PARENTS' MANAGEMENT OF CHILDHOOD ASTHMA: THE RELEVANCE OF PSYCHOSOCIAL FACTORS

VOLUME ONE

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Submitted in satisfaction of the requirements for the degree of Doctor of Philosophy in the Department of Psychiatry, Faculty of Medicine, The University of Adelaide. The work was conducted in the Research and Evaluation Unit, Women's and Children's Hospital, South Australia.

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ABSTRACT

Asthma is the most common chronic disease experienced by children in Australia and accounts for the greatest number of admissions to paediatric hospitals. Although parents carry the major responsibility for the management of children with asthma, little information is available about the specific management approaches parents employ when caring for their children. Few direct measures of parental behaviour have been available to investigate differences in parental management practices. This has limited our understanding of how recommendations made by health professionals are interpreted and implemented by parents.

The principal aim of this thesis was to develop a tool to measure approaches parents use to manage children’s asthma. The second aim was to identify the influence of psychosocial factors on parents’ management of childhood asthma. The new questionnaire developed in this thesis asked parents to describe their management approaches to typical asthma scenarios. For each scenario, parents rated their likelihood of carrying out different behaviours including giving medication, monitoring children’s symptoms and seeking medical help. Behaviours which parents considered important as well as behaviours that health professionals advocate were included in the questionnaire. Factor analysis was used to derive subscales for the questionnaire. The medical assessment subscale describes parents’ tendency to take their children for medical assessment when their children experience asthma symptoms. The external advice subscale describes parents’ tendency to seek assistance from knowledgeable others. The home management subscale describes parents’ approaches to monitoring and treating children at home.
One of the principal findings of this thesis was that psychosocial factors accounted for a large proportion of the variance in parental asthma management. The two most important independent factors were, parental perceptions of children’s vulnerability and family socioeconomic status. Parents who perceived their children to be more vulnerable to illness and parents from lower socioeconomic groups, reported a greater tendency to take children to be medically assessed, to seek external advice and to actively monitor their children’s clinical status at home. These relationships were present even after controlling for the effect of asthma severity. These findings have important clinical and public health implications.
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