

# Asthma Awareness Campaign Insights

## Introduction

From October 2024 to January 2025, Third Sector Leaders and Community Champions engaged with local communities to get feedback regarding asthma awareness. As defined on the NHS website, asthma is a common lung condition that causes occasional breathing difficulties<sup>1</sup>. It usually develops in childhood but can begin in adulthood as well, affecting people of all ages. While there is no cure for asthma, the symptoms can be controlled and its impact minimized via simple treatments. Awareness of asthma, including its signs, symptoms and triggers is important for diagnosis and management. In these conversations, respondents identified whether or not they know what asthma is and if they have it. People participating reported how much knowledge they have about asthma. If they had asthma, they expressed if they would know where to get support in case of any issues or concerns. Those who didn't know benefitted from a discussion and signposting. Respondents who have asthma identified if it is well managed or not and barriers they have faced leading to poorly managed asthma and/or their struggles in seeking support. This highlighted barriers amongst the different demographic groups including gender, age bracket, ethnicity and location/deprivation decile. The positive outcomes of these conversations and their impact has been noted.

## Overview of Data Collected

- 716 conversations were held which included 61 group conversation 655 individual conversations
- Participants were
  - 67% (472) females (or an all females group)
  - 31% (225) males (or an all males group)
  - 3% (18) prefer not to say
  - 1 non-binary individual
- The respondents were of diverse ethnic backgrounds:
  - 38% were Asian British Pakistani
  - 23% were White British/English/Northern Irish/Scottish/Welsh
  - 19% were Asian British Indian
  - 6% Black/Black British Caribbean
  - 5% Not known
  - 3% Black/Black British African
  - 2% or less each of other ethnic groups including Arab, any other Asian/Asian British, any other Black/ Black British, and/or any other White British backgrounds.

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- Participants were also from different age groups (includes age bracket of all individuals and one count of age bracket represented in the group conversations):
  - 49% of the respondents were in the 25-49 years age bracket (352 individuals)
  - 24% were 50-64 year olds (172 individuals)
  - 17% were 65-79 year olds (121 individuals)
  - 7% were 18-24 year olds (50 individuals)
  - 2% were aged 80+ (12 individuals)
  - 1% Not known (8 individuals) and prefer not to say (1 individual)
- Disability
  - 16% had a disability (115 individuals)
  - 68% had no disability
  - 12% Not known
  - 4% Prefer not to say
- 5% of the respondents had concerns about their emotional wellbeing/mental health
- 7% of respondents had worries, anxieties, or concerns around cost of living while 6% said maybe, 13% chose prefer not to say and 65% said no.
- Location/Postcode/Index of Multiple Deprivation Decile (with a rank of 1 being the most deprived and rank of 10 being the least deprived as outlined in the English indices of deprivation 2019)<sup>2</sup>
  - 51% of the conversations took place in decile 1
  - 25% in decile 2
  - 9% in decile 3
  - 5% in decile 4
  - 4% in decile 5
  - 1% in decile 6
  - 1% in decile 7
  - 1% in decile 8
  - 3% in decile 9

## Key Findings

- Do you know what asthma is?
  - 79% knew while 7% were not sure.
  - 5% said no they did not know.
  - 9% blank/unanswered
  - Men were more likely to say yes compared to women, with 85% of men saying yes and 79% of women.
  - 73% (24 out of the 33) of those who did not know were females.
  - Similarly, from those who were not sure, 72% (38 out of the 53) were females.
  - Black British (Caribbean and African) were more likely to say yes the know.

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- Asian British Indian were more likely to say they're not sure.
- Asian British Pakistani were more likely to say no they don't know.
- Do you have asthma?
  - 18% (132 individuals) said yes
  - 5% were not sure (34 individuals)
  - 5% also said they suspect they could have symptoms (33 individuals)
  - 64% said no and 9% did not respond to this question.
  - From the 132 with asthma:
    - 18% had concerns around cost of living
    - 10% had concerns around emotional wellbeing/mental health.
    - 39% stated they had a disability
    - 71% were females
    - 56% were in the 25-49 years age bracket with the remaining spread across other age groups.
    - They were primarily of White British/English ethnicity (32%) followed by Asian British Pakistani (27%), Asian British Indian (13%) and Black British Caribbean (11%). Less than 10% each from other ethnic groups.
  - Out of the 5% who were not sure:
    - 76% (26 out of 34) were females
    - 44% were of Asian British Pakistani ethnicity
  - From the 5% who suspected they could have symptoms:
    - 88% were females
    - 61% were 25-49 year olds
    - 39% were Asian British Pakistani and 21% were White British/English
- Is your asthma well managed?
  - 109 individuals said yes, it is.
  - 21 individuals said no.
  - 2 individuals chose N/A
  - Out of 132 individuals who said they had asthma, 83% are managing it well while 16% of them find their asthma is not well managed.
  - Out of the 21 individuals who felt their asthma is not well managed:
    - Two thirds (14 individuals) also said they had a disability
    - One third (7 individuals) had concerns around cost of living
    - 24% (5 individuals) had concerns around their emotional wellbeing/mental health
    - One- third were White British/English (7 individuals)
    - 24% were Asian British Pakistani (5 individuals)
    - All 21 individuals whose asthma was not well managed were from area of most deprived (ranks 1-4) while none were areas of less

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deprived (ranks 5-10). Specifically, 14 out of the 21 individuals were from decile 1, 4 from decile 2, 2 from decile 3 and 1 from decile 4.

