

# President's Task Force on Environmental Health Risks and Safety Risks to Children

## Coordinated Federal Action Plan to Reduce Racial and Ethnic Asthma Disparities

Division of Lung Diseases  
National Heart, Lung, and Blood Institute

National Center for Environmental Health  
Centers for Disease Control and Prevention

Indoor Environments Division  
U.S. Environmental Protection Agency

US Department of Housing and Urban  
Development



## Task Force on Environmental Health Risks and Safety Risks to Children

### Goal:

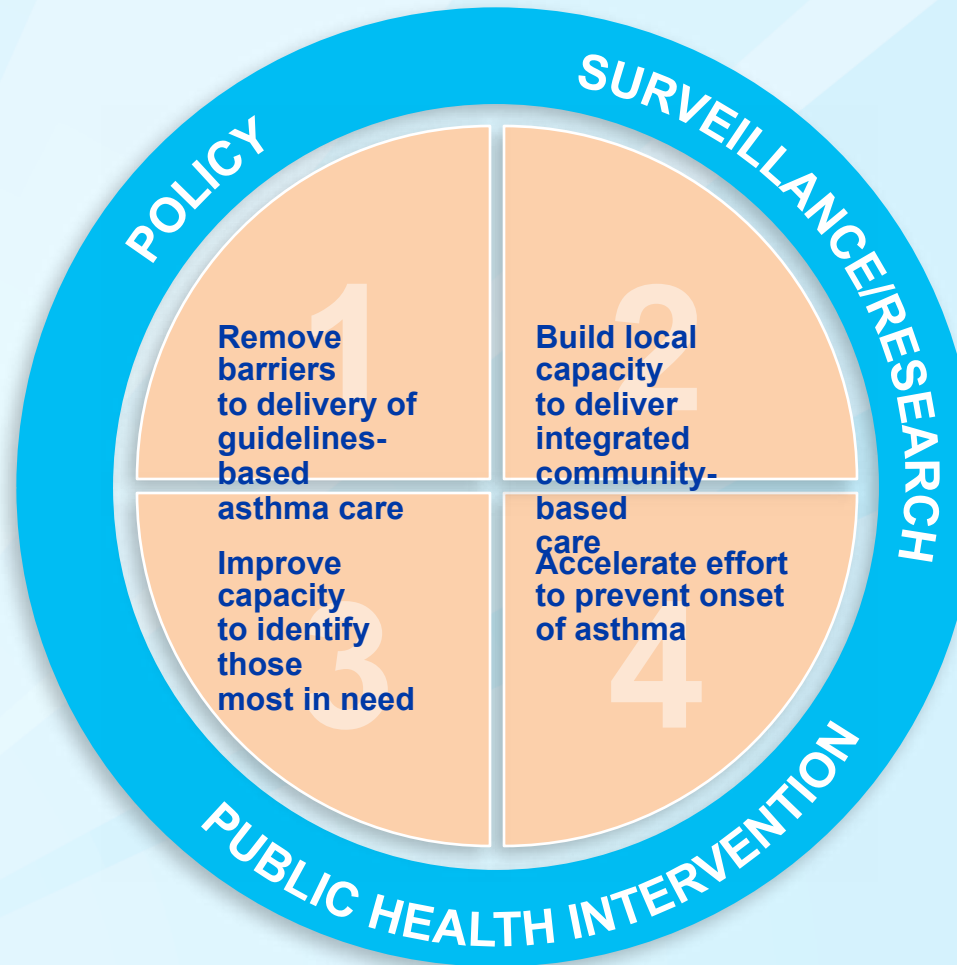
- Improve delivery of results to the public to address environmental health risks and safety risks to children
- *Accelerate interagency coordination and action*
- Three priority areas
  - Asthma disparities
  - Chemical exposures
  - Healthy settings

## Federal Action Plan

Federal Action Plan to Reduce Racial and Ethnic Asthma Disparities will:

- Focus on coordination and collaboration
- Leverage existing resources and program capabilities
- Ensure there is an evidence base

# Federal Action Plan: Four Strategies



## Highlights: Strategy One

### Remove Barriers to Guidelines-Based Care

- Explore reimbursement strategies to cover all asthma care services and reduce out-of-pocket expenses
- In health care settings, coordinate existing federal programs to improve QOC to disparate populations
- In homes, reduce environmental exposures (promote CG recommendations, federally assisted housing)
- In school and child care settings, implement asthma care services and reduce environmental triggers

