FRESHAR Global action for healthy lungs

An implementation science project to improve prevention, diagnosis and treatment of chronic lung diseases where resources are limited



A lack of

awareness

exacerbates

the problem.

about the risks

plementation research

terventions can work in

low-resource settings

is needed to test how

sed awarenes harm of tobacco oke, particularly knowledge on COPD and Creative Improved understanding community of risk factors engagement Interventions from FRESHAR Healthcare professionals trained and diagnosis usir Improved tools Improved for diagnosis lung health in infancv and treatment Pulmonary rehabilitatio adapted to Frontline sta mmunity-base programmes taught to delive Very Brief Advic

This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 680997.

Globally, the

of asthma is

increasing²



globalasthmareport.org/ www.unicef.org/publications/files/UNICEE Clear the Air for Children 30 Oct 2016 odf

Patients and communities volved in trans of materials and implementation analysis and issemination of research

Use of photography film. art. dance and patient stories to build positive

messages

Culturally-tailored information for parents of children with asthma

search on eptions of and treatments for hildhood cough and wheeze, raising questions about appropriate diagnosis

Engaged community

members as

peer researchers

Midwives able to teach new mothers about harm of smoke

What we have learnt from **FRESH**

Chronic lung diseases have an under-researched socio-economic impact - people may not take time off work but they are less productive.

Where infectious disease is prevalent asthma diagnosis missed.

Implementation research needs to be underpinned with actions that build trust in the process and . workforce and ensure local compatibility

Pulmonary rehabilitation sessions can be run affordably and effectively in the community.

Communities want to improve the quality of the air they breathe.



Evidence-based training interventions can be used to build implementation capacity e.g. teach the teacher and online training and feedback nodels

Verv Brief Advice for smoking cessation can be delivered. but challenges remain due to lack of availability of smoking cessation medication and counselling.

Education and training interventions should include a wide spectrum of healthcare professionals and community health workers (not just doctors).

Recommendations

he knowledge and other nefits generated by the oject need to be sustained the face of competing alth priorities.

mplementation of effective interventions depends on a data-driven case for change to be established and owned by local stakeholders.

Data has been lacking on the size of the problem and the feasibility of solutions, including their affordability and cost-effectiveness.

FRESHAR

can offer clinical data and imple on demographics, risk factors, healthcare utilisation, quality of life, and direct and indirect costs of diagnosed respiratory patients to build those cases for change.

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