**Table S1.** Asthma-Related Measures and Absenteeism (≥5 Days): Children with Asthmaa in School, BRFSS ACBS, 2006–2010b

|  |  |
| --- | --- |
| **Clinical Measure** | **Prevalence Ratio**c (95% CI) |
| Asthma uncontrolledd | 1.49 |  (1.33–1.66) |
| ≥1 asthma episode or attack  | 1.41 |  (1.30–1.54)–1.19) |
| Visited ED or urgent care center for asthma  | 2.82 |  (2.31–3.44) |
| Saw health professional for urgent treatment of worsening asthma symptoms or asthma episode/attacke  | 1.89 |  (1.67–2.14) |
| Hospitalized ≥1 night for asthma  | 2.88 |  (1.69–4.90) |
| ≥1 acute health care encounter for asthmaf  | 1.91 |  (1.72–2.13) |

ED, emergency department.

a Current asthma.

b Data are representative of 35 U.S. states (AZ, CA, CT, GA, HI, IA, IL, IN, KS, LA, MA, MD, ME, MI, MO, MS, MT, NE, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, TX, UT, VA, VT, WA, WI, WV) and the District of Columbia.

c Adjusted for child age group, race/ethnicity, annual householdincome, asthma medication use. Referent is children with no missed school for asthma.

d Based on child’s day symptoms, night symptoms, and SABA use in the past three months. “Uncontrolled asthma” is a composite variable consisting of not well controlled and very poorly controlled asthma.

e Besides the aforementioned ED or urgent care center visits.

f Composite variable of ED visits, urgent care center visits, urgent visits other than ED or urgent care center visits, and hospitalizations.

**Table S2.** Financial and Environmental Factors Associated with Asthma-Related School Absenteeism (≥5 Days): BRFSS ACBS, 2006–2010a

|  |  |
| --- | --- |
| **Variable** | **Prevalence** **Ratio**b (95% CI) |
| **Cost barrier to asthma-related health care** |
| Unable to see primary care doctor  |  1.96 | (1.28–3.00)  |
| Unable to see specialist  | 2.40 |  (1.27–4.54)  |
| Unable to buy medication  | 2.25 |  (1.58–3.21) |
| **School environment** |  |  |
| Asthma action plan on file at school | 1.09 |  (0.95–1.25) |
| Allowed to self-carry asthma medication | 0.87 |  (0.75–1.01) |
| Feathered or furry pets in classroom | 1.64 |  (1.06–2.53) |
| Mold problems in school | 1.54 |  (0.87–2.74) |
| **Home environment** |  |  |
| Secondhand smoke  | 1.01 |  (0.71–1.43) |
| Pets in bedroom | 0.96 |  (0.82–1.13) |
| Cockroaches seen  | 0.83 |  (0.57–1.22) |
| Mice or rats seen | 0.80 |  (0.49–1.32) |
| Mold seen or smelled | 1.93 |  (1.38–2.70) |

a Data are representative of 35 U.S. states (AZ, CA, CT, GA, HI, IA, IL, IN, KS, LA, MA, MD, ME, MI, MO, MS, MT, NE, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, TX, UT, VA, VT, WA, WI, WV) and the District of Columbia.

b Adjusted for child age group, race/ethnicity, annual householdincome, asthma medication use. Referent is children with no missed school for asthma.

**Table S3.** Asthma-Related Measures and Absenteeisma, Controlled for Asthma Severity: BRFSS ACBS, 2006–2010b

|  |  |
| --- | --- |
| **Clinical Measure** | **Prevalence Ratio**c (95% CI) |
| Asthma uncontrolledc |  | N/Ad |
| ≥1 asthma episode or attack  | 1.51 |  (1.39–1.65)–1.19) |
| Visited ED or urgent care center for asthma  | 3.39 |  (2.53–4.54) |
| Saw health professional for urgent treatment of worsening asthma symptoms or asthma episode/attacke  | 2.48 |  (2.12–2.90) |
| Hospitalized ≥1 night for asthma  | 1.82 |  (0.90–3.68)f |
| ≥1 acute health care encounter for asthmaf  | 2.46 |  (2.14–2.82) |

ED, emergency department; N/A, not available.

a ≥1 day of missed school because of asthma in the past 12 months.

b Data are representative of children in school with current asthma in 35 U.S. states (AZ, CA, CT, GA, HI, IA, IL, IN, KS, LA, MA, MD, ME, MI, MO, MS, MT, NE, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, TX, UT, VA, VT, WA, WI, WV) and the District of Columbia.

c Adjusted for child age group, race/ethnicity, annual householdincome, and asthma severity. Referent is children with no missed school for asthma.

d Because definition of the asthma severity covariate included measurement of asthma control (the outcome), this analysis was not performed.

e Besides the aforementioned ED or urgent care center visits.

f Estimate not reliable because relative standard error >0.3.

f Composite variable of ED visits, urgent care center visits, urgent visits other than ED or urgent care center visits, and hospitalizations.

**Table S4.** Factors Associated with Asthma-Related School Absenteeisma, Controlled for Asthma Severity: BRFSS ACBS, 2006–2010b

|  |  |
| --- | --- |
| **Variable** | **Prevalence** **Ratio**c (95% CI) |
| **Cost barrier to asthma-related health care** |
| Unable to see primary care doctor  |  1.96 | (1.28–3.00)  |
| Unable to see specialist  | 2.80 |  (1.56–5.06)  |
| Unable to buy medication  | 1.72 |  (1.16–2.53) |
| **School environment** |  |  |
| Asthma action plan on file at school | 1.09 |  (0.98–1.23) |
| Allowed to self-carry asthma medication | 0.95 |  (0.85–1.05) |
| Feathered or furry pets in classroom | 1.15 |  (0.77–1.73) |
| Mold problems in school | 1.49 |  (0.98–2.27) |
| **Home environment** |  |  |
| Secondhand smoke  | 1.28 |  (0.99–1.65) |
| Pets in bedroom | 0.96 |  (0.85–1.08) |
| Cockroaches seen  | 0.80 |  (0.58–1.10) |
| Mice or rats seen | 0.84 |  (0.57–1.24) |
| Mold seen or smelled | 1.80 |  (1.35–2.39) |

a ≥1 day of missed school because of asthma in the past 12 months.

b Data are representative of children in school with current asthmain 35 U.S. states (AZ, CA, CT, GA, HI, IA, IL, IN, KS, LA, MA, MD, ME, MI, MO, MS, MT, NE, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, TX, UT, VA, VT, WA, WI, WV) and the District of Columbia.

c Adjusted for child age group, race/ethnicity, annual householdincome, and asthma severity. Referent is children with no missed school for asthma.