

2019 STATE Honor Roll



**Asthma and Allergy
Policies for Schools**
statehonorroll.org



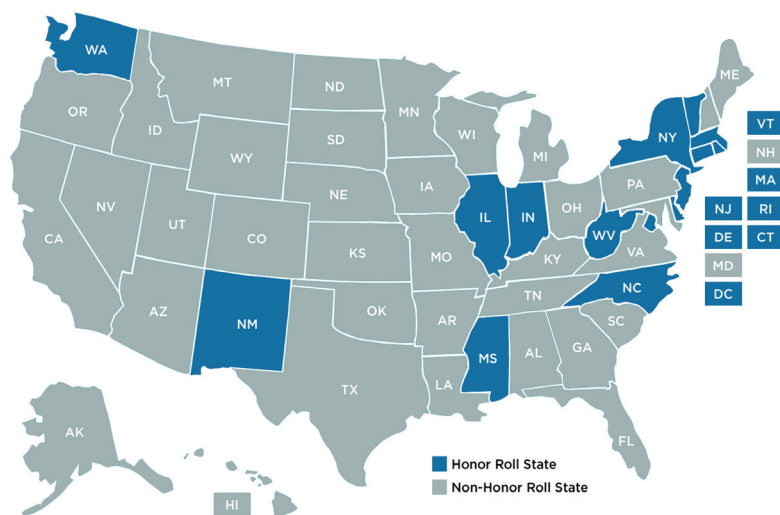
Asthma and Allergy
Foundation of America

The **2019 State Honor Roll™ of Asthma and Allergy Policies for Schools** ranks the states with the best public policies for people with asthma, food allergies, anaphylaxis and related allergic diseases in U.S. elementary, middle and high schools.

Which States Made AAFA's 2019 State Honor Roll List?

Fifteen states are included in AAFA's Honor Roll this year!

- Connecticut
- Delaware
- District of Columbia*
- Illinois
- Indiana
- Massachusetts
- Mississippi
- New Jersey
- New Mexico
- New York
- North Carolina
- Rhode Island
- Vermont
- Washington
- West Virginia



*The District of Columbia joins Connecticut in meeting all 23 core policies. This distinguished achievement shows the commitment our nation's capital has made to protect students with asthma and allergies. It is an excellent example for states to follow when considering asthma and allergy friendly policies.

How the State Honor Roll Report Works

The report checks to see how every state compares against 23 key measures that affect people with asthma and allergies in schools. States make the honor roll when they have 18 of 23 core policies.

The Impact of Asthma and Allergies on Students

Asthma and allergic conditions are among the most common health issues affecting children in the U.S.^{1,2,3} And asthma is the top reason kids miss school. In 2013, about 13.8 million missed school days were reported due to asthma.⁴

In the United States:



One out of 12 children have asthma



One out of 12 children have rhinitis (hay fever)



One out of 13 children have food allergies

Learning is hindered when a child can't breathe or is having allergic reactions. Many school buildings are full of asthma and allergy triggers, such as mold, dust and strong cleaning chemicals. But proper school policies can create more asthma and allergy friendly environments to prevent asthma attacks and allergic reactions.

AAFA's Core Policies for Protecting Students' Asthma and Allergy Health

Medication and Treatment

1. State requires physician's written instructions to be on file to dispense prescription medication to students.
2. State policy ensures students' right to self-carry and self-administer prescribed asthma medication.
3. State policy ensures students' right to self-carry and self-administer prescribed anaphylaxis medication.
4. State policies or procedures shield school personnel from liability for unintended injuries.
5. State requires local school districts to create asthma and anaphylaxis medication policy and provide resources, guidelines and parameters.
6. State policy mandates schools to identify and maintain records for students with chronic conditions including asthma and anaphylaxis.
7. State requires a procedure updating health records periodically.
8. State requires that schools maintain asthma/allergy incident reports for reactions, attacks and medications administered.
9. State requires a student health history form that includes asthma/allergy information to be maintained for each student.
10. State requires schools to have emergency protocols for asthma.
11. State requires schools to have emergency protocols for anaphylaxis.
12. Nurse-to-student ratio is 1:750 or better.

