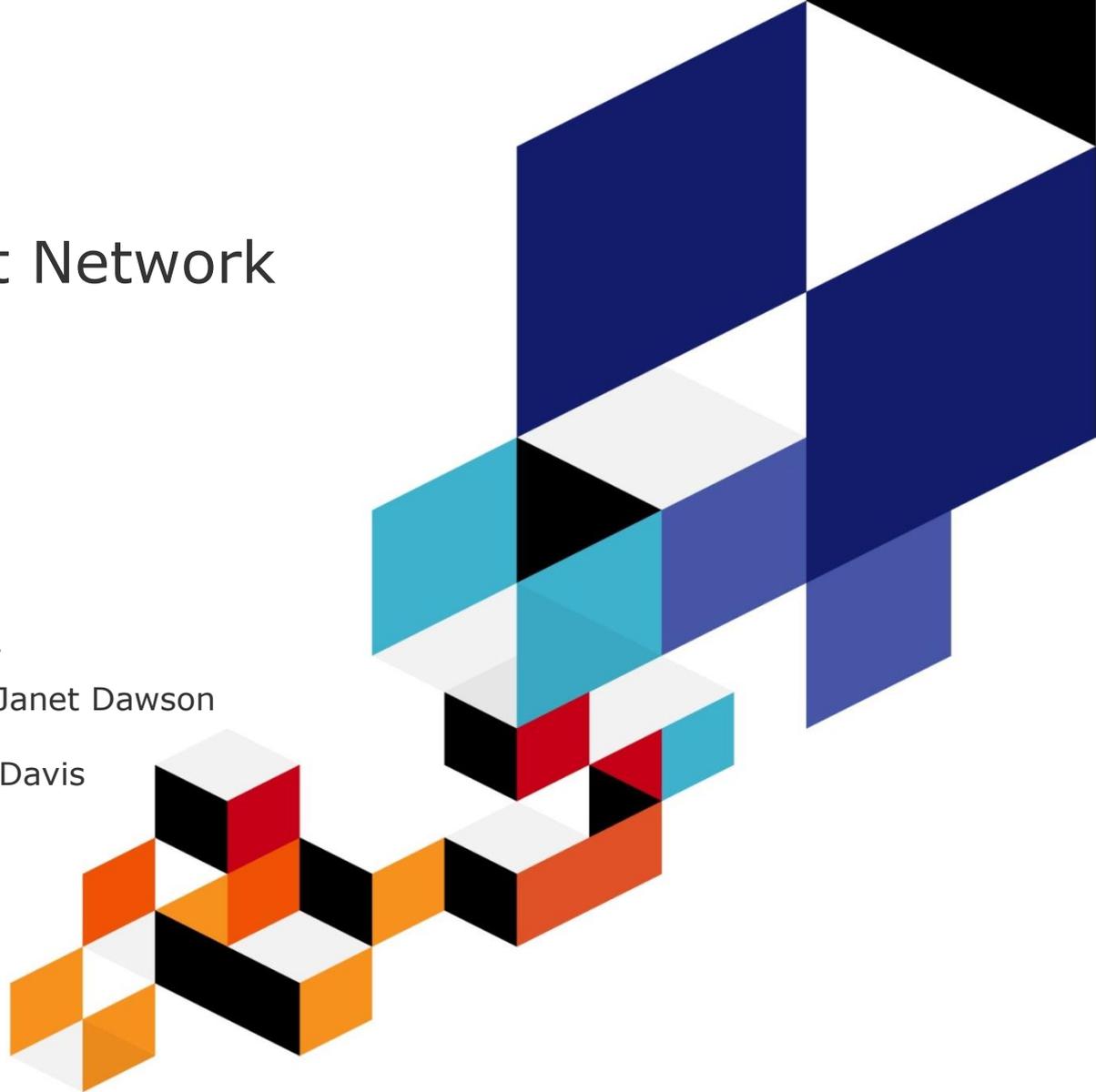


Asthma ACT Support Network Consumer Survey

Final Report
June 2014

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Contents

1		
Executive Summary	03	
2		
Research Objectives and Method	09	
3		
Asthma Experience Profile	15	
4		
Experience with Asthma	18	
5		
Living with Asthma Medication and Self Management	31	
6		
Productivity Impacts of Asthma	42	
7		
Asthma Healthcare Information	48	
8		
Awareness and Experience of Asthma Services in the ACT	52	
9		
Respondent Profile	59	
10	Appendices	
Appendix I: Additional Analysis	61	

1

Executive Summary



Summary (1)

Insights

- The majority of people with asthma deal with the condition for the long term. Three in four (75%) people with asthma have been experiencing asthma or asthma symptoms for over 5 years. However, for carers, first onset and experience of asthma for the person they care for tends to have occurred more recently (1-5 years ago).
- The majority of people with asthma and carers of those who have asthma report to have very mild/mild to moderate levels of asthma. One in ten (12%) of the total sample reported to have severe asthma.
- While a majority of both people with asthma and carers indicate the condition to be largely under control (well or completely controlled) (63%), more than a quarter concede to the condition being only somewhat controlled (28%), and a total of 9% not controlled.
- Furthermore, where respondent perception of severity of asthma is mild/ very mild or under control, some warning signs exist that would indicate that the asthma condition may not be controlled as perceived – including where there is use of blue reliever medication (2+ times per week) and sleep issues as a result of asthma among these cohorts.

Recommendations

- There is a clear need for both short term and long term support of those who have asthma, given both the prevalence of asthma and extended length of experiencing asthma.
- Continued and targeted support is also important given some disparity between reported asthma severity and level of control of the condition. Communication and education would be important to create awareness of the issue among people with asthma and carers, educate around appropriate asthma control expectations, and inform regarding the support information and services available.
- Beyond providing long term information and support to people with asthma, there is also a need to provide specific support to carers, particularly carers of children. Carers have unique needs for information and support in that they may be newly exposed to caring for someone with the condition. Consideration should also be given to ongoing information and support availability and dissemination, given this is a continually regenerating cohort.

Summary (2)

Insights

- The majority of people with asthma and carers have had recent contact with multiple health services in relation to their asthma condition. The family doctor or local GP serve as the key point of contact for medical treatment for assistance or advice for asthma, followed by the pharmacy.

Recommendations

- People with asthma and carers look heavily towards health professionals, as well as pharmacies, for support and advice, highlighting the need to equip these health services with the relevant information to ensure support and advisory materials are readily available through these contact touch points.
- Further, this highlights a need for the Asthma Support Network to understand not only the needs of people with asthma and carers, but also the needs of these health professionals and pharmacies to whom people with asthma and carers predominantly turn for advice and treatment.

Summary (3)

Insights

- One in five (20%) people with asthma and carers have accessed a hospital or hospital emergency department in the past 12 months to treat an asthma condition.
- Of those who had gone to a hospital or emergency department in the last 12 months, half (50%) made an appointment with their doctor to discuss the asthma issue. One in four (24%) hadn't followed up with their GP after leaving the hospital.
- Overall two in five (38%) have undertaken a spirometry test, while just over half (58%) have had a health professional check the correct use of the asthma device.
- Management around the asthma condition is somewhat variable, with only one third (34%) of people with asthma or carers having action plans in place and around half (52%) with knowledge about administering first aid.
- People with asthma are significantly less likely than carers to have an asthma action plan in place.

Recommendations

- Opportunities exist to understand the reasons for not seeking GP advice prior to an attack and then for the large proportion who do not follow up with a GP following an attack.
- Hospitals prevail as an important touch point for Asthma Support Network services to ensure/continue provision of support services and information for those suffering an attack to encourage follow up treatment in the short term, and to inform, encourage and support around improved asthma management in the long term.
- Opportunities may exist for Asthma ACT to increase the rates of medical checks through supporting information and network services, and in turn, increase brand awareness and understanding through cross promotions.
- The low prevalence of asthma action plans and know how to administer asthma first aid is a concern. Asthma ACT could consider further opportunities to engage with people with asthma and carers (and the broader community) of the importance of having these initiatives in place. If not already offered, Asthma ACT may assist or further enhance the provision of these services (both directly and through the support networks, or other partnerships).

Summary (4)

Insights

- Health professionals play the most important role as direct sources of information about asthma for people with asthma and carers. In particular, doctors are the key source of information, with three quarters of people with asthma and carers each currently sourcing information from doctors (76%), and nominating doctors as their preferred source of information (57%).
- Pharmacists are also an important source of information, with two in five people with asthma and carers sourcing information (45%) and preferring to source information from pharmacists (31%).
- In terms of other sources of information, the internet is an important consideration, with over one quarter of people with asthma and carers (28%) currently sourcing information from online health websites/ forums, and two in five (20%) preferring to access information online.

Recommendations

- Providing support to doctors and pharmacists is critical to helping people with asthma and carers. Many prefer and rely on verbal communication to help with their asthma management. Asthma ACT need to understand health professional needs to provide a high standard of service and information to their patients.
- Beyond the traditional methods of providing information directly to through health professionals, there is also a desire for self learning and discovery via online methods. This needs to be supported by comprehensive but simple information via this channel.
- Asthma ACT could review further opportunities to 'own' this territory and serve as a central information source, by providing online solutions to meet the needs of people with asthma and carers, as well as health professionals.

Summary (5)

Insights

- Just under half (46%) of people with asthma and carers are aware there is an organisation in the ACT that provide free information and support services for people with asthma. However when asked for the specific name, only one in ten (8%) cited specifically the Asthma Foundation ACT as this organisation. Higher prevalence exists however (25%) for the generic Asthma Foundation brand.
- For those who knew of an organisation in the ACT that provides free information and support services for people with asthma, the majority knew how to access this service.
- Prompted awareness of the Asthma Nurse Educator Service is low; only 22% of people with asthma and carers have heard of them. Furthermore, only a small proportion (10%) have actually used them.
- Prompted awareness of the Adult Asthma Educator Service is also low; only 19% of people with asthma and carers have heard of them. Furthermore, only a small proportion (5%) have actually used them.

Recommendations

- There is a clear need to increase awareness of the Asthma Foundation ACT broadly, the brand, and the information and support available, as well as related support services. Increasing awareness may have positive implications for increased government and community support.
- Beyond increasing brand awareness there is a need to increase knowledge on how to contact asthma related support services within the ACT, and consideration to dissemination through the respective key touch points.
- Further to the gap in awareness for the Asthma Support Network, there appears to be a real disconnect amongst people with asthma and carers with respect to awareness and usage of dedicated asthma health support networks. There is a need to understand in more detail what is driving this disconnect and explore strategies that can be adopted to increase awareness and usage of these services, and the relevant touch points to optimise use.

2

Research Objectives and Method



Research background

- The Asthma Support Network is comprised of the key asthma service and support groups in the ACT. The aim of the Asthma Support Network is to help people with asthma to breathe better and reduce the impact of asthma on the ACT community.
- The Asthma Support Network has four main objectives:
 1. To raise awareness of asthma within the ACT community and support Asthma Friendly environments.
 2. To improve asthma self-management and reduce the impact of the condition on people with asthma and their carers.
 3. To improve the coordination between asthma services, support groups and health professionals to ensure efficient referral pathways and optimal support.
 4. To ensure a platform for collaboration and sustainable partnerships between the Asthma Support Network, ACT Government and other organisations.
- The Asthma Support Network (through Asthma Foundation ACT) commissioned TNS to conduct research with people with asthma and carers of someone with asthma or a related condition, to understand the experiences, management and impact of asthma in the ACT, and information and services used.
- The framework for this research for the ACT Asthma Support Network was based on the Asthma Foundation Queensland Research conducted by TNS in 2011.

Research objectives

- The objectives of the research for the Asthma Support Network were to gain detailed information regarding the experiences and life circumstances of people with asthma and carers of people with asthma respective to the ACT.
- Specific areas of investigation included the following:
 - Experiences with condition
 - Management of condition
 - Economic impact of asthma on people with asthma
 - Sources of information
 - Awareness of, access to and interest in support services.

Methodology

Sample respondents

- People with asthma and carers of someone with asthma or a related condition
- Australian Capital Territory (ACT) residents
- 18+ years old

Methodology

- Sample from My Opinions online platform and via client distribution
- Fieldwork conducted from 15th April 2014 – 27th May 2014
- Average interview length of 15 minutes

Sample size

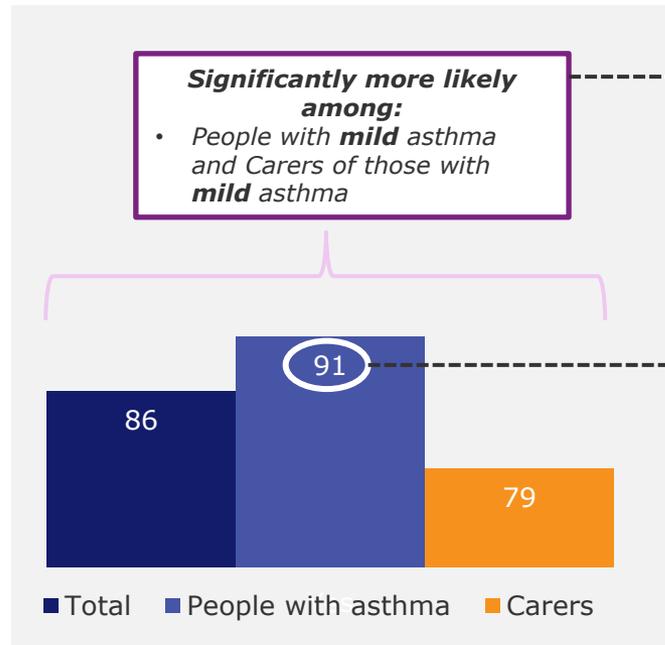
- Total sample: n=258
 - My Opinions sample n=134
 - Client contact sample n=124

Margin of error

- On a total sample size of n=258 the maximum sampling error is +/- 6.1%

Notes on the report

Notation of significant differences



Purple box:

Denotes a significant difference between **other groups** at the 95% confidence interval.

White circle:

Denotes a significant difference between **People with asthma** and **Carers** at the 95% confidence interval.

Definition of respondent segments

People with asthma

"I have experienced asthma" OR "Both myself and someone else I take care of have experienced asthma"

Carers (Carers of person suffering from asthma)

"I take care of a child/ children who has experienced asthma" OR "I take care of someone else who has experienced asthma (e.g. elderly parent, spouse, partner)"

Acknowledgement of research limitations

- In any research, there are methodological limitations that must be acknowledged in order to provide context to the reliability and replicability of the research and its findings. The consistency of findings throughout this project's methodology suggests that the limitations noted below have not critically impeded this research. The noted methodological limitations to this research include:
 - **Recruitment bias:** Recruitment of respondents used a mixed sampling approach including the online consumer panel as well as offline client sampling distribution through the Asthma ACT Support Network services. This offline client sampling method posed limitations in terms of control over who conducted the survey via this method. Additionally, there may have been some difference between these sample sources and the sample invited and completing through the consumer panel. However, these were expected to be limited, and to control this, responses from both methodologies were monitored for consistency during the fieldwork period.
 - **Non-response bias:** This occurs if the answers of respondents differ from the potential answers of those who did not answer. However, the mixed sampling approach and strong response from the online consumer panel addressed this issue.
 - **Sample size:** ACT population size posed limitations to sample size achievable via the consumer panel. The client sampling method boosted achievable sample size, however, sample size available and distributed to, and expected completions to be achieved was not known via this method. As such, no limit was placed on the number of achieved interviews for this method during the fieldwork period, and the fieldwork period remained flexible for extension to optimise completion rates.
 - **Sample size – analysis:** The smaller sample size in the ACT effects a higher margin of error due to the small base sizes, and as such limits the level of detailed analysis possible for subgroups.
 - **Timing of research:** Results should be considered with respect to the research timing coinciding with the start of the winter season when asthma conditions and symptoms may have more prevalence.
 - **Accuracy of claimed behaviour:** Accuracy of measuring past, current and intended behaviour based on claimed behaviour is a limitation in any research method. We control for this through careful survey and question design.

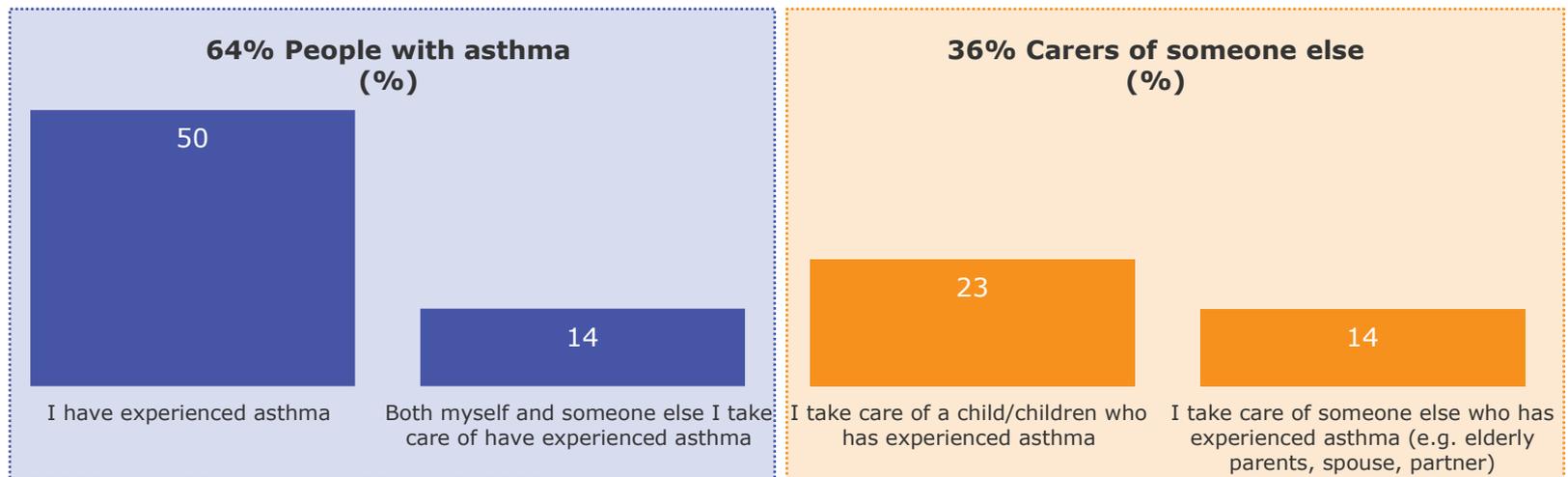
3

Asthma Experience Profile



Defining people with asthma and carers

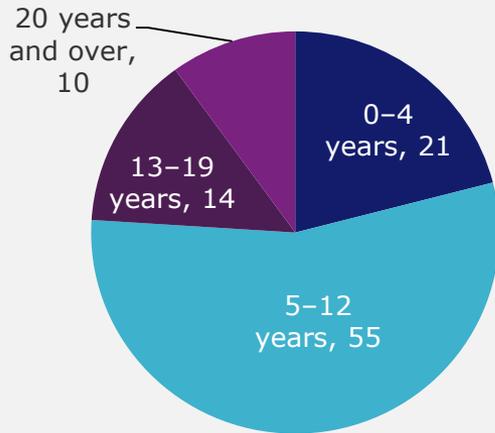
- The total sample comprises of around two thirds (64%) of people with asthma and around one third (36%) of carers of someone who has experienced asthma.
 - People with asthma include those who have experienced asthma themselves, and those who both have experienced asthma themselves and take care of someone else who has experienced asthma.
 - Carers include those who take care of someone else with asthma – including a child/children or someone else such as elderly parents, spouse or partner who has experienced asthma.
- Results throughout this report are provided by subgroups for both people with asthma and carers of someone with asthma, as well as total sample.



