

Managing Asthma on the College Campus: Findings of a Texas Pilot Study

Review author:

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Students attending institutions of higher education have the option of utilizing their student health center (SHC) for asthma management. However, a review of the available literature revealed no previous research as to how SHCs on college campuses in Texas manage students with asthma. This led to the following research questions: How are SHCs in Texas managing asthma for college students and what are the SHC directors' attitudes and perceptions of the impact of asthma on their college campuses?

The American College Health Association states that 8.8% of college students reported⁴ having asthma in 2012; previous studies have shown that college student's quality of life is diminished by asthma symptoms, which affects their self-esteem and academic performance.^{5,6} We randomly selected 20 colleges in Texas; 17 institutions agreed to participate. The inclusion criteria consisted of four-year colleges accredited by the Southern Association of Colleges and Schools with an undergraduate student population of greater than 1000 full-time students, excluding online colleges. Once identified, the director of each institution's SHC was contacted by telephone and invited to complete the Managing Asthma on College Campuses Survey (MACCS) instrument via telephone interview (n=14) or email (n=3).

Quantitative data obtained through the survey revealed 23.5% of SHCs provide individualized asthma action plans to students and 35% of SHCs stated they have an emergency

action plan for asthma exacerbations. Respondents noted two major barriers for effective asthma management on campus: lack of understanding of chronic disease management and underuse of the SHC due to a lack of awareness of its existence. Perceived barriers to visiting the SHC included access issues, money, and students self-medicating with SABA inhalers and/or OTC medications. Even though the majority of directors were satisfied with asthma services provided to students the results of our study reveal improvements are needed in the following areas: (1) more face-to-face education regarding chronic disease management, (2) promotion of the asthma services offered by the SHC, (3) the use of individualized asthma and emergency action asthma plans, and (4) better recording of asthma-related visits to the SHC. College students have misperceptions of their asthma severity when compared with an objective asthma severity scoring survey.⁸ These misperceptions regarding their asthma severity in addition to their lack of asthma management skills put them at risk for increased hospitalization.⁹

Our study represents a small sample; a study with a larger sample size of 4-y colleges in Texas would provide more data and enhance the generalizability of the findings. A future longitudinal study is warranted. The clinical implication of this study is effective asthma management strategies are lacking at SHCs and need to be implemented on college campuses in Texas.

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