**Abstract**

Asthma is one of the most common chronic diseases in children. Parents of children diagnosed with asthma often times fail to understand the multitude of complexities in controlling and preventing asthma exacerbations, resulting in increased mortality, morbidity, and health care cost. Disparities in asthma severity, prevalence, and poor outcomes have been widely documented across racial and ethnic groups, low socioeconomic status, and uninsured and publicly insured patients resulting in a significant burden to the health care system. National and international guidelines state that the aim of an asthma self-management program is to achieve and maintain asthma control. Studies show patient education and an individualized, comprehensive medical treatment plan reduces morbidity and mortality in pediatric patients diagnosed with asthma. The purpose of the Parent Asthma Education Program evidence-based practice project is to educate parents of children age 5 to 12, diagnosed with persistent asthma and using the Medicaid system to successfully control their child's asthma. Based upon the
National Asthma Education Prevention Program, Expert Panel Report-3 Guidelines, the project offers parents educational tools to improve functional health and quality of life while decreasing the complexities of asthma disparity. Chronic illness imposes a challenging experience for patients, families, and health care professionals. The Symptoms Management Model (SMM) developed by the University of California San Francisco, College of Nursing, serves as the framework in the evidence-based project. The SMM proposes explicit and testable relationships among three concepts, providing a structure for understanding the connections of the concepts, and identifying interventions and outcomes. The model focuses on symptom experience, management strategies, and outcomes applicable to practice and research, and is currently being used in a variety of studies and settings. The Children’s Health Survey for Asthma (CHSA), a condition-specific, self-reported, functional validated health measure for parents of children five to 12 years of age with chronic asthma, is administered before and after the educational program to measure functional health and quality of life. The CHSA appraises the impact of asthma and daily complexities experienced by the child with asthma and their family. Providing parents of children with asthma skills and knowledge to manage their child’s asthma demonstrates decreased health care utilization, increased functional health, and improved quality of life.