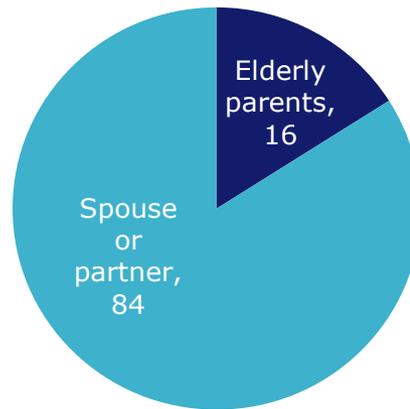
SOURCE:A1a. Which of the following best describes your experience with asthma and/or asthma symptoms? [SR]
BASE: All respondents n=258

Child/person cared for with asthma

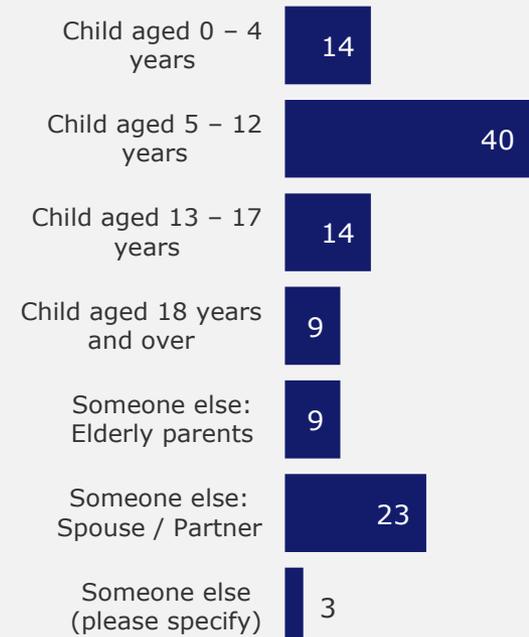
**Carers of child/children:
Age of child with asthma (%)**



**Carers of someone else:
Person cared for with asthma (%)**



**People with asthma and Carers of
someone else:
Person cared for with asthma (%)**



SOURCE: A1b. And how old is your child with asthma? If you have more than one child who suffers from asthma, please answer this question and fill out the rest of the survey thinking about your youngest child who suffers from asthma. [SR]
 A1c. And who is it that you mainly care for with asthma? [SR]
 A1d. And is that a child or someone else you take care of with asthma? [MR]
 BASE: Those who are carers for children with asthma (code 2 at A1a) n=58
 Those who care for someone else (code 3 at A1a) n=25
 Those who suffer and care for someone else (code 4 at A1a) n= 35

4

Experience with Asthma



Experience with asthma (1)

Summary

- The majority of people with asthma are longer term sufferers of the condition. Three in four (75%) people with asthma have been experiencing asthma or asthma symptoms for over 5 years. This is significantly higher among people with asthma compared with carers.
- The majority of people with asthma claim to have very mild to moderate levels of asthma. In particular, around three in ten (31%) overall indicate that the condition is moderate. However, around one in ten (12%) of the total sample reported to have 'fairly or very' severe asthma.
- Both people with asthma and carers tend to indicate they have the condition largely under control; at least six in ten (people with asthma - 62%, carers - 66%) reported the condition to be 'completely or well' under control. However, three in ten (30%) of those claiming to have the asthma under control also indicated use of the blue reliever medication (2 or more times per week). Further, nearly one in ten (9%) overall conceded to their asthma condition being 'poorly or not' controlled, particularly people with asthma (11%) rather than carers (4%).
- In terms of recent presence of asthma symptoms, the majority of people with asthma and carers have experienced shortness of breath over the last four weeks; typically several times a week (as opposed to daily). Just one in four (25%) have not experienced any shortness of breath.
- Over half of people with asthma (58%) claimed to get a full nights sleep without asthma like symptoms waking them up during the night. Not surprisingly, those who are regularly woken up during the night tend to suffer from severe asthma and/or this cohort includes those who care for children.
- It appears many people with asthma experience other symptoms that impact their asthma condition. Nearly all (91%) indicated that they experience allergic rhinitis, hay fever or nasal symptoms, particularly people with asthma compared with carers noting this. Of these, four in five (86%) are also aware that these types of conditions do have a worsening impact on their asthma.

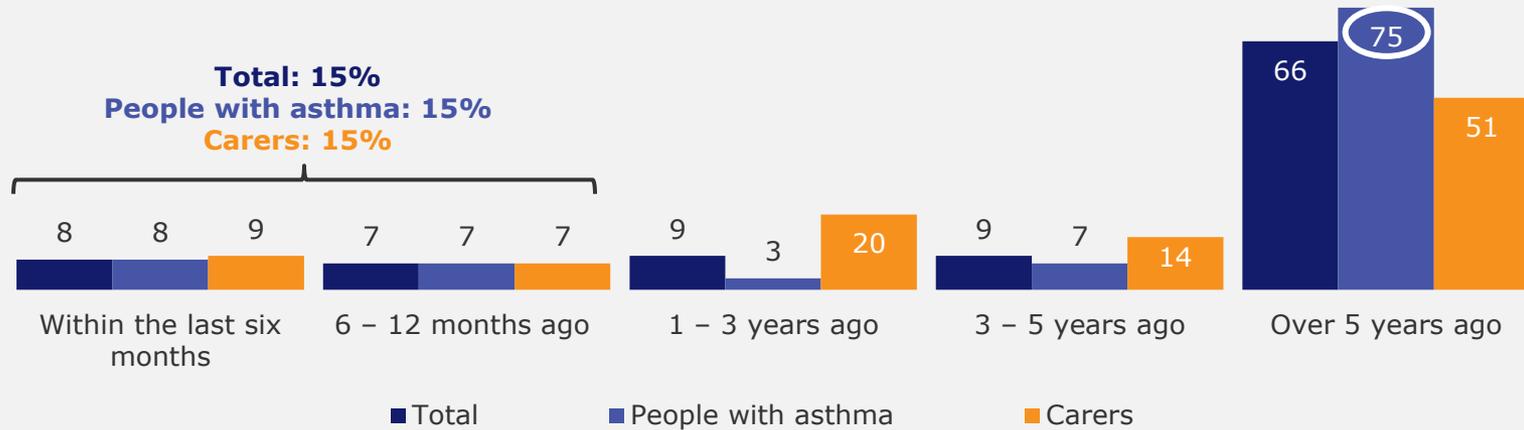
Experience with asthma (2)

Summary

- The majority of people with asthma and carers have had recent contact with multiple health services in relation to their asthma condition. The family doctor or local GP serves as the key point of contact for medical treatment or advice for asthma, followed by the pharmacy. Four in five (81%) people with asthma and carers have accessed their family doctor or local GP at least once in the past 12 months, and at least half (52%) more than once. Two in three (62%) have accessed a pharmacy in the past 12 months, with two in five (43%) more than once.
- One in five (20%) people with asthma and carers have accessed a hospital or hospital emergency department in the past 12 months to treat an asthma condition. However, there has been more limited access to other medical services, including other emergency clinics or medical centres, local Asthma Foundation, Health Direct Australia or a local asthma educator service.
- Among those who have seen a doctor for asthma related issues, most prefer consistency and either use the same doctor (39% all the time, 48% most of the time). A very small proportion (10%) see any doctor they can get an appointment with.
- Among those who had gone to a hospital or emergency department in the last 12 months, half (50%) made an appointment with their doctor to discuss the asthma issue. One in four (24%) hadn't done any follow up after leaving the hospital.
- Uptake varies for other medical services available for people with asthma and carers. Two in five (38%) have undertaken a spirometry test, while just over half (58%) have had a health professional check the correct use of the asthma device.

Length of time experiencing asthma symptoms

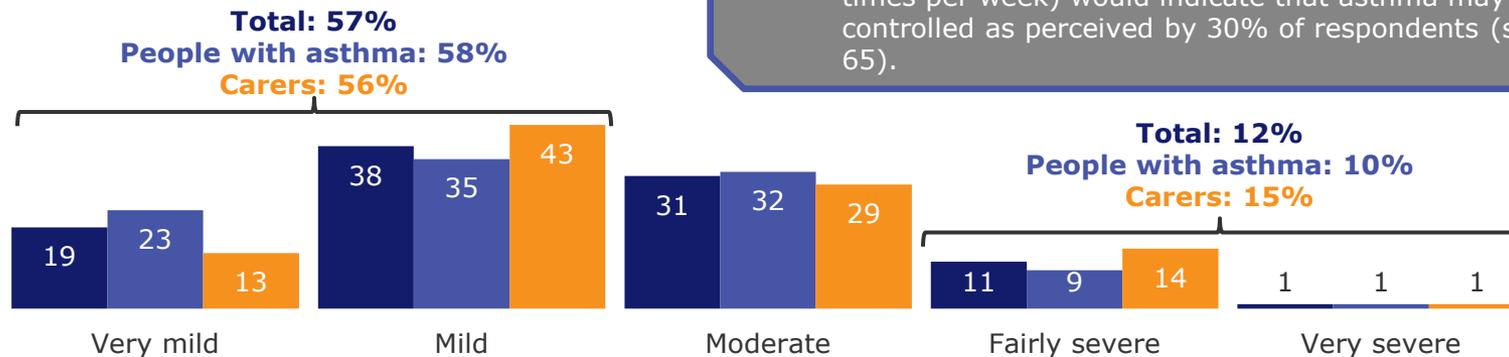
Length of time since first experiencing asthma/asthma symptoms (%)



SOURCE: A2b. Approximately how long has it been since < you / the person you take care of > first started experiencing asthma or asthma symptoms? [SR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

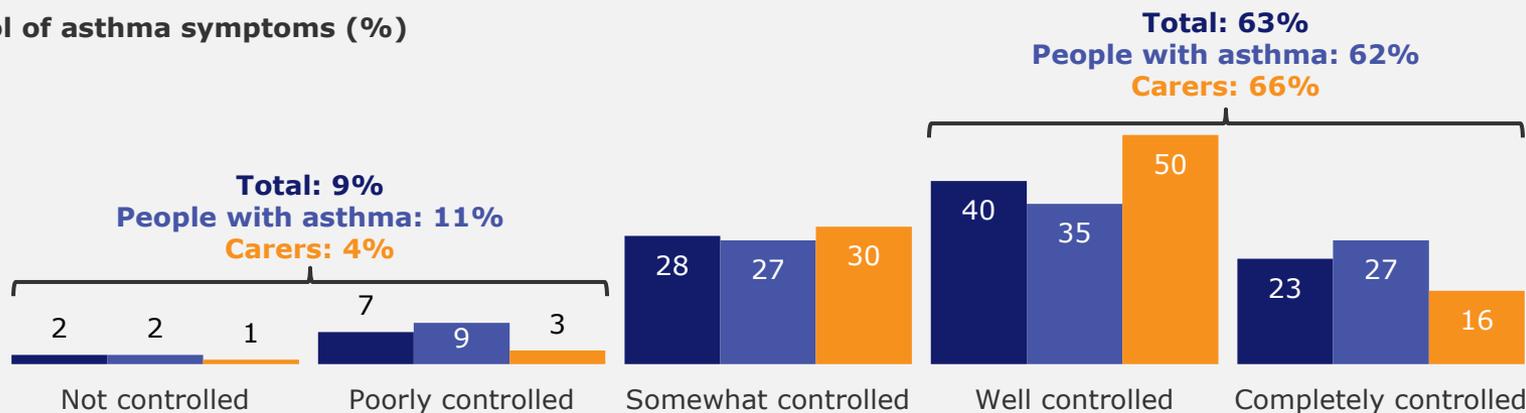
Perception of severity and control of asthma symptoms

Severity of asthma symptoms (%)



Where respondent perception of severity of asthma is mild/very mild, use of the blue reliever medication (2 or more times per week) would indicate that asthma may not be controlled as perceived by 30% of respondents (see page 65).

Control of asthma symptoms (%)

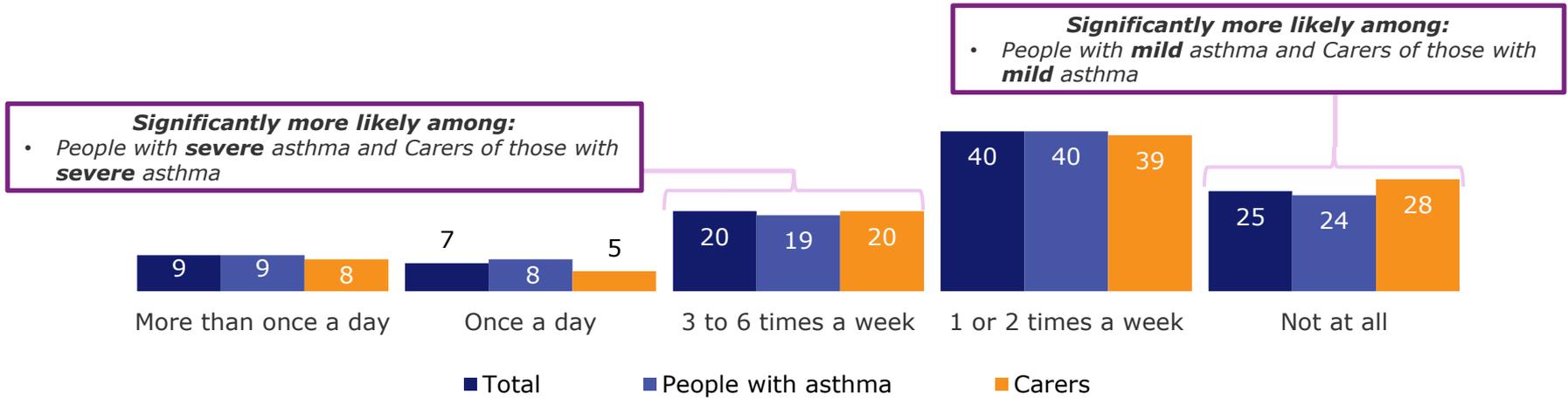


■ Total ■ People with asthma ■ Carers

SOURCE: A2a. How severe would you describe < your asthma to be / the asthma of the person you take care of? [SR]
A7. How would you rate < your asthma control / the asthma control of the person you take care of > during the past 4 weeks? [SR]
BASE: All respondents n=258; People with asthma n=165; Carers n=93

Presence of asthma symptoms – shortness of breath

Shortness of breath in the past 4 weeks (%)



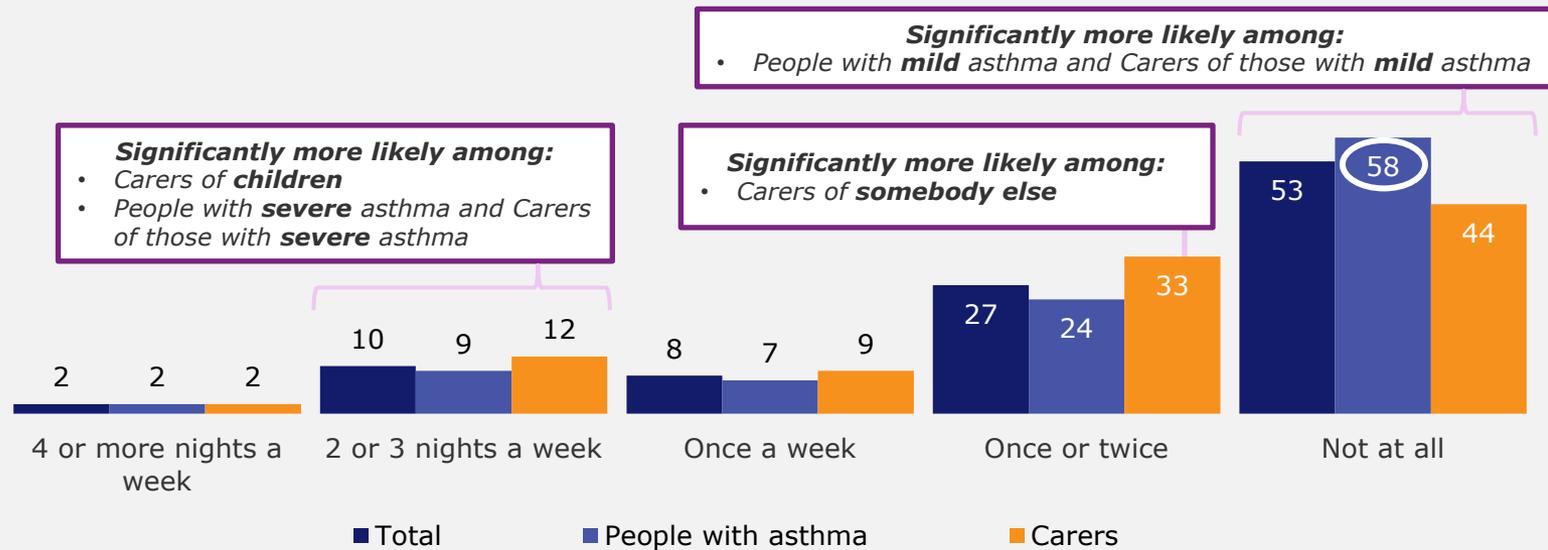
SOURCE: A5. During the past 4 weeks, how often < have you / has the person you take care of > had shortness of breath? [SR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Presence of asthma symptoms – affect on sleep



Again where the perception of severity of asthma is mild/ very mild or under control, waking during the night due to asthma at least once a week by one in ten of this cohort (9%) would also indicate that asthma may not be controlled as perceived (see page 62).

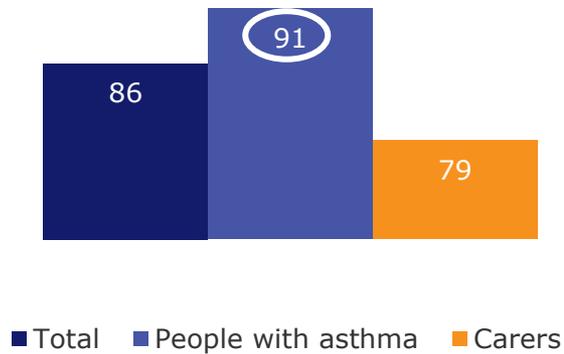
Affect of asthma symptoms on sleep (%)



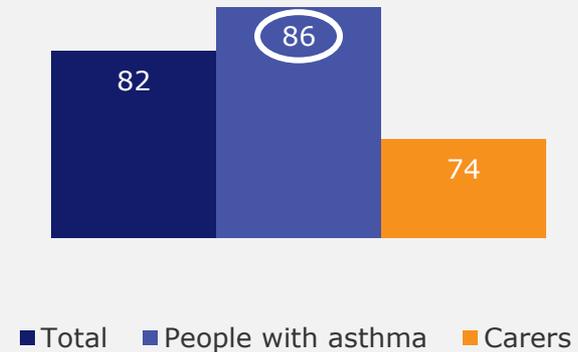
SOURCE: A6. During the past 4 weeks, how often did < your asthma symptoms / the asthma symptoms of the person you take care of > wake < you / them > up at night or earlier than usual in the morning? [SR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Experience and awareness of allergic symptoms

Experience of allergic symptoms - Yes (%)



Experience of allergic symptoms:
Awareness of impact - Yes (%)



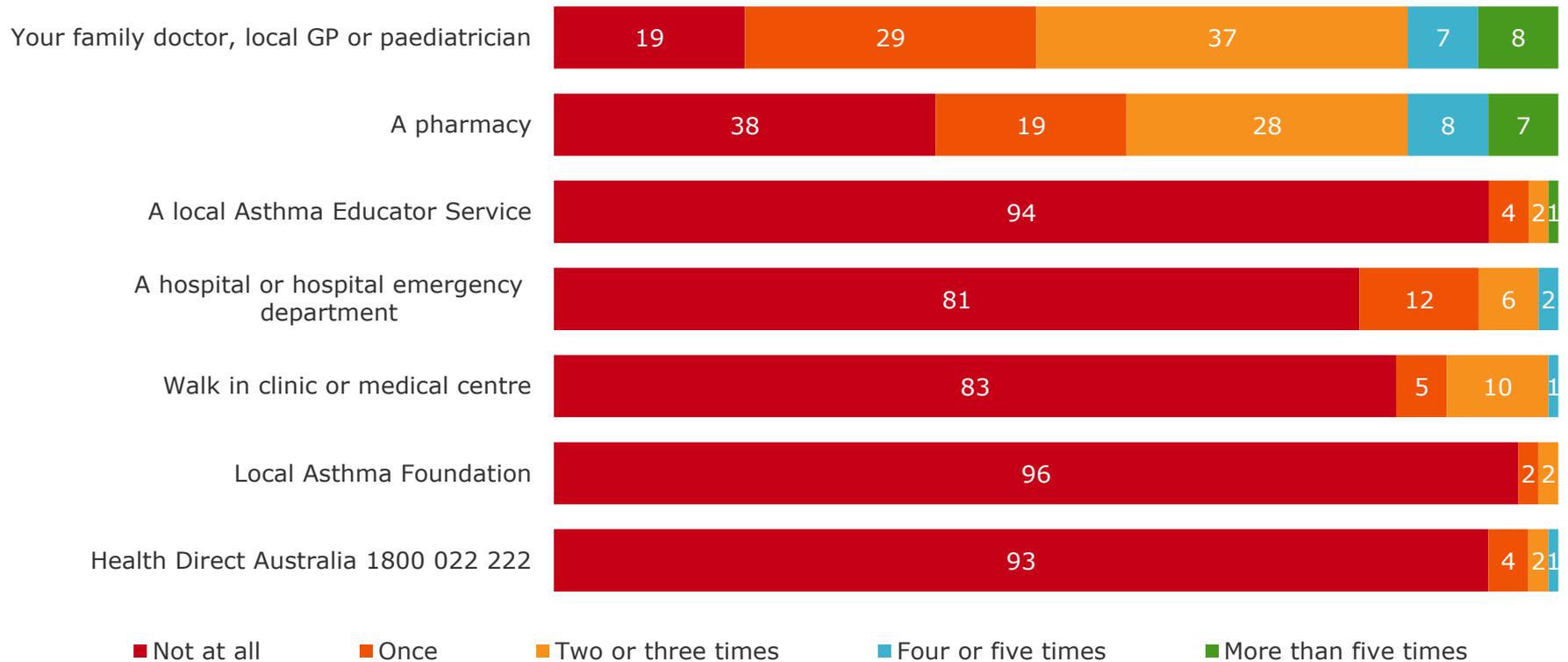
SOURCE: A14a. < Do you / Does the person you take care of > ever experience allergic rhinitis, hay fever or nasal symptoms (runny or blocked nose, difficulty breathing through nose, sneezing, itchy and watery eyes)? [SR]