Extra credit:

- A. State requires anaphylaxis medicine - epinephrine - stocking and authority to administer in schools.
- B. State allows and/or requires asthma quick-relief medicine - albuterol - stocking and authority to administer in schools.
- C. State has or is preparing an explicit asthma program with policies, procedures and resources for schools to manage students with asthma.
- D. State has or is preparing an explicit anaphylaxis program with policies, procedures and resources for schools to manage students with allergies.
- E. State has adopted policy that each school will have one full-time nurse.
- F. State has adopted policy stating that school districts provide case management for students with chronic health conditions such as asthma.

Awareness

13. State recognizes problem of asthma in schools and has begun to address it.
14. State recognizes problem of allergy in schools and has begun to address it.

Extra credit:

- G. State sponsors or provides funding for staff training in asthma awareness covering school asthma program/policy and procedures.
- H. State sponsors or provides funding for staff training in food allergies.

School Environment

15. State has mandated that all schools must have indoor air quality (IAQ) management policies.
16. State has adopted a policy requiring that districts and schools conduct periodic inspections of heating, ventilation and air conditioning (HVAC) system and other items important in asthma/allergy management.
17. State has IAQ policies that include specific components important in asthma/allergy management - HVAC, HEPA (high efficiency particulate air) filters, carpeting and pesticide use.
18. State recommends/requires that districts or schools use Integrated Pest Management (IPM) techniques OR ban use of pesticides inside school.
19. State requires schools to notify parents of upcoming pesticide applications.
20. State limits school bus idling time and establishes proximity restrictions.
21. All smoking is prohibited in school buildings and on school grounds.
22. All smoking is prohibited on school buses and at school-related functions.
23. Tobacco-use prevention is required in health education curriculum.

Extra credit:

- I. State makes funding or resources available for technical IAQ assistance to schools.
- J. State recommends standards and programs to promote environmentally preferable materials for school construction, maintenance and cleaning.
- K. State requires school facility design standards that include low emission construction materials, pollutant source controls, durable and easy-to-clean surfaces and floors, and moisture/mold controls.
- L. State has implemented or actively promotes a diesel school bus engine retrofitting program.
- M. State requires districts or schools to provide tobacco-use-cessation services to students.

**Detailed state reports are available
at statehonorroll.org.**

CHART 1: 2019 PERFORMANCE OF ALL STATES ON CORE POLICY STANDARDS*

The 2019 “State Honor Roll™ of Asthma and Allergy Policies for Schools” is a research project of the Asthma and Allergy Foundation of America (AAFA) to identify states with the most comprehensive and preferred statewide public policies supporting people with asthma, food allergies, anaphylaxis and related diseases in U.S. elementary, middle and high schools. This report is intended to provide a blueprint for asthma and allergy advocates to develop better school-based policies and practices. The table below illustrates factors and policy standards that researchers used to compare and score all 50 states and the District of Columbia in the areas of: medication and treatment, awareness and school environment. Visit statehonorroll.org or call 1-800-7-ASTHMA for more information.

