

# [Literature review on qualitative research critique](https://assignbuster.com/literature-review-on-qualitative-research-critique/)

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## Qualitative Research Critique

Discussion   
Article Citation   
(Place in the column to right and include in your reference list for this assignment. This is APA related, so no points are assigned, but can be lost for this.)   
Burkhart, P. V., Rayens, M. K., &Oakley, M. G. (2012). Effect of Peak Flow Monitoring on Child Asthma Quality of Life. Journal Of Pediatric Nursing, 27(1), 18-25.

## Introductory Materials: number each question below separately in your answers to the right.

1. Introduction to problem   
2. Research problems/hypotheses   
3. Significance of the problem   
4. Theoretical concept/framework   
5. Literature review   
1. Did the researcher(s) introduce the problem and how was it put into a meaningful context for research?   
The researchers provided an introduction and a background for their research work. In the introduction, the researchers made the objective known; the researchers intended to “ evaluate the effect of peak flow monitoring (PFM) on asthma QOL (quality of life) for asthmatic children”. Additionally, the background given by the researchers is an epidemiology of Asthma- the background serves to validate their research topic. The researchers have also delineated the meaning of peak flow monitoring (PFM) on asthma quality of life (QOL) in the background section.

## Do the research problems/hypotheses make sense within the context of the introduction?  How are they measurable and researchable?

The introduction though comprehensive as it is to me, does not include any hypothesis. Besides, not statement in the introduction is inferable as the hypothesis.

2. Is this research meaningful to nursing?  What is its significance to nursing?

In light of the nursing, this study becomes very significant. The high prevalence and incurable nature of Asthma calls for proper management methods of the condition. The fact that the study was aimed at evaluating the effect of Peak flow monitoring makes this study overly relevant in this nursing context- Peak flow monitoring is perhaps the most effective management method for Asthma.   
3. What theory or conceptual framework guided the research?  Was it appropriate to the research question/hypothesis?

## There is no theoretical framework for this study

4. What were the major topics covered in the literature review? Did the review of the literature show that there was a gap in the literature that this research filled? What was the gap?

In the literature review, the researchers gave epidemiology of Asthma. They proceeded to try and define Asthma QOL (Quality of Life) as well as Peak Flow Monitoring. However, reading through the literature review, there is no identifiable gap that the research was going to fill.

## Participant Issues:

1. Participants   
a. Population   
b. Sample   
c. How chosen   
2. Protecting confidentiality   
3. Ethical Issues   
1. What was the population of the study? What was the sample used? How was the sample chosen?

All through the article, the researchers have made reference to children with Asthma. For instance, the background of the study is entirely based on children with asthma. This warrants that the population of this research is children with Asthma. The researchers picked a sample of 77 children (aged between 7 and 11) with asthma from Kentucky of which 45 were male while 32 were female.

2. How did the researcher(s) protect the participants' confidentiality?

## Apparently, the researchers do mention in how they maintained participants confidentiality in the article.

3. What other ethical issues were addressed and how?   
The researchers reached interested parents through, recruitment flyers available in pediatric clinics, physician letters recommending the program, or through personal contact with the physician. Afterwards, the research nurse then telephones interested parents seeking their consent to allow their children participate in the study. Again, the researchers hinted that the study was approved by the Medical Institutional Review Board at a Southern University

## Data Collection Issues:

1. What methodology was used to do the research?   
2. How was the data collected and analyzed?   
3. Was the statistic used appropriate for the methodology?   
4. What limitations did the research identify?   
5. What were the recommendations that the researchers came to based on the data analysis?   
1. What methodology was used to do the research?   
As mentioned in the article, Asthma QOL was measured using the Children's Health Survey for Asthma (CHSA). CHSA is one of the most widely used tools for studies that require parents to report statuses of their children’s asthma related conditions. The research design was by all means Quasi-experimental considering that the researchers had no control whatsoever on what the parents were going to report about their children.

## How was the data collected and analyzed?

Data was collected with the help of questions that enabled the participating parents rate their children’s physical and emotional health, activity, emotional health, Asthma heath conditions, missed out schools days, asthma episodes as well as Health Care Utilization. Accutrax Personal Diary Spirometer was utilitarian in enabling the measurement of At-home adherence to daily PFM during the 16-week.

2. Was the statistic appropriate for the methodology?   
Two-sample t tests was used to appraise the relationships between asthma QOL and adherence to PEF monitoring. Considering that the researchers randomly chose their sample, the two-sample t tests becomes very appropriate as it enabled them institute any significant difference between the samples and hence the population.   
3. What limitations did the researcher(s) identify?

The researchers appreciated the fact that CHSA could potentially become biased considering that parents were asked to report QOL indicators over the previous 2-month period at three data collection points. Moreover, the researchers admit that the use of self-reported asthma QOL could also limit the study.

4. What were the recommendations that the researcher(s) came to based on the data analysis?   
The researchers also emphasize the need for nurses the understand the pivotal role that Peak Flow Monitoring can play towards the management of Asthma in children. According to the researchers, effective asthma management is only achievable with a comprehensive assessment of the ability of children and their families to adhere to asthma treatment.

## Findings/Conclusions

1. What findings/conclusions did the researchers reach?   
2. Where these findings/conclusions realistic?   
3. Could other findings/conclusions have been reached?   
1. What findings and conclusions did the researcher(s) reach?   
The researchers came to the realization that the self-management interventions, for instance Peak Flow Monitoring are indeed very useful in the management of Asthma. According to the researchers, Peak Flow Monitoring was very effecting in controlling asthma symptoms in children.

2. Where these findings and conclusions realistic?   
The findings are realistic. Coming from a region with a considerable population of asthmatic people (I hail from xxxx), I have witnessed the important role that Peak Flow Monitoring plays in the management of asthma.

## What other findings and conclusions could have been reached?

Apparently, there is no other findings reached by the researchers

What conclusions did you reach when you read the research report and can this research be applied to nursing practice?

Admittedly, this article is an indispensable addition to the literature touching on the management of Asthma. As mentioned before, I have witnessed the PFM at work before hence was not surprised when the researchers came to the realization that it was effective in the management of asthma. However, I was very optimistic that the researchers would also suggest some ways of increasing the effectiveness of this management but they did not. Nonetheless, PFM have always been criticized for lack of accuracy in the measurement of peak flow. As Ashok (2008) asserts, the lung peak performance are not always accurate as lung function measurements. This puts doubt on the effectiveness of PFM in managing Asthma.

## References

Ashok, C. (2008). Test Your Physical Fitness. Delhi: Kalpaz Publications.   
Burkhart, P. V., Rayens, M. K., &Oakley, M. G. (2012). Effect of Peak Flow Monitoring on Child Asthma Quality of Life. Journal Of Pediatric Nursing, 27(1), 18-25.