A14b. Are you aware that allergic rhinitis or hay fever can make asthma worse? [SR]

BASE: All respondents n=258; People with asthma n=165; Carers n=93
Those that also experience other side effects (code 1 at A14a) n=223

Medical services in past 12 months - use and frequency

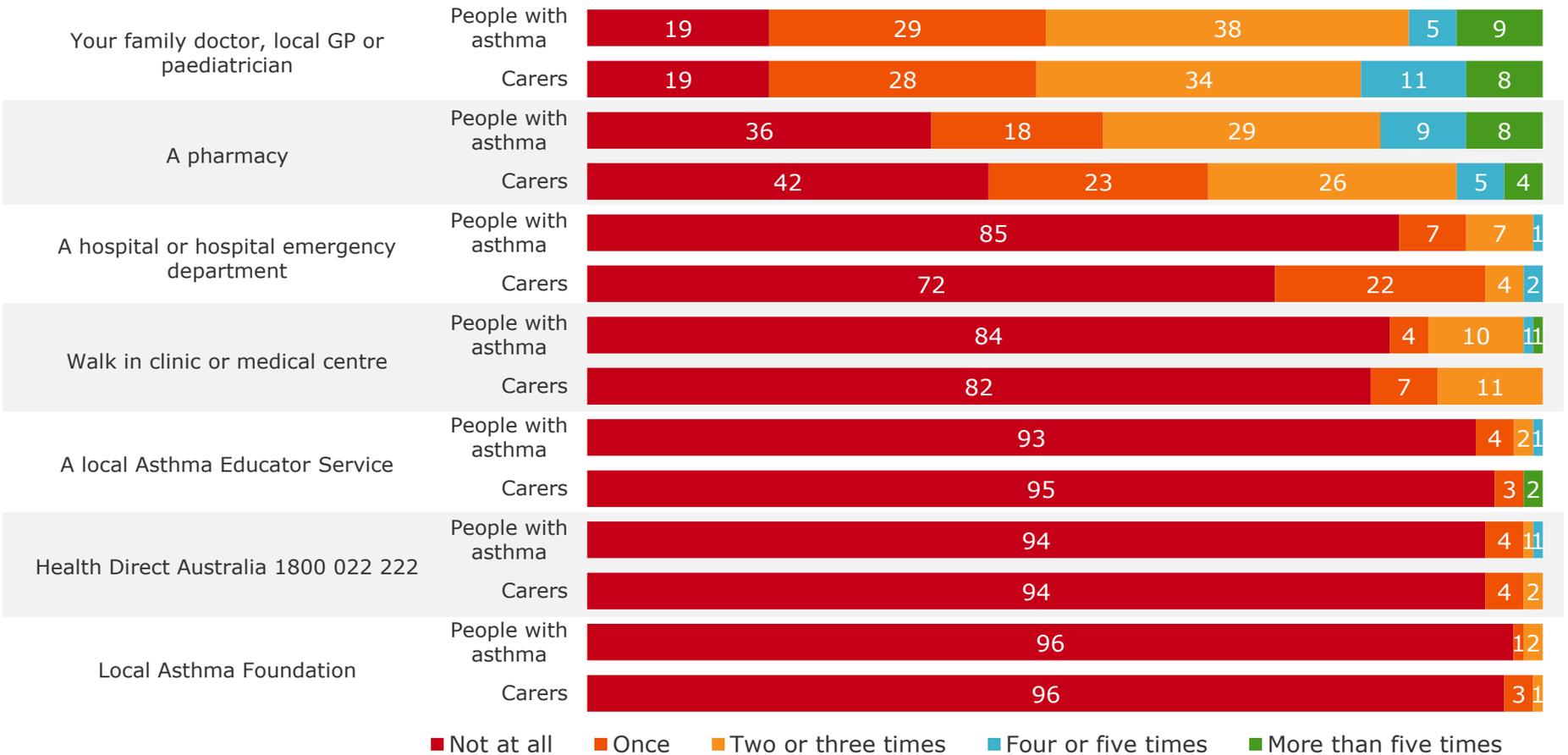
Total use of medical services (%)



SOURCE: A3. Thinking about the past 12 months, how many times have you used the following medical services for assistance or advice < for asthma / for the person you take care of with asthma >? [SR PER ROW]
 BASE: All respondents n=258

Medical services in past 12 months - use and frequency

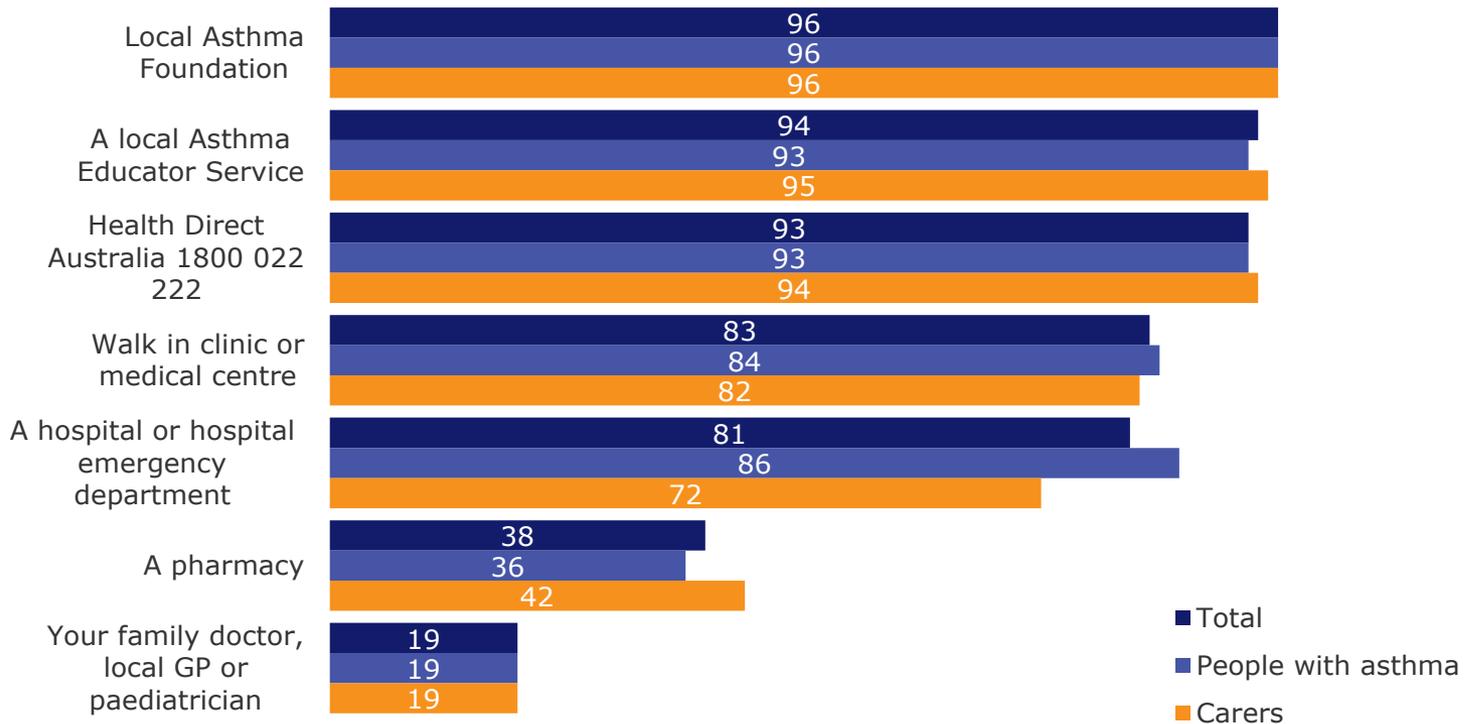
Use of medical services (%)



SOURCE: A3. Thinking about the past 12 months, how many times have you used the following medical services for assistance or advice < for asthma / for the person you take care of with asthma >? [SR PER ROW]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Medical services in past 12 months

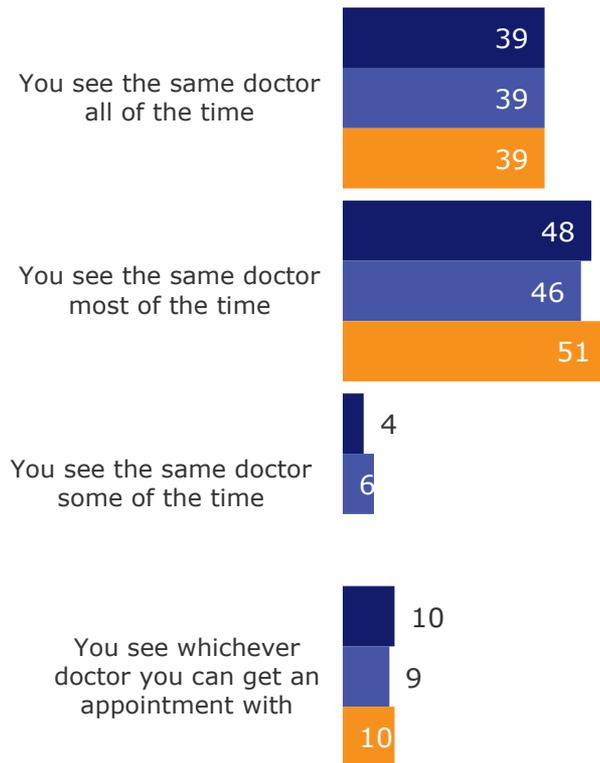
Medical services for asthma in past 12 months – Not at all used (%)



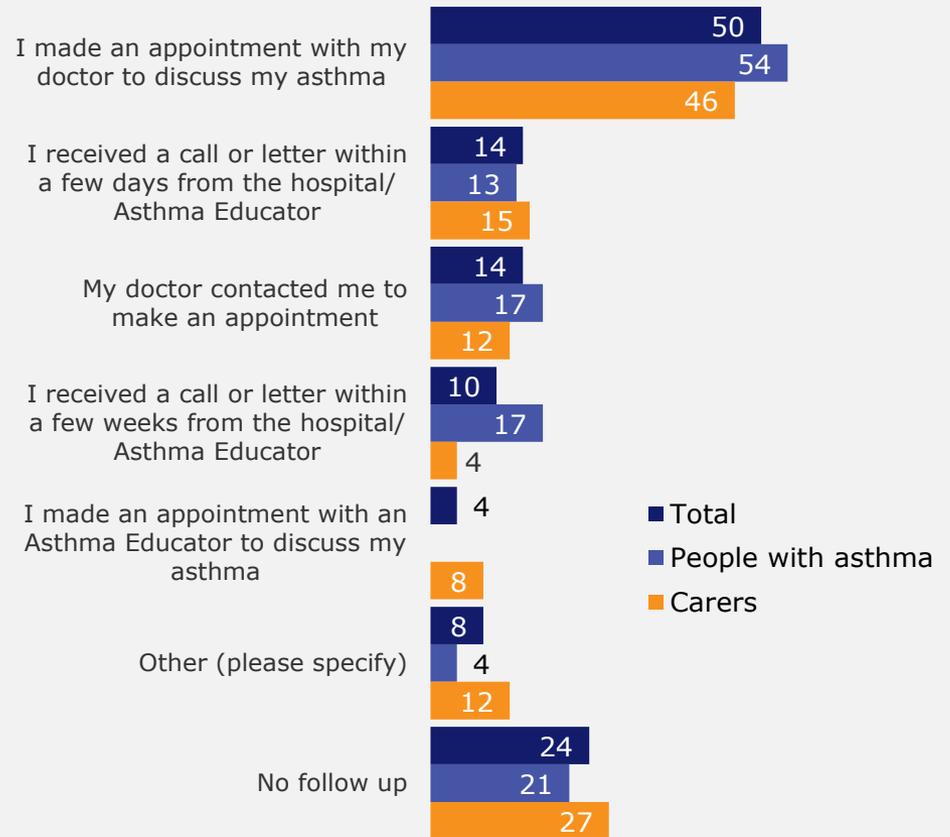
SOURCE: A3. Thinking about the past 12 months, how many times have you used the following medical services for assistance or advice < for asthma / for the person you take care of with asthma >? [SR PER ROW]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Medical services in past 12 months - use and frequency

**Those who had visited a doctor:
Doctor visit behaviour (%)**



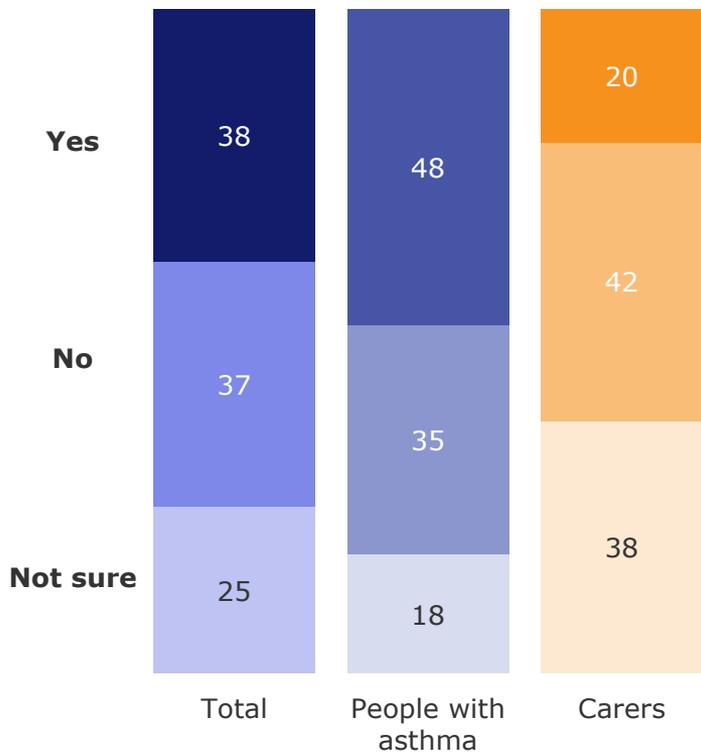
**Those who had visited the emergency department/hospital:
Follow up contact received (%)**



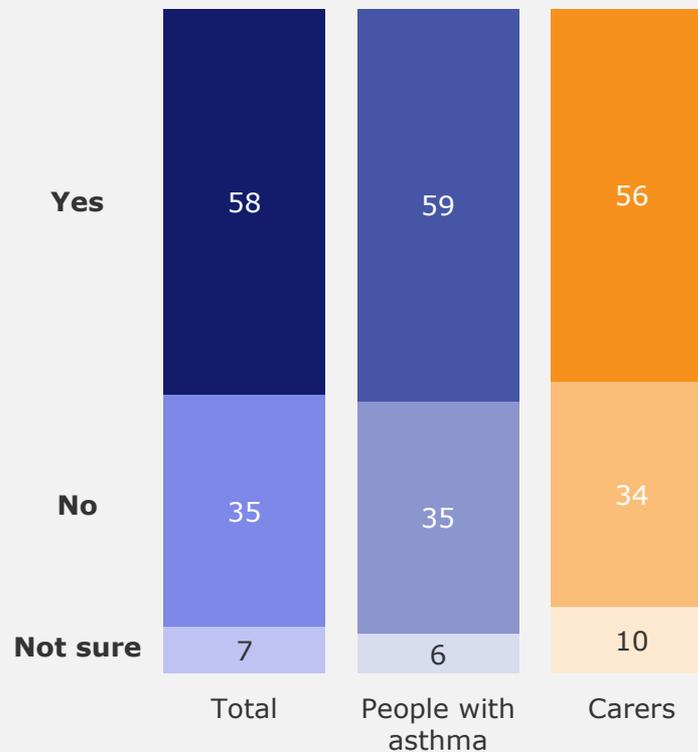
SOURCE: A4a . You mentioned that you have seen a doctor <for your asthma / for the person you take care of with asthma > more than once in the past 12 months. Would you say...? [SR]
 A4b. You mentioned that you have gone to hospital or the emergency department in the past 12 months because of <your asthma / the asthma of the person you take care of>. Since returning home from that hospital visit, what follow-up has there been from the hospital, an Asthma Educator, or your doctor? [MR, EXCEPTING 'No follow up']
 BASE: Those who had seen a doctor at least twice (code 3, 4 or 5 at A3a) n=134
 Those who had visited the emergency department (code 2, 3, 4 or 5 at A3b) n=50

Asthma medical checks ever done

Undertaken a Spirometry test (%)



Had a health professional check use of asthma device (%)



SOURCE : A11. < Have you / Has the person you take care of with asthma > ever done the following in relation to < your / their > asthma condition...? [SR PER ROW]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

5

Living with Asthma Medication and Self Management



Living with asthma (1)

Summary

- Looking at medications for asthma, the majority of people with asthma use preventer medication. Two in five (41%) use it most days or everyday, while fewer (29%) use it at least some days. One quarter (28%) never use preventer medication, with one in ten (12%) overall indicating they have medication but don't use it, and 16% who don't have preventer medication at all. People with asthma are more likely to not have preventer medication compared to carers.
 - The main reason those with preventer medication do not use it every day relates to a perceived lack of necessity in that their asthma condition is under control (58%). However, some indicate that their doctor did not advise them to take it every day (13%), while others simply forget (15%), or are not convinced asthma medication makes a difference or actually helps (7%).
- Awareness (96%) and ownership (88%) of the blue reliever puffer is high among people with asthma and carers. Most (71%) use it weekly (either once or several times) however there is a small handful who have a blue reliever (18%) but don't use it. It is worth considering seasonal environmental elements that may have some impact on use of reliever medication for people with asthma.
- Two in three (64%) people with asthma and carers say they have a spacer to use with their puffer. Spacers appear to be used by half (50%) of people with asthma overall, made up of one third who use the spacer always or most of the time. However, a further one in six (14%) have a spacer but do not use it with their medications.
 - Carers, and in particular carers of children with asthma, are more likely than people with asthma to have a spacer with the puffer for the person they care for, and to use the spacer for their child with asthma.
- While the sample size of carers with teenagers with asthma was small, most indicated that they were at least reasonably confident with their teenager's asthma management.