- If your asthma is not well managed or you have not seen anyone about it, why do you think you are struggling or have not sought support?
  1. N/A – Asthma is well managed (128 individuals)
  2. Didn't understand/realise the importance (53 individuals)
  3. Lack of awareness of service available (46 individuals)
  4. Accessing services – such as GP/hospital appointments (33 individuals)
  5. Fear of asthma diagnosis (29 individuals)
  6. Language barrier – unable to understand health literacy, unable to ring re-arrange appointment (27 individuals)
  7. Assumption that individual is at no or low risk (25 individuals)
  8. Time constraints e.g. competing priorities such as work/family commitments/childcare (24 individuals)
  9. Fearful of asthma appointment e.g. feeling embarrassed or ashamed or that it could be painful or don't know what to expect (20 individuals)
  10. I have only just heard of it from speaking to a champion today (19 individuals)
  11. Social barriers – no friends/family to talk to about the topic, no access to support (17 individuals)
  12. Mental health barrier e.g. anxiety, depression (16 individuals)
  13. Financial barriers e.g. cost of transport (8 individuals)
  14. Religious barriers (7 individuals)
  15. Disability related barriers (4 individuals)
  16. Has COPD (1 individual)
  17. Online (1 individual)
- Top 3 Barriers per demographic group:
  - Females:
    1. Didn't understand/realise the importance
    2. Lack of awareness of service available
    3. Accessing services – such as GP/hospital appointments
  - Males:
    1. Didn't understand/realise the importance
    2. Lack of awareness of service available
    3. Social barriers
  - Age-bracket:
    1. 25-49 year olds' top barriers are didn't understand/realise importance, lack of awareness of service available, and time constraints
    2. 50-64 year olds said it was lack of awareness of service available, fear of asthma diagnosis, and language barrier

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3. 65-79 year olds said they didn't understand/realise importance, lack of awareness of service available, and accessing services
  4. 18-24 year olds didn't face many barriers. Out of the 50 individuals in this age bracket, only one selected they didn't understand/realise the importance and one selected assumption that they're at low or no risk.
  5. 80+ year olds chose fear of diagnosis, language barrier, fear of appointment, mental health barrier, financial barrier, religious barrier and disability related barrier. With only 12 respondents in this age bracket, there were only one or two individuals at most selecting each barrier mentioned.
- Those who said yes to having emotional wellbeing/mental health concerns:
    1. Mental health barrier
    2. Accessing services
    3. Time constraints
  - Those who had worries, anxieties or concerns around cost of living (answered yes/maybe):
    1. Lack of awareness of service available
    2. Didn't realise/understand the importance
    3. Mental health barrier
  - Ethnicity:
    1. Asian British Pakistani respondents mainly faced language barrier, lack of awareness of service available and didn't understand/realise the importance.
    2. White British/English respondents struggled with accessing services followed by lack of awareness and didn't understand/realise the importance.
    3. Asian British Indian respondents mostly had lack of awareness and didn't understand/realise the importance.
    4. Black British Caribbean respondents said they didn't understand/realise the importance or assumed were not at risk.
    5. Remaining ethnic groups had few participants and only 1 or 2 selected a barrier listed above.
- How much knowledge do you have about asthma?
    - 76% of all respondents said "I know about signs and symptoms" (545 individuals)
    - 47% said "I know how and where to get support if needed" (308 individuals)
    - 41% said I know about triggers (297 individuals)
    - 35% said I know about prevention (251 individuals)
    - 27% said I know about genetics and the part they play (192 individuals)
    - 26% said I know about who can develop asthma (188 individuals)
    - 9% chose Other (63 individuals)

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- If you have asthma and you did find that you were having any issues or concerns, would you know how to get support/how to manage your asthma?
  - 56% N/A don't have asthma
  - 30% Yes
  - 5% No
  - The 5% saying no is primarily female (25 out of the 34 individuals saying no). They are mainly 25-49 year olds (16 individuals) and 50-64 year olds (12 individuals) and of Asian British Pakistani ethnicity (13 out of 34), White British English (8 out of 34), and Asian British Indian (6 out of 34).
  - The most common barriers for this 5% with asthma who do not know how to get support or manage their asthma are lack of awareness of services available, didn't understand/realise the importance and language barrier.
  
