assessment, a support group and presentation programs at the following events.

For Families
Asthma Wellness Day, an asthma-focused health fair held three times (one bilingual English/Spanish) for 390 people in 2003

For Children
Awesome Asthma School Day, a four-hour learning session presented to 121 students grades four to six
Footsteps to Fitness, exercise and nutrition classes presented as a two-month class for 14 students ages 10-13
Asthma Survival Skills for Teens, interactive instruction in four high school classes for 113 teens

For Schools
Asthma Basics for Schools, a one-hour, in-service program presented to 155 school staff
Exercise and Asthma, an American Lung Association of Wisconsin curriculum presented to 253 physical education teachers and coaches

For Childcare Providers
Asthma Care at Child Care, a three-hour, in-service program presented four times for 88 childcare providers
Counting on You...Responding to Kids with Asthma, an American Lung Association of Wisconsin curriculum presented 12 times for 174 providers

For Community Members
Breathe with Ease – Asthma Toolkit for Parishes is a booklet providing general asthma education as well as sample activities tailored to a church setting, including environmental checklists, prayers and bulletin announcements

“...this independent parish nurse deeply appreciates the workshop. I have asthma and so does my daughter and I thought I knew most everything I needed to know. Not only did I learn how to assess my congregation better, but also I have better ways to plan for my day-to-day management. Bravo!”

– Parish Nurse after a FAM Allies program
Care Coordination and Case Management

In an effort to create a community asthma network, FAM Allies undertook the development of standardized protocols used to assess the needs of children with asthma in their homes. These protocols help nurse case managers assess home environmental risks, develop family-centered care plans, provide information and technical assistance and coordinate referrals.

FAM Allies’ collaborative team of emergency department and clinic nurses identifies and invites the families of high-risk children to participate in FAM Allies’ home-based programs. Case managers then follow-up with children and families monthly for 6-12 months.

These randomized controlled studies are conducted to demonstrate the effectiveness of home-based asthma nurse case management and to recruit families from Children’s Hospital of Wisconsin, the Downtown Health Center and Children’s Medical Group. A network of nurses and a social worker at Covenant Home Health, Aurora Visiting Nurses Association, Medical College of Wisconsin, Gentiva Health Care and Milwaukee Health Department provide the coordinated follow-up services. More than 270 children and their families have enrolled in one of following programs designed for families dealing with asthma.

Emergency Department (ED) Allies

ED Allies is an asthma tracking system and intervention study of primary care follow-up and home-based nurse case management.

Healthy Homes Demonstration Project

A FAM Allies team conducts assessments and provides environmental interventions in the homes of low-income children affected by asthma. While providing home visits, case managers educate, guide and monitor asthma self-management by children and their caregivers.

Physicians also create asthma medication action plans for caregivers based on the child’s symptoms and, in some cases, peak expiratory flow measures. Through appropriate medication therapy and trigger control, families minimize the frequency and severity of asthma attacks.
Clinical Quality Improvement

FAM Allies’ Clinical Quality Improvement programs promote the adoption of asthma practice guidelines via interactive seminars. Each program is specifically designed to meet the needs of physicians, nurses and other healthcare providers who diagnose and treat children with asthma in Milwaukee. The aims of FAM Allies’ efforts are consistent with the National Asthma Education and Prevention Program (www.nhlbi.nih.gov). FAM Allies developed a toolkit of educational materials in English and Spanish to help clinicians guide asthma self-management by their patients.

Physician Asthma Care Education (PACE) Seminars
PACE seminars provide a semiannual interactive forum for primary-care physicians and nurse practitioners serving children with asthma. The seminar enables clinicians to provide family asthma education over the course of several visits and to make recommendations based on the patient’s level of asthma severity and control.

Teach Asthma Management (TAM) Workshops
TAM workshops are semiannual training sessions for nurses, office managers, outreach workers and others who teach families how to manage asthma.

Allergist Outreach Asthma Education Program
Outreach Asthma Education is a program presented with the expertise of an allergist and a nurse who provide a team approach to case-based asthma education for primary-care practices.

Pharmacist Asthma Management Seminars
Asthma Management is a program designed to enhance the knowledge of pharmacists in the area of asthma care counseling and medication use.

Chase McGee
2-1/2 Years Old

Chase suffers from moderate persistent asthma. Chase was in the hospital four or five times for what appeared to be severe respiratory infections. Eventually, Chase’s episodes of labored and rapid breathing, lethargy and vomiting were diagnosed as asthma.

During one emergency room visit, an ED Allies research nurse contacted the McGee family. After filling out a survey, they enrolled in FAM Allies’ case management program.

“The nurse comes about every two months and is very patient. They walked us through the experience step by step. Our nurse started by telling us about asthma. She actually brought along a model of the lungs and described the difference between how a healthy lung works and how an asthmatic lung works. I learned a lot about treatment and how to keep triggers under control.

“They provided us with a treatment plan. The plan is posted on the refrigerator. Our plan is like a traffic light for asthma, with red, yellow and green areas that correspond to the symptoms of Chase’s asthma attacks. We can tell at a glance where he is with his asthma at any point in the day.”