Living with asthma (2)

Summary

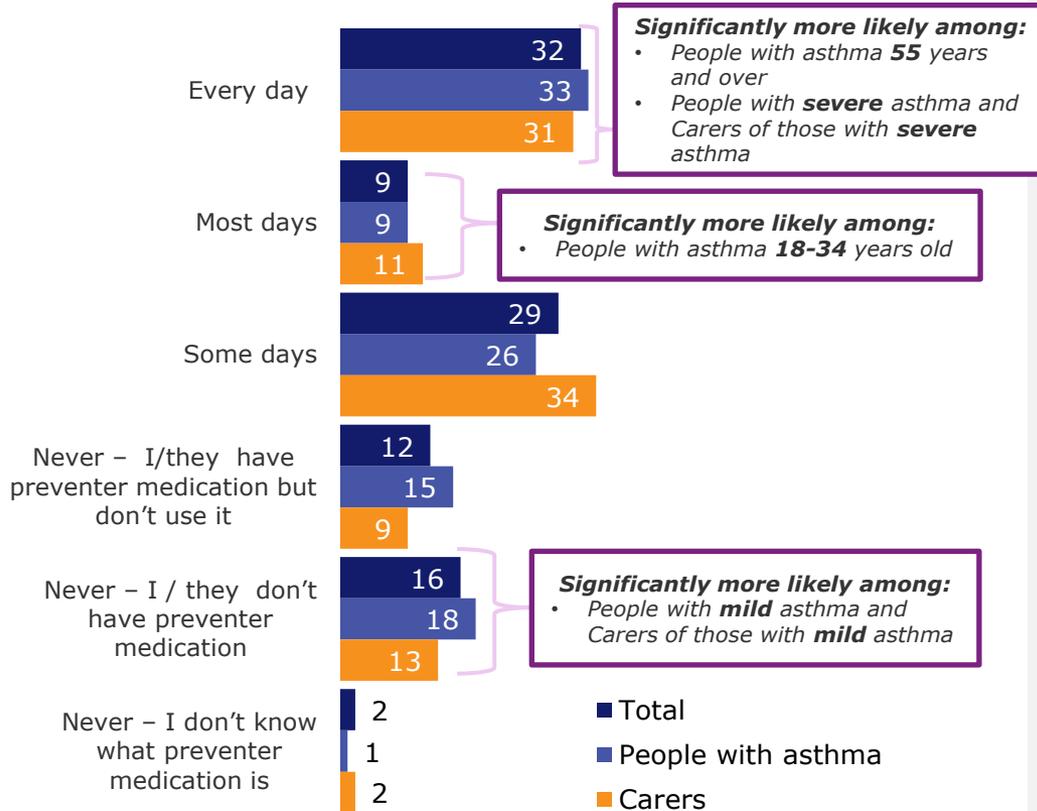
- For the most part, asthma medication is considered affordable for people with asthma and carers. However, not to be ignored, 5% of people with asthma and carers highlight a concern with the affordability, namely the struggle to pay for the medication meaning sometimes going without. In particular, those with moderate/ severe asthma are more likely than those with mild asthma struggle to pay.
- Management around the asthma condition is somewhat variable with fewer than half of people with asthma having action plans in place or knowledge about asthma first aid. Only one quarter (26%) of people with asthma have an asthma action plan in place; carers of children with asthma and people reporting severe asthma are more likely to have an action plan in place. Among those who do have an asthma action plan, the majority (92%) understand how to use the action plan.
- Only half (52%) of people with asthma and carers indicate that they know how to administer asthma first aid in the event of an emergency. Of those who can administer first aid, most are at least reasonably confident (88%). Two in five (44%) are very or extremely confident in administering asthma first aid.
- Among those carers whose child attends school, kindy or childcare, knowledge of the completion of asthma first aid training by that institution is somewhat unknown; 45% said they weren't sure if their school had completed the training.
- Over half (53%) of people with asthma and carers have never smoked cigarettes/ tobacco.

Use of preventer medication

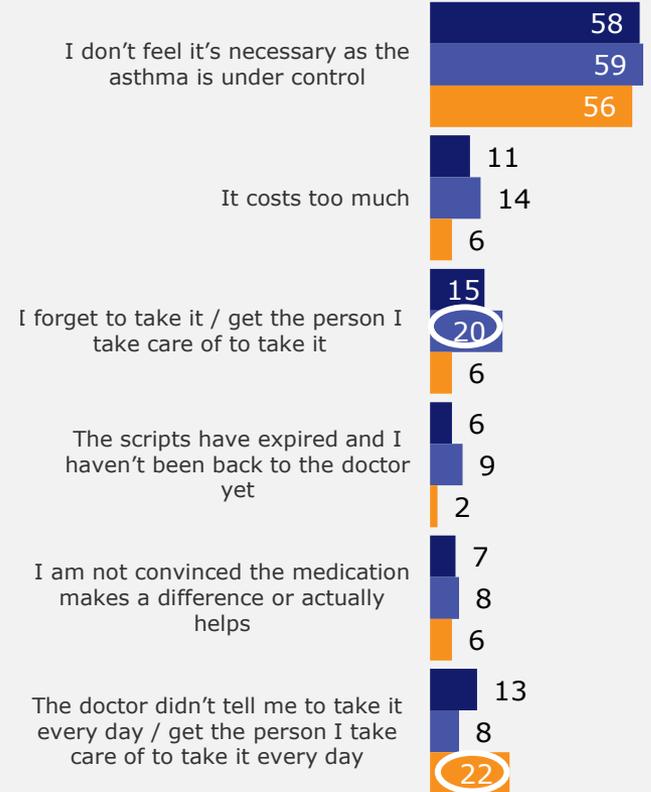


For those who use their blue reliever puffer 2 or more times a week, regular use of preventer medication is also higher (45% every day), suggesting asthma may not be well controlled (see page 64).

Use of preventer medication (%)



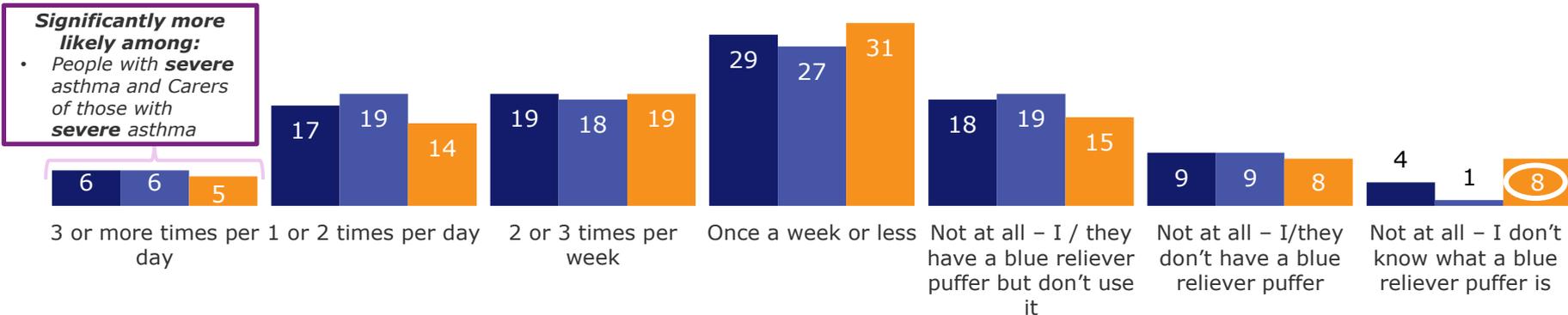
Those who don't use medication everyday: Reasons for not using preventer medication (%)



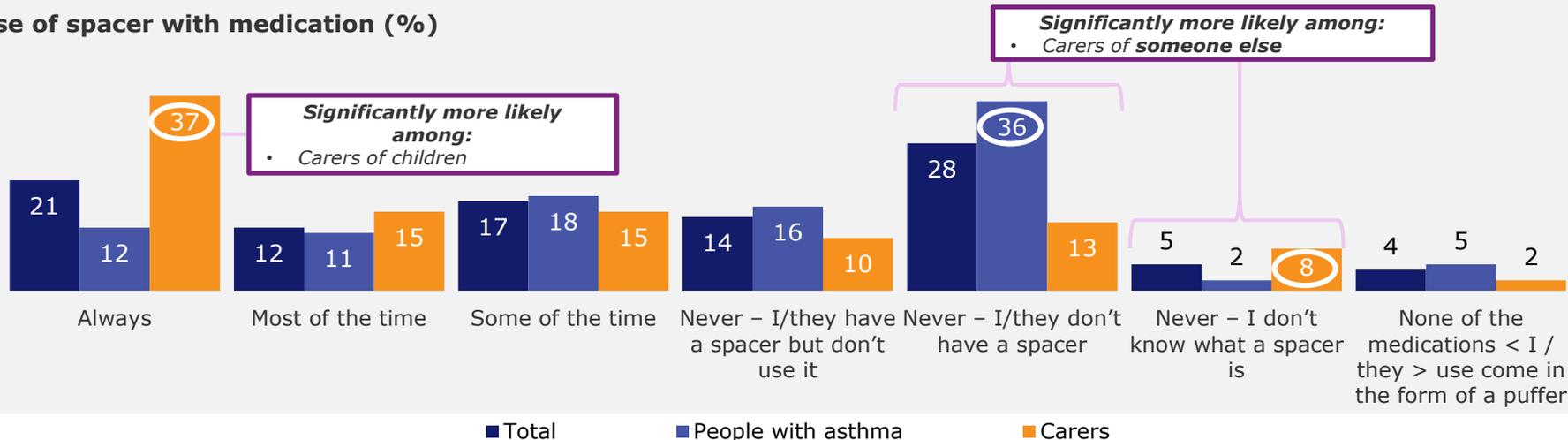
SOURCE: A8a. < Do you / Does the person you take care of> normally use preventer medication...? [SR]
 A8b. Is there a reason < you don't take your / the person you take care of doesn't take their > preventer medication every day? [MR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93
 Those who don't use their preventer medication every day (code 2, 3 or 4 at A8a) n=130

Awareness and frequency of blue reliever medication and spacer

Use of blue reliever medication (%)



Use of spacer with medication (%)

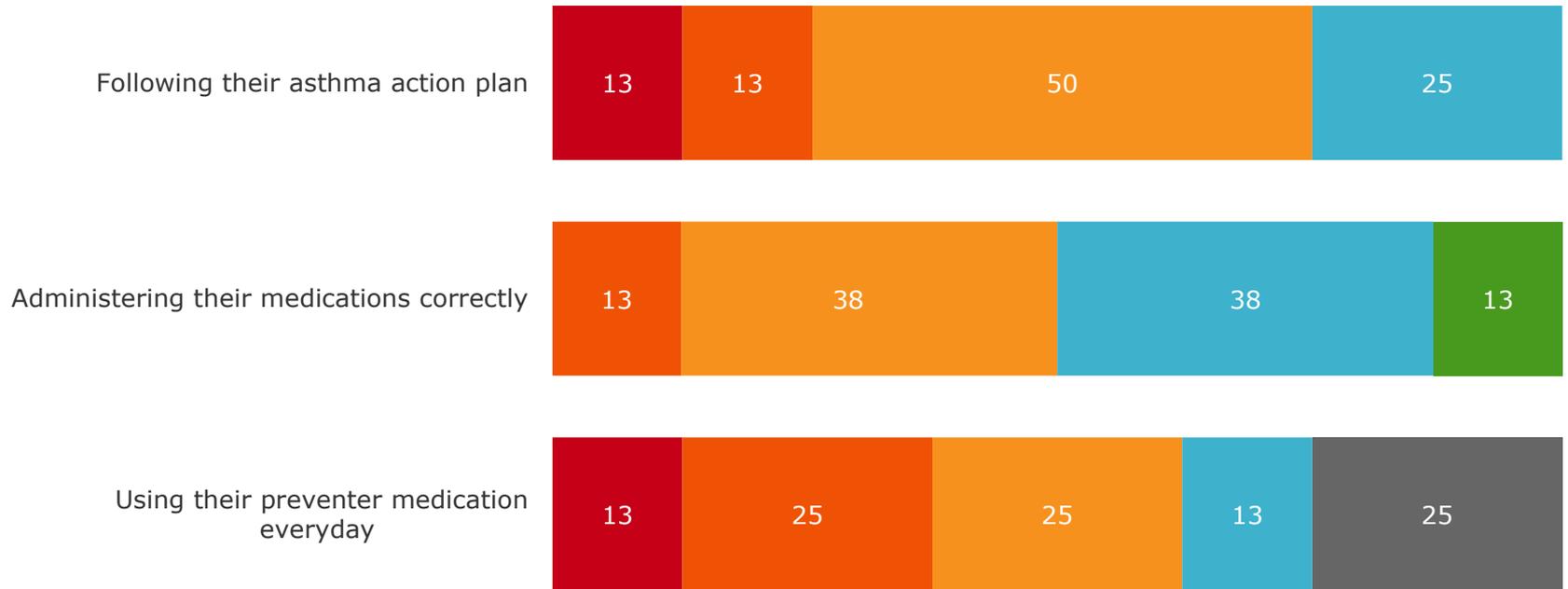


SOURCE: A9. During the past 4 weeks, how often < have you used your / has the person you take care of used their > blue reliever puffer? [SR]
 A10. If any of the medications taken by <you / the person you take care of> come in the form of a puffer, do <you / they> also use a spacer? [SR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Teenagers

Carers of teenagers:*

Confidence managing their Asthma (%)



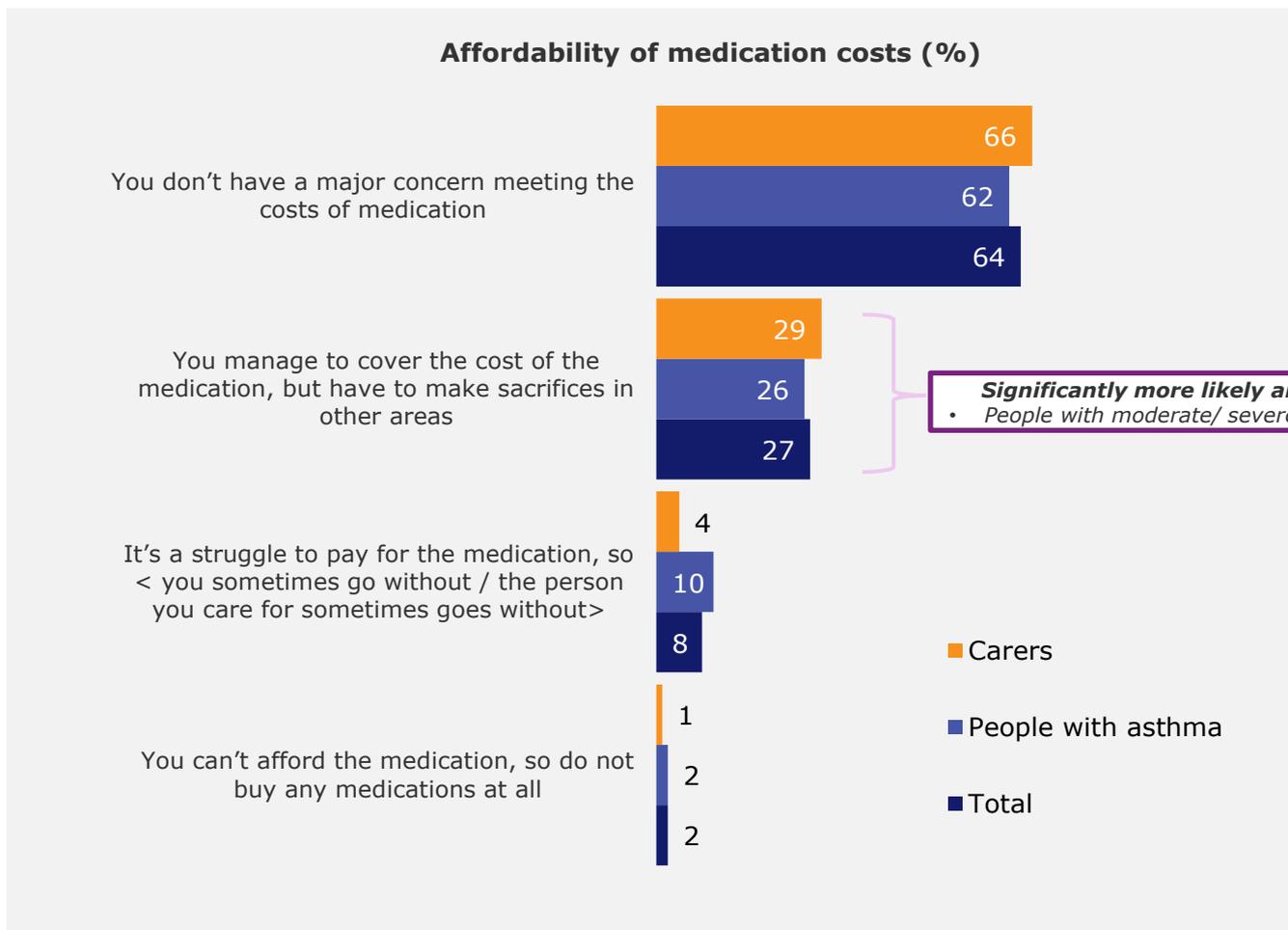
■ Not at all confident ■ Not very confident ■ Reasonably confident ■ Very confident ■ Extremely confident ■ N/A

SOURCE: A17. Please think about your teenager with asthma and how confident you feel about your teenager looking after their asthma condition. Using a scale of 1 to 5, where 1 is 'not confident at all' and 5 is 'extremely confident', please rate how confident do you feel that they are...? [SR PER ROW]

BASE: Carers of teenagers with asthma n=8*

*Caution: Very small sample size, results are indicative only.

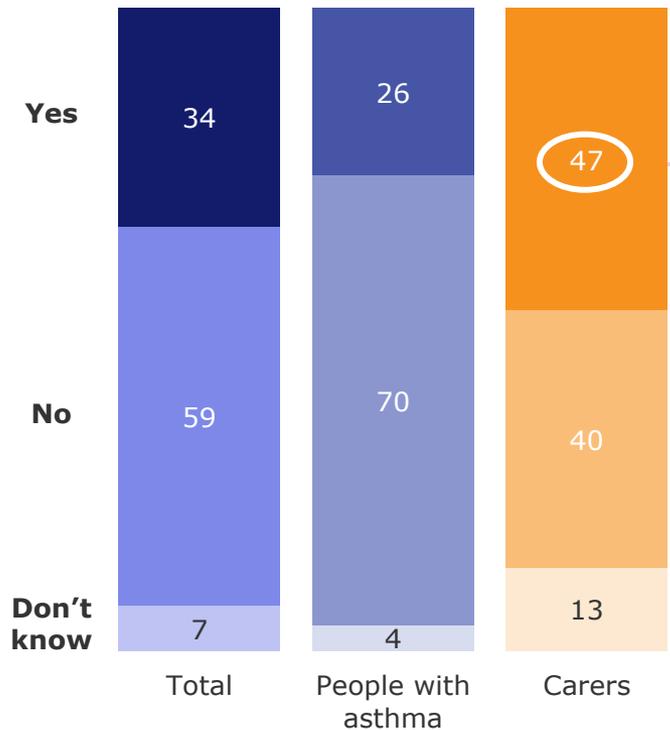
Affordability



SOURCE: A12. Overall, thinking about the costs of asthma medications, would you say ...? [SR]
BASE: All respondents n=258; People with asthma n=165; Carers n=93

Use and understanding of an asthma action plan

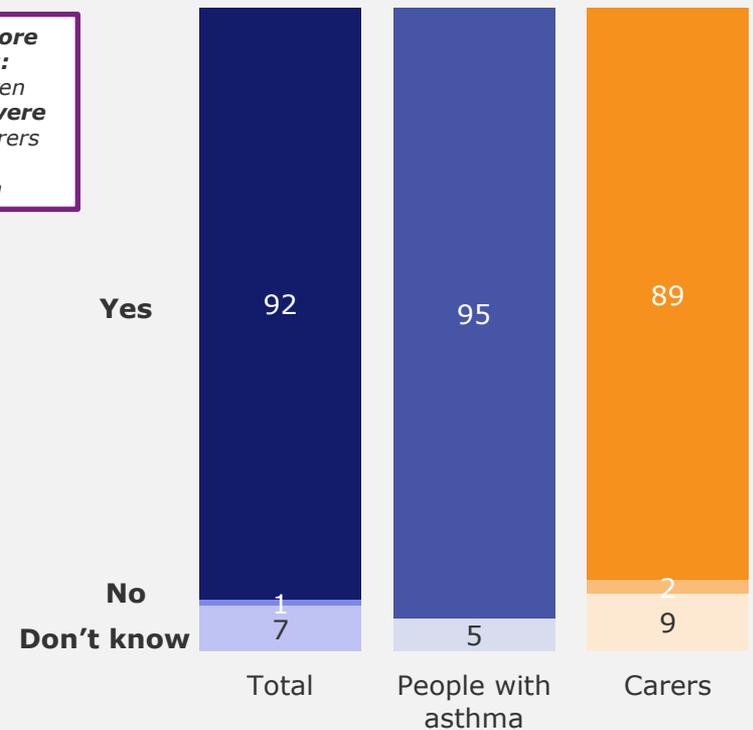
Has an asthma action plan (%)



Significantly more likely among:

- Carers of children
- People with **severe** asthma and Carers of those with **severe** asthma

Those with an action plan: Understanding of action plan (%)

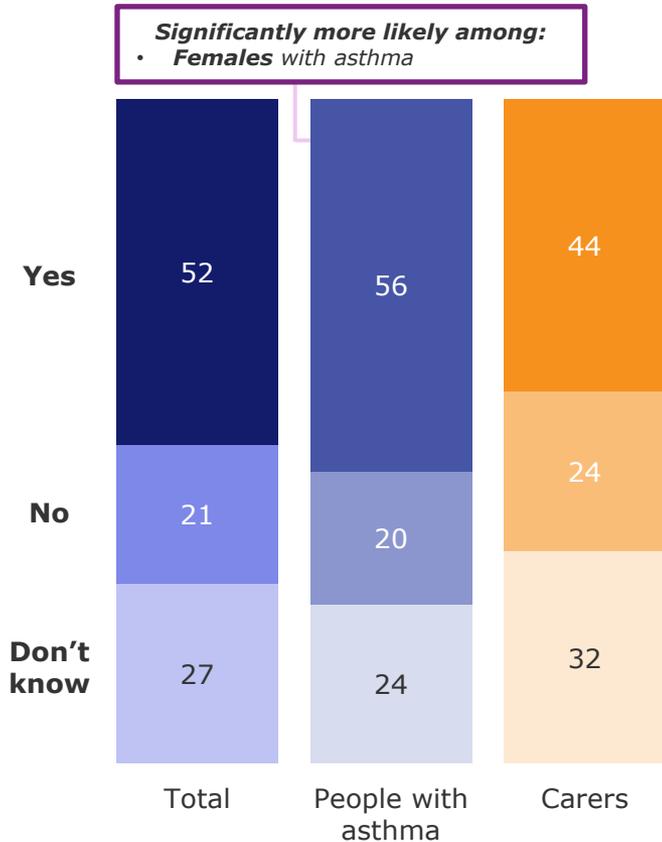


 As indicated as a significant difference above, carers of children are more likely to have an asthma action plan for the child in their care (60% for carers of children) (see page 66).

