

Asthma in Children

Getting It Under Control

Did you know that asthma is the most common chronic lung disease in children? According to the Centers for Disease Control and Prevention, asthma affects approximately 6 million children in the United States. A recent study published in the journal *Pediatrics* found that children who have been in foster care were twice as likely to develop asthma.

Poorly controlled and undiagnosed asthma in young children can result in trips to the emergency room, hospital stays, missed workdays for parents and suffering that many young children cannot express. However, with the right care plan, asthma symptoms can be managed so that children can do just about anything they want to do.

What Is Asthma?

Asthma is a chronic condition that causes breathing problems. Children who have asthma may cough, wheeze, or be short of breath. About half of the children who have asthma at a young age seem to outgrow it.

Scientists do not know why exactly people develop asthma. Experts think it might be a combination of environmental factors and genes. People with asthma may have a parent or other close relative with asthma. In addition, those who are overweight may be more likely to develop asthma.

How Does Asthma Affect Breathing?

For someone who has asthma, air does not move through the lungs the way



it should. Normally, when someone breathes in, air goes in through the nose or mouth, down the windpipe (trachea), and into the airways (bronchioles) of the lungs. When people breathe out, air exits the body in the opposite direction.

With asthma, air has a harder time passing through. Airways swell and fill with mucus. The muscles around the airways tighten, making airways narrower. Things that can irritate the airways are called "triggers." Triggers can lead to asthma flare-ups or attacks.

Flare-ups are when asthma symptoms get worse. They happen when airways get more irritated and swollen than usual. During a flare-up, children might have:

- trouble breathing
- a tight chest
- a whistling sound while breathing (wheezing)

- a cough
- a fast heartbeat

Things that bring on a flare-up are called **triggers**. Triggers vary from person to person, but common ones include:

- allergies to things like pollen, mold, and pet dander
- irritants and pollutants in the air
- second-hand smoke from cigarette and marijuana
- respiratory infections, like colds or flu
- weather conditions
- exercise (some children only have asthma symptoms during or after exercise)
- gastroesophageal reflux

An important part of managing asthma is avoiding triggers. Your child's primary care provider will work with you to create a care plan that helps prevent flare-ups as much as possible.

How Can I Manage My Child's Asthma?

For most children with asthma, symptoms can be controlled. Learn as much as you can, talk to others living with asthma, read up on asthma, and discuss any concerns with your child's primary care provider. The following tips can put you on the right path.

Have a plan and stick to it. Your child should have an asthma action plan. These written instructions from your child's primary care provider give clear, step-by-step directions on what medicines to take and when, how to avoid triggers, what to do between flare-ups, and how to recognize and manage them if they happen. By following this plan, you will

learn how to care for your child and when to call the primary care provider for help.

Take medicines as prescribed. Most children with asthma need to take medicines. Some are daily medicines (called long-term control medicines) to help keep airways from getting irritated. Others are used only during a flare-up to help open the airways (quick-relief medicines). Your child's primary care provider will tell you which medicines your child needs and how to take them.

Identify and avoid triggers. When you know your child's triggers, help your child avoid them as much as possible. You child's primary care provider can help too, for instance, by testing your child for allergies if you think they are making the asthma worse.

Make sure your child gets a yearly flu vaccines. The flu vaccine is recommended for all children, especially those with asthma. If children with asthma get the flu, they are at risk for flare-ups and developing a more serious illness.

Use tools when necessary. One way to help predict if a flare-up is on its way is to use asthma tools, like an asthma diary and peak flow meter. The diary helps you to keep track of your child's asthma symptoms, need for medicines, and more. This can help you learn about your child's early warning signs, and it can help your child's primary care provider see how well treatment is working. A peak flow meter is a handheld tool that measures how well your child can blow air out of the lungs. It can tell if airways are getting narrow and blocked, and whether your child is at risk for a flare-up.

Know what to do for a severe flare-up. Know when your child's symptoms call for medical care. Always have quick-relief medicine handy in case your child needs it. Everyone who cares for your child (like teachers and coaches) also should know when and how to give the medicine.

If My Child Has Asthma, Can He or She Participate in Sports and Activities?

With correct management, a child with asthma can fully participate in most

sports. Aerobic exercise actually improves airway function by strengthening breathing muscles. Some tips for exercising with asthma include the following:

- Teach your child to breathe through the nose and not the mouth. This helps to warm and humidify the air before it enters the airways.
- During cold weather, have your child wear a scarf over their mouth and nose to warm inhaled air.
- Have your child carry their quick-relief inhaler medicine.

