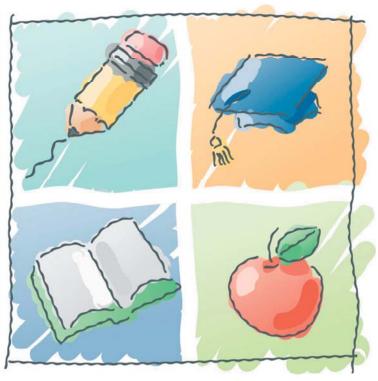
Asthma in the Classroom: A Teacher, Coach and Staff Guide





The Clean Air and Healthy Lungs People
Since 1917

We wish to credit the original creator of this asthma guide book, Katelyn E. Bryant, who was a student at California State Monterey Bay and completed this booklet as her senior project. Thank you to Bryan Emerson for page design.

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"This publication was presented to Breathe California of Sacramento-Emigrant Trails and is dedicated to my little sister, Jessica Anne Bryant. Her determination to overcome unspeakable odds and her ability as a child to educate adults about her disease, displays courage and strength that the asthma community is forever grateful for.

This booklet could not have been created without the assistance of the professionals at Breathe California of Sacramento-Emigrant Trails. Thank you for taking the time to provide me with the information necessary to compile this educational resource."

- Katelyn E. Bryant -

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The Clean Air and Healthy Lungs People
Since 1917

Breathe California of Sacramento-Emigrant Trails, has been a leader in fighting for clean air, healthy lungs and a tobacco-free future in the Sacramento Region since 1917.

As an independent nonprofit focused on our communities, we are committed to local, grassroots prevention and education programs. We are also the only Sacramento-Based organization devoted to clean air, healthy lungs and a tobacco free tomorrow that spends 100% of every dollar raised improving the health of our residents.

Early on Breathe California of Sacramento-Emigrant Trails understood the importance of youth involvement in all aspects of our organization. Our Youth Advisory Board enhances all of our projects by including the youth voice. The A.I.R. Project (Ask. Investigate. Resolve) gives youth a chance to conduct a multi-step scientific study on their campuses while learning about air quality issues. Our Thumbs Up! Thumbs Down! Project counters the glamorization of tobacco in film and prevents kids from picking up a deadly habit. The STAND Project encourages multi-unit housing complexes to implement smoke-free policies. Our STAND Street Team offers one-on-one quitting support to their peers. Last but not least, our Teen Asthma Task Force created useful materials for teens to help them better understand their asthma.

With the continued community support, we promise to make our dream of clean air, healthy lungs and a tobacco-free future a reality!



Asthma in the Educational System

As a teacher, coach or school staff member, it's not a question of *if* you will encounter an asthmatic student during your career - it's a question of *when*. Asthma is the most common serious, chronic disease of childhood. It can be very serious and potentially life threatening.

Asthma in the Classroom

Asthma is one of the primary causes of school absenteeism in the country. More students will miss school because of their asthma symptoms than any other chronic disease.

Missing school because of asthma makes it hard for a student to reach his or her full academic potential. So, being educated about asthma and its physical and emotional effects, will allow you to provide a safer educational environment for your asthmatic student to succeed.

This booklet was designed to help you understand the severity of asthma, which will in turn help you help your asthmatic students succeed in their learning environment.



Asthma Overview

What Is Asthma?

Asthma is a long term chronic disease that causes the air passages in the lungs to become inflamed and narrow or blocked. It can range from annoying to life-threatening. When someone is having an asthma attack or episode, they may experience a tight feeling in their chest. Often it feels like breathing through a straw that is pinched in the middle.

The main problem in asthma is inflammation (redness and swelling) of the walls of the small breathing tubes. The cells and substances that cause inflammation build up in the wall of the airway. The lining in the airway becomes swollen and produces extra mucus or phlegm.

The small breathing tubes are also surrounded by muscle. When exposed to an asthma trigger, the muscle tightens and narrows the airway. This process is called bronchospasm. The inflammation and the bronchospasm combine to make it hard to get air in and out of the lungs.

Who Gets Asthma?

Anyone can have asthma. However, some people are more likely to have asthma than others:

- People with parents and family members who have asthma, allergies, or eczema
- · People with allergies or eczema
- People who are born prematurely
- People whose parents smoke

Asthma Medication Law

Effective January 2005 in California

The California Asthma Medication Law permits students with asthma to carry and self-administer their prescribed asthma medication.