Key
 ✓ State Policy Exists 🏆 2019 Honor Roll State

States	Total Score (out of 23 total possible)	Medication and Treatment												Awareness		School Environment								
		Medication Policies					Identification and Reporting				Management Policy	Health Services Capacity	Awareness in Schools		Indoor Air Quality			Outdoor Air Quality			Tobacco Policy			
		Policy Standard 1	Policy Standard 2	Policy Standard 3	Policy Standard 4	Policy Standard 5	Policy Standard 6	Policy Standard 7	Policy Standard 8	Policy Standard 9	Policy Standard 10	Policy Standard 11	Policy Standard 12	Policy Standard 13	Policy Standard 14	Policy Standard 15	Policy Standard 16	Policy Standard 17	Policy Standard 18	Policy Standard 19	Policy Standard 20	Policy Standard 21	Policy Standard 22	Policy Standard 23
Alabama	12	✓	✓	✓	✓	✓						✓	✓		✓	✓						✓	✓	✓
Alaska	9		✓	✓		✓					✓	✓	✓			✓			✓	✓				
Arizona	16	✓	✓	✓	✓	✓				✓		✓	✓		✓	✓		✓	✓	✓	✓		✓	✓
Arkansas	17	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓		✓	✓			✓	✓
California	15	✓	✓	✓		✓						✓		✓	✓		✓	✓	✓	✓	✓	✓	✓	✓
Colorado	15	✓	✓	✓	✓	✓	✓	✓			✓	✓		✓	✓		✓	✓					✓	✓
Connecticut	23	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Delaware	18	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓		✓	✓		✓		✓		✓	✓	✓
District of Columbia	23	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Florida	16	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓		✓	✓		✓	✓	✓	✓				
Georgia	8	✓	✓	✓									✓	✓	✓						✓			✓
Hawaii	15	✓	✓	✓			✓	✓	✓	✓			✓	✓		✓	✓				✓	✓	✓	✓
Idaho	11		✓	✓		✓	✓	✓		✓				✓		✓	✓					✓		✓
Illinois	19	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓				✓	✓	✓	✓	✓	✓
Indiana	19	✓	✓	✓	✓	✓	✓	✓			✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓	✓
Iowa	17	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓		✓	✓		✓				✓	✓	✓
Kansas	11	✓	✓	✓		✓		✓		✓		✓			✓						✓	✓	✓	
Kentucky	17	✓	✓	✓		✓	✓	✓		✓		✓		✓	✓	✓		✓	✓	✓	✓		✓	✓
Louisiana	14	✓	✓	✓		✓	✓	✓	✓				✓	✓			✓	✓	✓			✓	✓	✓
Maine	17	✓	✓	✓		✓	✓	✓	✓				✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Maryland	17	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓		✓	✓	✓	✓	✓	✓	✓	✓
Massachusetts	20	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	✓	✓
Michigan	17	✓	✓	✓	✓	✓		✓	✓			✓		✓	✓		✓	✓	✓	✓	✓		✓	✓
Minnesota	15		✓	✓		✓	✓	✓					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mississippi	19	✓	✓	✓		✓	✓	✓	✓		✓	✓		✓	✓	✓	✓	✓	✓		✓	✓	✓	✓
Missouri	9	✓	✓	✓		✓	✓	✓						✓	✓									✓
Montana	11	✓	✓	✓	✓									✓	✓		✓	✓		✓		✓	✓	
Nebraska	11	✓	✓	✓	✓	✓		✓			✓	✓		✓	✓									✓
Nevada	13	✓	✓	✓			✓	✓	✓	✓		✓			✓						✓	✓	✓	✓
New Hampshire	17	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓		✓			✓	✓	✓	✓		✓	✓	✓
New Jersey	20	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

*For more details, see aafa.org/shr-methodology

CHART 1: 2019 PERFORMANCE OF ALL STATES ON CORE POLICY STANDARDS*

Key

- ✓ State Policy Exists
- 🏆 2019 Honor Roll State

States	Total Score (out of 23 total possible)	Medication and Treatment											Awareness		School Environment									
		Medication Policies			Identification and Reporting			Management Policy	Health Services Capacity	Awareness in Schools		Indoor Air Quality		Outdoor Air Quality		Tobacco Policy								
		Policy Standard 1	Policy Standard 2	Policy Standard 3	Policy Standard 4	Policy Standard 5	Policy Standard 6	Policy Standard 7	Policy Standard 8	Policy Standard 9	Policy Standard 10	Policy Standard 11	Policy Standard 12	Policy Standard 13	Policy Standard 14	Policy Standard 15	Policy Standard 16	Policy Standard 17	Policy Standard 18	Policy Standard 19	Policy Standard 20	Policy Standard 21	Policy Standard 22	Policy Standard 23
New Mexico 🏆	18	✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓		✓	✓	✓	✓		✓	✓	✓
New York 🏆	18	✓	✓	✓	✓		✓	✓		✓		✓			✓	✓	✓	✓	✓	✓	✓		✓	✓
North Carolina 🏆	20	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓			✓	✓	✓	✓	✓	✓	✓		✓	✓
North Dakota	11		✓	✓	✓			✓			✓	✓		✓	✓				✓			✓		✓
Ohio	12	✓	✓	✓	✓	✓					✓				✓		✓	✓	✓	✓		✓		
Oklahoma	9	✓	✓	✓		✓			✓					✓	✓							✓	✓	
Oregon	17	✓	✓	✓	✓	✓	✓	✓		✓	✓			✓	✓				✓	✓		✓	✓	✓
Pennsylvania	16	✓	✓	✓	✓	✓	✓	✓		✓	✓			✓	✓			✓	✓	✓		✓	✓	✓
Rhode Island 🏆	21	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓		✓	✓		✓	✓	✓	✓	✓		✓	✓
South Carolina	12	✓	✓	✓		✓	✓	✓		✓	✓				✓							✓		✓
South Dakota	5	✓	✓	✓											✓							✓		
Tennessee	16	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓			✓	✓				✓		✓		✓
Texas	13	✓	✓	✓		✓	✓	✓							✓	✓			✓	✓	✓		✓	✓
Utah	16	✓	✓	✓	✓	✓	✓	✓	✓						✓	✓		✓			✓		✓	✓
Vermont 🏆	21	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓
Virginia	17	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	✓			✓		✓		✓	✓
Washington 🏆	20	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓		✓	✓	✓	✓		✓	✓
West Virginia 🏆	19	✓	✓	✓	✓	✓	✓	✓	✓						✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Wisconsin	13	✓	✓	✓		✓	✓								✓	✓	✓	✓	✓			✓	✓	
Wyoming	7		✓	✓		✓		✓		✓					✓	✓				✓				