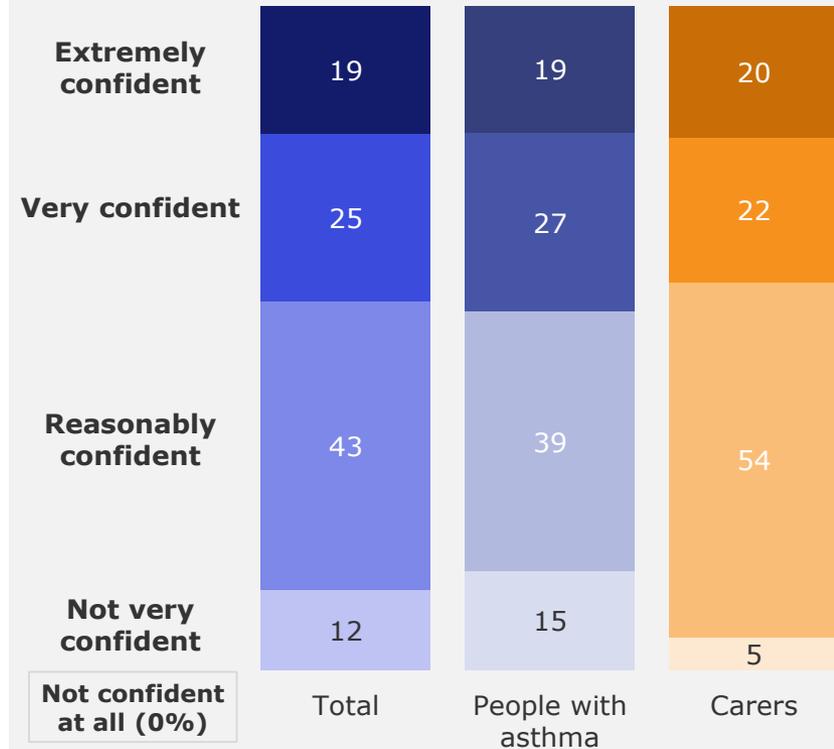
SOURCE : A13a. < Do you / Does the person you take care of > have an asthma action plan? [SR]
 A13b. And do you understand how to use < your / their > asthma action plan? [SR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93
 Those with an Asthma action plan (code 1 at A13a) n=87

Asthma first aid

Know how to administer Asthma first aid (%)



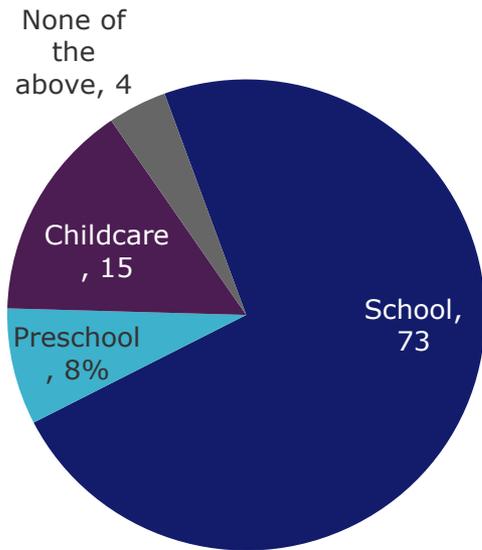
Those who know how to administer asthma first aid: Confidence (%)



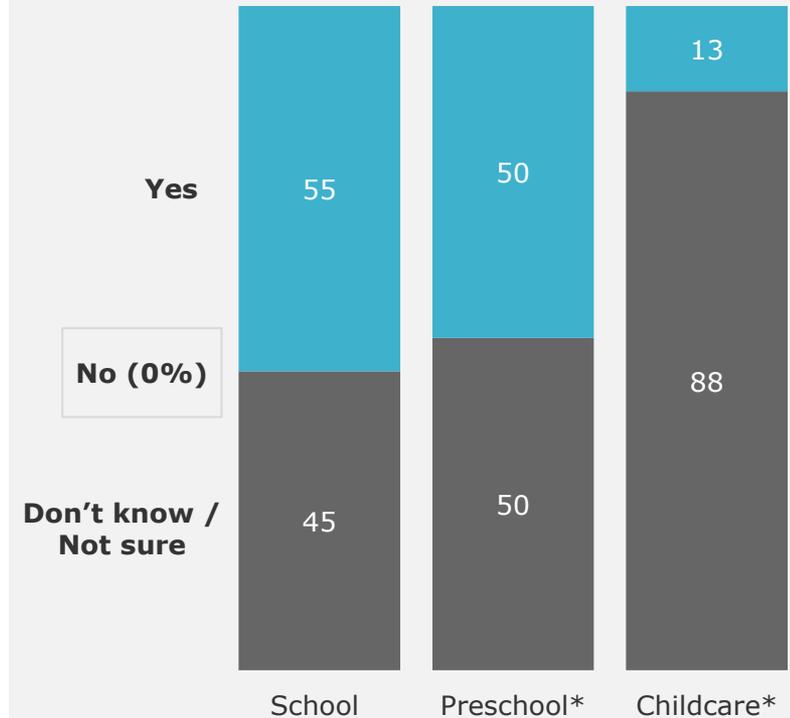
SOURCE : A15a. Do you know anything about how to administer asthma first aid in the event of an asthma emergency (i.e. if you or someone else is having a severe asthma attack)? [SR]
 A15b. And how confident do you feel in administering asthma first aid? [SR]
 BASE: All respondents n=258
 Those who know how to administer asthma first aid (code 1 at A15a) n=134

Asthma first aid

**Carers of child/children:
Current attendance (%)**



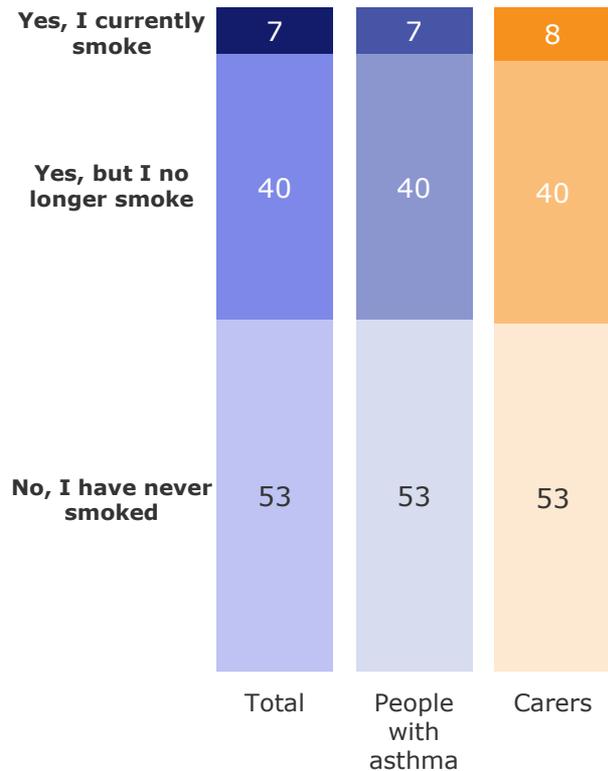
**Carers of child/children who attend
childcare/preschool*/school*:
Asthma training (%)**



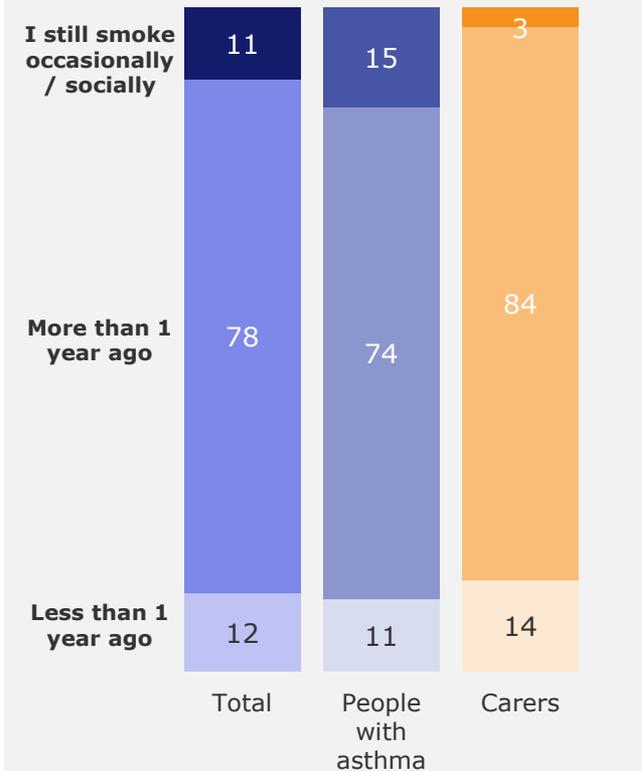
SOURCE : A16a. Does your youngest child with asthma currently attend school, preschool or childcare? [SR]
 A16b. Thinking about the <ENTER RESPONSE SELECTED AT A16a> your child with asthma currently attends, do you know if...? [SR]
 BASE: Carers of children (Code 1, 2 or 3 at A1b) n=52
 School n=38; Preschool n=4*; Childcare n=8*
 *Caution: Very small sample size, results are indicative only.

Smoking

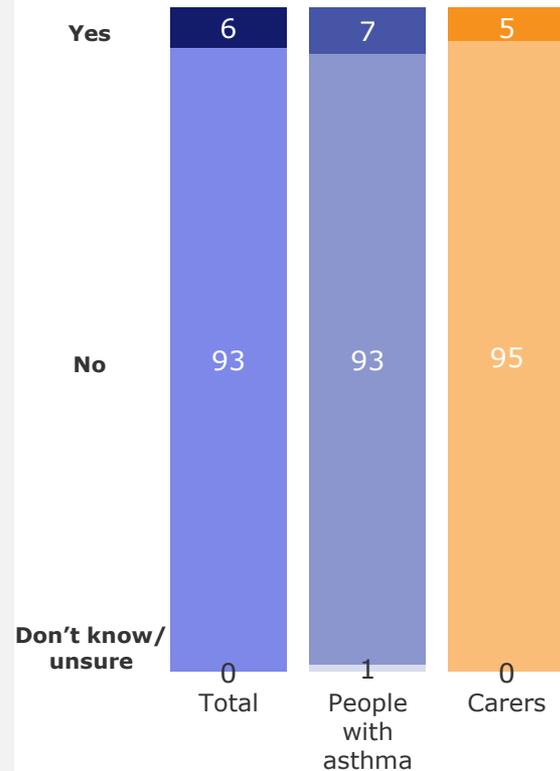
Smoking status (%)



Those who have since quit smoking:
How long since quitting (%)



Smoking inside car/house recently (%)



SOURCE : A18a. Do you or have you ever smoked cigarettes/tobacco? [SR]
 A18b. If you used to smoke but don't any more, when did you quit smoking? [SR]
 A18c. In the past week, has anyone, including yourself, smoked anywhere inside your house or car? [SR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93
 Those who used to smoke (code 2 at A18a) n=102

6

Productivity Impacts of Asthma



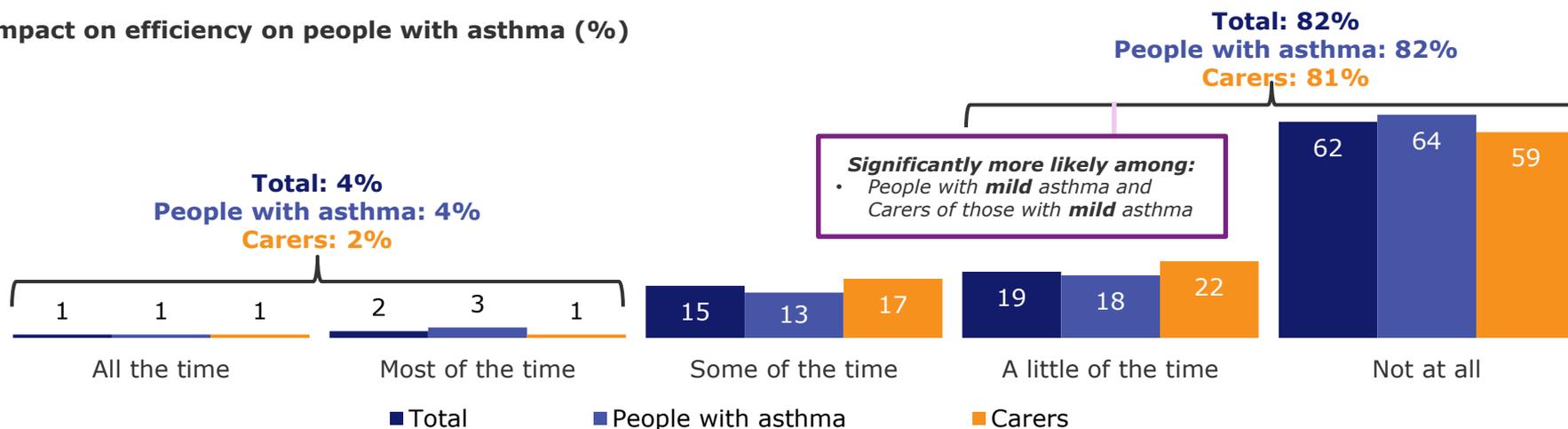
Productivity impacts of asthma

Summary

- The impact of asthma stems beyond the physical respiratory condition. It has the ability to impact on day-to-day living and productivity. Over the last 4 weeks asthma has impacted productivity with work, school or home (36% of people with asthma, 41% for carers). Encouragingly, for the majority of people with asthma (64%) and carers (59%), asthma has not impacted their productivity.
 - For carers of children with asthma, over half (55%) reported having their child absent from school due to asthma over the last 12 months. Forty-five percent of carers report their child has been absent for 6+ days over the 12 month period.
- For people with asthma and carers who are working or studying, over half (57%) report having had to take days off from work or study due to the asthma condition.
 - For those taking the time off work due to an asthma condition, the main consequences were needing to provide a medical certificate (25%) and having to use personal leave/ sick leave to cover the time off (18%).

Asthma causing disruption to normal routine

Impact on efficiency on people with asthma (%)



The impact of asthma on efficiency may be one of the drivers of perception of control of the asthma condition, with those with the perception that their asthma is under control, more likely to not be impacted (79% not at all) (see page 67).

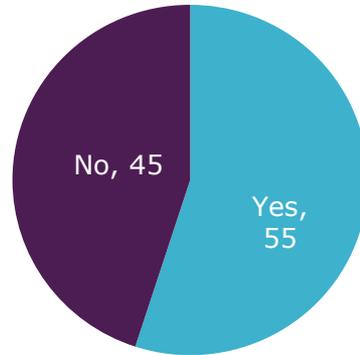
Impact on efficiency on carer (%)



SOURCE: B1a. In the past 4 weeks, how often did < your asthma / the asthma of the person you take care of > prevent < you / them > from getting as much done at work, school or home? [SR]
B1b. And in the past 4 weeks, how often did the asthma of the person you take care of prevent you from getting as much done at work, school or home? [SR]
BASE: All respondents n=258; People with asthma n=165; Carers n=93

Effect on school attendance

Absent from school due to asthma in the past 12 months (%)



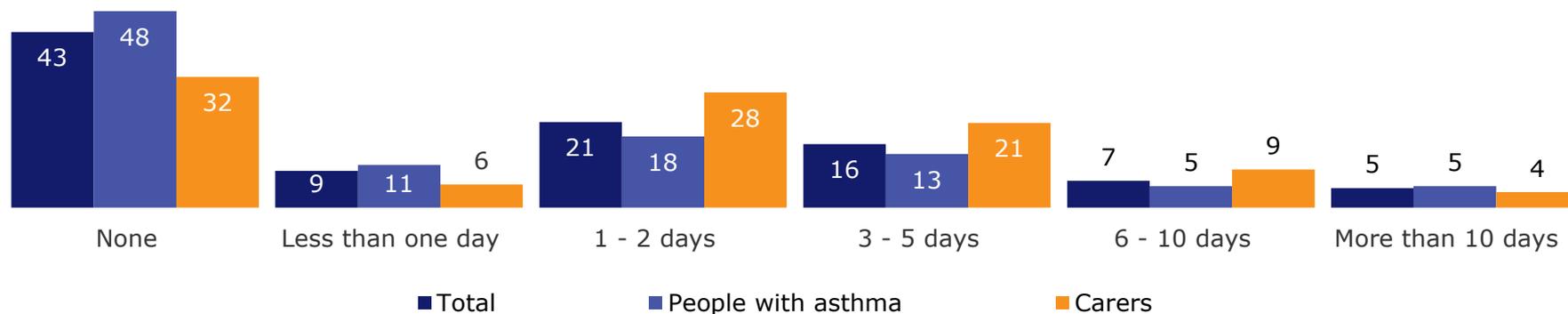
Days absent because asthma (%)



SOURCE: B2a. In the past 12 months, has your youngest child who suffers from asthma been absent from school, preschool or childcare due to their asthma? [SR]
B2b. How many days would you say your child has had off sick from school, preschool or childcare in the past 12 months due to asthma? [SR]
BASE: Carer of child/children who attends school, preschool or childcare n=47
Carer of child/children who have been absent due to asthma n=26; Caution: Small sample size, results are indicative only.

