

ASTHMA SYMPTOM SEVERITY: COMPARING CHILD AND PARENT PERCEPTIONS

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Purpose: Children diagnosed with a chronic disease such as asthma often rely on family members for proper disease management. Congruency between asthma related symptoms perceived by the children and parents is therefore important for optimal asthma management. The purpose of this study is to examine the difference between asthma symptom severity as perceived by school-age children who have asthma and their parents.

Methods: Study participants were family units consisting of a school-aged child who had a medical diagnosis of asthma and had experienced asthma symptoms within the past 12 months (i.e., current asthma), and the primary caregiver. Both children and parents rated the child's asthma severity using the 3-item Severity of Chronic Asthma scale that measures the frequency of asthma symptoms and activity limitations due to asthma. The children's ratings were compared to the parents' rating of asthma severity using a paired samples *t*-test. A paired samples *t*-test is used when the variables are not independent, such as the case when the data is obtained from a child and their parent.

Findings: The sample consisted of 88 children; 33 girls and 55 boys, with an average age of 8.67 years; and composed of 33% white non-Hispanic, 53.4% Hispanic, 9.1% African American, and 6.5% other children. The results showed there was a significant difference between the child's subjective rating of asthma severity and the parents' subjective ratings of asthma severity ($t(87) = -3.645, p < 0.001$). The children rated their asthma severity significantly higher than their parents.

Conclusions: The study indicated that children rated their asthma severity significantly higher than did their parents. It is important to confer with the child and understand how much they believe their asthma interferes with their day-to-day activities when developing an appropriate treatment plan. Relying solely on information provided by the parent can result in insufficient asthma control.

Acknowledgement: This is a secondary analysis of data collected as part of a larger study with grant funding from the National Institutes of Health, National Institute of Nursing Research and National Heart, Lung, & Blood Institute (R01, NR007770). The content is solely the responsibility of the authors and does not necessarily represent the official views of NIH.