## Highlights: Strategy Two

### Build local capacity to deliver integrated, comprehensive care

- Encourage cross-sector linkages and partnerships between asthma programs and community health workers, healthy homes, tobacco control, radon and lead reduction, and obesity programs
- Address state and local policies and practices that protect children from health risks associated with air pollution (transportation and goods movement, new home construction, school siting, public awareness)

## **Highlights: Strategy Three**

### **Improve capacity to identify children with a disparate burden**

- Explore emerging technologies (e.g., health GIS, internet and mobile phone, hotspot analysis) to enhance identification of target populations and tracking risk factors for poor asthma outcomes
- Standardize and promote definitions, measures, outcomes and information/data collection methods, and maximize availability and use of collected data

## **Highlights: Strategy Four**

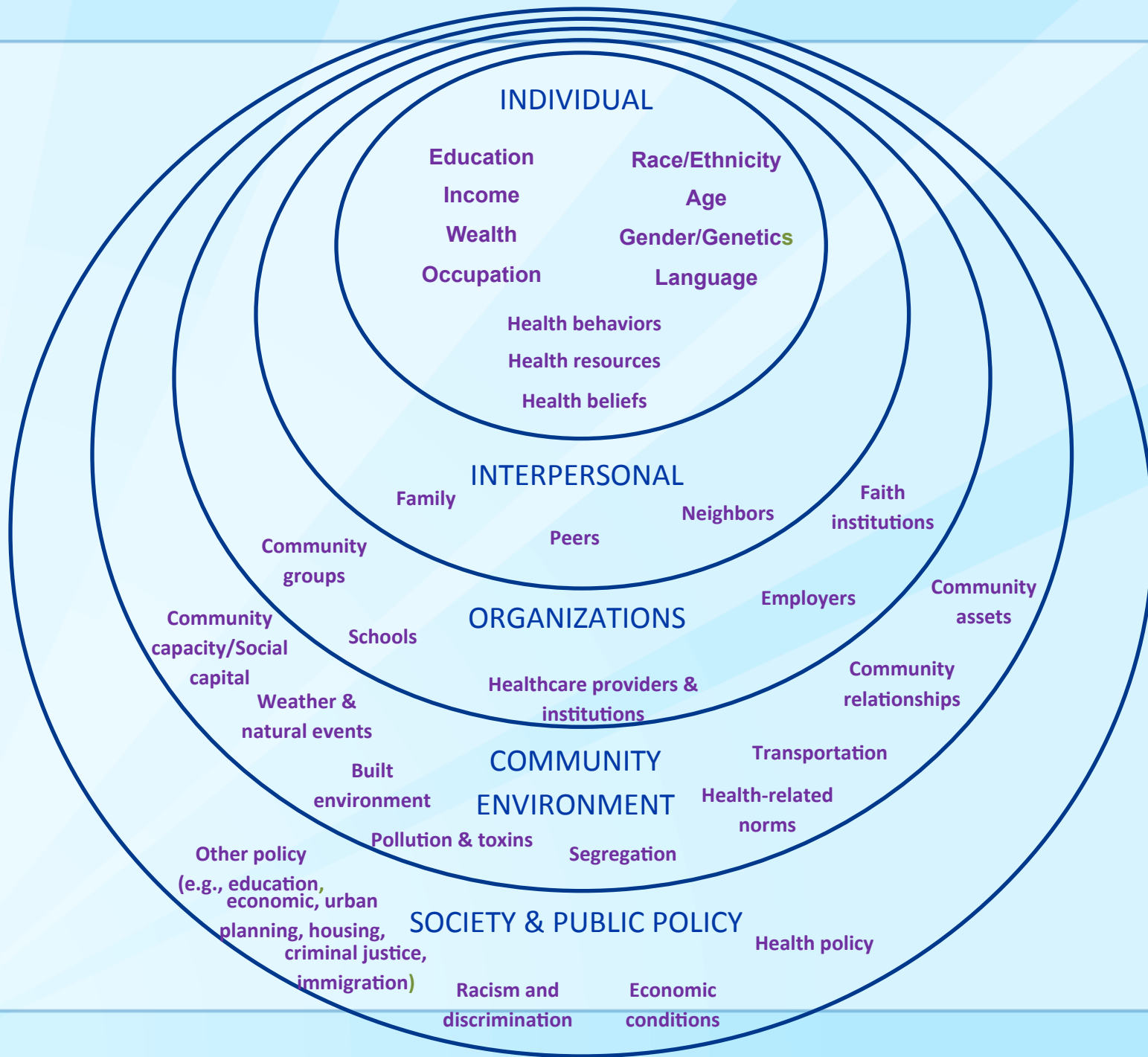
### **Accelerate efforts to prevent the onset of asthma**

- Reduce exposure to environmental tobacco smoke among pregnant women and infants.
- Establish priorities and collaborations across federal agencies for research to identify and test interventions that prevent the onset of asthma
- Coordinate asthma research programs across federal agencies that support observational follow-up of birth cohorts.

