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Interview with Tyra Bryant-Stephens

In this interview, EPA's Indoor Environments Division Communication Specialist Kelly Hunt talks with Dr. Tyra Bryant-Stephens from the Children's Hospital of Philadelphia's Community Asthma Prevention Program.

KH = Kelly Hunt (EPA, Communications Specialist)

TBS = Tyra Bryant-Stephens (MD, Director, Children's Hospital of Philadelphia's Community Asthma Prevention Program)

KH: Hello and welcome to the Asthma Science Notebook. I'm Kelly Hunt from EPA's Indoor Environments Division. Today, I have the privilege of speaking with Dr. Tyra Bryant-Stephens from the Children's Hospital of Philadelphia's Community Asthma Prevention Program. Tyra founded the Community Asthma Prevention Program of Philadelphia at the Children's Hospital of Philadelphia in 1997. As medical director of the program, her staff includes RN clinical and educational coordinators as well as home visitors. Her focus has been on community-based research for the past 10 years. Glad to have you here, Tyra.

TBS: Thanks, I'm glad to be here.

KH: So, let's start a little with background. What does the Community Asthma Prevention Program do to address asthma health outcomes for minority, inner city children in Philadelphia?

TBS: Community Asthma Prevention Program —affectionately known as CAPP—has always taken a community involvement or community participatory approach to looking at the problem of asthma in Philadelphia. What we try to do is to address the different areas of a community that may be impacted by or can impact the asthma outcomes for children in the inner cities. We have basically focused on four areas: one is having community classes, which are led by peer educators, and we actually now have sustainable partners. We partnered with community groups who now actually conduct these classes on their own. And then the other piece is the home environmental intervention, which we have done since 1998. In this program, we try to do work within the home to improve the bedroom, specifically, but also the general living area in terms of exposure to common asthma indoor triggers. And then we also work with the physicians to educate them regarding other guidelines and how to implement them into practice. And then finally, but certainly importantly, we work with schools in terms of training school nurses. In the past we've had school classes as well for children with asthma.

KH: So, how did you get started with your home-based interventions?

TBS: Well, we started out with the classes and part of our classes, in terms of learning from the families, we heard a lot "yeah, but I don't know how to do that" when we talked about reducing asthma triggers. And it appeared that they actually needed more than just education, but actually needed some hands-on help. And also we realized that there are children who are sicker than others, and we thought by identifying the children who have actually been in the hospital and really focusing our energies towards reducing their exposure to common indoor triggers would be helpful. So we looked at various models, and there weren't that many across the country in 1997, 1998. But we felt that given our experience with the classes and how effective parent educators were that we wanted to use community health

workers to accomplish our home visits feeling that number one, they live in the community. They are aware of the challenges, the barriers, and the psycho-social factors, which the families also experience. And we felt that these would be people who had actually kind of overcome some of those barriers. We tried to identify these workers who also either had a child with asthma, had asthma themselves, or had a close relative with asthma so that they could actually add their personal story to the education and to the environmental intervention. And then we found that as soon as we made this available, that there were lots of children who needed it. We really have not ever had a problem with recruitment.

KH: And how do you know the program is working to improve health outcomes?

TBS: We actually track outcomes. So track asthma symptoms; we give them daily diaries that they have to complete. We also track hospitalization, emergency room visits. For some children we're able to track that directly through Children's Hospital records. And for other children we do it by self report, those who may not be patients of Children's Hospital. We also track parents' self-management skills, and we have shown that we improve self-management skills, we improve knowledge, and then also reduce hospitalizations and emergency room visits through this intervention.

KH: How has the program's service area grown over the years? And why do you think this has happened?

TBS: Well, we started out in a community we knew, which is West Philadelphia, and as I said, we never really had a problem with recruiting for the West Philadelphia population. But other partners across the city realized that there was no other program like ours, but the need was across the city. So, through partners we began to spread out to other needy neighborhoods, and our service area is essentially the entire city now.

KH: And what do you hope to come from that Community Asthma Prevention Program's work?

TBS: Well, our goal has always been to improve asthma outcomes for children who are affected by this disease. And our goal has always been to leave the neighborhood and leave the families equipped. So, one of my kind of long range hopes is that in every neighborhood there's a skilled peer educator or community health worker who lives in the neighborhood, because we know with many of the minority groups that word of mouth really is effective in terms of spreading messages and spreading skills. So that's kind of a really long term hope. In addition, we hope to equip partners, community-based organizations who have similar workers —community health workers — to also conduct home visits and to conduct classes. Obviously, we can't serve the entire city. So, we want to make sure that we have other partners who are skilled in servicing the rest of the city.

KH: Well, it sounds like you've got some great work going on over there. Thank you, Tyra, for taking time to speak with me today on raising asthma exposures. I appreciate it. For more about asthma explore the rest of the asthma edition of Science Notebook or visit the EPA's asthma website at epa.gov/asthma. Thank you.