Always talk with your child's primary care provider if you or your child has questions or concerns. In addition, the Asthma Clinic at San Francisco General Hospital does a great job of teaching children and families about their care plans. The providers at the Asthma Clinic have health educators who can inspect your home for mold and other allergens, and they have decades of experience working with children in foster care. Consider reaching out to them for further advice and care: <https://zuckerberg-sanfranciscogeneral.org/location/pulmonary/>.

Keeping Your Foster Child Safe: Windows

According to the RFA Written Directives, "Each bedroom used by a child or nonminor dependent shall have at least one operable window or door that ensures a safe, direct, emergency exit to the outside."

Windows can save lives when used as emergency escape routes. Bedrooms and other sleeping areas can be a secondary means of escape in case of fire or smoke, and that exit is often through a window. Having windows designated for escape is not enough; they also must be safe and accessible. Checking the following in your home can help ensure that your windows are a safe exit to the outside:

- Make sure at least one window in each bedroom meets escape requirements, and incorporate windows into your home fire escape plan;

SECTION 11-01: Home and Grounds

(b) A bedroom for a child or non-minor dependent shall meet the following requirements:

(1) Each bedroom used by a child or nonminor dependent shall have at least one operable window or door that ensures a safe, direct, emergency exit to the outside.

(A) A window with security bars shall have a safety release device that meets all state and local requirements. (B) If the home of a Resource Family is subject to the rules and regulations set forth by the State Fire Marshal.

- Make sure windows are not nailed or painted shut;
- Make certain that window stops, guards, security bars, grilles and

grates have a release mechanism; and

- Do not install window unit air conditioners in windows that may be needed for escape.

While windows can be a safe exit during an emergency, it is equally important to teach children how to be safe near windows to prevent falling out of windows. According to the Consumer Product Safety Commission, about 8 children under age 5 die each year from falling out of a window, and more than 3,300 are injured seriously enough to go to the hospital. That's why it is vital that you talk to your children about keeping playtime away from windows. Teach them that screens may help keep bugs out, but they do not keep children in.

Champion for Children Evelyn Smith

Congratulations to our March Champion for Children, Evelyn Smith.

Ms. Smith was raised by strong, respected women around her and with neighbors who helped raise children like a village. Her family always had kids in her home and that grew on her. She didn't care for weekend nights out with friends, but instead preferred to stay at home and help around the house. A strong family life with a house full of children is something that stayed with her, formed the foundation for her becoming a foster parent and led her to currently being in the process of adopting a family of five children.

"God does things for a reason," she explains, "and I was chosen because of this family." Ms. Smith became a guardian for a sibling set of four girls in early 2019, and later welcomed the fifth sibling into her home. The mother of the five children wanted Ms. Smith to adopt her children and walked with her through the adoption process. Sadly, the mother passed away recently. "The mom knew she gave her children the greatest gift she could: a roof over their head," said Ms. Smith.

Prior to adopting the five children, Ms. Smith had opened her home to a countless number of children. Ms. Smith feels the most rewarding part of being a foster parent is when children come back to her, especially ones she hasn't seen in years, and remind her of something she told them while she cared for them.

Her grounding principle to children is to stay in school and respect all adults. Ms. Smith recently saw a child who was in her



care 5 or 6 years ago and apologized to her for his behavior during that time.

On the other hand, Ms. Smith finds it challenging to discipline children in today's society in which children have a lot of options. "I was raised to say 'yes ma'am' and 'no ma'am' and kids aren't used to being told what to do now," explains Ms. Smith.

Ms. Smith's advice to other parents is to be patient. "Don't be quick to judge a child that you have no knowledge of," she said. "As you get to know the child, you will see them open up like a rose but it takes time and patience. Another way to think about your relationship with the child is like a good book: from the time you open the book to when you close it, you will learn a lot more than when you started."



Champions for Children

Ms. Smith also recommends getting to know parents of the children in your home. "In getting to know the parents, you get to learn more about the people they love most, their children," explains Ms. Smith. "You might not win over every parent, but like any parent, parents of foster children wake up in the middle of the night worrying about their children. They just want to know that their kids are cared for and if you can show them that it'll ease their worries and help you build a relationship with them."

