

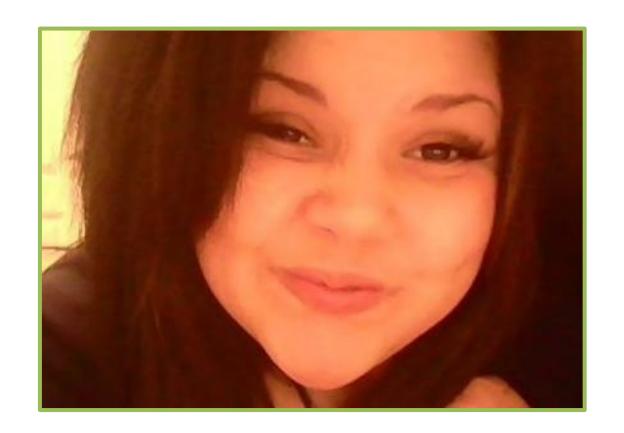


What are the priorities for children and young people's asthma care in 2025/26: importance of wider social/environment issues?



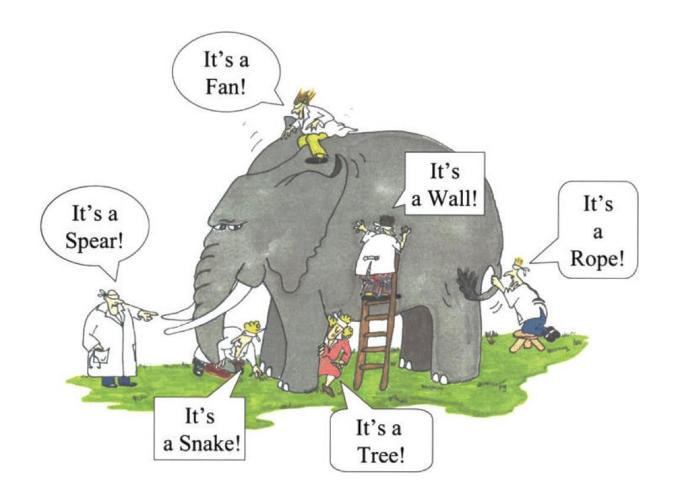
# **Story about asthma....**

Tamara's story





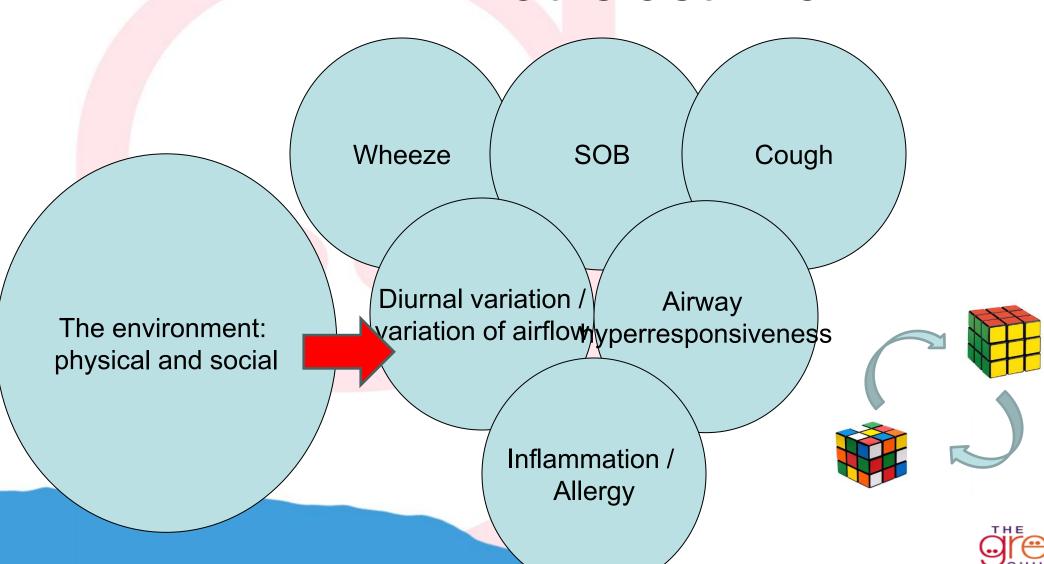








# What is asthma?



### **Asthma priorities**

- 1. Get an <u>asthma action plan</u> in place
- 2. Understand how to use <u>inhalers</u> correctly
- 3. Schedule an <u>asthma review</u> every year and after every attack
- 4. Consider <u>air pollution</u> and its impact on lung health

Lessons from CYP who die due to asthma...





