



EFA

European Federation of Allergy and Airways
Diseases Patients' Associations



HEY YA!

HEalth Literacy, **Y**oung Patients with **A**sthma and **A**dherence to
Treatment

EFA Asthma Adolescent Project: Key results and Recommendations

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Key results and Recommendations

Background

- Non-adherence to medical asthma treatment is highly prevalent among young patients
 ➡ Barrier for positive health outcome and unnecessary high costs,
- So far research on adherence in asthma focused on the views of parents and physicians

EFA decided to ask the adolescents directly to explore underlying mechanisms.

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Key results and Recommendations

Research Objectives

Patient's perspective:

the survey provides the missing link to the understanding of poor adherence to asthma therapy: the [view of adolescent patients](#).

During fieldwork measures were taken to guarantee that the interview is definitely held with an adolescent patient aged 12-17 years.

Strategy support:

The results can [support the development of recommendations](#) to strengthen the adherence of adolescent asthma patients (12-17 years) and contributes to EU Polish and Cyprus Presidencies conclusions and GINA guidelines.

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Key results and Recommendations

Development of the questionnaire

- Following a [systematic literature review](#), interviews with asthma adolescents evoked [five themes](#):
 - Daily impact of asthma,
 - Health literacy,
 - Asthma confrontation,
 - Attitude,
 - Social Influence.
- The questionnaire was developed on behalf of EFA by Anam Ahmad, as part of her master thesis at the Maastricht University, NL

Key results and Recommendations

Scope

Germany, France, Spain, UK

Recruitment and Interview

- Step A (Recruitment only via physicians)
- Step B (Telephone interviews 15-20 min without open ended questions with asthma patients aged 12-17 years)

Target group and sample size

N=50 adolescent asthma patients aged 12-17 years per country
N=200 interviews over all countries

Screening Criteria

Asthma patient; 12-17 years; asthma severity known

Fieldwork period

July - October 2015

Survey Methodology

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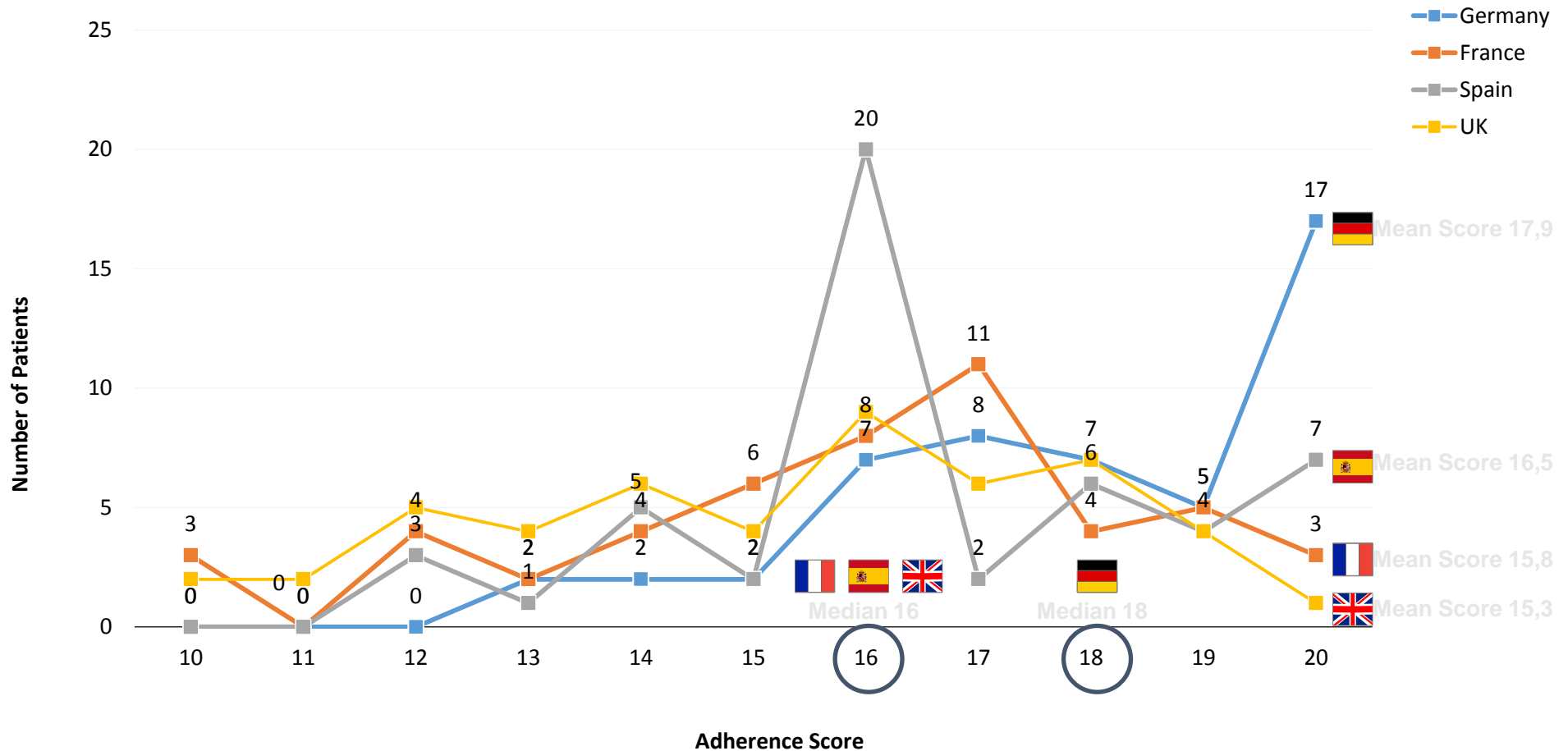
Key results and Recommendations