Asthma causing disruption to normal routine

Absent from work or study due to asthma in the past 12 months (%)



Consequences of time off due to asthma (%)

"I had to get doctors certificate to cover every day I had off so that I could get paid."
- Carer

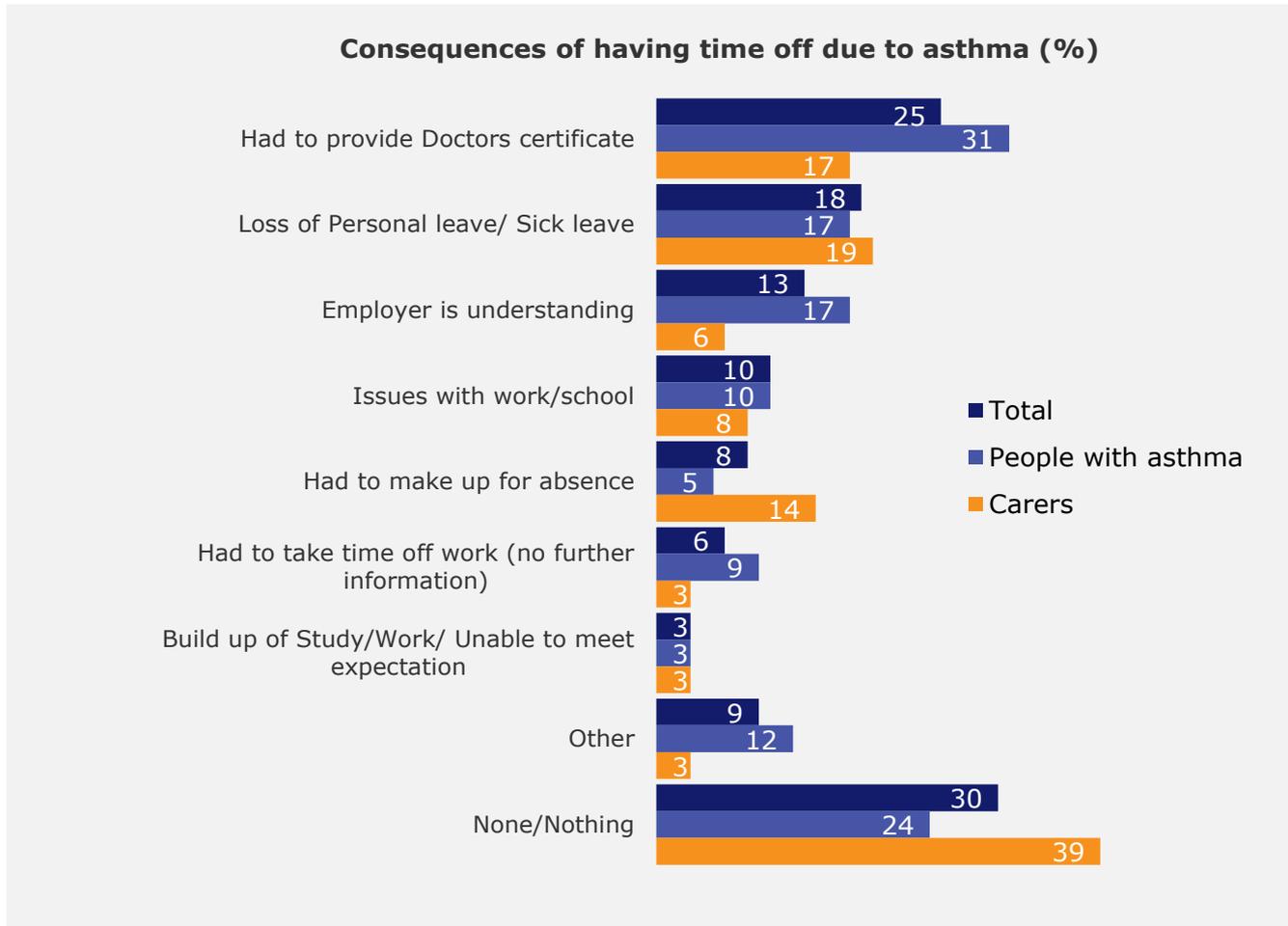
"Having to catch up on work is stressful. I feel embarrassed that I have to take time off work because of Asthma."
- Person with asthma

"I take time off to attend sporting events just to be safe."
- Carer

"My work was very understanding as I had become unwell which affected my asthma. They then helped me catch up on the work I missed when I returned."
- Person with asthma

SOURCE: B3. How many days, if any, would you say you have had to take off from work or study in the past 12 months < due to your asthma / to care for someone else with asthma >? [SR]
B4. What were the consequences for you and your work or study by having this time off? [OPEN]
BASE: Those who work or study n=91
Note: A full list of verbatim responses made is included in the appendix.

Consequences of having time off



B4. What were the consequences for you and your work or study by having this time off? [OPEN – CODED]
 BASE: Those who have had to take time off (code 2, 3, 4, 5 or 6 at B3) n=95
 Note: A full list of verbatim responses made is included in the appendix.

7

Asthma Healthcare Information



Asthma healthcare information

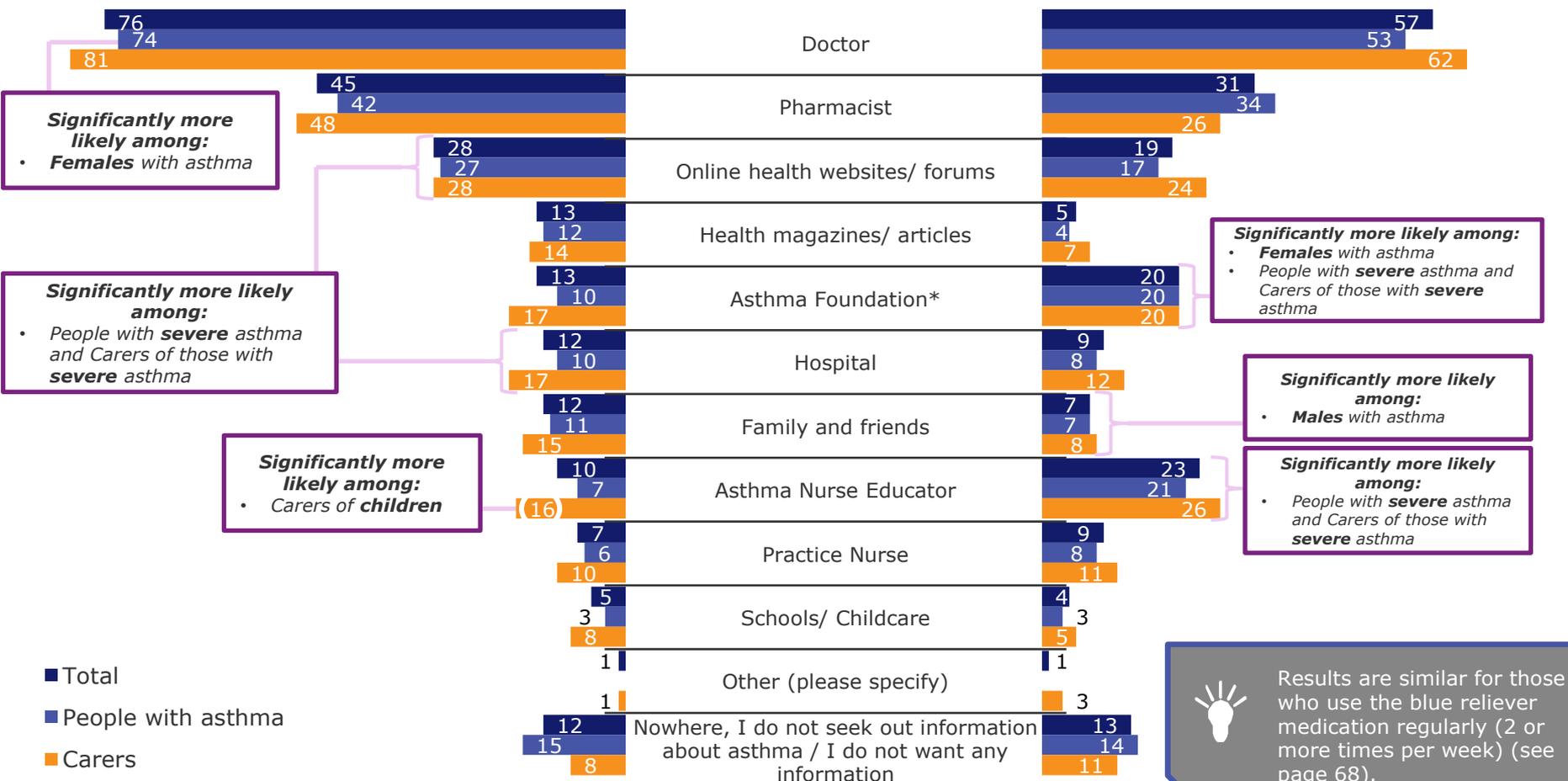
Summary

- Health professionals play the most important role as direct sources of information about asthma for people with asthma and carers. In particular, doctors are the key source of information, with three quarters of people with asthma and carers each currently sourcing information from doctors (76%), and nominating doctors as their preferred source of information (57%).
- Pharmacists are also an important source of information, with two in five people with asthma and carers sourcing information (45%) and preferring to source information from pharmacists (31%).
 - Currently nurses (Asthma Nurse Educators and Practice Nurses) are used less frequently as information sources. However, there is significant opportunity for them to play a greater role, particularly Asthma Nurse Educators.
- In terms of other sources of information, the internet is an important consideration, with over one quarter of people with asthma and carers (28%) currently sourcing information from online health websites/ forums, and two in five (20%) preferring to access information online.
- The Asthma Foundation is currently used as an information source by just over one in ten (13%) people with asthma and carers. However, there is room in providing more information, with 20% of people with asthma and carers indicating they would prefer to receive information about asthma from the Asthma Foundation.
- When it comes to the information people with asthma and carers receive, they're more likely to get information verbally (83%). The key information required by people with asthma and carers is around how to recognise if asthma is worsening and how to deal with it as a result (44%), asthma first aid steps (40%) and asthma medication (34%).

Information sources used and preferred

Information sources currently used (%)

Information sources prefer to use (%)



Results are similar for those who use the blue reliever medication regularly (2 or more times per week) (see page 68).

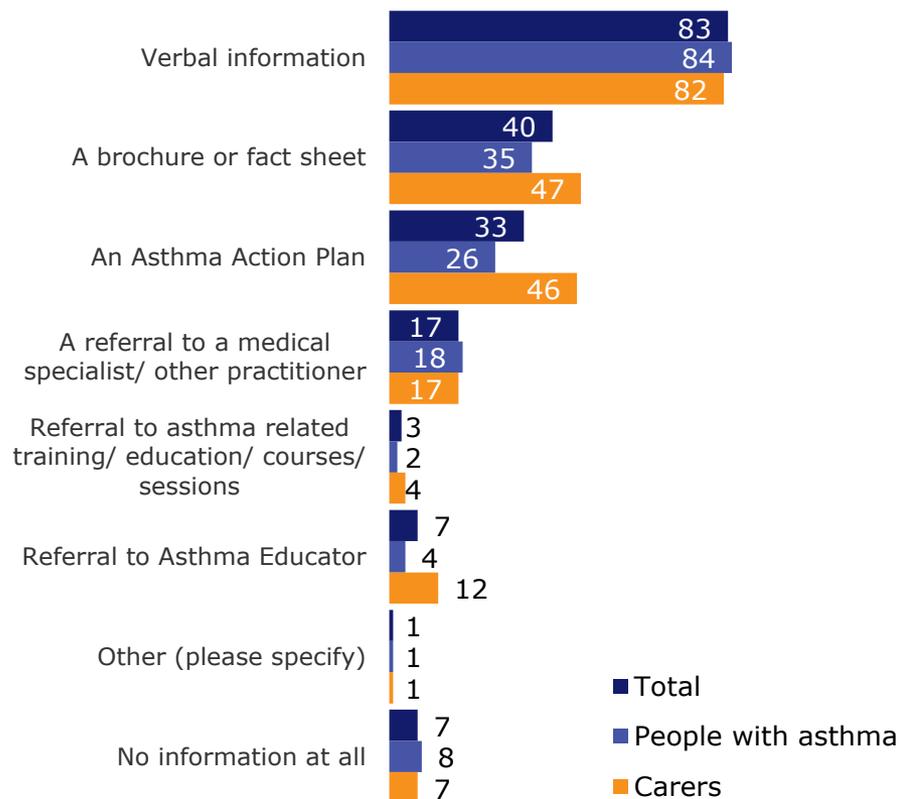
SOURCE: C1. Where do you currently source information about asthma, and where would you prefer to source this information? [MR]

BASE: All respondents n=258; People with asthma n=165; Carers n=93

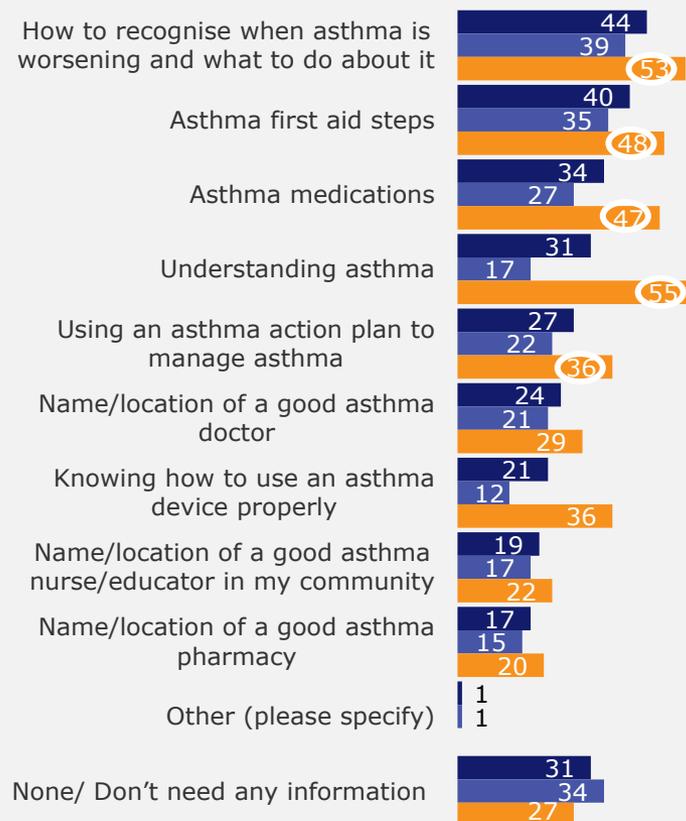
*Note: 'Asthma Foundation' was prompted generically under 'Information sources' prior to spontaneous awareness of 'organisations in the ACT that provide free information and support services for people with asthma', and prior to prompted awareness specifically of 'Asthma Foundation ACT'.

Types of information received and content sought

Types of information previously received (%)



Those who seek information:
Type of information sought (%)



SOURCE: C2. What type of information about managing asthma has your doctor or other health professional provided you with? [MR]
C3. Which of the following would you like fact sheets/ brochures/ information/ training on?
BASE: All respondents n=258; People with asthma n=165; Carers n=93
Those who sought information (code 1-7, or 97 at C1b) n=210

8

Awareness and Experience of Asthma Services in the ACT



Awareness and experience of asthma services in the ACT (1) Summary

- Just under half (46%) of people with asthma and carers are aware there is an organisations in the ACT that provide free information and support services for people with asthma. However when asked for the specific name, only one in ten (8%) cited specifically the Asthma Foundation ACT as this organisation. Higher prevalence exists however (25%) for the generic 'Asthma Foundation' brand.
- For those who knew of an organisations in the ACT that provide free information and support services for people with asthma, two-thirds (66%) knew how to access this service.

Asthma Foundation ACT

- We then asked people with asthma and carers if they had heard of Asthma Foundation ACT. Around two in three (63%) cite awareness on prompting. However, the majority (53% of the total) indicate that they have never accessed any Asthma Foundation ACT resources or services. Just over one in ten (11%) people with asthma or carers register use of at least some of Asthma Foundation ACT's resources or services.
- There is a clear opportunity to extend provision of a greater level of resources and services to the asthma community with strong interest registered in information services from Asthma Foundation ACT, particularly in an online capacity; with three in five (57%) registering interest in visiting a comprehensive website, and one in four (25%) registering interest in subscribing to a regular e-newsletter. Furthermore, a quarter (25%) express interest in calling a free information line to discuss the asthma condition with a trained asthma educator (particularly carers and people with severe asthma), and one in four (26%) with attending a free workshop with a trained asthma educator.

Awareness and experience of asthma services in the ACT (2) Summary

Asthma Nurse Educator Service

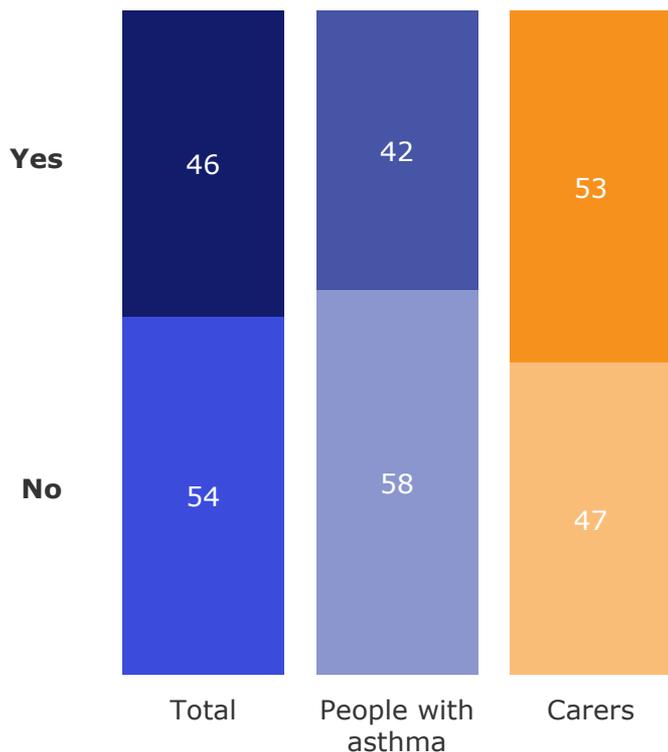
- Prompted awareness of Asthma Nurse Educator Service is low; only 22% of people with asthma and carers have heard of them. Furthermore, only a small proportion (10%) have actually used them.
- The types of information and services desired from Asthma Nurse Educator Service typically relate to written hand-outs (35%) and broad educational activities such as phone conversations (18%), home visitations (16%) and asthma group education (14%).

Adult Asthma Educator Service

- Prompted awareness of Adult Asthma Educator Service is also low; only 19% of people with asthma and carers have heard of them. Furthermore, only a small proportion (5%) have actually used them.
- The types of information and services desired from Asthma Nurse Educator Service typically relate to written hand-outs (36%), asthma education sessions (30%) and phone conversations (16%).