NOTE: Refer to your local state medication law if you are outside of the state of California.

Requirements

In order for students with asthma to carry and self-administer their perscribed asthma medication, the first requirement is that the school district must receive a written statement from the physician with the following information:

- A. The name of the medication
- B. How it is to be used
- C. The dosage
- D. Conformation that the student is able to self-administer the medication

The second requirement is that the school district must receive a written statement from the asthmatic student's parent/foster/guardian with the following information:

- A. Consent allowing the student to self-administer his/her asthma medication
- B. Release allowing the school nurse or other designated school personnel to consult with the student's physician if questions or concerns arise
- C. Release absolving the school district and school personnel from civil liability if the self-administering student suffers an adverse reaction

Asthma Medication

Two Types of Medications (Inhaled)

- Controllers (also called prevention or maintenance)
- Relievers (also called rescue or fast acting)

Controllers (Anti-Inflamatory)

To be most effective, preventive medication must be used every day.

CAUTION: Controller medications **<u>DO NOT</u>** provide rapid relief of asthma symptoms.

Examples of some common corticosteroids (controllers) are:

- Aerobid
- Azmacort
- Beclovent
- Flovent
- Pulmicort
- Qvar
- Vanceril

Relievers (Bronchodilator)

These medications relax the muscle bands around the breathing tubes. The air passages open and breathing becomes easier within minutes. Examples of short acting bronchodilators (relievers) are:

- Albuterol
- · Breathaire
- Maxair
- Proventil
- Ventolin
- Xopenex

NOTE: If a student is experiencing an asthma attack in the classroom or on school grounds, make sure he/she uses a reliever (rescue) inhaler and not a controller inhaler.



How to Take Asthma Medications

Inhaled medications go directly into the lungs. They provide the most benefit with the least side effects.

Metered Dose Inhalers (MDI)

The MDI delivers the medication as a spray. Metered dose inhalers are sometimes called "inhalers," "puffers," or "spray."

Spacer Devices or Holding Chambers

Spacer devices and holding chambers can be used with most metered dose inhalers. With a spacer, more medication goes directly into the lungs, and less gets into the mouth and throat. Less coordination is



also needed. Commonly used brands of spacers include Aerochamber, EZ Vent, and InspirEase.

Dry Powder Inhalers

The DPI delivers the medication as a dry powder. To use them, the powder must be inhaled rapidly.

Nebulizers

Nebulizers delivers the asthma medication as a fine mist. It takes about 15 minutes to give a nebulizer treatment. (Usually this form of medication is kept in the school office or with the school nurse).

How to Use a Metered Dose Inhaler With and Without Spacer/Holding Chamber

Inhalers need to be used correctly to work. If one of your students is having an asthma attack, make sure he or she follows these steps in order to asminister medication properly:

- 1. Sit or stand upright.
- Take the inhaler cap off. Shake the inhaler well (prime HFA inhalers by wasting four puffs if MDI has not been used recently) and then insert into the spacer/holding chamber device if available. Breathe out normally.
- 3. *With* a chamber, place the mouthpiece of the spacer/holding chamber in the mouth.
- 4. *Without* a chamber, hold MDI one inch from the mouth.
- 5. Hold medication upright. Press down on the medication canister (releasing one puff).
- 6. Breathe in slowly and deeply, filling the lungs with as much air as possible. If using spacer/holding chamber, it should not make a noise.
- 7. Hold breath and count to ten.
- 8. Breathe out slowly.
- 9. Wait one minute before taking the next puff.
- 10. When finished make sure to replace the protective cap on the mouthpiece of the inhaler.

* **NOTE:** Medication should be administered by the student unless he or she is unable to administer it themself.

****NOTE:** Inhalers are kept in the office if the student is unable to administer it themself.

Triggers

What Are Triggers?

When a student has asthma, certain things that generally do not bother students without asthma can affect their sensitive airways. These things are called triggers. They can include irritants, infections, exercise and allergens.

Not all asthmatic students share the same triggers. It is important to talk to them and their parents or guardians about which triggers the doctor and family have identified in hopes of avoiding them.



