An investigation of the reasons parents and carers of children with asthma declined to attend self management education programs

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An Investigation of the Reasons Parents and Carers of Children with Asthma Declined to Attend Self Management Education Programs

A thesis submitted in partial fulfilment of the requirements for the award of the degree

MASTER OF NURSING

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Heather Smith
ABSTRACT

The aim of this qualitative study was to investigate why parents or carers of children with asthma chose not to attend asthma self management education. Six semi-structured interviews were conducted with parents who had declined an invitation to attend the Illawarra Asthma Service.

Participants expressed that they felt confident in their ability to self manage their children with asthma, four of the respondents indicated that they already felt confident and did not feel they needed to participate in the education offered to them. One respondent sought self management education from an educator at her General Practitioners surgery; this family were able to implement many self management behaviours. The remaining respondent had previously attended the service and in their experience the benefits of attending were negligible and they believed they were doing everything possible to manage their children’s asthma.

The Theory of Planned Behaviour was included as a theoretical framework to explain and predict this health behaviour. Major themes emergent from the interviews relating to the theory include self confidence, attitudes towards self management education, experience of asthma, skills and knowledge, transport, time, confidence in medical managers, and parental responsibility. Support, an additional theme, was identified which was not directly related to the determinants of behaviour change identified within the Theory of Planned Behaviour. This model of health behaviour has provided some insight into the
issues related to attendance at self management education and adoption of self management behaviours for parents and carers of children with asthma.

Attitudes to self management education also had a strong relationship with this population’s ability to adopt self management strategies.

A range of interventions have been proposed to identify those families that have not already implemented behaviours reflective of best practice in asthma self management and to facilitate attendance at self management education for these families.