

# FOCUS ON RESEARCH

## AN EXPLORATION OF REASONS FOR LOW PHYSICAL ACTIVITY LEVELS AMONG CHILDREN WITH MODERATE TO SEVERE ASTHMA

### Researchers

Dr B Williams, Dr J Coyle, Ms G Hoskins, Dr A Greene, Dr R Neville, Dr S Mukhopadhyay, Ms J Pow.

### Aim

To explore reasons for low levels of exercise among children with asthma in order to help identify potential strategies to improve activity levels.

### Project Outline/Methodology

Qualitative study based on in-depth interviews with 30 children with asthma and 38 parents together with 12 focus groups with pupils and key staff in primary and secondary schools.

### Key Results

Children's, parents' and teachers' beliefs about capability, safety and motivation were the principle reasons for low activity levels. Children were limited through self and parent-imposed restrictions around the danger of participating in exercise in the presence of perceived triggers. Some parents and young people may be interpreting the normal consequences of activity such as breathlessness as 'symptoms' of asthma when they are simply due to a lack of physical fitness. Physical activity was therefore generally thought of as a potential threat to be managed rather than something beneficial. Teachers found it difficult to distinguish and respond appropriately to children who were incapable due to health problems and those who were capable but unmotivated. This difficulty was exacerbated when young people presented parental letters or quoted their doctor's advice to effectively "veto" involvement in activity. This appeared to be more common at secondary schools.

### Conclusions

The findings revealed disagreement and misunderstanding among children, parents and teachers about what is desirable, feasible and safe in terms of activity. Young people may be more likely to participate where there is agreement between these parties over ability and safety and where the child is motivated. Clarity and interventions are needed to promote consensus between children, parents and teachers. In addition, initiatives are required to explore and test ways of increasing the

value, and possible links to self-esteem, of involvement in physical activities particularly among teenage girls.

### What does this study add to the field?

Past research has shown that children with asthma are often less active than children without asthma and that this difference is more significant for girls than for boys. The findings suggest that interventions to address child, parental and staff concerns about ability and safety may increase activity levels among children with asthma at school. However, engagement in activity *outside* of the school context will continue to rest on the value that the child, peers and parents attach to physical activity.

### Implications for Practice or Policy

The findings suggest that interventions should focus on parents', teachers' and children's beliefs about safety and capability, and the child's motivation. Asthma and exercise workshops could be run to alleviate concerns about safety, stress the health benefits of exercise and provide realistic assessments of capability. Schools can monitor 'sick notes' to ascertain if a child's activity levels may be undermining their health. Schools can support joint agreements with parents about the level of activities the child can and should engage in. Children are motivated by activities which are fun, enhance social belonging, self-achievement and self-esteem. Therefore, interventions must focus on what makes activities fun, sociable and self-enhancing.

### Where to next?

A range of further research in this area may be useful in order to establish more precisely the scale and distribution of the issues that have been identified. These include examining children's and parents' accuracy in terms of interpreting breathlessness and identifying asthma symptoms, and developing and testing suggested interventions to address these issues.

### Further details from:

Dr Brian Williams  
Division of Community Health Sciences  
University of Dundee  
Email: [b.y.williams@chs.dundee.ac.uk](mailto:b.y.williams@chs.dundee.ac.uk)

