Background South Asian Children present more frequently than White British Children to emergency departments with acute asthma: tailored interventions may redress this. The Management Interventions for Asthma project (MIA) assessed the feasibility of involving adults, parents and children from this potentially ‘hard to reach’ ethnic community alongside healthcare professionals (HCPs) in prioritising components for tailored asthma interventions.

Methods Eleven issues identified as barriers to asthma management following interviews with community members, parents, children and HCPs were presented at community based events by the MIA team utilising interpreters/facilitators for simultaneous 5-way translation. HCPs were sent information electronically.

Forty six community members, 22 parents, 19 children and 13 HCPs used Borda ranking to prioritise the issues for subsequent development of interventions in the current health care system.

Results Getting a diagnosis was ranked first by parents and community members but last by HCPs. Language barriers were ranked first by HCPs. Children prioritised managing acute asthma attacks.

Conclusions Ethnicity and language need not be barriers to involving South Asian families in health services research.

It is crucial to include community members, families and children in the development of tailored interventions as well as HCPs. Relying on HCPs alone could lead to key issues being missed or priorities misjudged.

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