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The impact and psychosocial burden of a child's asthma diagnosis: How can we help the family?

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Background: Asthma is the leading chronic disease in children and a diagnosis of asthma can have wide-ranging medical and psychological effects on both the child and their family. This study identified parents' views on their child's asthma diagnosis experience and the consequential psychosocial burdens of that diagnosis on the family.

Methods: A grounded theory methodology was chosen as the topic was a relatively unexplored area of inquiry. Parents of children with asthma were recruited. Sampling was discontinued when no new relevant data was emerging. Nineteen caregivers (child age range: 2-14) took part in the study by completing semi-structured interviews and self- and parent-report questionnaires.

Results: Parents reported having one of three diagnostic experiences; straight forward, ambiguous or traumatic. Parents further reported psychosocial impacts related to diagnosis and ongoing management such as lack of knowledge, parental and child stress and worry, overprotective parenting styles and child autonomy over the disease.

Conclusions: The current findings highlight the need for appropriate, accurate communication from health professionals at the time of diagnosis, increased provisions of information to families about medical and psychological aspects of the diagnosis and intervention for those families of children with high asthma severity or who experienced a traumatic asthma diagnosis.

Biography

Jo Dudeney is currently in her final year of PhD studies at The University of Sydney, Australia. Prior to this, she has completed her Doctorate of Clinical Psychology and a Masters of Organizational Psychology. Her domain is Pediatric Psychology and her dissertation is focused on the comorbidity of asthma and anxiety in children and adolescents. Through her research efforts, she has been both primary and co-author on a number of publications. Clinically, she works part-time at an inpatient facility for adolescents with anxiety and depressive disorders coupled with school refusal.

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