	Germany	France	Spain	UK
Gender:				
Male	48%	68%	60%	70%
Female	52%	32%	40%	30%
Area:				
Rural/ Village/small city	20%	52%	46%	36%
Big city/suburb/ inner city	80%	48%	54%	64%
Age:				
Average	14,5 years	13,8 years	14,0 years	14,7 years

Demographic
characteristics of
participants

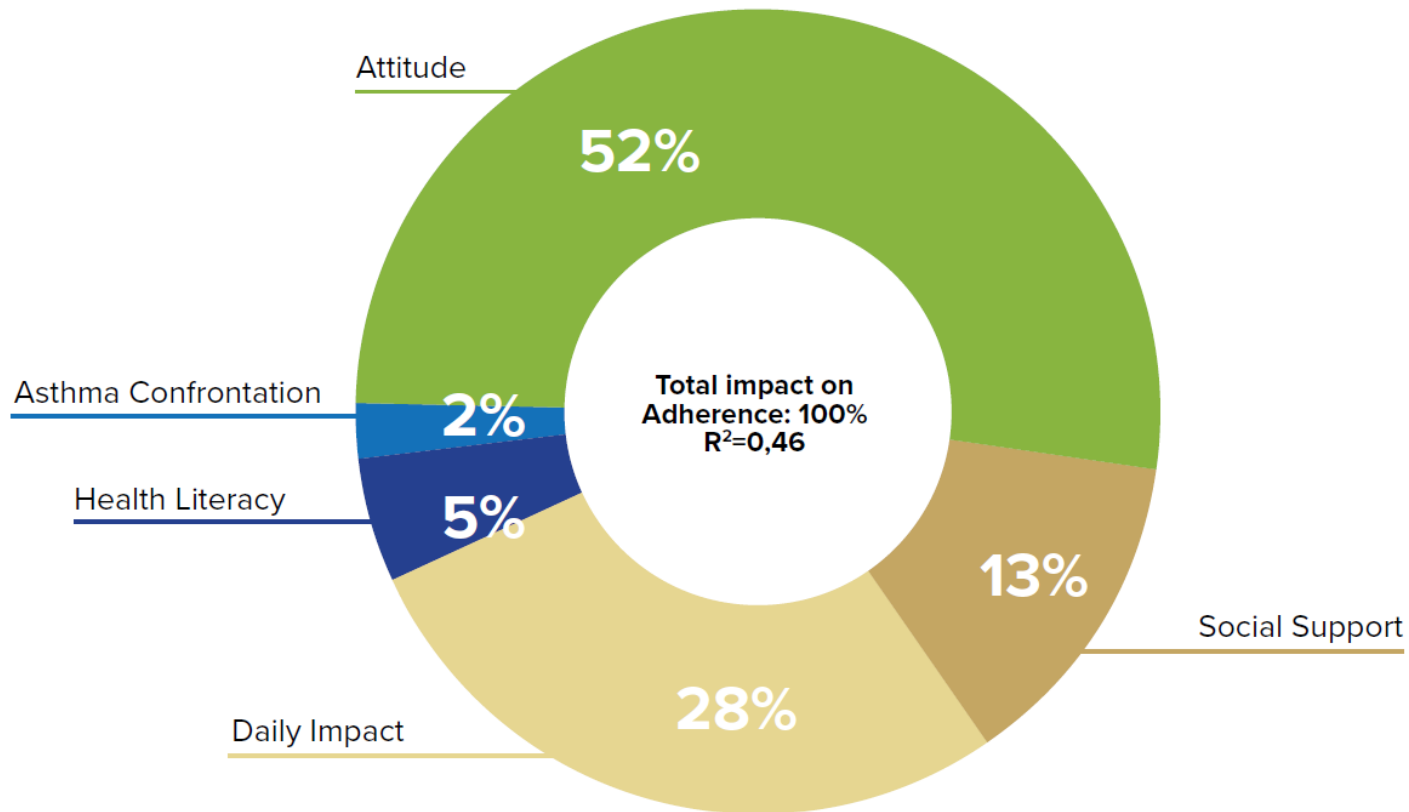
Adherence Score per country

Every third German respondent achieves the maximal Score



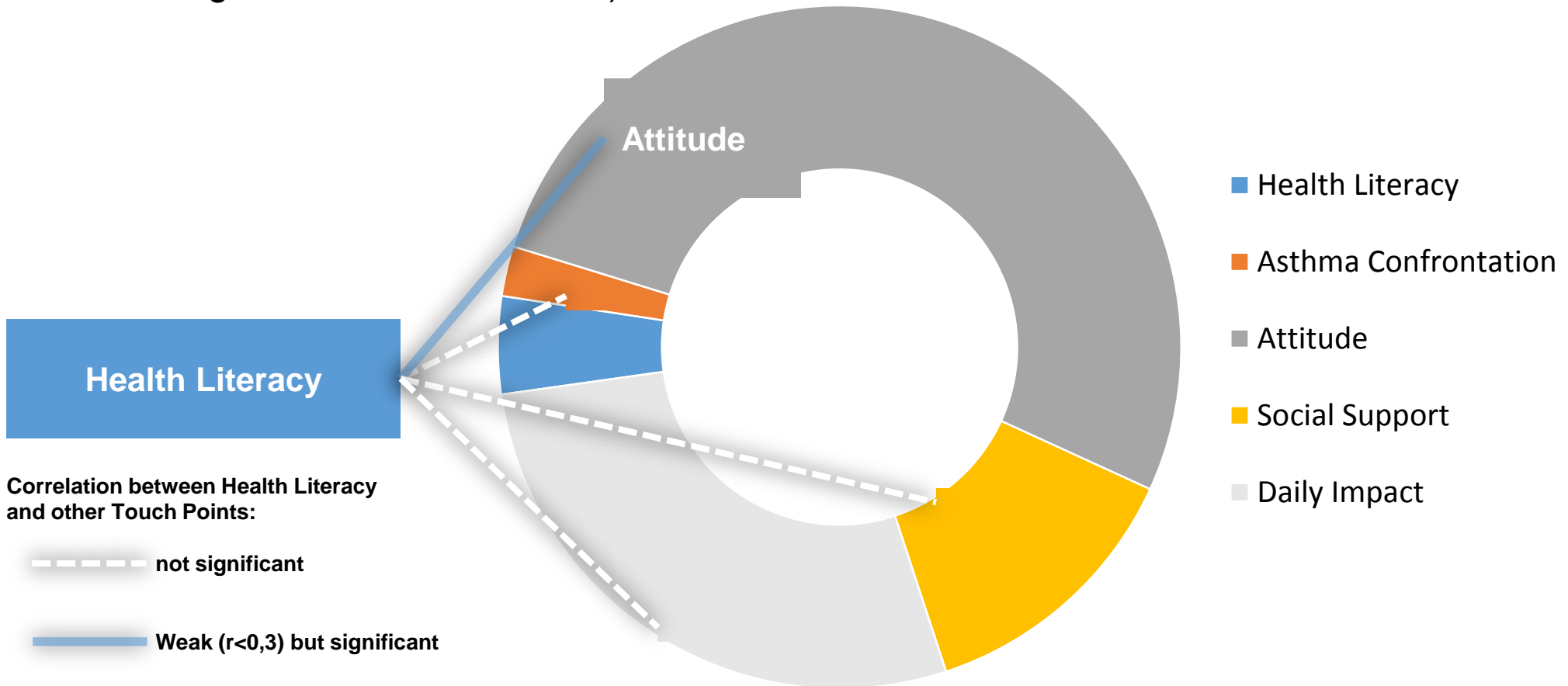
Touch Points for Adherence

Attitude and perceived daily impact of asthma influence the most adherence



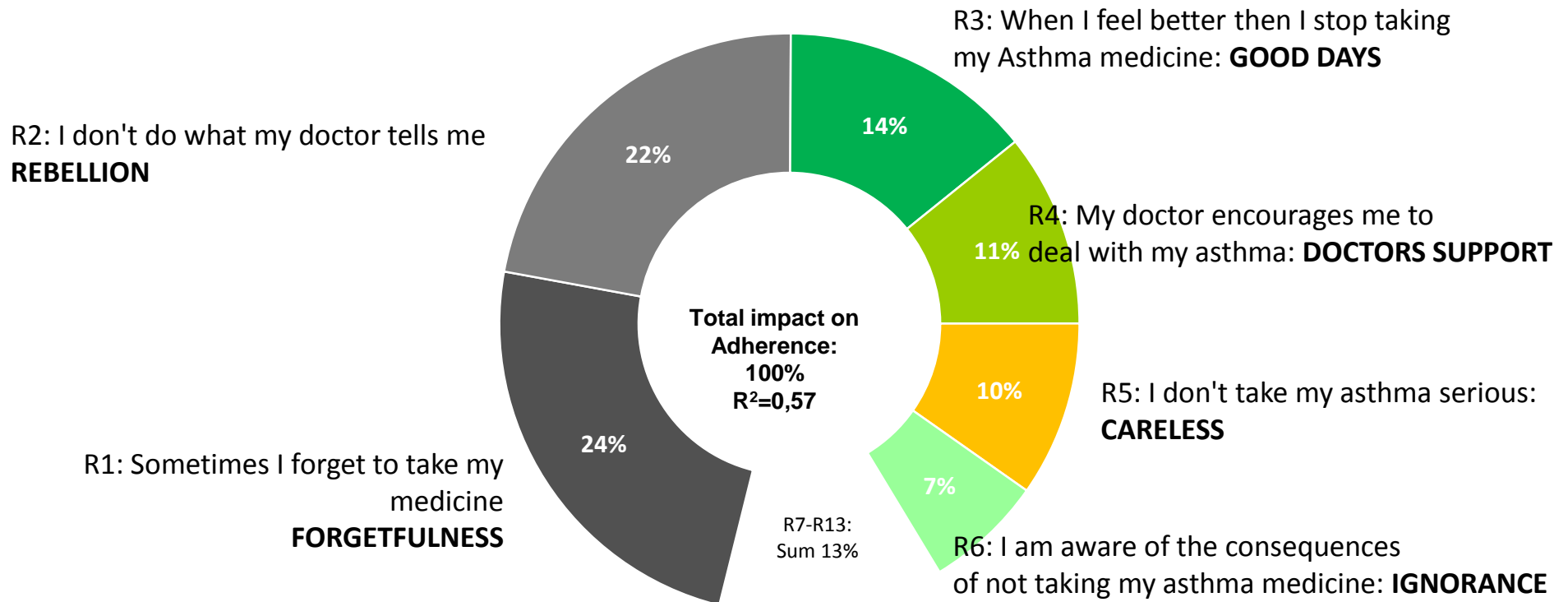
Correlation between Health Literacy and the other Touch Points

Health Literacy showed a weak, but significant correlation with Attitude (which is the strongest driver of adherence).



Driver Analysis: Item Evaluation

Communication based on these six leading items covers together almost 90% of Adherence (Adherence, which is explained by this model).





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Patients Associations

**I trust
my
doctor**

**I don't do
what my
doctor tells
me about
my asthma**

HEY YA! Report HEalth Literacy, Young Patients with Asthma and Adherence to treatment

