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HEALTH BEAT: CONTROLLING CHILDHOOD ASTHMA

Englewood's children can breathe a little easier

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They are small victories.

An 8-year-old girl keeps a promise and calls Brandi Godbolt, a caseworker for the Addressing Asthma in Englewood project, with her peak-flow numbers, a measure of breathing ability.

A boy attends a meeting about asthma and realizes he needs an inhaler. He tells his family, they talk to project manager Rev. Gay Chisum, and she is able to get him one.

"He said it made him feel safer," Chisum says. "It really makes you feel good that you can help someone."

For nearly two years, the AAE project, developed in partnership between the Respiratory Health Association of Metropolitan Chicago and the University of Illinois at Chicago School of Public Health, has been working in Englewood and West Englewood, two of Chicago's poorest neighborhoods. A total of 117 families and about 180 kids are now enrolled in the four-year project, which is being funded by a \$2 million grant from the Merck Childhood Asthma Network foundation. "Our overall goals are quite defined," explains Maureen Damitz, the RHA's director of community education and the project director. "Our main one is to reduce the pediatric asthma hospitalization rate and to improve the quality of care children with asthma in Englewood are receiving. And I think a broader goal is to increase community awareness and knowledge about asthma."

The pediatric hospitalization rate in the two neighborhoods is about 62 per 10,000, more than double the national rate. At times, though, asthma seems way down the list of the community's problems. Crime, poverty, environmental concerns and other health issues -- the highest infant mortality rate in Illinois, for example -- take precedence.

One priority among others

Damitz tells of talking to a father of a boy with asthma, whose walk to school takes him through some gang-infested areas. And that, not whether he remembers to carry his inhaler, is the major issue in his life.

"He knows his son has asthma, he wants his son to take care of his asthma," Damitz says. "That's a priority in this man's mind. But his priority right now is, 'How do I get my son from my home to school and back home every day safe and alive?'"

"I can help him with the asthma, but I also have to help him with the bigger issue. And that's what we found with many of our families," Damitz says. "They care about their children greatly, they want them to be in great health, but one of the things they're struggling with is, 'How do I make good health a priority when there's so much else going on in my life?'"

Other parents aren't as aware of what asthma is and how it can be treated.

"We hear it all the time," Godbolt says. "'My kid gets bronchitis four times a year.' That's not bronchitis. That's asthma."

The project provides handouts, brochures and a medication chart on which kids and families can place stickers to remind them what medication to take and when. The daily challenges in Englewood extend to those running the project. Families relocate with frequency. Their cell phone service is often discontinued because the little money they have has to go to other necessities. Many times, the best way to reach a family is to go to the home.

"We were aware this was a highly challenged community by a number of stresses," says Dr. Victoria Persky of the University of Illinois at Chicago, one of the project's co-principal investigators. "I think the level of it has been a bit of a surprise to me. This is a community facing a lot. We've become more and more committed to help them on multiple fronts."

Spreading the word

That means holding classes and community meetings, finding resources to help people economically, appearing at health fairs, schools and retirement homes and making home visits. A radio and billboard marketing campaign is set for this month. And the AAE project has reached out to health-care professionals.

"There are a number of medical providers in the area who haven't been in contact with each other, who may not have had current asthma education or as much knowledge as one may need," says Rhonda Williams, the project's other co-principal investigator. "We're working with over 50 medical providers, some of them are in very small clinics, and they now have access to resources through this collaboration..."

Already the project is marking successes that should have legs. A social service directory has been updated and is being distributed throughout the community. And Kennedy-King College professor Julienne Thomas is sending 30 of her biology honors students to a training session so they will be able to work in the community.

And those running the project have made such a deep commitment, it's hard to see how their impact wouldn't continue to be felt.

"The staff truly believes we can change this community," Damitz says. "It may be one child at a time, or

maybe one family at a time. But we will leave our mark."

Adds Chisum, "They'll remember the asthma ladies."

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Stress exacerbates asthma's triggers

Those running the Addressing Asthma in Englewood project were well aware of the triggers that cause asthma attacks.

Someone smoking in the home, roach droppings, poor air quality, mold and environmental factors are all triggers, and so is stress.

But they were surprised when they saw figures from the Chicago Department of Public Health that laid out just how much stress children in Englewood face:

- * 77 percent of the community's children have heard gunshots.
- * 23 percent have witnessed a knife attack.
- * 41 percent have seen domestic violence among partners.
- * 72 percent have been hit by caretakers.

"It becomes a trigger in that stress in itself plays into any chronic illness," says project director Maureen Damitz. "Any time we have stress in our lives, our health suffers. We know that. This is no different. When we have extreme stress, our asthma suffers.

"The other thing it does, [stress] kind of makes you forget other things you need to do to keep your asthma in control. Like an example would be, when my husband's father died suddenly, I don't know if making sure my kids took their daily meds was the first thing on my mind. My thought was, 'How are we going to get through this time?' So without meaning to, other things sometimes have to take priorities in their lives."

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