

METHODOLOGY

Policy Standards and Indicators

AAFA began this project by developing standards to measure a state's performance in promoting asthma and allergy health in schools. After researching and evaluating criteria for assessing states regarding their asthma and allergy policies and efforts, AAFA examined criteria used by other expert bodies.

For medical criteria, AAFA reviewed strategies for addressing asthma used in the CDC's *Coordinated School Health Program* model, the American School Health Association's *School-Based Asthma Management* resolution, the National Association of State Boards of Education's *Fit, Healthy, and Ready to Learn*, the *Guidelines for the Diagnosis and Management of Asthma* and successful state models. AAFA's selected environmental parameters largely paralleled the strategies recommended in programs such as the Environmental Protection Agency's (EPA) *Tools for Schools and Clean School Bus USA*.

The Foundation engaged independent consultants to test and validate its preliminary findings using a three-step process:

1. Review available documentation related to the study including methodology, state-by-state matrices of data, scoring, and data sources.
2. Conduct telephone interviews and pilot survey with a core group of Key Opinion Leaders (KOLs) representing the following stakeholder groups: Public Health/Environmental Health/School Health; School Nurse/Nurse Coordinator; School Administration; Advocates and Parents.
3. Administer a web-based survey fielded to individuals representing the stakeholder groups listed above. Of the 60 invited to participate, 52 (87%) responded.

After evaluating the findings from the validation study, AAFA revised the methodology to address concerns raised by the KOLs:

- Simplified the assessment to eliminate weighting of indicators
- Significantly reduced the number of indicators to focus the research
- Structured a set of core indicators based on strong consensus by the KOLs – 68% or better
- Clarified that policies being assessed were state-level rather than school or district-level
- Focused on state-level policies that mandate or require school practices state-wide

Relying on the KOL's feedback AAFA refined the criteria to articulate a list of core policy standards to track states' progress. AAFA also noted those indicators on which there was not a consensus that met the threshold of 68% of the KOLs who responded to the survey.

AAFA recognized the importance of state's efforts on many of those indicators by creating a list of "extra credit" indicators if a substantial minority of KOLs identified the indicator as worthy of consideration with no significant resistance from KOLs.

Core Policy Standards

Core standards for the Honor Roll were those for which there was at least 68% consensus among the respondents to AAFA's validation survey. AAFA declined to assign specific weights to categories or indicators. A state's policy counted for a specific standard if it fully met the standard. For all indicators except # 9, # 10 and # 11, states must have a law or policy in place requiring a school to comply with the standard expressed by the indicator. Thus, a state policy that recommends or advises schools to adopt smoke-free campus environments does not meet AAFA's core standard. AAFA's core policy standards are listed in Table 1. States may use this set of core policy standards as a starting point for enhancing their school asthma and allergy policies.

Extra Credit Indicators

This study also explored a variety of indicators of enhanced efforts by states to protect the health of students with asthma and allergies. While these criteria did not meet the consensus level for core policy indicators, they did receive a balance of 25% or more agreement of AAFA's KOLs for inclusion. AAFA weighed these important criteria in tracking states progress overall, but considered the feedback of KOLs in its decision to exclude them from the focused list of core indicators. For example, some KOLs felt that a state's performance in meeting these extra credit indicators reflects a state's capacity and resources, preference for local or district-level decision-making regarding school policies, and interpretation. AAFA's extra credit Indicators are listed in Table 2. States that have substantially accomplished implementation of core standards might use these indicators to guide future policy efforts.

Other Indicators

AAFA did not assess states using indicators that either failed to gain a minimal consensus for extra credit status, or generated significant negative votes from KOLs. Because AAFA did not assess states on those indicators, they are not included in this report.

Selection of States

2009 State Honor Roll™ Selection

AAFA selected states for the 2009 State Honor Roll based on states' performance on the list of core policy standards. AAFA assessed each state's laws to determine if it adopted laws or policies that have state-wide applicability and meet each of 18 AAFA policy standards. The states named to the Honor Roll met at least 15 of the 18 standards.