# Asthma deaths and near fatal asthma n =54 April 2019 – March 2024 – NCMD England

Adverse	medical	factors
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

87% arrested outside hospital	48		
65% ED or admitted in last year	34		
87% had ≥ 3 SABA in the last yr	47		
No action plan	10 / 36		
No follow up within 2 days of admission 11/17			
Issues of treatment delays	13		

### Adverse psychosocial factors

Death rate 4 x higher in children from most deprived area

Death rate higher in those from ethnic background

All exposed to air pollution > WHO guidelines

PM2.5 – 9.6 mcgm/m2 at home and school (WHO <5; UK <20mcg/m2)

NO2 – 19.5 and 19.6 at home/school (WHO <10mcg/m2; UK,40mcg/m2)

Smoker/Vaper 2/ 22

Family smokers 32 (48%)

Known to social services 23/57 (34%)

WNB (DNA) 12/26 (39%)

Parental non-compliance 12/26 (39%)

Child deaths due to asthma, anaphylaxis and allergies



# Asthma deaths and near fatal asthma n =53 2014

Adverse medical factors		Adverse psychosocial factors	
No education/management plan	34	Poor compliance/monitoring	23
Under treatment with ICS	22	Smoker	16
Inadequate GP FU	18	Failed/refused appointments	15
Inadequate PEF monitoring	12	Denial/poor perception	12
Under treatment with prednisolone	8	Depression	7
No referral to specialist	2	Addiction	6
No monitoring of repeat scripts	2	Poor family support/housing	6
Doctor factors	2	Psychiatric hx	3
Unconventional treatment	1	Morbid obesity	3
Failure to address asthma in an addict	1	No telephone	2
Total pts with adverse factors 44 (8	3%)	Total pts with adverse factors 38 (72	<u>'</u> %)





# Health inequalities and asthma

### Housing

• issues such as damp, mould and poor ventilation exacerbate asthma

### Access to services

 we know that there are challenges across a range of inequalities with accessing care both in the community and acutely

### Air pollution exposure

 lower income families are more likely to live in more highly polluted areas

### High requirement of selfmanagement

 this is more difficult for families living in poverty or facing hardships

### Hospitalisation

 we know that statistically those from lower income households are more likely to be admitted to hospital for their asthma

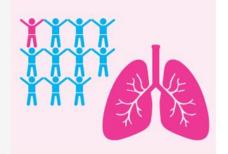


### Role of RCPCH

#### Asthma is a national issue

#### **Respiratory illness**

 Around 1 in 11 children and young people live with asthma (1.1 million) and the UK has one of the highest prevalence of emergency admission and death rates for childhood asthma.<sup>11</sup>



RCPCH has a key role in medical education, professional standards, research and policy.

Our policy work brings together multi-agency responses- e.g. Drs can't directly solve housing issues, we have to work together Working together nationally helps us to better understand the problems, draw conclusions from the data and identify efficient solutions



# From left behind to leading the way: a blueprint for transforming child health services in England

- Children's services have been out of scope of NHS reform
- Demand has grown due to preventable and nonpreventable ill health
- No equivalent increase in investment in children's service capacity or workforce number
- The result is children are waiting longer than adults to access services, paediatric services face poorer recovery, and families have growing barriers to accessing care



# **National Campaigning - Tobacco and Vapes**

### The problem:

- Growing concern from our members about the increasing popularity of vapes among young people.
- In 2024, 18% of 11–17-year-olds had tried vaping, compared to 11% in 2021, rising steadily from 3.8% in 2013.
- Exposure of CYP to nicotine can lead to long-term negative impacts on health, as well as long-term addiction.
- Data showed that disposable e-cigarettes were the product of choice for children and young people.
- Based on the information and evidence available, RCPCH called for a ban on disposable vapes in 2023.



# **National Campaigning - Tobacco and Vapes**

## Influencing change by:

- Advocating for action through targeted media activity to raise the alarm on youth vaping
- Becoming a trusted voice through responding formal Calls of Evidence and providing oral evidence for the Health Select Committee
- Building relationships by briefing MPs ahead of key debates and supporting the development of health plans
- Keeping the issue high on the political agenda with officials at the Department of Health and Social Care



# **Creation of resources - RCPCH Air Pollution Companion**



### **Knowledge hub**

For anyone interested in learning more about air pollution and its impact on child health.

Knowledge hub



#### Case studies

Explore our library of case studies highlighting projects and professionals working to improve air quality.

Case studies



#### **Communication toolkit**

For child health professionals who want to make talking about air pollution 'business as usual'.

**Communication toolkit** 



### Clean air community

Discover more about our national and international networks focused on air pollution and child health.

Clean air community



### Advocacy toolkit

For health professionals who want to advocate for broader systemic change to improve air quality.