†Descriptions of Core Policy Standards









1. State requires physician's written instructions to be on file to dispense prescription medication to students.
2. State policy ensures students' right to self-carry and self-administer prescribed asthma medication.
3. State policy ensures students' right to self-carry and self-administer prescribed anaphylaxis medication.
4. State policies or procedures shield school personnel from liability for unintended injuries.
5. State requires local school districts to create asthma and anaphylaxis medication policy and provides resources, guidelines and parameters.
6. State policy mandates schools to identify and maintain records for students with chronic conditions including asthma and anaphylaxis.
7. State requires a procedure updating health records periodically.
8. State requires that schools maintain asthma/allergy incident reports for reactions, attacks and medications administered.
9. State requires a student health history form that includes asthma/allergy information to be maintained for each student.
10. State requires schools to have emergency protocols for asthma.
11. State requires schools to have emergency protocols for anaphylaxis.
12. Nurse-to-student ratio is 1:750 or better.
13. State recognizes problem of asthma in schools and has begun to address it.
14. State recognizes problem of allergy in schools and has begun to address it.
15. State has mandated that all schools must have indoor air quality (IAQ) management policies.
16. State has adopted a policy requiring that districts and schools conduct periodic inspections of heating, ventilation and air conditioning (HVAC) system and other items important in asthma/allergy management.
17. State has IAQ policies that include specific components important in asthma/allergy management (HVAC, HEPA, carpeting, pesticide use).
18. State recommends/requires that districts or schools use Integrated Pest Management (IPM) techniques OR ban use of pesticides inside school.
19. State requires schools to notify parents of upcoming pesticide applications.
20. State limits school bus idling time and establishes proximity restrictions.
21. All smoking is prohibited in school buildings and on school grounds.
22. All smoking is prohibited on school buses and at school-related functions.
23. Tobacco-use prevention is required in health education curriculum.

*For more details, see aafa.org/shr-methodology

CHART 2: 2019 PERFORMANCE OF ALL STATES ON EXTRA CREDIT INDICATORS*

The 2019 “State Honor Roll™ of Asthma and Allergy Policies for Schools” is a research project of the Asthma and Allergy Foundation of America (AAFA) to identify states with the most comprehensive and preferred statewide public policies supporting people with asthma, food allergies, anaphylaxis and related diseases in U.S. elementary, middle and high schools. The table below illustrates “extra credit” indicators that AAFA researchers used to compare and score all 50 states and the District of Columbia. For details, see the full report at statehonorroll.org or call 1-800-7-ASTHMA.