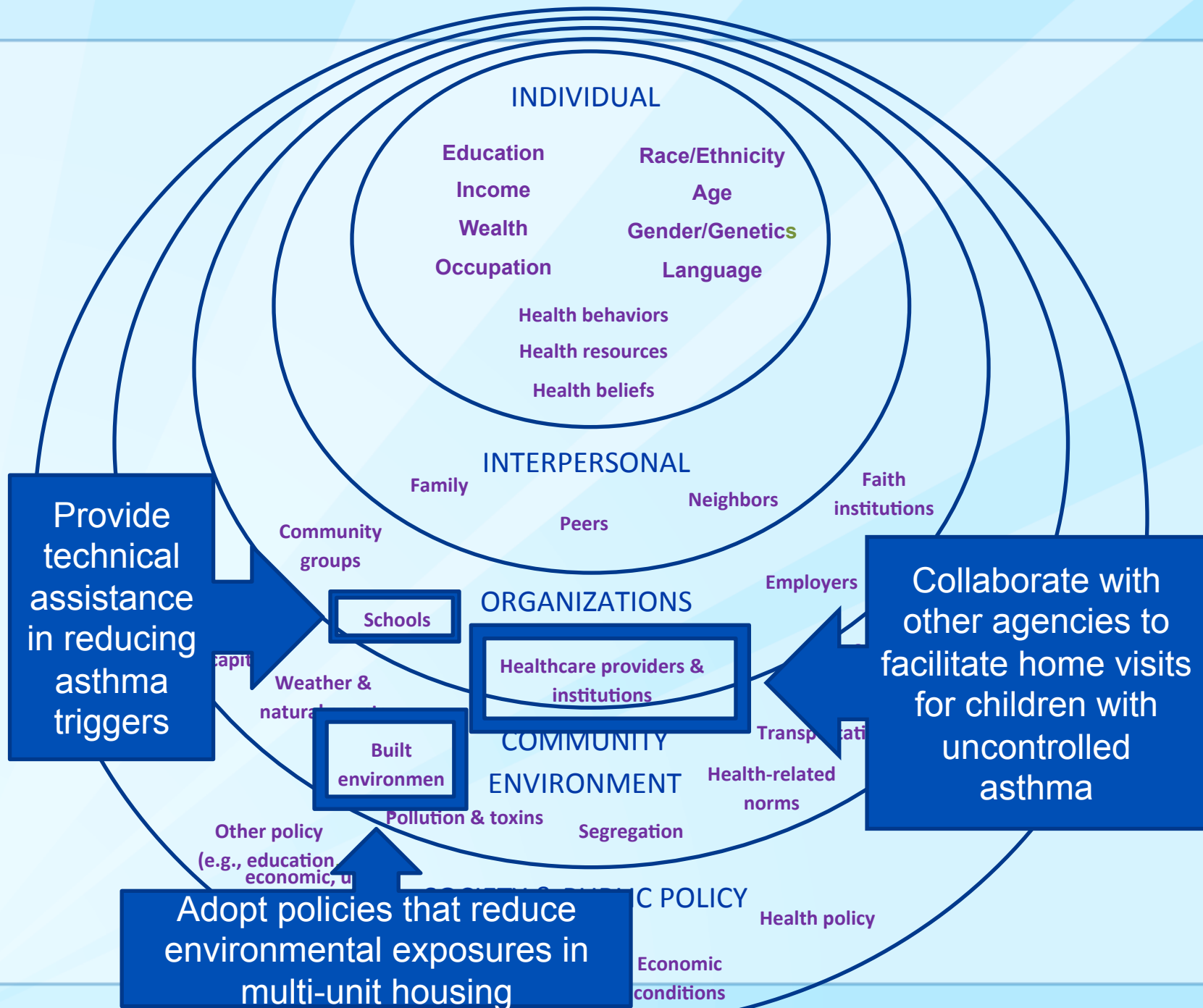


**How Can You Contribute?**

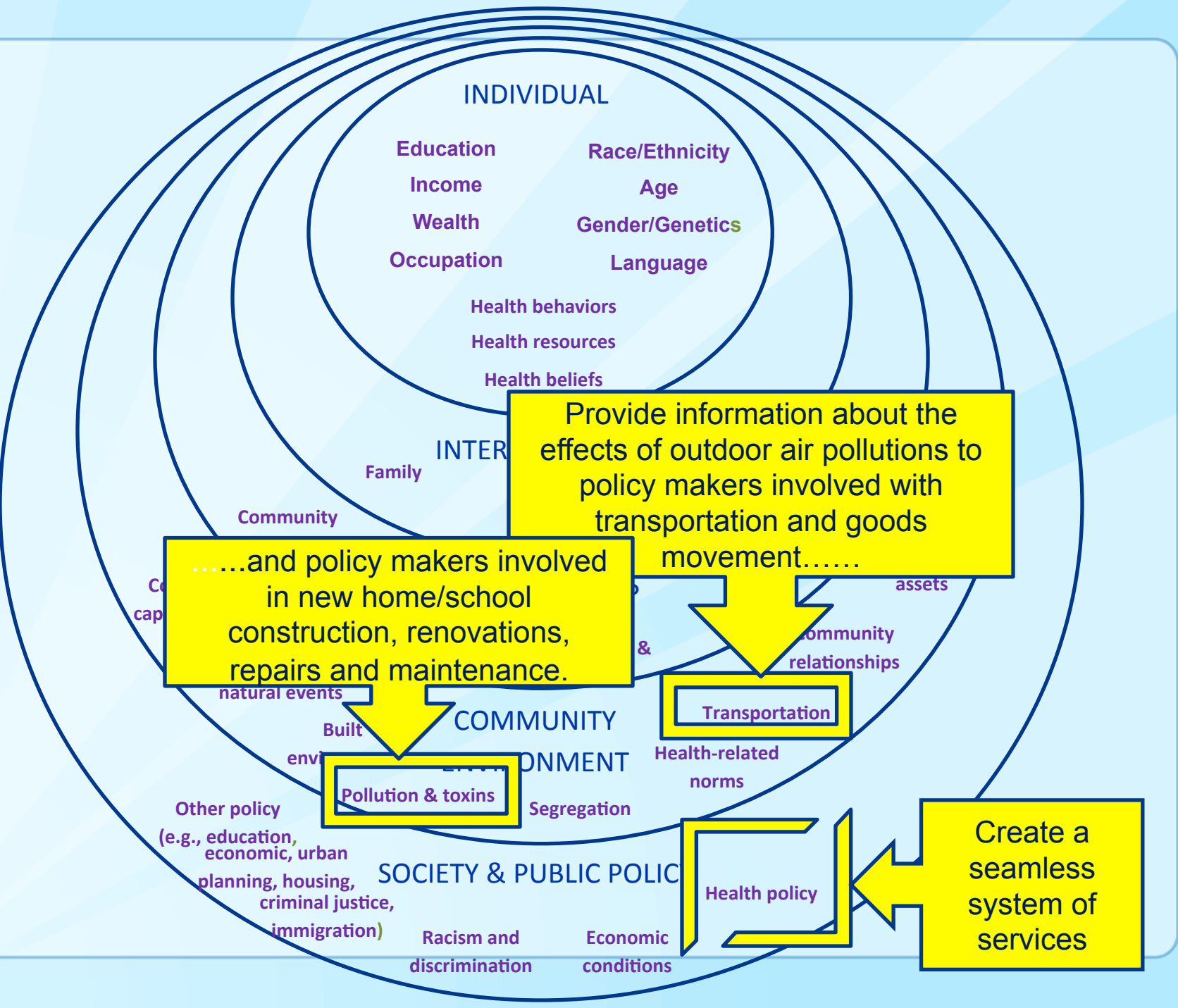
Determinants of Health Disparities  
(And Opportunities to Address Them).