Advocacy toolkit



### Clean air clinics

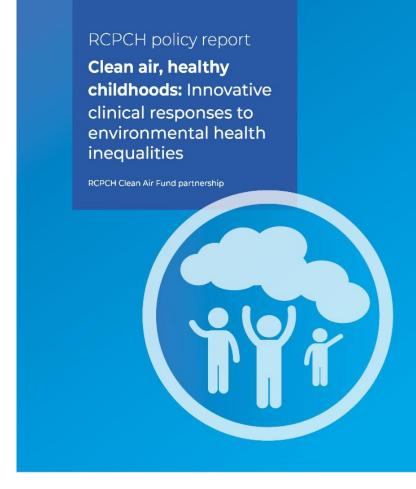
For policy makers, NHS leaders and child health professionals. Read more about these innovative clinics.

Clean air clinics





# **Reports - Clean Air, Healthy Childhoods**



#### Summary of recommendations



#### For UK governments and administrations:

- · Enact a Clean Air Act ensuring legal rights to clean air
- Meet 2005 WHO Air Quality Guidelines
- . Expand Awaab's Law across the UK to cover private renters
- · Fund air quality monitoring in schools and empower councils to act on breaches

#### For Local Authorities and housing teams

- · Improve housing conditions with faster response to mould and damp complaints.
- · Forge stronger partnerships with healthcare services.

#### For Boards, Trusts and Integrated Care Systems:

- · Pilot 'hub and spoke' models to link specialist clinics with local services.
- · Allocate time for detailed consultations and housing advocacy.

#### For Royal Colleges and medical schools:

- · Embed environmental health in core curricula
- · Encourage research, CPD and education on environmental health across specialities
- Use RCPCH Air Pollution Companion to upskill healthcare professionals to have conversations with children and families on the impact of air pollution and the "talking to patients about air pollution" module of simulated conversations with children, young people and families.

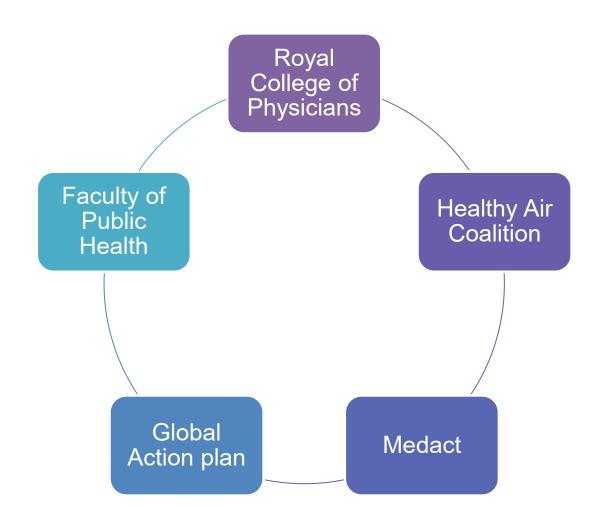
#### For clinicians:

- · Incorporate environmental history into routine care
- Complete accredited CPD activity on environmental impacts on health and health inequalities
- · Use evidence-based tools to advocate for healthier environments





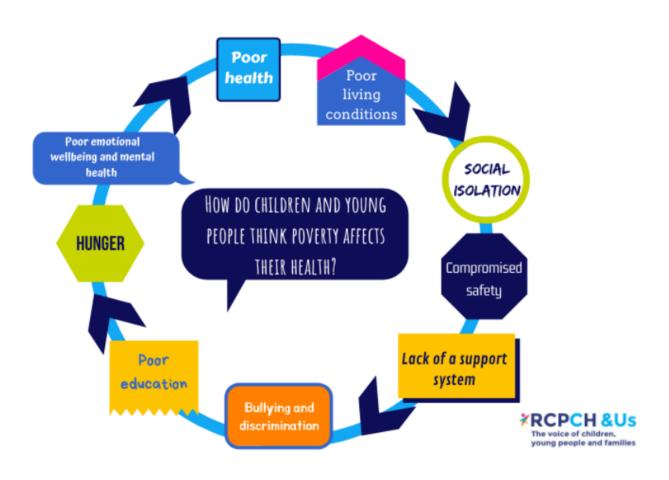
# **Coalition work - Clean Air Policy**







## **RCPCH & Us**





### **Asthma priorities**

- 1. Get an <u>asthma action plan</u> in place
- 2. Understand how to use <u>inhalers</u> correctly
- 3. Schedule an <u>asthma review</u> every year and after every attack
- 4. Consider air pollution and its impact on lung health
- Social environment: access / education
- Physical environment: pollution / housing
- Lessons from CYP who die due to asthma...

"The majority...are preventable"

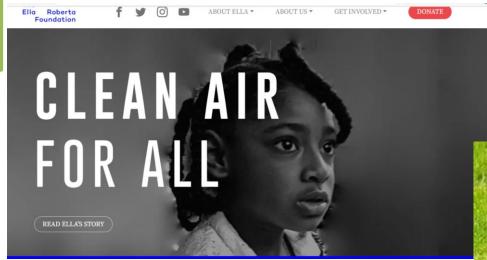




# Lest we forget....



Tamara



Ella