Triggers That Can Be Found At School

- Cold dry air/change in weather
- Smog (Spare the Air Days)
- Grass, weed pollen, mold spores
- Exercise
- Food allergies
- Infection triggers: ear, sinus, lung infections and the common cold
- Classroom pets or visiting animals (fur & feathers)
- Strong scents
- Cockroaches
- · Dust Mites

Minimizing these triggers can help the student avoid episodes in the classroom. If these triggers are around be aware! Make sure your student has his or her proper medications on hand.

Symptoms

The Symptoms of Asthma

Asthma symptoms can include:

- Coughing
- · Chest Tightness
- Wheezing (as air whistles through narrow passages)
- Shortness of breath
- · Difficulty breathing

Many asthmatic students can suffer from a variety of symptoms, and the symptoms of asthma can be different for each person. They may experience a dry cough or wheeze during a cold.

They also may experience chest tightness when exercising or have episodes of wheezing and difficulty breathing. They may also display symptoms of itchy eyes, runny nose and scratchy throat when the asthma is not under control.

REMEMBER: If you see a student displaying any of the above symptoms, please seek help immediately!

Epinephrine Auto-Injector (Epi Pen)

What is an Epinephrine Auto-Injector?

An epinephrine auto-injector provides a rapid convenient dose of epinephrine. It is used to treat severe allergic reactions. Such emergencies may occur from insect bites and stings, food, drugs, latex, exercise-induced anaphylaxis and unknown causes.

NOTE: Some severe asthmatics have an epinephrine auto-injector, but this treatment's main use is for an allergic reaction and is <u>NOT A</u> COMMON TREATMENT FOR ASTHMATICS.

When to Use an Epinephrine Auto-Injector For Anaphylaxis and Asthma

If a student is displaying symptoms of an allergic reaction or a severe asthma attack (where the student stops breathing or is about to), it is the time to use the epinephrine auto-injector. An epinephrine auto-injector is prescribed by a doctor and is either carried to class by the student or is located in the office.

Epinephrine and the Asthmatic Student

If a student is having an asthmatic attack and his or her medication is not working, call 911. If the child's breathing has become labored and oxygen is not circulating properly, the child most likely will have a red face that will turn pale and bluish. This is the time to use the epinephrine auto-injector. The epinephrine auto-injector is designed to inject epinephrine into the student's system to help open airways.

The Epi Pen must be prescribed specifically to the student.

Use epinephrine if there are true systemic problems such as drooling, difficulty speaking, coughing, gastrointestinal symptoms, feeling faint or when a student stops breathing.

If the epinephrine injector is used for any reason call 911.

*IMPORTANT: In California schools, the epinephrine auto-injector can only be administered by a trained individual. Under the California Education Code 49414, only a person who has been trained to recognize anaphylaxis and has current CPR is allowed to administer an epinephrine auto-injector.

**NOTE: Refer to the instructions printed on the container for an Epi-Pen or Twin Jet Auto-Injection.

***NOTE: Epinephrine auto-injectors are designed to work through clothing*

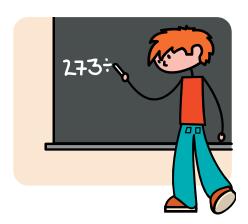
Social and Emotional Effects of Asthma

Students who miss school due to poorly controlled asthma not only miss classroom instruction, they also miss out on social interactions with other students their own age. This can lead to fears of social isolation and fears of being "different" from other classmates. Some students may develop low self-esteem, withdraw from activities, or have difficulty completing their schoolwork.

Some asthmatic children are embarrassed if other students see them taking medications or if school activities are interrupted because of an asthma attack. Medications can also have side effects, such as: nervousness, tremors, irritability, insomnia, restlessness, fatigue and depression. This can impact the student's school performance, behavior and social relationships.

If a student misses a lot of school, upon return there may be difficulties adjusting, especially if he or she feels like they missed out on activities. It also may be stressful trying to complete missed class-work and homework.

Missing school days, not being able to interact with other classmates, waking up in the middle of the night with an asthma attack, and going to the emergency room can lead to feelings of helplessness and produce anxiety in students with asthma.



What Educators and Staff Can Do To Help



Asthma symptoms are often confusing. There are times when teachers and staff often wonder if a student reports symptoms as a desire for attention or to avoid participating in certain activities. However, it is important that all school personnel take asthma seriously.

