A Study to Assess the Knowledge on Home Asthma Management among Mothers of Asthmatic Children in Selected Rural areas, Bangalore with A View to Develop an Asthma Action Plan

Vimal Kumar Suthar

Assistant Professor, Genius College of Nursing, Bhilwara

Corresponding Address: Vimal Kumar Suthar, Assistant Professor Genius College of Nursing, Bhilwara

Corresponding E-mail: vimalkumarsuthar90@gmail.com

Abstract

Introduction: Bronchial asthma is one of the most prevalent disorders of childhood which has a lasting impact on the growth and development of children. In a developing country like India, it has resulted in a spiraling rise in health care costs for children. So it is imperative that mothers of asthmatic children have adequate knowledge regarding asthma and its management so that they are able to take preventive steps.1

Methodology: The research design for the study was Descriptive research design. Samples of 60 mothers of asthmatic children were selected for the study using non probability convenient sampling technique. A structured interview schedule was used to collect the data. Study setting was rural area of Bangalore.

Results: The mean score percentage was computed and it was observed as 43.15It shows that the selected mothers of asthmatic children have inadequate knowledge on home asthma management and are not having updated knowledge of recommended guidelines of Home asthma action plan.

Conclusions: Mothers of asthmatic children have inadequate knowledge on home asthma management and are not having updated knowledge of recommended guidelines of Home asthma action plan.

Keywords: Assess; knowledge; home asthma management

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How to cite this article: Suthar VK. A study to assess the knowledge on home asthma management among mothers of asthmatic children in selected rural areas, Bangalore with a view to develop an asthma action plan. Glob. Nurs. J. India 2023; 6:II: 547-550.

Submitted: 29/07/2023, Modification: 11/08/2023, Accepted; 22/08/2023, Published: 04/09/2023

Introduction

Parental perception about child illness is a significant factor in the compliance with treatment. A critical component of the medical management of children with chronic asthma is the development and maintains of an effective and trusting relationship between parent and medical personal, because asthma is a chronic disorder; which cannot be cured, self

management and education are essential to ensure effective control of asthma. Approximately 300 million children word wide suffer from asthma.

The present study attempted to assess the knowledge level Regarding home Management among Mothers of Asthmatic Children residing at selected rural areas of Bangalore and to develop asthma action plan in improving

ISSN Print: 2581-8546 ISSN Online: 2582-2934

the knowledge of mothers on bronchial asthma and its management at home.

Objectives of the study

- 1. To assess the knowledge regarding home asthma management among mothers of Asthmatic children at selected rural areas of Bangalore.
- 2. To associate knowledge level on home asthma management among mothers of Asthmatic children with their selected demographic variable.
- To develop and distribute asthma action plan regarding home asthma management in children to the mothers of asthmatic children.

Hypothesis

H₁: There will be a significant association between the levels of knowledge of mothers of asthmatic children residing at selected rural areas with their selected socio demographic variables.

Delimitations of the Study

This study will be limited to

- V Themothers of asthmatic children with the child age group between 5-10 years.
- Mothers of asthmatic children residing at selected rural areas in Bangalore
 - Q Data collection is limited to mothers who are willing to participate in the study
 - q The mothers of asthmatic children who will be present during data collection.
 - q The sample size is limited to 60mothers who are having one or more asthmatic child.

Research Methodology

Research approach: Descriptive survey approach.

Research design: adopted for current study is Non

Experimental, Descriptive survey design

Sample: Mothers of asthmatic children

Sampling techniques: convenient sampling technique

Sample size: 60 mothers of asthmatic children.

Setting of the study: In selected rural areas, Bangalore

Variables: Dependent Variable, Attribute Variable

Population : The population of the present study comprises of the mothers of asthmatic children.

Development of Tools: The tools were prepared on the basis of the objectives of the study.

Questionnaire Structured interview schedule

Results

The collected data was analyzed by using descriptive and inferential statistics. The findings of the study revealed that the knowledge of mothers of asthmatic children regarding home asthma management was determined with mean of 14.73 and standard deviation of 4.87. The maximum possible score is 23. The subject's range was found 4-23.

SECTION-I

The sample consists of 60 mothers of asthmatic children residing at selected rural areas of Bangalore. Data was collected regarding age of the mothers, religion, education, occupation, type of family, family income per month, number of living children, gender of the baby, Type of fuel used at home.

Table -1: Abstract of chi-square results of socio demographic characteristics and Knowledge regarding home asthma management among mothers of asthmatic children.

n = 60

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S.No.	Characteristics	Chi-square value	Df	Result	P-value
1	Age	3.18	2	Significant	0.03
2	Religion	4.16	3	NS	0.13
3	Educational status	8.86	3	Significant	0.01
4	Nature of Occupation	13.2	3	Significant	0.004
5	Income	8.37	3	Significant	0.04
6	Type of family	9.33	2	Significant	0.009
7	No. of Children	12.48	3	Significant	0.006
8	Gender of child	5.45	1	Significant	0.02
9	Type of fuel used	3.01	2	NS	0.045
10	Type of pet	12.48	3	Significant	0.006
11	History of child hospitalization	1.45	2	NS	0.02

SECTION-II

Assessment of Knowledge regarding home asthma management among mothers of Asthmatic Children Table -2. Mean, Standard deviation, range and mean score percentage of knowledge ofmothers of Asthmatic Children

n=60

S. No.	Knowledge	Max Possible Score	Mean	SD	Range	Mean score%
1	Meaning, incidence, causes and triggering factors of asthma in children	10	5.28	2.18	4-7	46.5
2	Assessment of a early symptoms of asthma in children	5	2.38	1.28	2-4	40.2
3	Identification of need for early treatment of asthma in children	5	2.3	1.28	2-3	39.4
4	Home management measures and asthma action plan.	10	4.77	2.1	4-7	46.5
	Overall Knowledge	30	14.73	6.84	4-23	43.15

Table-3. Frequency and percentage distribution of knowledge level mothers of Asthmatic Children

n=60

Grading	Score (%)	Knowledge		
		Frequency (60)	%	
Poor	0-10	32	53.6	
Average	11-20	18	30	
Good	21-30	10	16.4	

Conclusions

- Most children with asthma develop symptoms before age 5.
- V Asthma in children varies by age group. Infants, toddlers and 4-year-olds are diagnosed and treated differently than teens and adults.

Mothers of asthmatic children have inadequate knowledge on home asthma management and are not having updated knowledge of recommended guidelines of Home asthma action plan .

Recommendations

In the light of the above findings and personal experience of the investigator the following recommendations are offered.

V The study can be replicated on a larger sample; thereby findings can be generalized for a larger population.

- Continuous Nursing education, In service education and demonstration can be conducted at hospitals at regular intervals to update the knowledge and practice of mothers of asthmatic children regarding home asthma management.
- V A similar study can be conducted to compare the knowledge and practice level of among mothers of asthmatic children regarding home asthma management. Between urban and rural area.

Financial support and sponsorship: Nil

Conflict of Interest: There are no conflicts of interest.

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