San Francisco Family and Children's Services, along with the Parenting for Permanency College commend Ms. Smith for her strength and love spirit. She has made it her priority to work with children and provide a nurturing home for them, no matter what the child has gone through. Congratulations to Ms. Smith, our Champion for Children!

K.I.D.S.

Published bimonthly for San Francisco County foster parents, resource families, NREFMs and kin care providers. To suggest a topic, submit an article, promote an event, or provide feedback, email Sharon.Walchak@sfgov.org.

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Newsletter Website: <https://sfcaresforkids.org/kids-newsletter/>

Helpful Phone Numbers

HSA Operator	(415) 557-5000
CPS Child Abuse Hotline	(800) 856-5553 or (415) 558-2650
Foster Care Ombudsman	(415) 558-2828
Transportation Duty Line	(415) 557-5376
Licensing/RFA/Recruitment Hotline	(415) 558-2200
San Francisco Families Making a Difference	
Mentor Program for Care Providers	(415) 557-5400
Free Foster Parenting Respite Service	(415) 861-4060 x 3035
Community Services	211
Non-emergency Government Services	311

FCS Agency Directory: www.sfhsa.org/174.htm

K.I.D.S.



Resource Family Meetings/Support

Quarterly Caregiver Meeting

2nd Tuesday once per quarter
 Tuesday, April 14, 2020 from 6-8 p.m. at 170 Otis Street
 2nd floor cafeteria

QPI/RFA Meetings

4th Thursday of each month
 Thursday, March 26, 2020 11 a.m. to 12:30 p.m. at 170
 Otis/7th Floor Conference Room
 Thursday, April 23, 2020 11 a.m. to 12:30 p.m. at 170
 Otis/7th Floor Conference Room

FCS Recruitment Team Meeting

3rd Wednesday of each month
 Wednesday, March 18, 2020 from 11:30 a.m. - 1 p.m.
 Wednesday, April 15, 2020 from 11:30 a.m. - 1 p.m.
 170 Otis St. San Francisco

Resource Family Convening

3rd Wednesday of each month
 Wednesday, March 18, 2020 from 5:30-7:30 p.m.
 170 Otis Street 5th floor Multi Media Room

*For more RFA Care Provider Meeting information please
 contact Arlene Hylton at 415-557-5067.*

Special Announcements

SA/HIV Infant Program Support Group

English: 3rd Tuesday of the month (Except December) 6-8
 p.m. **Spanish:** 3rd Thursday of the month (Except Decem-
 ber) from 6-8 p.m.

To attend SA/HIV Support Group, please contact Sharon at:
 (510) 282-4658.

Other Resource Parent Meetings

Resource Families United — Foster Parent Association
 Last Thursday of the month from 6-8 p.m. at 3801 3rd Street
 resourcefamiliesunited@yahoo.com

SF Resource Family Mentor Program

Are you an experienced Resource Family who would like to provide support and advice to new caregivers? Are you a new or struggling Resource Family who could benefit from the guidance and assistance of a more seasoned caregiver? If so, please consider joining the SF Resource Family Mentor program! For more information, please contact Program Facilitator Jeana Lasser at (510) 852-9708 or ppc@afs4kids.org.

Newest Caregivers to complete RFA PreService:

Join me us in welcoming the January 2020 English and Spanish RFA Pre-service graduates and the graduates of the January/February 36hr SA/HIV placement training! Thank you for participation and dedication.



RFA Pre-Service Approval Training

English RFA Pre-Service Training	March 14 & 21, 2020 (Saturdays) 9 a.m. - 4:30 p.m.
Spanish RFA Pre-Service Training	April 18 & 25, 2020 (Saturdays) 9 a.m.-4:30 p.m.
English RFA Pre-Service Training	April 21-30, 2020 (Tues/Thurs) 5:30-9 p.m.

Placement Training

Spanish SA/HIV 36-hour Cycle	March 7-April 4, 2020 (Saturdays) 9 a.m.-5 p.m.
CPR/First Aid (English)	April 18, 2020 9 a.m. - 3:30 p.m.
ABC's of Baby Care (Spanish)	April 8, 2020 5:30 - 8:30 p.m.

Ongoing Training

RFA Advanced Training: Reproductive Rights SB 89	Wednesday, March 4, 2020 5:30-8:30 p.m.
Advanced Training: Parenting in Oz	April 25, 2020 10 a.m.-5 p.m.

To register for training please contact:
Alternative Family Services (AFS) PPC@afs4kids.org
Or through your RFA Worker