Actions that can help support a student with asthma:

- Get to know the warning signs of asthma and learn when to contact the school nurse (if on site) and when to call 911.
- Learn the procedure for asthma related emergencies.
- Educate non-asthmatic students to help them understand the disease.
- Encourage the asthmatic student to participate in all activities, including PE, but offer reassurance that there are options to modify or limit activity as apporpriate to the student's needs. If asthma is triggered by exercise the student must premedicate.
- Talk to the student about thier concerns regarding participating in activities and offer alternative activities if full participation is not possible.
- Consult with a school nurse, parent, or health care professional to make sure the student feels safe and encouraged to participate.
- Encourage the student to express fears and ask questions by providing a warm, accepting attitude.
- Refer the student to a counselor if they appear depressed or withdrawn.
- Respect the student's self-report on his/her condition. There is a strong possibility that the student is asking to be excused because of a real problem.
- Never leave a student alone when he/she is having an attack.
- Make sure student carries medication with them or that there is easy access to the medication.

Spare the Air Days

There are certain days that children with asthma should not leave the classroom for recess or PE. These are called Spare the Air Days and usually occur during warm summer weather in California. When the temperature climbs too high, there is no wind present, and automobile traffic is high, the air quality will be at an unhealthy level to breathe. If the air quality is poor enough to reach beween 101-300, asthmatic students should be kept indoors, which means they should be kept inside the classroom for recess, physical education or any out door activities.

This is a preventative measure because if poor air quality or smog is an asthmatic student's trigger, an asthma attack may occur. Also poor air quality is not healthy for any student. If the Air Quality Index indicates that air quality is going to be between 151-300, try to keep the class indoors. If there is a covered and air conditioned school gym, try to utilize that area instead of the play ground or create games to play in the classroom. For more information on air quality, visit www.SpareTheAir. com.

The Air
Quality Index
Activity Chart
was created
by Breathe
California of
SacramentoEmigrant Trails
in conjunction
with the
Sacramento
Metropolitan
Air Quality
Management

ACTIVITY	0 to 50 GOOD	51 to 100 MODERATE	101 to 150 UNHEALTHY FOR SENSITIVE GROUPS	151 to 200 UNHEALTHY	201 to 300 VERY UNHEALTHY
Recess (15 min)	No Restrictions	No Restrictions	Make indoor space available for children with asthma or other respiratory problems.	Any child who complains of difficulty breathing, or who has asthma or other respiratory problems, should be allowed to play indoors.	Restrict outdoor activities to light to moderate exercise.
P.E. (1 hr)	No Restrictions	No Restrictions	Make indoor space available for children with asthma or other respiratory problems.	Any child who complains of difficulty breathing, or who has asthma or other respiratory problems, should be allowed to play indoors.	Restrict outdoor activities to light to moderate exercise not to exceed one hour.
Scheduled Sporting Events	No Restrictions	Exceptionally sensitive individuals should limit intense activities.	Individuals with asthma or other respiratory/ cardiovascular illness should be medically managing their condition. Increase rest periods and substitutions to lower breathing rates.	Consideration should be given to rescheduling or relocating event	Event should be rescheduled or relocated.
Athletic Practice and Training (2 to 4 hrs)	No Restrictions	Exceptionally sensitive individuals should limit intense activities.	Individuals with asthma or other respiratory/ cardiovascular illness should be medically managing their condition. Increase rest periods and substitutions to lower breathing rates.	Activities over 2 hours should decrease intensity and duration. Add rest breaks or substitutions to lower breathing rates.	Sustained rigorous exercise for more than one hour must be rescheduled, moved indoors or discontinued.
	Note: All guideli	nes are cumulative (left to r	right and top to bottom) as duration	and intensity of activities increase.	

District and other partners, as well as air quality and health experts, to be used as a guide that coincides with the Air Quality Index to modify outdoor activities on poor air quality days. While this chart is designed around school-specific activities it can be used for anyone participating in outdoor activities. For a copy of the Air Quality Activity Chart, visit **www.sacbreathe.org** or call (916) 444-5900.