Unprompted awareness of asthma services in the ACT

Unprompted awareness of 'Asthma organisation' (%)



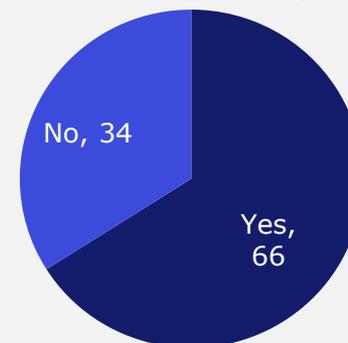
Those who recall an 'Asthma organisation':

Unprompted name (%)

Asthma Foundation	25%
Asthma Foundation ACT	8%
Asthma ACT	5%
Asthma Nurse Educator	5%
ACT Health	3%
Asthma Australia	1%
Asthma Hotline	1%
Other	3%
Don't know	50%

Those who recall an 'Asthma organisation':

Know how to access these organisations (%)



SOURCE : D1a. Are you aware that there are organisations in the ACT that provide free information and support services for people with asthma? [SR]

D1b. Do you know the name of these organisations? [OPEN - CODED]

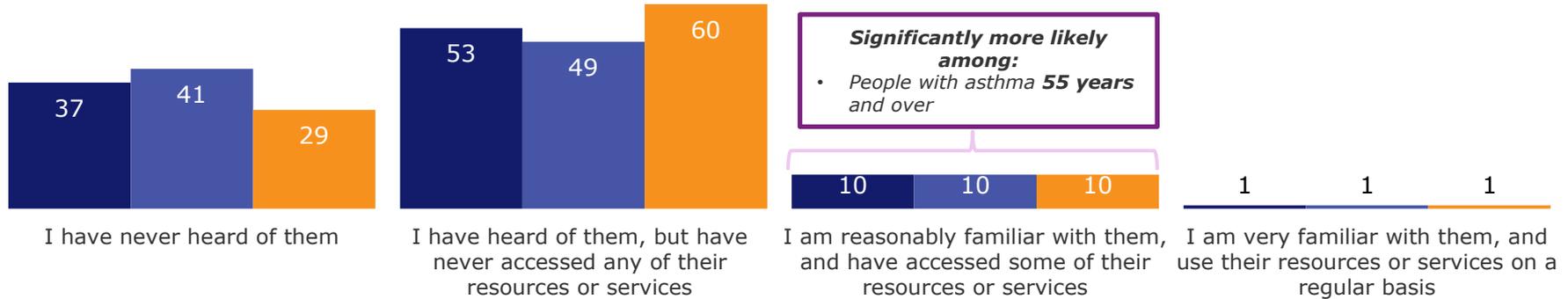
D1c. Do you know how to access these organisations? [SR]

BASE: All respondents n=258; People with asthma n=165; Carers n=93

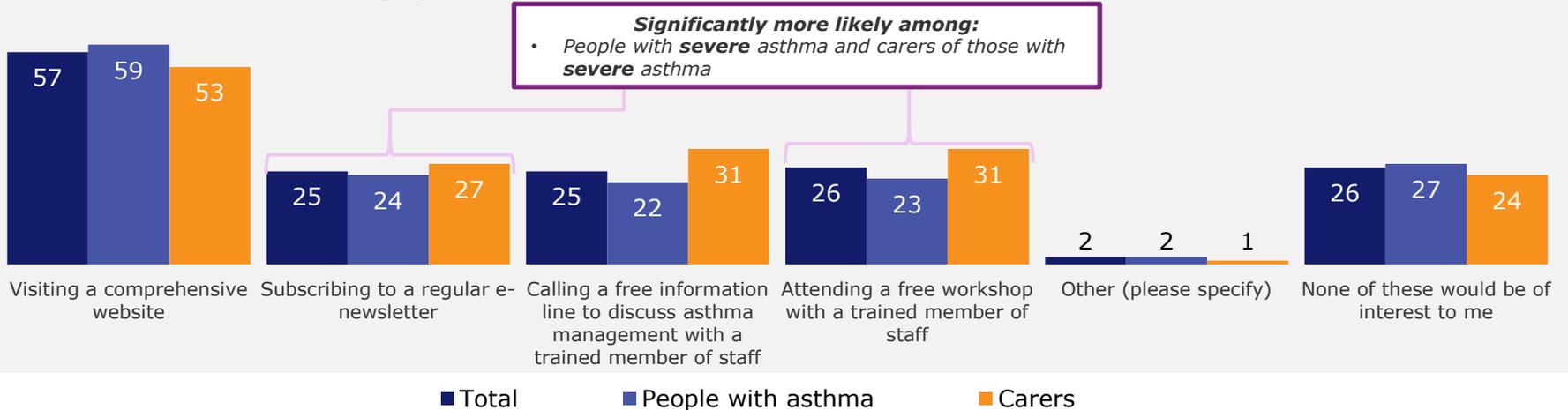
Those who recall an 'asthma organisation' n=119

Prompted awareness of Asthma Foundation ACT

Prompted awareness of Asthma Foundation ACT (%)



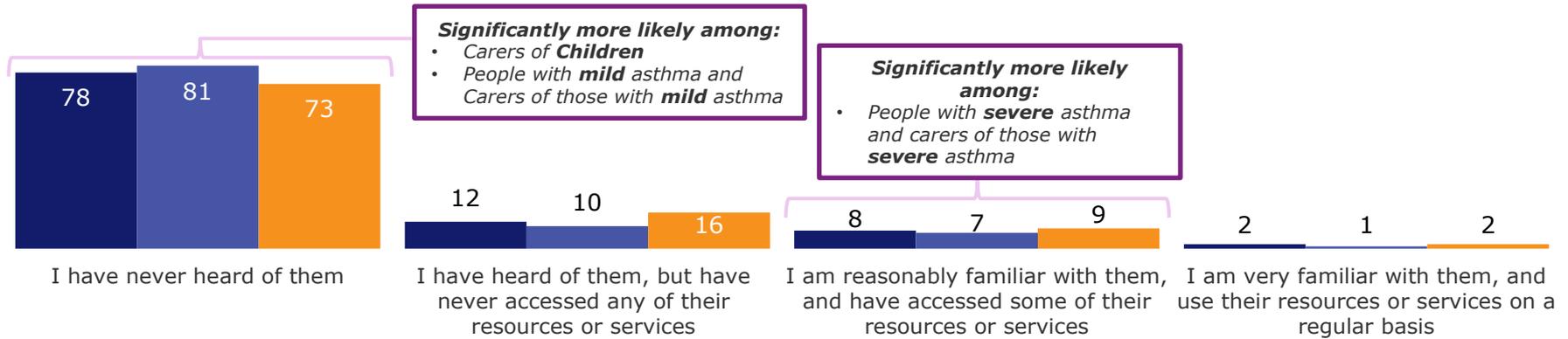
Information services of interest (%)



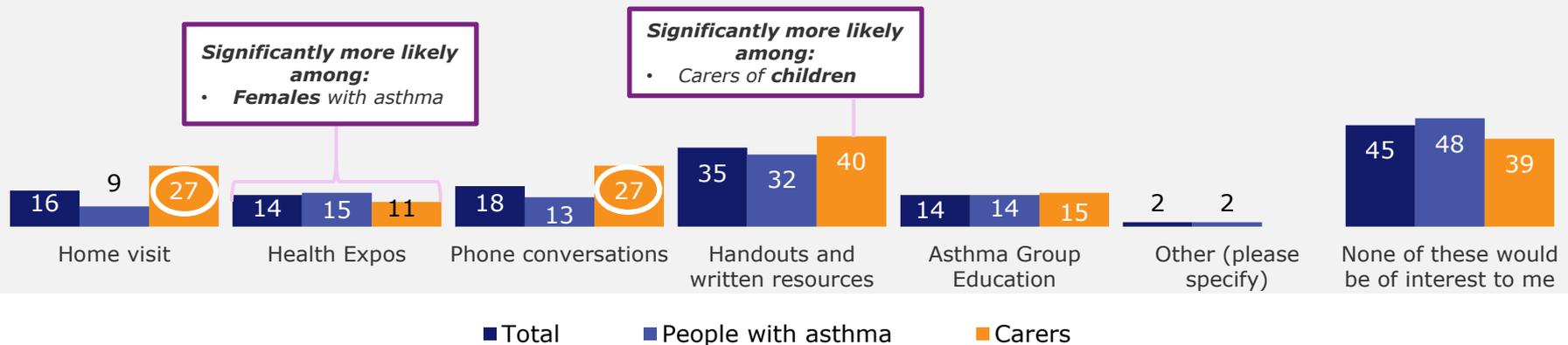
SOURCE: D2. Have you heard of the Asthma Foundation ACT and used their services? [SR]
 D3. Which of the following asthma information services provided by the Asthma Foundation ACT would be of interest to you? [MR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Prompted awareness of Asthma Nurse Educator Service

Prompted awareness of Asthma Nurse Educator Service (%)



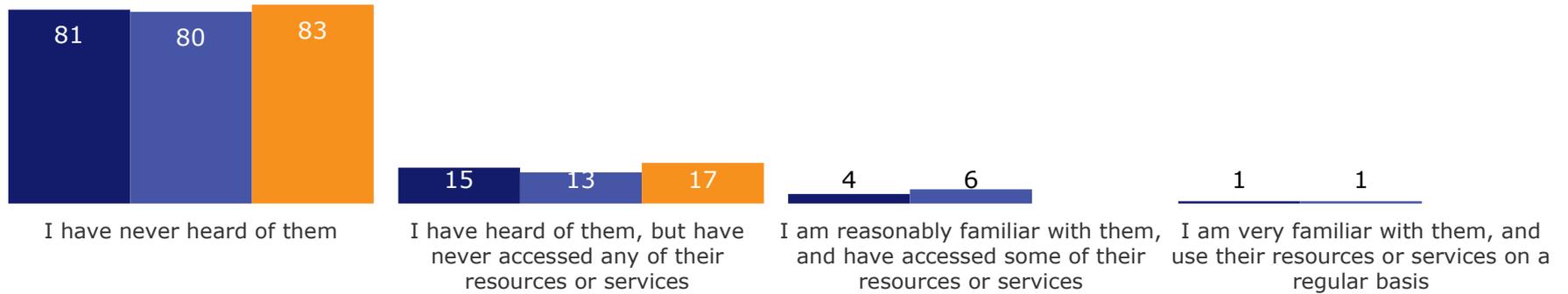
Information services of interest (%)



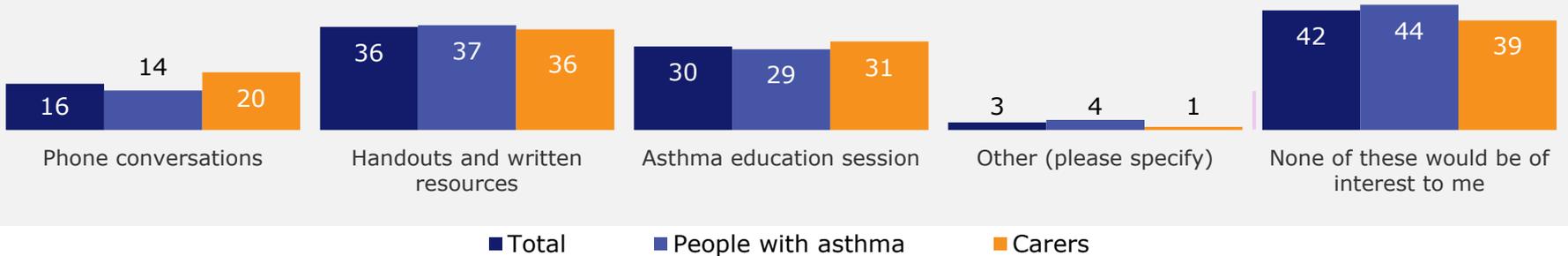
SOURCE: D4a. Have you heard of the Asthma Nurse Educator Service (formerly Community Asthma Support Service) and used their services? [SR]
 D4b. Which of the following asthma information services provided by the Asthma Nurse Educator Service (formerly Community Asthma Support Service) would be of interest to you? [MR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

Prompted awareness of Adult Asthma Educator Service

Prompted awareness of Adult Asthma Educator Service (%)



Information services of interest (%)



SOURCE: D5a. Have you heard of the Adult Asthma Educator Service at The Canberra Hospital and used their services? [SR]
 D5b. Which of the following asthma information services provided by the Asthma Nurse Educator Service (formerly Community Asthma Support Service) would be of interest to you? [MR]
 BASE: All respondents n=258; People with asthma n=165; Carers n=93

9

Respondent Profile



Respondent profile

Asthma or asthma related symptoms



- Yes, asthma
- Yes, other asthma related symptoms

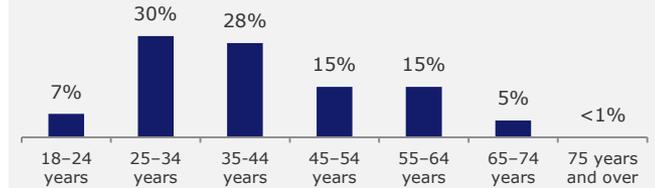
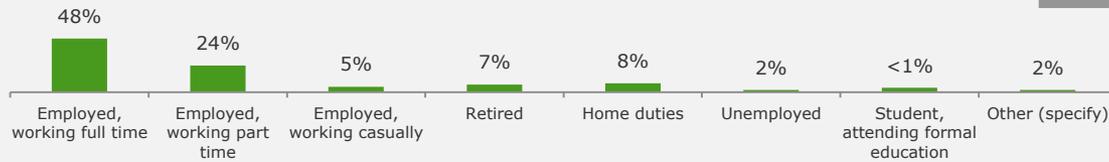
Recency of asthma and/or related symptoms



- Within the past 12 months
- Within the past 2 - 3 years

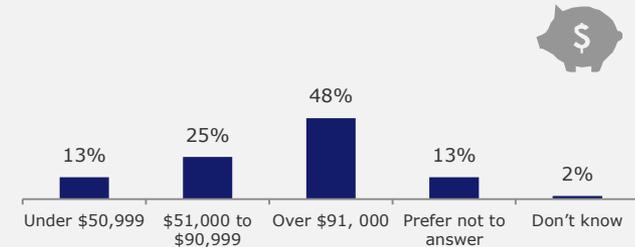
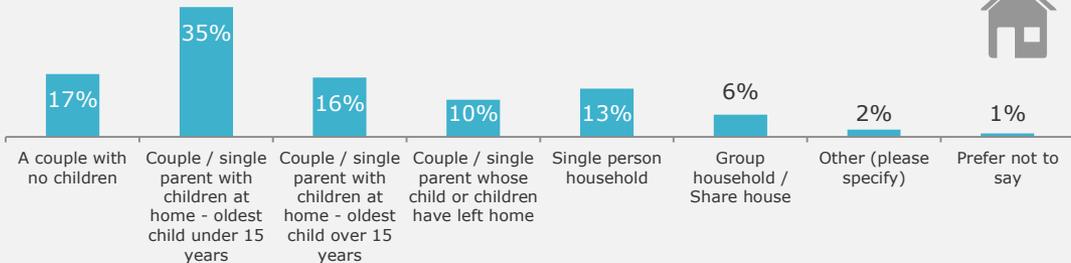


- Male
- Female



Average number of children per household 2.3

Average number of children with asthma 1.0



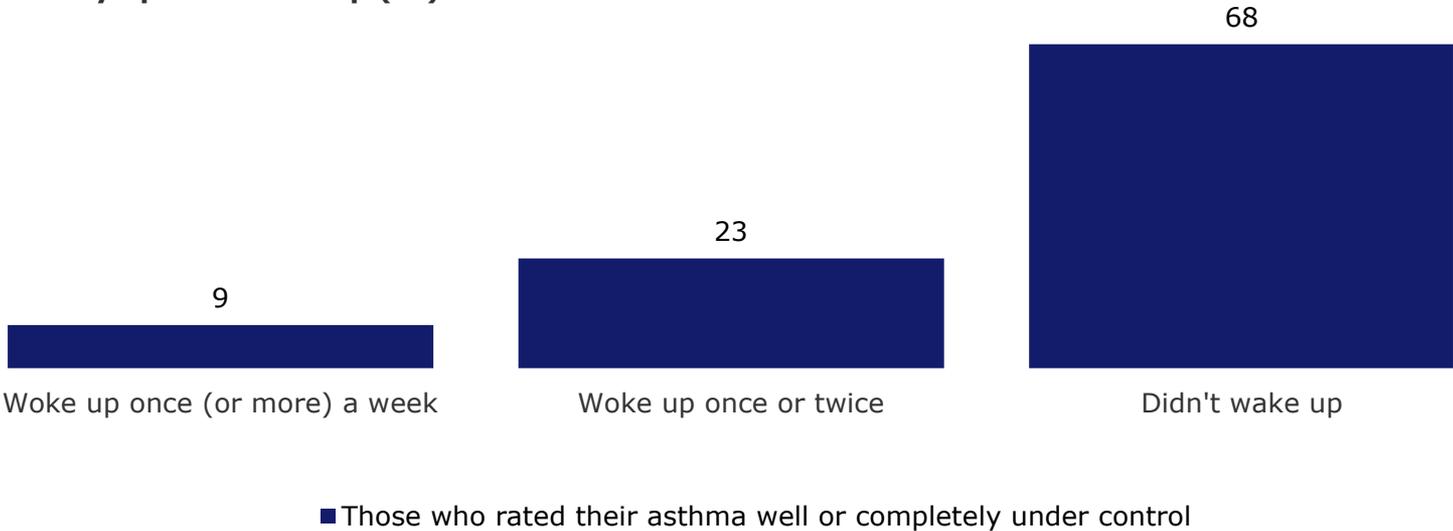
10

Appendix I: Additional Analysis



Affect of asthma symptoms on sleep by those who rated their asthma well or completely under control

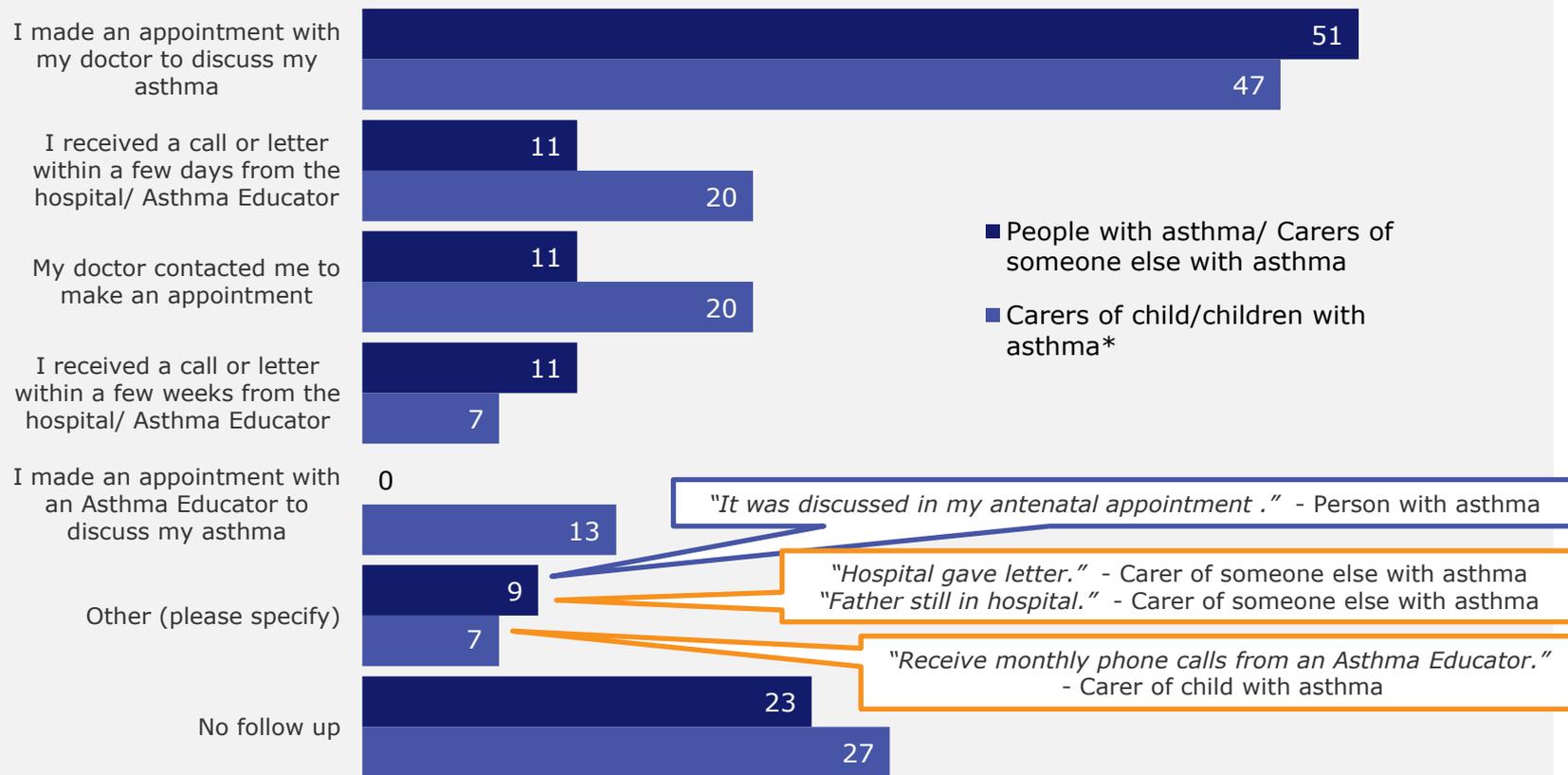
Affect of asthma symptoms on sleep (%)



SOURCE: A6. During the past 4 weeks, how often did < your asthma symptoms / the asthma symptoms of the person you take care of > wake < you / them > up at night or earlier than usual in the morning? [SR]
BASE: Those who rated their asthma well or completely under control (code 4 or 5 at A7) n=163

Medical services in past 12 months - use and frequency (adults vs children)

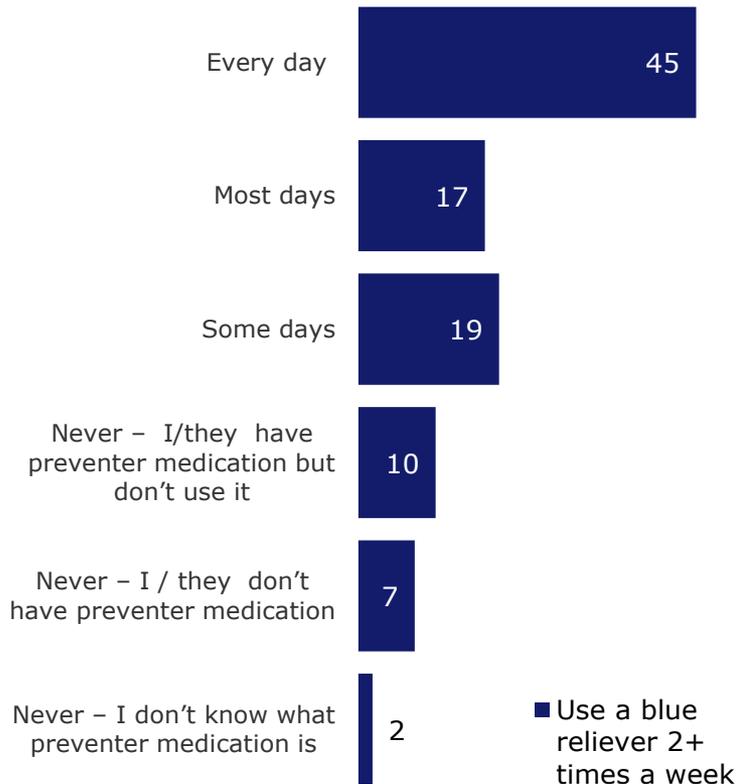
Those who had visited the emergency department/hospital:
Follow up contact received (%)



