



## PSYCHOLOGICAL PROBLEMS OF PARENTS WITH ASTHMATIC CHILDREN: A DESCRIPTIVE STUDY

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### ABSTRACT

Asthma is the most common chronic disease among children, causing financial, social and other challenges for children and their families. A descriptive study was conducted in A. J. Hospital Research Centre and Fr. Muller Medical College Hospital, Mangalore to determine the psychological problems of parents with asthmatic children. A purposive sample of 60 parents with asthmatic children admitted in hospital were selected and PPAS used for data collection. Findings revealed that majority of parents (91.6%) had moderate psychological problem where as 8.3% of them had mild psychological problem. Over protectiveness, depression and anxiety was severe among the parents with asthmatic children with the mean percentage of score was 73.5, 73.33 and 73.13 respectively whereas hospitality and guilt was mild psychological problem with mean percentage 12.23% and 14.45% respectively. This study concluded that asthmatic children's parents have various psychological problems and are more over-protective, depressed and anxious when their child is unable to breathe properly.

**KEYWORDS :** Psychological problem; Parents; Asthmatic children; Challenges.

### INTRODUCTION

Bronchial asthma is a chronic respiratory disease that results from the effects of three main pathological processes namely airway obstruction, airway inflammation and bronchial hyper-responsiveness. It is a common disorder in childhood whose prevalence varies widely across the world; the prevalence figure for bronchial asthma is considered to be nearly 16%.

Bronchial asthma can be disabling and life threatening when severe, and generally has psychosocial impact because of its restrictions on and disruptions of emotional and social aspects of the patient's life. These psychological and social problems also referred to as psychosocial problems can be substantial if unmitigated. There are variations in the rate of psychological and social problems in pediatric asthmatic patients and parents reported in literature. These variations depend on many factors like: the methodology used; the geographical characteristic of the study setting; measuring instruments used; the case definition standards used, the severity measures of the disease and the demographic factors of the group being studied.

Psychological problems are important in asthma care because they can precipitate attacks, make control difficult or even cause mortality. Depression is particularly recognized as carrying an elevated risk of more severe morbidity and mortality in asthma. Psychosocial problems constitute a barrier to self-management of asthma and are also important because they can affect parent-child interactions and cause developmental, educational and behavioral problems in the child. The role of coping styles in psychosocial problems and asthma morbidity patterns have been explored. Coping styles like denial and avoidance are regarded as negative and inadequate because they are associated with poorer asthma control and worse morbidity patterns.

According to the Global Initiative for Asthma (GINA), which takes into account symptoms, medications used activity limitations, lung function and insomnia, asthmatic patients are classified as controlled, partially controlled and uncontrolled, and demonstrating that controlling the disease is one of the main forms of treatment. Currently, guidelines are being developed to maintain and expand asthma treatment as a means of controlling it.

Asthma can, therefore, be a stressful condition not only to children but also to their caregivers. The way the family faces illness directly influences children's adherence to treatment. Patients' self-perception of illness, symptoms and psychological/social states affects their Quality of life and response to treatment. This study was aimed to determine the

psychological problem of parents with asthmatic children in selected Hospitals of Mangalore.

### MATERIALS AND METHODS

The study adopted a quantitative approach with a descriptive survey research design. Study was conducted in A. J. Hospital Research Centre and Fr. Muller Medical College Hospital, Mangalore. A purposive sample of 60 parents with asthmatic children admitted in hospital were selected and PPAS used for data collection. Conceptual framework of the study was based on Dorothy E. Johnson's Behavioral system model. The tool for data collection had three sections – section A, B & C. Section A consists of baseline proforma of parents, section B – baseline proforma of the child. Section C - psychological problems assessment scale. The tool had 35 items in total. The content validity for tool was obtained from 7 experts of different fields. The reliability of the tool was established by split half method and Spearman Brown Prophecy formula was used ( $r = 0.82$ ). Before the interview, the objective of the study was explained to the parents with self-introduction and data confidentiality also assured along with obtaining a written informed consent. The data were analyzed using descriptive and inferential statistics.

### RESULTS

#### a. Socio demographic data

Highest percentage (55%) of parents was in the age group of 21-30 years whereas lowest percentage (18.33%) was in the age group of  $\leq 20$  years. Majority (46.67%) of parent in the sample had primary school education whereas the least (1.66%) had pre-university education. Most of the parents (43.33%) who participated in the study were housewives and least (5%) are professional. Only a few (18.33%) of the parents had a monthly family income of  $\leq$  Rs. 2500, rest belonged to an income group of Rs. 2501-5000 (40%) and Rs. 5001-10000 (41.67%). With regard to type of family, majority of the parents (71.67%) were from nuclear families and majority of them (46.67%) had two children. Majority of the parents (55%) were previously exposed to hospital due to child's illness. For 45% of mothers it was their first hospital exposure.

#### b. Psychological problem of parents

**Table 1: Frequency and Percentage distribution of Psychological problem of parents**

(n=60)			
Psychological Problem	Score	Frequency	Percentage
Mild (1-36)	(< 33%)	5	8.33%
Moderate (37-74)	(34%-66%)	55	91.67%
Severe (75-108)	(67%-100%)	-	-

**Table 2: Range of score, Mean, standard Deviation and Mean Percentage of various psychological problems**

(n=60)

Sl. No	Psychological problems	Maximum score	Range of score	Mean	SD	Mean %	Level of psychological problem
1	Depression	0-24	4-15	10.97	2.31	73.13	Severe
2	Anxiety	0-33	9-22	15.65	2.82	71.13	Severe
3	Hostility	0-9	0-3	0.367	0.69	12.23	Mild
4	Fear of unknown	0-12	2-8	5.067	1.54	63.3	Moderate
5	Guilt	0-16	0-4	0.57	0.99	14.45	Mild
6	Denial	0-16	0-12	7.67	2.38	63.95	Moderate
7	Over protectiveness	0-6	2-16	4.41	1.062	73.5	Severe

Depression, overprotectiveness and anxiety had more or less similar mean percentage scores (73.13, 73.5%), whereas hostility (12.23%) showed least mean percentage scores.

### C. Association between the psychological problem and demographic variables

Age of the parents, number of children and number of time child admitted in the hospital showed a significant association with the Psychological problem. However no significance association was found between the psychological problem and education, occupation, income of the family, previous exposure to the hospital, order of birth and frequency of attack.

### DISCUSSION

The findings of the study support the idea that asthmatic children creates psychological problem to mother. It was found that majority (91.67%) of the parents had moderate level of psychological problems and only 8.33% of them had mild psychological problem. This finding was similar to a researcher of a qualitative study 'The impact of knowing your child is critically ill, a mothers experiences' that revealed hearing diagnosis like asthma was a shock and it caused stress and anxiety for everyone involved.

The findings of the study revealed that there is a significant association between the level of psychological problem and number of children in family. However, no significant association was found between the psychological problem and age of mothers, educational status, occupation, income, type of family, previous exposure to hospital. This study findings are in contrast to a study conducted in Jabatan Pediatric hospital Malaysia (n=112) using Malay version of PSS. Alteration in parental role was identified as the most psychological problem. Parent's gender, previous experience, severity of the child illness influences their psychological problem. Another similar study was conducted to explore the perception of caring from the context of parents of critically ill child in pediatric ward revealed that those perception of caring behavior influenced the length of hospital stay, parents previous exposure.

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