Key
 State Policy Exists  2019 Honor Roll State

States	Total Score (out of 13 total possible)	Medication and Treatment						Awareness		School Environment				
		Medication		Management Policy		Health Services Capacity		Awareness in Schools		Indoor Air Quality		Outdoor Air Quality	Tobacco Policy	
		Extra Credit Indicator A	Extra Credit Indicator B	Extra Credit Indicator C	Extra Credit Indicator D	Extra Credit Indicator E	Extra Credit Indicator F	Extra Credit Indicator G	Extra Credit Indicator H	Extra Credit Indicator I	Extra Credit Indicator J	Extra Credit Indicator K	Extra Credit Indicator L	Extra Credit Indicator M
Alabama	3		✓		✓			✓						
Alaska	1												✓	
Arizona	5		✓	✓	✓					✓			✓	
Arkansas	5	✓	✓		✓					✓	✓			
California	9	✓		✓	✓			✓	✓	✓		✓	✓	✓
Colorado	8		✓		✓			✓	✓		✓	✓	✓	✓
Connecticut 	9	✓		✓	✓			✓	✓	✓	✓	✓	✓	
Delaware 	4	✓				✓				✓			✓	
District of Columbia 	8	✓		✓	✓	✓		✓	✓	✓	✓			
Florida	6			✓	✓	✓		✓	✓	✓			✓	
Georgia	6		✓	✓	✓			✓	✓				✓	
Hawaii	9			✓	✓	✓	✓	✓	✓	✓	✓			✓
Idaho	3							✓	✓				✓	
Illinois 	7		✓	✓	✓			✓	✓		✓		✓	
Indiana 	7		✓	✓			✓	✓	✓		✓		✓	
Iowa	3							✓	✓					
Kansas	1									✓				
Kentucky	5						✓	✓	✓		✓		✓	
Louisiana	2						✓	✓						
Maine	5							✓	✓				✓	✓
Maryland	7	✓		✓	✓		✓			✓			✓	✓
Massachusetts 	7			✓	✓			✓	✓	✓		✓	✓	
Michigan	6	✓		✓	✓			✓	✓	✓			✓	
Minnesota	7			✓	✓		✓	✓	✓	✓			✓	
Mississippi 	6							✓	✓		✓	✓	✓	✓
Missouri	7		✓	✓			✓	✓	✓				✓	
Montana	2								✓				✓	
Nebraska	4	✓	✓	✓									✓	
Nevada	4	✓					✓						✓	✓
New Hampshire	5		✓		✓					✓			✓	✓
New Jersey 	10	✓	✓	✓	✓		✓	✓	✓	✓			✓	✓

*For more details, see aafa.org/shr-methodology

CHART 2: 2019 PERFORMANCE OF ALL STATES ON EXTRA CREDIT INDICATORS*

Key

- ✓ State Policy Exists
- 🏆 2019 Honor Roll State

States	Total Score (out of 13 total possible)	Medication and Treatment						Awareness		School Environment				
		Medication		Management Policy		Health Services Capacity		Awareness in Schools		Indoor Air Quality		Outdoor Air Quality	Tobacco Policy	
		Extra Credit Indicator A	Extra Credit Indicator B	Extra Credit Indicator C	Extra Credit Indicator D	Extra Credit Indicator E	Extra Credit Indicator F	Extra Credit Indicator G	Extra Credit Indicator H	Extra Credit Indicator I	Extra Credit Indicator J	Extra Credit Indicator K	Extra Credit Indicator L	Extra Credit Indicator M
New Mexico 🏆	7	✓	✓	✓			✓	✓	✓					
New York 🏆	7		✓		✓		✓		✓	✓		✓	✓	✓
North Carolina 🏆	4	✓						✓	✓			✓		
North Dakota	3			✓				✓	✓					
Ohio	4		✓					✓	✓				✓	
Oklahoma	2				✓								✓	
Oregon	6			✓	✓			✓	✓	✓			✓	
Pennsylvania	3								✓		✓	✓	✓	
Rhode Island 🏆	4			✓	✓				✓				✓	
South Carolina	3				✓				✓				✓	
South Dakota	2							✓	✓					
Tennessee	5			✓	✓				✓	✓				✓
Texas	2		✓										✓	
Utah	5		✓	✓					✓				✓	✓
Vermont 🏆	8			✓	✓		✓	✓	✓	✓	✓			
Virginia	6	✓		✓	✓			✓	✓				✓	
Washington 🏆	9			✓	✓		✓	✓	✓	✓	✓		✓	
West Virginia 🏆	7			✓	✓		✓	✓	✓				✓	
Wisconsin	3							✓	✓	✓				
Wyoming	1				✓									