- The conversation outcomes were (list in order of most to least frequently chosen):
  1. Improved awareness of asthma – chosen by 83% of total respondents
  2. Increased of signs/symptoms – 47%
  3. Additional individual conversations – 45%
  4. Signposted to online resources – 44%
  5. Increased awareness of triggers – 43%
  6. Increased awareness of prevention – 41%
  7. Signposted to other services for support and further information – 37%
  8. Signposted to online resources in multiple languages – 35%
  9. Signposted to local activity related to asthma – 32%
  10. Advised to contact GP – 21%
  11. Talked about childhood asthma – gave support/signposted – 20%
  12. Supported with stop smoking advice/signposting – 10%
  13. N/A – 3%
  14. Already knowledgeable – 1%
  - Improved awareness of asthma was the top conversation outcome for respondents of all ages, gender, and ethnicity.
  - 83% of the female participants (392 out of 472 total women) had an improved awareness of asthma as did 84% of males (188 out of 225 total men).
  - Nearly half the women had additional individual conversations (48%), an increased awareness of signs/symptoms (46%) and were signposted to online resources (46%).
  - In comparison, 44% of men had an increased awareness of signs and symptoms, 38% of men had additional individual conversations and 40% were signposted to online resources.
  - Women were more likely to be advised to contact GP, with 23% of women and only 16% of men with this outcome.
  - More women were signposted to online resources in multiple languages (40%) compared to men (28%).

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- For the top three outcomes per age bracket, improved awareness is first for all age groups.
  - For 18-24 year olds, the second outcome is increased awareness of signs/symptoms followed by signposted to other services for support and further information.
  - For those in 25-49 year age bracket, the second highest outcome was increased awareness of signs and symptoms while the third was additional individual conversations.
  - For 50-64 year olds, the second outcome was signposted to online resources and the third outcomes was additional individual outcomes.
  - Those in the 65-79 years age bracket chose increased awareness of signs/symptoms followed by increased awareness of triggers.
  - Those aged 80+, although few in numbers, were also signposted to other services for support and further information as well as had increased awareness of signs/symptoms as their outcomes.
  
- The top three conversation outcomes for those with emotional wellbeing/mental health concern:
  1. Improved awareness
  2. Signposted to other services for support and further information
  3. Advised to contact GP
- The top three conversation outcomes for those with concerns around cost of living were:
  1. Improved awareness of asthma
  2. Additional individual conversations
  3. Signposted to other services for support and further information
- The top three conversation outcomes for those with a disability were:
  1. Improved awareness of asthma
  2. Additional individual conversations
  3. Increased awareness of signs/symptoms
- Index of Multiple Deprivation Decile and conversation outcomes:
  - While 50% of the conversations happened in decile 1 postcodes, it's interesting to note the percentage of respondents from specific deciles within each outcome.
  - For all outcomes, the greatest number of respondents are from decile 1. However, for those reporting they talked about childhood asthma as their conversation outcome, 70% were from decile 1, 14% from decile 2, 4% from decile 3, 10% from decile 4 and 1% or less from remaining.

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- From those advised to contact GP, 37% were from decile 1, 36% from decile 2, 9% from decile 3, 9% from decile 4, 7% from decile 9, and the remaining 2% from others.
  - Those from decile 2 benefitted from advice to contact GP and signposting to online resources and in multiple languages.
  - The second most common outcome for those in decile 3 and 4 was additional individual conversations.
  - Those from decile 5 were more likely to choose N/A rather than one of the conversation outcomes listed above.
  - Although there are not many respondents from decile 6-8, there were several from decile 9 and their top conversation outcomes were all related to improved awareness of asthma including its signs/symptoms, prevention and triggers. Almost half of those from decile 9 (10 out of the 22) were advised to contact a GP as well.
- Index of Multiple Deprivation Decile and barriers:
    1. Those from decile 1 were most likely to report all of the barriers listed above as their reasons for poorly managed asthma or for struggling to get or not seeking support.
    2. The most reported barrier for those from decile 9 was they didn't understand/realise the importance.
    3. Mental health barrier was reported by 16 individuals, all from decile 1 (12 respondents) and decile 2 (4 respondents).
    4. Those from most deprived areas (lower deciles 1-3) were more likely to report accessing services as one of their barriers. 94% (31 out of the 33) of those reporting this barrier were from decile 1,2, and 3.
    5. Those from decile 1 were more likely to report the assumption that they are at no or low risk (80% of those reporting this were from decile 1).
    6. Time constraint is more prevalent among those in areas of high deprivation with 23 out of the 24 individuals reporting this barrier from decile 1-4.
  - What would you do differently now that you have spoken to a champion?
    - Majority agreed they would keep up with their health check-up appointments and see GP or another healthcare professional as needed.
    - Some mentioned they would get their vaccinations booked in i.e. flu jab, covid jab, etc.
    - Those with any symptoms indicative of asthma will get the appropriate support and diagnosis through their GP.
    - Many mentioned following a healthy lifestyle including healthier eating and incorporating exercise.
    - They will use the information from these conversations in making informed decisions.

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