Emergency Asthma Action Plan

What To Look For:

- Shortness of breath
- Coughing or wheezing
- · Chest tightness
- · Difficulty walking, talking or breathing
- Tightly-pulled skin around neck or chest area

What To Do:

- STAY CALM! Speak reassuringly, provide privacy and do not leave the student alone.
- Sit the student upright and do not let him or her lay down.
- If needed, help administer the student's reliever (fast acting) bronchodilator listed on his/her medication authorization form.
- If there is no improvement (medication is not working) after five minutes CALL 911.

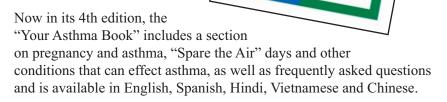
Call 911 Immediately If:

- The student's lips and/or nails are blue
- The student's skin is pulled tightly around neck or chest
- The student cannot walk or talk
- If an Epi-Pen was administerd
- If medication is not working

"Your Asthma Book" & Self Care Card

In 1999, Breathe California of Sacramento-Emigrant Trails established the Asthma Collaborative. This group of physicians, school nurses, respiratory therapists, pharmacists, health care administrators and parents assess the asthma needs of our community.

The Asthma Tool Kit, which includes "Your Asthma Book" and Self Care Card, was created in 2001 by the Asthma Collaborative as a resource for asthma sufferers to better understand and manage their asthma.



Not only is the Asthma Tool Kit making a difference in our local community, but more than 35,000 copies have been distributed internationally to countries including Bangladesh, Bosnia, Canada, Indonesia, New Guinea, Philippines, Poland, Russia, Ukraine, Australia, India, Kyrgyzstan, Nepal, Nigeria, Pakistan, Romania, Serbia and the United Kingdom.

Single copies are available at no cost and multiple copies can be purchased for a nominal fee. If you would like a copy of the Asthma Tool Kit, please contact us at (916) 444-5900. The Tool Kit can also be downloaded online at **www.sacbreathe.org**.

Teens and Asthma

There are millions of teenagers with asthma. In California alone, more than half a million teens reported having been diagnosed with asthma at some point in their life.

Breathe California of Sacramento-Emigrant Trails formed the Teen Asthma Task Force in 2005. This group of youth volunteers worked in collaboration with the Asthma Collaborative and created a teen-friendly question and answer style brochure and web page to help teens better understand and live with their asthma. Some of the topics covered are:

Where does asthma come from?

Not all the answers are known, but several factors such as family health history, allergies, the environment, and air pollution can contribute to the development of asthma.

How do I know if I have asthma?

You will experience warning signs that may include coughing, wheezing, shortness of breath, or chest tightness, often caused by triggers. If you think you may have asthma, see your doctor for proper diagnosis.

How do I manage my asthma?

The first thing is to know your triggers and warning signs. Do not smoke. You should have a peak flow meter - a device used to measure lung volume - and use it. Know the correct technique to use your medication inhaler, and have a controller medication and carry your fast acting reliever/bronchodilator with you at all times. If your

attacks are exercise induced, pre-medicate fifteen minutes prior to exercise with

your reliever/bronchodilator.

These and other questions and answers are also available in Spanish. If you would like a brochure, please contact us at (916) 444-5900. Visit our Teens and Asthma web page at

www.sacbreathe.org/TeenAsthma.

Asthma Resources

Allergy and Asthma Foundation of America

(202) 466-7643 **www.aafa.org**

Allergy and Asthma Network/Mothers of Asthmatics, Inc.

1-800-878-4403 www.aanma.org

American Academy of Allergy, Asthma & Immunology

(414) 272-6071 www.aaai.org

American College of Allergy and Immunology

1-800-942-7777 www.acaai.org

Breathe California of Sacramento-Emigrant Trails

(916) 444-5900 www.sacbreathe.org

National Heart Lung & Blood Institute

www.nhlbi.nih.gov

Sacramento Metropolitan Air Quality Management District

www.sparetheair.com

Greater Sacramento Area

Kaiser Permanente Asthma Program: North Valley-Sacramento, Davis, Rancho

Cordova, Roseville

(916) 973-7435 www.kp.org

South Sacramento

(916) 688-6090 (adult)