†Descriptions of Extra Credit Indicators

- A. State requires anaphylaxis medicine - epinephrine - stocking and authority to administer in schools.
- B. State allows and/or requires asthma quick-relief medicine - albuterol - stocking and authority to administer in schools.
- C. State has or is preparing an explicit asthma program with policies, procedures and resources for schools to manage students with asthma.
- D. State has or is preparing an explicit anaphylaxis program with policies, procedures and resources for schools to manage students with allergies.
- E. State has adopted policy that each school will have one full-time nurse.
- F. State has adopted policy stating that school districts provide case management for students with chronic conditions such as asthma.
- G. State sponsors or provides funding for staff training in asthma awareness covering school asthma program/policy and procedures.
- H. State sponsors or provides funding for staff training in food allergies.
- I. State makes funding or resources available for technical IAQ assistance to schools.
- J. State recommends standards and programs to promote environmentally preferable materials for school construction, maintenance and cleaning.
- K. State requires school facility design standards that include low emission construction materials, pollutant source controls, durable and easy-to-clean surfaces and floors, moisture/mold controls.
- L. State has implemented or actively promotes diesel school bus engine retrofitting program.
- M. State requires districts or schools to provide tobacco-use-cessation services to students.

*For more details, see aafa.org/shr-methodology

Recommendations to Continue to Improve School Policies

- 1 Continue efforts to require stocking of quick-relief asthma medicine in schools. Make sure schools are equipped to obtain the medicine and know how to use it.
- 2 Increase the number of school nurses.
- 3 Remove barriers to putting these laws into practice, whether that means more funding, awareness or training.
- 4 Refresh or develop programs to improve air quality, both for indoor air pollution and outdoor air pollution in the school environment.
- 5 Encourage innovation and partnerships between government and private companies (public-private partnerships).



A message from AAFA's CEO and President

Our hope is that every state will someday qualify for AAFA's State Honor Roll. We are excited to see the great strides Washington D.C. has made to join Connecticut in meeting all 23 of the core policy standards in AAFA's 2019 State Honor Roll Report. Meeting these honor roll standards is an achievement that directly benefits the health, well-being and academic potential of the students in D.C. living with asthma and allergies.

We encourage states to focus on improving indoor air quality in school buildings. We are disappointed to find that no state has implemented indoor air quality policies since our 2014 State Honor Roll Report. As schools around the country continue to age, improving indoor air quality is increasingly imperative.

States already on the State Honor Roll can continue to find ways to progress as well. Our recommendations listed above represent policy gaps upon where all states can improve. America's children deserve to learn in healthy environments. It is our goal that this report serves as a resource for states to address asthma and allergies in schools.

Sincerely,

A handwritten signature in black ink, which appears to read "Kenneth Mendez". The signature is written in a cursive style.

Kenneth Mendez
CEO and President, Asthma and Allergy Foundation of America

Acknowledgements

AAFA's 2019 State Honor Roll™ Report of Asthma and Allergy Policies for Schools was supported in part by a grant from Genentech.

We thank the following contributors to this report:

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References

1. Childhood (Pediatric) Asthma: AAAAI. (n.d.). Retrieved from [https://www.aaaai.org/conditions-and-treatments/conditions-dictionary/Childhood-\(pediatric\)-Asthma](https://www.aaaai.org/conditions-and-treatments/conditions-dictionary/Childhood-(pediatric)-Asthma)
2. FastStats - Asthma. (n.d.). Retrieved from <https://www.cdc.gov/nchs/fastats/asthma.htm>
3. *Table 35. Health conditions among children under age 18, by selected characteristics: United States, average annual, selected years 1997-1999 through 2014-2016*[PDF]. (2017). Centers for Disease Control and Prevention (CDC). <https://www.cdc.gov/nchs/data/hus/2017/035.pdf>
4. Zahran, H., Bailey, C., Damon, S., Garbe, P. and Breysse, P. (2018). Vital Signs: Asthma in Children — United States, 2001-2016. DOI:<http://dx.doi.org/10.15585/mmwr.mm6705e1>.