Health Promotion and Disease Prevention

The AARC acknowledges that respiratory therapists (RTs) are integral members of the health care team around the world. They serve in many roles across the broad continuum of patient care facilities and environments where respiratory care is practiced. RT’s roles in these settings are expanding to include, but not limited to: disease management, health coaching, case management, clinical consulting, patient education, COPD education and asthma education. Higher education attained at the baccalaureate level and beyond, permits RTs to participate in advanced and independent roles in health promotion and disease prevention.

The AARC acknowledges the RT’s responsibility to take a leadership role in pulmonary disease teaching, smoking cessation and tobacco control programs, pulmonary screening for the public, air pollution awareness, allergy and sulfite warnings. RTs must also demonstrate initiative in research in those and other areas where efforts could promote improved health and disease prevention. Furthermore, the RT is in a unique position to provide leadership in determining health promotion and disease prevention activities for students, faculty, practitioners, patients, and the general public.

The AARC recognizes the need to:

1. Provide and promote consumer education related to the prevention and control of pulmonary disease with the goal of decreasing health disparities and inequities, in a culturally relevant manner;
2. Establish a strong working relationship with other health agencies, educational institutions, federal and state governments, businesses, military and other community organizations for better understanding and access to prevention of pulmonary disease services;
3. Support RTs to advance their education to the baccalaureate level and beyond, thereby enhancing their ability to perform in advanced practice and higher-level professional leadership roles to affect policy changes in health promotion and disease prevention;
4. Promote the application of evidence-based medicine in all aspects of health promotion and disease prevention to achieve health-related quality of life and well-being;
5. Utilize telehealth in settings as appropriate to promote good health;
6. Reduce hospital re-admissions, emergency department visits, and overall mortality.

Furthermore, the AARC supports efforts to develop personal and professional wellness models and action plans related to health promotion and disease prevention. The AARC seeks to inspire RTs to demonstrate their expertise in pulmonary disease etiology, pathology and treatment, and to lead the way nationally in health promotion and pulmonary education.

Additional Resources

1. The American Association for Respiratory Care; Tobacco Use Control and Inhaled Controlled Substances Position Statement, 2020.
2. The American Association for Respiratory Care; Electronic Cigarette Position Statement, 2020

Effective 1985
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Revised 2005
Revised 2011
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