Angela McGee, Chase’s mom

1992-2002 Hospital Discharge Data for Pediatric Asthma

According to data available from the Wisconsin Bureau of Health Information, 1,405 of children under age 18 years insured by Medicaid or commercial insurance residing in Milwaukee County were hospitalized with the principal discharge diagnosis asthma (ICD-493) in 1992 compared with 628 children in 2002, representing a 55% decrease over 11 years. Milwaukee children whose hospitalizations were either self-paid or covered by other government programs represented 2.0% and 0.8% of asthma discharges in 1992 and 2002, respectively. In 1992, the total pediatric asthma inpatient hospital charges (excluding physician fees) submitted to Medicaid and commercial insurers were $7.98 million (adjusted for inflation to 2002 dollars), with 70.0% paid by Medicaid and 30.0% paid by private insurers. In 2002, the childhood asthma hospital charges submitted to these payers were $2.96 million with 56.0% paid by Medicaid and 44.0% paid by private insurers. Thus total inflation-adjusted hospital charges to Medicaid and commercial insurers for Milwaukee children with asthma decreased 62.9% over the 11-year period.
Between 2000 and 2002, FAM Allies successfully contributed to reduced asthma hospitalization rates for children in Milwaukee County by 40%. This is a good start, but there is more to do.

Despite advances in medicine, the prevalence of childhood asthma cases in the US has doubled since the 1980s. With this trend in mind, FAM Allies has defined its goals for the future:

**Community Involvement**
Firmly establish parent and neighborhood support groups in high risk areas, encourage caregiver and grassroots community involvement, increase representation of African American and Latino cultures, build additional leadership and capacity, coordinate diversity programs and encourage long-term investment in the coalition.

**Education and Case Management**
Integrate and coordinate numerous coalition activities in family and community education, clinical quality improvement, care coordination, case management and public communications.

**Evaluation**
Continue surveillance and evaluation of outcomes of FAM Allies’ activities such as reductions in asthma emergency visits, relief of asthma symptoms, marked improvement of quality of life and caregiver support. With the other Allies Against Asthma program sites, we aim to demonstrate the effectiveness of community coalition activities to control childhood asthma.

We have proven that continued program implementation and evaluation will reduce the adverse impact of asthma among children. Collaboration represents the best model of healthcare delivery. Pooling the talents of health care professionals, government officials, community representatives, and families creates a coalition structure that values teamwork, diversity and inclusiveness.

Through the generous support from the The Robert Wood Johnson Foundation, FAM Allies has grown to become a powerful community coalition with numerous programs to control asthma.

We need your support to help children who have the highest emergency department visit rates, the poorest quality of life, and live in households with high levels of environmental triggers. For the children’s sake, the FAM Allies coalition needs to increase its partner and caregiver membership in order to sustain and expand the most effective activities. We can’t accomplish this alone.

FAM Allies needs your support. Every child should be able to go to school healthy, run without wheezing and sleep through the night without coughing. We have made tremendous progress implementing programs that have produced measurable differences in the lives of families served. Now we need your help to keep the programs going, to reach more families and to reach more providers.

Together we can help the children in Milwaukee County breathe a little easier.

**Why FAM Allies Needs Your Support**

“I would recommend FAM Allies to anyone. I wouldn’t even think twice... FAM Allies are great! They really care about their job.”

– Parent of Child with Asthma
The History of FAM Allies

Fight Asthma Milwaukee (FAM) started in 1994 as the only community-based asthma coalition in Wisconsin. Armed with the powerful idea that family and community education were needed outside clinical settings, FAM’s goal was to improve the quality of life for children suffering from asthma by focusing services in the central city of Milwaukee.

1994

FAM created under the leadership of the American Lung Association of Wisconsin with a focus on family and community asthma education.

1996

With support from the U.S. Environmental Protection Agency and the 16th St. Community Health Center, FAM expanded activities to include outreach to families, information and referral.

1998

Aurora Health Care’s Sinai Samaritan Medical Center became the new fiscal agent for FAM and led Asthma Wellness Days with celebrity support.

1999

Children’s Hospital and Health System became the lead agency of FAM. Through 2002, growing coalition efforts reduced overall pediatric asthma hospitalizations in Milwaukee County by 40%.

2001

FAM was one of seven coalitions awarded a community planning grant from The Robert Wood Johnson Foundation (RWJF), the largest philanthropy devoted exclusively to health and health care in the US. The Centers for Disease Control and Prevention also established a cooperative agreement with the State of Wisconsin Department of Health and Family Services to plan and build asthma control capacity including support of FAM Allies’ surveillance.

2002

FAM Allies received a three-year coalition implementation grant from RWJF. The Foundation also awarded a three-year Managing Pediatric Asthma grant for the Emergency Department Allies Demonstration Program.

2003

The US Housing and Urban Development awarded a two-year grant to the Milwaukee Health Department for a Healthy Homes Demonstration Project for nursing and environmental interventions in homes of low-income children with asthma.

2004

DECEMBER – The Robert Wood Johnson Foundation grant ends.

Today FAM Allies consists of 70 agencies and more than 173 active members working together to control childhood asthma in Milwaukee.
For more information about becoming a FAM Allies member or to make a financial donation, contact Coalition Coordinator Cathy Brummer at 414-456-4948. For more information about FAM Allies’ programs and resources, contact Family and Community Education Coordinator Erin Lee at 414-390-2179.

For more information about asthma management, see:

- Fight Asthma Milwaukee Allies .......... www.famallies.org
- Allies Against Asthma Program .......... www.asthma.umich.edu
- Burden of Asthma in Wisconsin Report ........................................ www.chawisconsin.org
- American Academy of Allergy, Asthma & Immunology ............ www.aaaai.org
- American Lung Association ................. www.lungusa.org
- Centers for Disease Control and Prevention ................................ www.cdc.gov/asthma
- National Asthma Education and Prevention Program ............. www.nhlbi.nih.gov/about/naepp

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