(916) 688-6848 (pediatric) www.kp.org

Mercy Folsom Hospital

(916) 817-8673 www.mercyfolsom.org

Mercy General Hospital/Medical Plaza

(916) 453-4273 www.chwhealth.org/Sacramento

Mercy San Juan Medical Center

(916) 537-5299 www.chwhealth.org/Sacramento

Methodist Hospital

(916) 453-4273 www.chwhealth.org/Sacramento

Sacramento County Clinic Services

(916) 875-0041

Sutter General Hospital/Adult classes only

(916) 733-1782 www.sutterhealth.com

Sutter Memorial Hospital/Pediatric classes only

(916) 733-1782 www.sutterhealth.com

UC Davis Asthma Network Adult Program (UCAN)

(916) 734-5676 www.ucan.ucdmc.ucdavis.edu

UC Davis Children's Hospital Pediatric Program

1-800-823-4543

Amador Sutter Hospital

Senior Center

(209) 223-7581 www.sutterhealth.com

El Dorado County

Barton Memorial Hospital

Respiratory Therapy Care (530) 541-3420 x 2500

Youth Asthma Camps (530) 541-3420

El Dorado Public Health Department Clinic

(530) 621-6100

Sierra Nevada Memorial Hospital

(530) 274-6124

Placer County

Kaiser Permanente Asthma Program, Roseville

(916) 973-7435 www.kp.org

Sutter Auburn Faith Hospital

(530) 888-4530 www.sutterhealth.com

Sutter Roseville Medical Center

(916) 781-1449 **www.sutterhealth.com**

San Joaquin County

Dameron Hospital

(209) 944-5550 www.damersonhospital.org

Lodi Memorial Hospital

(209) 334-3411 **www.lodihealth.org**

(800) 323-3411

Saint Joseph's Medical Center

(209) 943-2000 www.stjosephscares.org

Yolo County

Kaiser Permanente Asthma Program, Davis

(916) 973-7435 www.kp.org

Sutter Davis Hospital

(530) 757-5122 www.sutterhealth.com

Woodland Memorial Hospital

(530) 662-3961

Smoking Cessation

California Smokers' Help Line	1-800-NO-BUTTS
American Lung Association	1-800-LUNG-USA
Sutter Hospital	(916) 454-6528
Kaiser Permanente	(916) 688-6783
Mercy General Hospital	(916) 453-4927
Mercy San Juan Medical Center	(916) 537-5299
UC Davis Medical Center	(916) 734-8493
Breathe California of Sacramento-Emigrant Trails	(916) 444-5900

Breathe California of Sacramento-Emigrant Trails has been working for clean air, healthy lungs and a tobacco-free future since 1917. Our innovative programs in tobacco prevention, asthma, and clean air education and advocacy include:

Asthma

- Asthma Education providing asthma education and materials to the community including healthcare providers, school staff, children, teens and parents, adults and community groups
- Asthma Collaborative volunteer members working to reduce asthma severity in our community
- Little Lungs Tool Kit providing asthma information to childcare providers, and parents

Clean Air

- Air Quality Flag Program a poor air quality days school awareness program
- *A.I.R. Project* helping students measure and improve air quality on their school campuses
- Clean Air and Health Policy Committee advocating for local health impact studies
- *Cleaner Air Partnership* promoting clean air policy through a partnership with local businesses
- *Health Effects Task Force* a group of volunteer health and air quality experts conducting local studies of Sacramento Valley air pollution and the resulting health impacts on our residents

Tobacco

- *Thumbs Up! Thumbs Down!* teens and Hollywood working to reduce the glamorization of tobacco in film
- *STAND* the community, elected officials and young people work to reduce exposure to secondhand smoke; expose tobacco industry targeting tactics aimed the LGBT community; provide free quit smoking support and resources; and offer leadership and advocacy opportunities to teens and young adults
- *ATTACK* countering tobacco industry targeting tactics aimed at young adults (ages 18-25) through the creation of a revolutionary toolkit and website that focuses on adult only venues; fraternities/Greek organizations; Internet marketing; and any other emerging tobacco industry promotional tactics

Youth Leadership

• *Youth Advisory Board* - teaches high school and college students the necessary skills to become successful clean air and tobacco prevention activist, as well as leadership skills they will use throughout their lives

To help support our work, please send donations to Breathe California of Sacramento-Emigrant Trails 909 12th Street, Sacramento, CA 95814.

For more information, or to volunteer on any of these programs or our special events, please contact us at (916) 444-5900 or 1-877-3-BREATHE or visit www.sacbreathe.org.