AAFA selected 15 as the minimum for selection in part because 15 represents 83% of the 18 core policy standards; better than a "B minus" seemed a fitting threshold for an Honor Roll. More important, the 15 to 18 core policy standards required for State Honor Roll recognition reflect solid performance across all domains. (See Chart 1: 2009 Honor Roll States – Performance on Core Policy Standards.)

Selection of Honorable Mention States

After AAFA reviewed relevant laws approved by states during their 2009 legislative sessions, the Foundation chose to highlight these accomplishments and named those states to the 2009 Honorable Mention list.

This selection method is different from the selection of Honorable Mention category for 2008; thus, states that were singled out for Honorable Mention last year are not necessarily on the list for 2009. We chose to underscore the importance of improving policies by recognizing those states that progressed, even if their overall performance on all standards did not reach the Honor Roll echelon. (See Chart 3: All 50 States – Performance on Extra Credit Indicators.)

Study Challenges and Limitations

States may have enacted relevant laws and policies after the cut-off date for this assessment: May 2009. Notably, New York, which had a number of relevant laws pending before its state assembly after the end of May, could not be considered for Honor Roll Status. AAFA chose not to count a state as having met a policy standard if it had a relevant policy that was pending, advised or recommended.

In assessing policies for recognition, AAFA preferred laws that place definite requirements on schools and districts state-wide. Moreover, AAFA chose not to count policies that are present or even dominant at the sub-state-level unless the policy is universally required in schools across a state. Some KOLs questioned whether this focus reflected a role that states should not play – mandating policies for schools and school districts. Understandably, some states might implement certain preferred policies at the school or district-level rather than the state-level. However, school level policies and practices are not within the scope of this project.

Note that AAFA recognized exceptions: Policy standards # 9, # 10 and # 11. Policy standard # 9 recognizes states that promote school nurse-to-student ratios of at least 1:750, without regard to whether the state's policy is a requirement or a recommendation to schools. Nursing services in schools are important but inconsistently supported. The ratio embraced in the standard is minimal, yet lofty given budgetary constraints and conflicting priorities. Thus, AAFA concluded that a state-level recommendation, even if it is short of a mandate, is worthy of recognition.

Policy standards # 10 and # 11 recognize efforts by states to create awareness of asthma and allergy in schools. These two standards lack the definition of the others. However, these are the only standards initially identified by AAFA in the important domain of “education and awareness” that emerged from the KOLs consensus process. Because AAFA recognizes awareness as an important first step toward developing and funding training and education programs, AAFA chose to retain these indicators rather than eliminate the entire domain.

State resources played an important role in the selection process. Some KOLs commented that states did not allocate funding for programs related to certain initiatives, like providing staff education and smoking cessation programs.

They felt that AAFA's study should not penalize states whose funding is limited. AAFA recognizes that allocating resources is more difficult in states whose budgets are stretched thin by other education and health care priorities.

Key Opinion Leaders

AAFA is pleased with the participation of over 50 experts who acted as key opinion leaders (KOLs). They have hands on experience working with children, parents, and school personnel, including physicians, public health, environmental health and school health professionals, certified asthma educators, school and other nurses, national and state school administrators, and patient advocates.

Maria Laura Acebal, JD
Kelly Beckwith, MPH, CHES
Karen Boehm, RN
Stephen Boese
Jim Bogden, MPH
Maria Bonaiuto, RN, MSN, NCSN
Mary Brasler, Ed.D, MSN
Ann Burkett, RN
Charlotte J Burt, MSN, MA, RNC
Elizabeth C. Burton, RN, BSN
Sarah Lyon-Callo, MA, MS
Michele Carrick, LICSW
Caroline P. Chappell, MPA
Pamela Clark, RN, MPH
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Cynthia Conner, RN
Cindy Coopersmith
Robin Costley, CRT
Cheryl Courtlandt, MD
Carol D'Agnese
Brenda Doroski
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