Title of Intervention: Asthma Education in Rural Communities

Intervention Strategies: Individual Education

Purpose of the Intervention: To improve parental knowledge of asthma symptoms and treatments

Population: Parents of children with asthma in Talbot County, MD

Setting: Homes in rural Talbot County, MD; home-based

Partners: None mentioned

Intervention Description:
- Individual Education: The 12-page packet contained information on the following topics: early warning signs of asthma, asthma triggers, asthma at night, allergies, asthma action plans, medication review, severity of asthma, metered dose inhalers, spacers and cigarette smoke. The reading level of the packet was at the ninth grade.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Not mentioned
- Training: Not mentioned
- Technology: Telephones for interviews
- Space: Homes
- Budget: Not mentioned
- Intervention: Educational information
- Evaluation: Questionnaires, researchers

Evaluation:
- Design: Quasi-experimental, Pre- and Post-test
- Methods and Measures:
  - The Pediatric Asthma Caregivers Quality of Life Questionnaire assessed parents’ quality of life and coping skills.
  - The Asthma Knowledge Questionnaire assessed parental knowledge of asthma.

Outcomes:
- Short Term Impact: Pre- and post-test scores showed improvements in three areas of knowledge: long-term asthma medications, controlling roaches in the home and daily peak flow monitoring.
- Long Term Impact: There was a significant improvement between pre- and post-test results from the activity domain of quality of life. Eighty-five percent of the parents reported that they had either started making changes in their home, or planned to in the future, from reading the educational materials.

Maintenance: Not mentioned

Lessons Learned: Educational interventions can change parents' and caregivers' knowledge of asthma to improve quality of life for their children and themselves. The overwhelmingly positive response of the parents to the intervention is a good sign that parents in rural areas are receptive to asthma education.

Citation(s):