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Key results and Recommendations

Recommendations to support adherence of young asthmatics

Scope Six key impactful factors identified

1. Forgetfulness
2. Rebellion
3. Good days
4. Support
5. Carelessness
6. Ignorance

Target Adolescents, healthcare professionals, parents

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Key results and Recommendations

European Health Policy Recommendations to drive Adherence

Purpose

- Recommendations and actions should be integrated into
 - EU initiatives and policies on chronic diseases
 - EU Member States health coordination and sustainability plans

Target

- EU, national and local policy makers

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Key results and Recommendations

European Health Policy Recommendations to drive Adherence

- Promoting ***multidisciplinary care coordination*** to better support adolescent patients and to identify those at risk
- Developing ***Health Information Technologies (ICTs)*** specifically addressed to young patients to stimulate self-management, medication tracking and immediate healthcare feedback
- ***Empowering young patients*** through shared decision-making and tailored health literacy materials to enable adolescents to take responsibility about their own health and asthma medication
- ***Conducting additional research*** to picture the long-term consequences associated with poor adherence in adolescence and to curve down asthma.

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Key results and Recommendations

Case study: myAirCoach project



- Funded by Horizon 2020, it aims at developing mHealth solution for the self-management of asthma
- A smart sensor-based inhaler will monitor and store physiological, behavioural and environmental factors
- The smart inhaler will be connected to the patients smartphone to provide patients the possibility to customize their treatment against preset goals and guidelines and in consultation with HCPs
- A virtual community will allow interaction between HCPs, patients, carers, families
- Thanks to immediate feedback, alarms, educational component, interaction with others, myAirCoach will be extremely helpful in modifying adolescents' attitude towards adherence



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