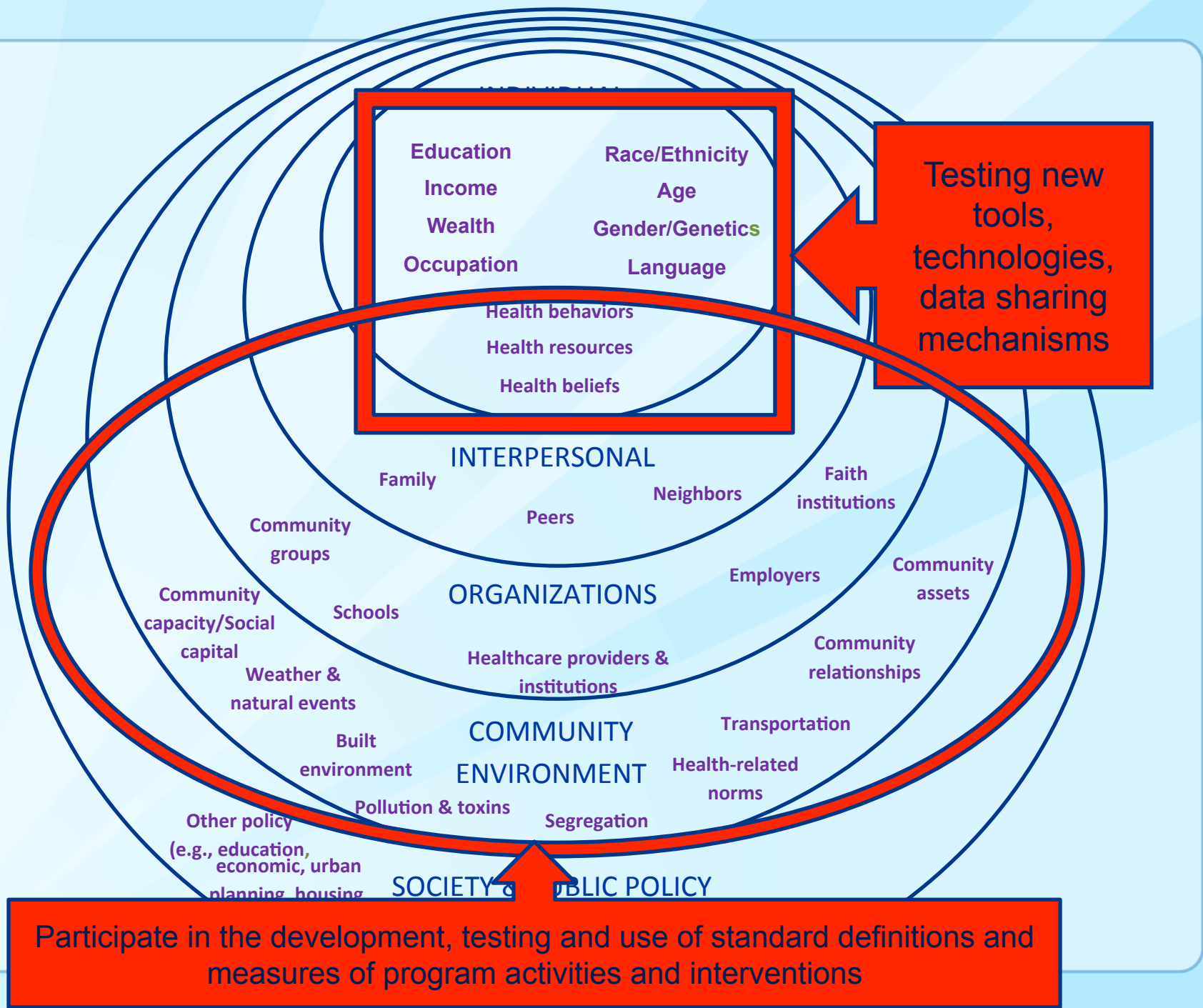
STRATEGY 1: Remove Barriers to Quality Asthma Care



STRATEGY 2: Build Local Capacity to Deliver Integrated, Comprehensive Community-Based Asthma Care



Strategy 3: Improve capacity to identify (and reach) the children most impacted by asthma disparities.



Strategy 4: Accelerate Efforts to Prevent the Onset of Asthma Among Ethnic and Racial Minorities



## Summary

- ❑ **Addressing racial/ethnic health disparities requires interventions at multiple levels**
- ❑ **No single agency or discipline can hope to succeed in isolation**
- ❑ **Each agency, sector, discipline has unique contributions**
- ❑ **Collaboration and coordination across federal, state, NGO and other agencies is necessary**

**For more information:**

**[www.cdc.gov/asthma](http://www.cdc.gov/asthma)**

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