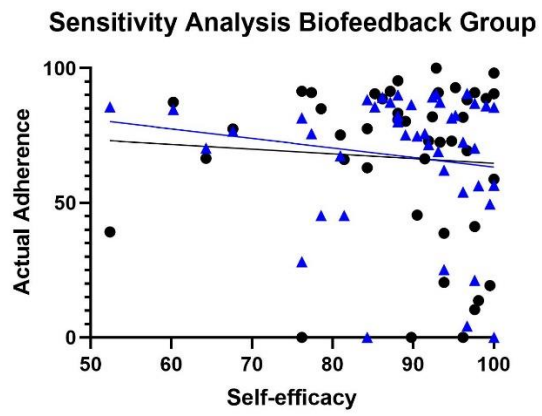
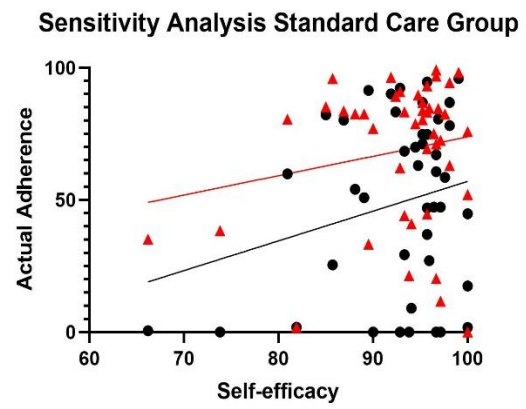


## Appendix 1: Sensitivity Analysis

A



B



## Appendix 2: \*Asthma Self-Efficacy Questionnaire

This questionnaire is designed to help us get a better understanding of how you manage your asthma. Please rate how certain you are that you can do each of the things described below by writing the appropriate number.

*For each of the following statements, rate how confident you feel by choosing a number from 0 to 100 using the scale given below:*

0      10      20      30      40      50      60      70      80      90      100

Cannot do at all                                      Moderately can do                                      Highly certain can do

Question	Confidence (0-100)
<b>MEDICATION</b>	
<b>I am confident that:</b>	
I know how to correctly use my asthma inhaler	
I know when to use my asthma medication	
I know which of my inhalers I need to take	
I know what my preventer inhaler is for	
I know what my reliever inhaler is for	
<b>SYMPTOM MANAGEMENT</b>	
<b>I am confident that:</b>	
I know how to use my asthma management plan	
I can be prepared to deal with an asthma attack	
I know how to stay calm when I am having trouble breathing	
I know how to measure my peak flow daily	
I know how to control my asthma when my peak flow level goes lower than it should be	
I know when I am out of breath because of my asthma rather than because of exercise	

I know when I am out of breath because of my asthma rather than because I feel a bit panicky	
I know when to use my inhaler to manage a serious breathing problem	
I know when I might need to go to hospital because of a serious breathing problem	
I know what to do to avoid triggers for my asthma	
<b>ASTHMA BELIEFS</b>	
<b>I am confident that:</b>	
I am in control of my asthma	
I can do physical activity such as sports	
I can have a normal life	
I can do the things that I want to do	
I can control my asthma day-to-day	
<b>FRIENDS AND FAMILY</b>	
<b>I am confident that:</b>	
I can take my inhalers in front of my friends	
I can take my inhalers in front of my family	
I can talk honestly to my friends about my asthma	
I can talk honestly to my family about my asthma	
I can talk honestly to my doctor or nurse about my asthma	
I can ask my friends for help if I am having trouble breathing or having an asthma attack	
I can ask my family for help if I am having trouble breathing or having an asthma attack	

\*Adapted from the Adolescent Asthma Self-Efficacy Questionnaire (AASEQ): Holley S, Knibb R, Latter S, et al. Development and validation of the Adolescent Asthma Self-Efficacy Questionnaire (AASEQ). *Eur Respir J* 2019.