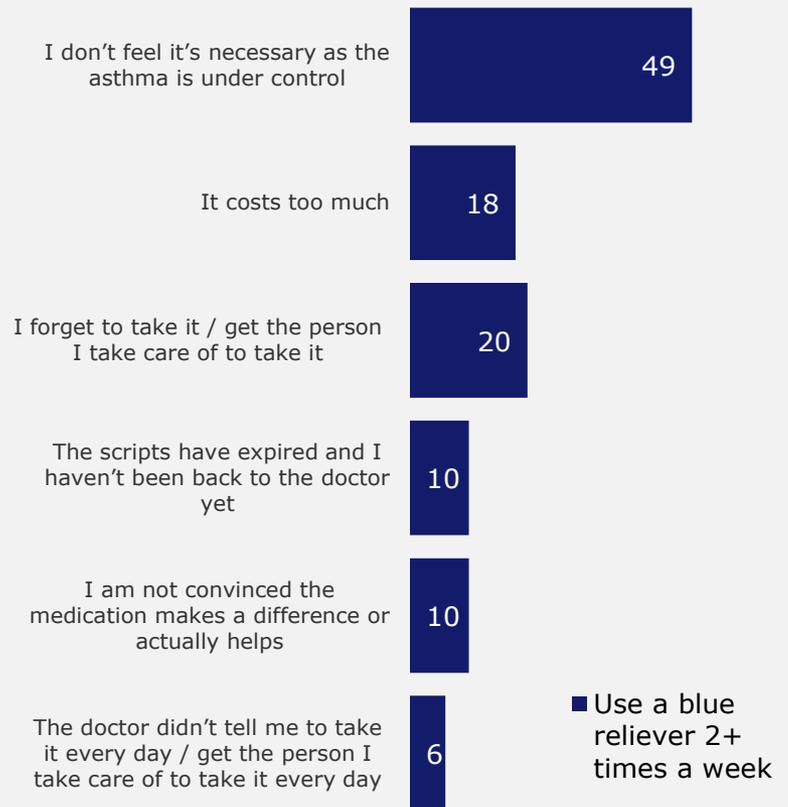
SOURCE: A4b. You mentioned that you have gone to hospital or the emergency department in the past 12 months because of <your asthma / the asthma of the person you take care of>. Since returning home from that hospital visit, what follow-up has there been from the hospital, an Asthma Educator, or your doctor? [MR]
 BASE: Those who had visited the emergency department (code 2, 3, 4 or 5 at A3b) n=35 People with asthma/ Carers of someone else with asthma, n=15 Carers of child/ children with asthma.
 *Caution: Very small sample size, results are indicative only.

Use of preventer medication by those who use their blue reliever puffer 2 or more times a week

Use of preventer medication (%)



Those who don't use medication everyday:
Reasons for not using preventer medication (%)



SOURCE: A8a. < Do you / Does the person you take care of> normally use preventer medication...? [SR]

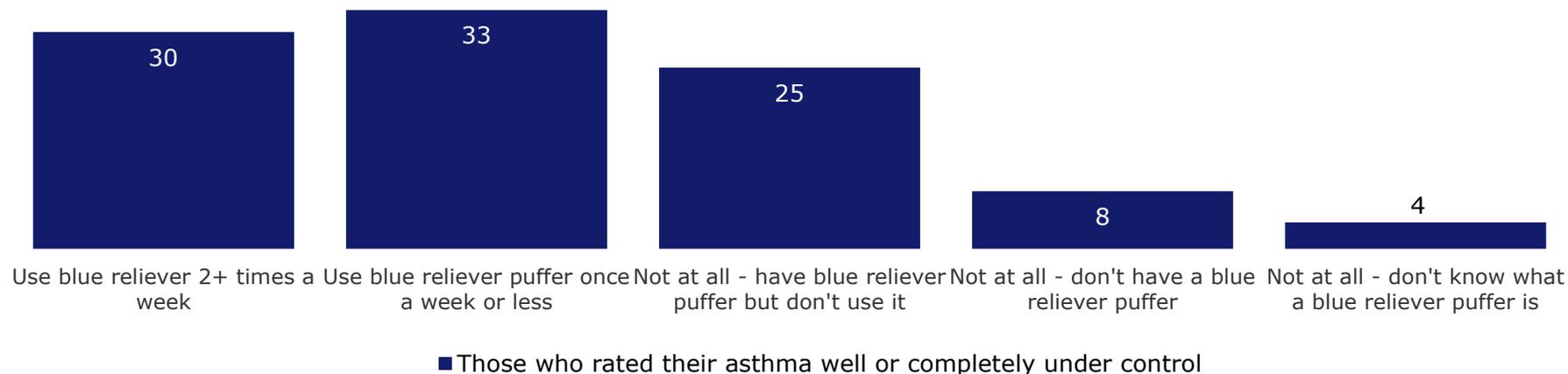
A8b. Is there a reason < you don't take your / the person you take care of doesn't take their > preventer medication every day? [MR]

BASE: Those who use a blue reliever puffer 2 or 3 times a week or more (code 1,2 or 3 at A9) n=107

Those who don't use their preventer medication every day (code 2, 3 or 4 at A8a) and who use a blue reliever puffer 2 or 3 times a week or more (code 1,2 or 3 at A9) n=49

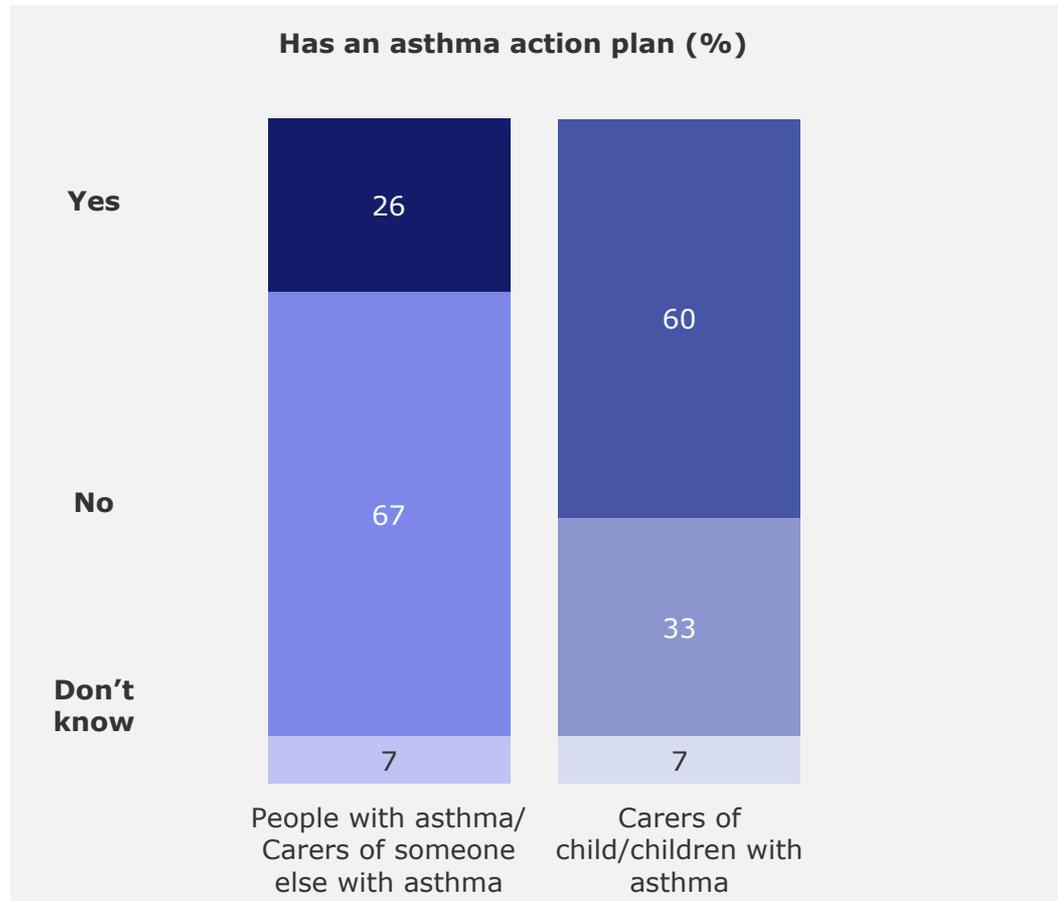
Use of blue reliever medication and spacer by those who rated their asthma well or completely under control

Use of blue reliever medication (%)



SOURCE: A9. During the past 4 weeks, how often < have you used your / has the person you take care of used their > blue reliever puffer? [SR]
BASE: Those who rated their asthma well or completely under control (code 4 or 5 at A7) n=163

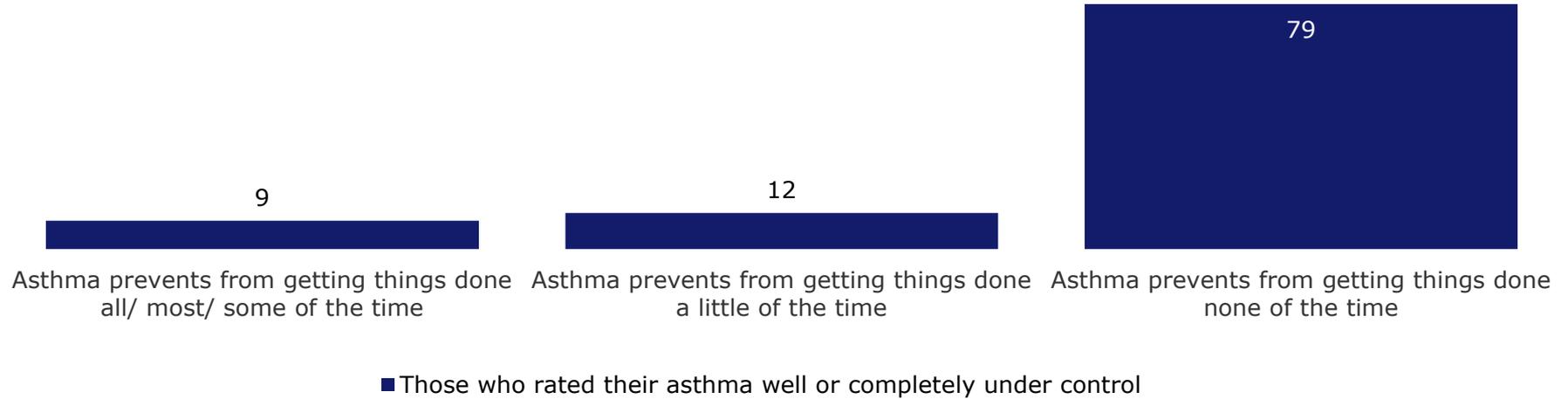
Use of an asthma action plan (adults vs children)



SOURCE : A13a. < Do you / Does the person you take care of > have an asthma action plan? [SR]
BASE: All respondents (n=200 People with asthma/ Carers of someone else with asthma, n=58 Carers of child/ children with asthma)

Asthma causing disruption to normal routine by those who rated their asthma well or completely under control

Impact on efficiency (%)

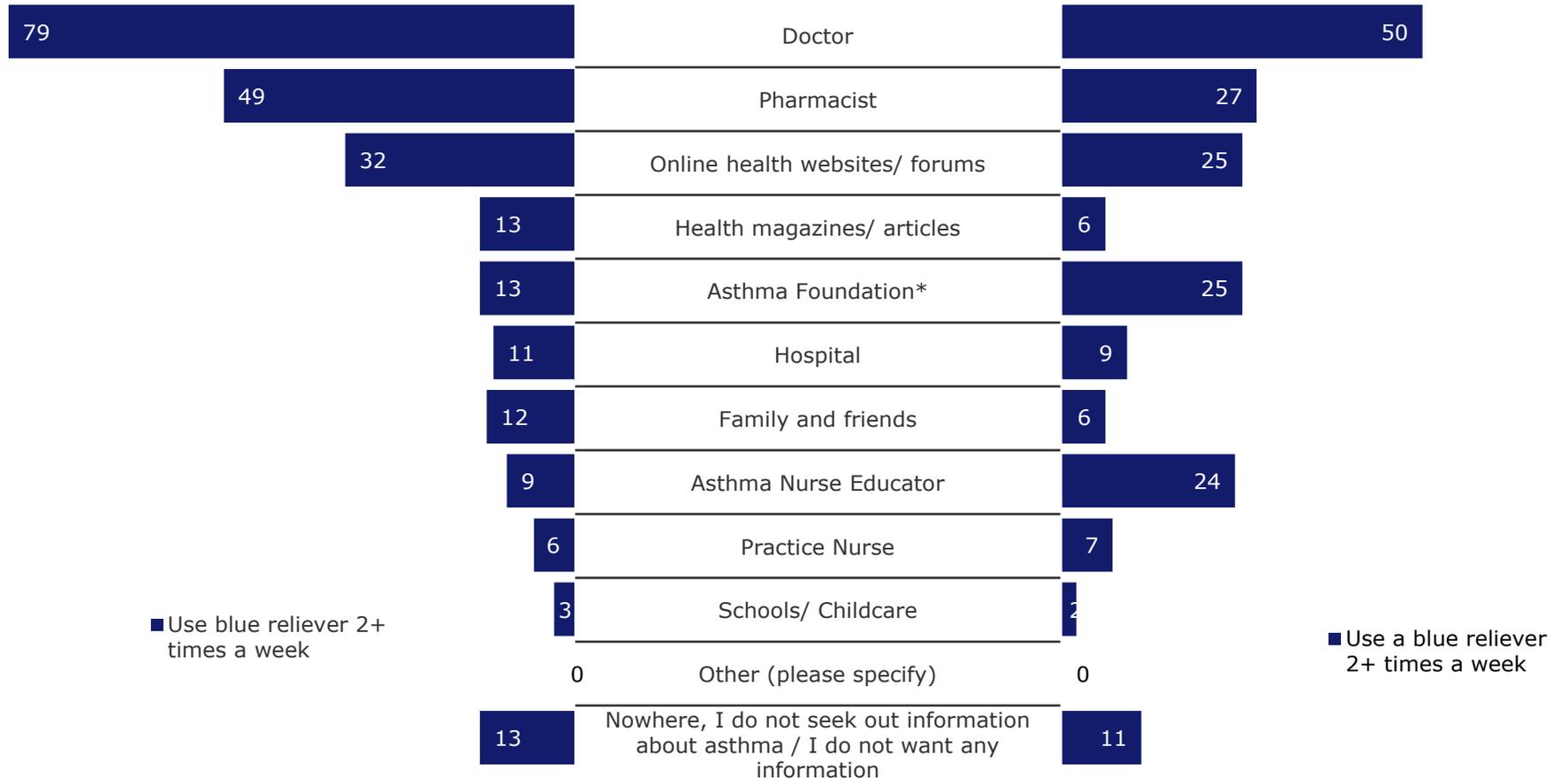


SOURCE: B1a. In the past 4 weeks, how often did < your asthma / the asthma of the person you take care of > prevent < you / them > from getting as much done at work, school or home? [SR]
BASE: Those who rated their asthma well or completely under control (code 4 or 5 at A7) n=163

Information sources used and preferred by those who use their blue reliever puffer 2 or more times a week

Information sources currently used (%)

Information sources prefer to use (%)



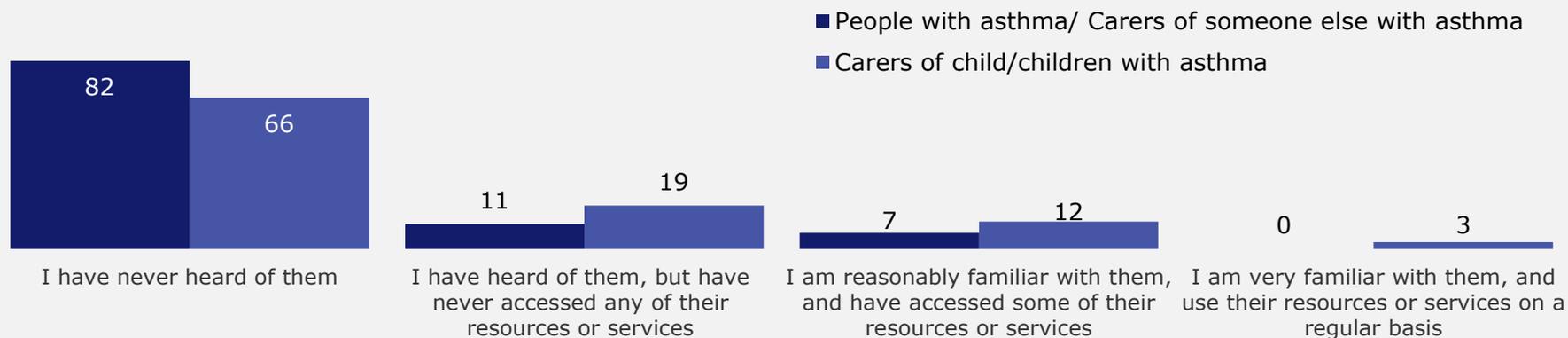
SOURCE: C1. Where do you currently source information about asthma, and where would you prefer to source this information? [MR]

BASE: Those who use a blue reliever puffer 2 or 3 times a week or more (code 1,2 or 3 at A9) n=107

*Note: 'Asthma Foundation' was prompted generically under 'Information sources' prior to spontaneous awareness of 'organisations in the ACT that provide free information and support services for people with asthma', and prior to prompted awareness specifically of 'Asthma Foundation ACT'.

Prompted awareness of Asthma Nurse Educator Service (adults vs children)

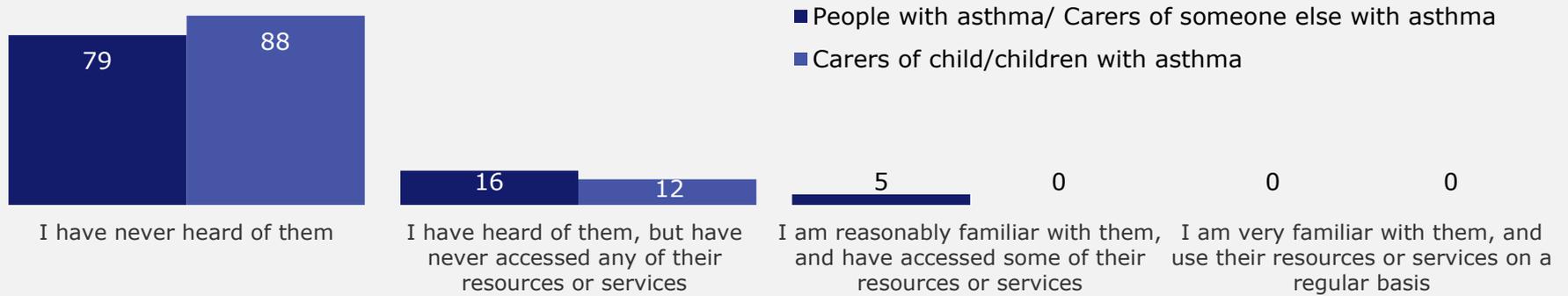
Prompted awareness of Asthma Nurse Educator Service (%)



SOURCE: D4a. Have you heard of the Asthma Nurse Educator Service (formerly Community Asthma Support Service) and used their services? [SR]
BASE: All respondents (n=200 People with asthma/ Carers of someone else with asthma, n=58 Carers of child/ children with asthma)

Prompted awareness of Adult Asthma Educator Service (adults vs children)

Prompted awareness of Adult Asthma Educator Service (%)



SOURCE: D5a. Have you heard of the Adult Asthma Educator Service at The Canberra Hospital and used their services? [SR]
BASE: All respondents (n=200 People with asthma/ Carers of someone else with asthma, n=58 Carers of child/ children with asthma)

The logo consists of a solid magenta square. In the bottom right corner of this square, the letters "TNS" are written in a bold, white, sans-serif font.

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