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**African Scholars Digest** 

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## Air Pollution Effects on Children with Asthma

Asthma is the most common long-term disease of children that affects the lives of about 20 million Americans, including 6.3 million children; Since 1980, the biggest growth in asthma cases have been in children under five. In 2000 there were nearly 2 million emergency room visits and nearly half a million hospitalizations due to asthma, at a cost of almost \$2 billion, and causing 14 million school days missed each year (Center for Disease Control 2008; Environmental Protection Agency, 2008). Various factors contribute to the causes



of this paper, emphasis will be on air pollution, which is defined as "the human introduction of, chemicals, particulate matter, or biological materials, that cause harm or discomfort to humans or other living organisms, or damages the natural environment, into the atmosphere" (Wikipedia, 2008). The prevalence of asthma among children continues to be on the increase globally and in the United States and disproportionately causes morbidity in inner-city minority children (Hansel et al., 2008). Clark et al. (1999) state that asthma is particularly troublesome in urban and racial/ethnic minority populations. They also informed that asthma hospitalization and morbidity for non-whites are more than twice those for whites. Etzel (1995) attributes



## Ms. Elizabeth Chinazor Asika

the hospitalization to poverty rather than race, stressing that it is unknown as to the whether children who live in poverty are more heavily exposed to indoor air pollutants than children who do not live in poverty.

The environment in which a child lives in may contribute to risks of having ongoing asthma exacerbation. Bearing in mind that children in the United States spend an average of twenty hours of their time indoors means that they are not limited to the effects of outdoor pollutants but also to indoor air pollutants that may exacerbate their asthma (Etzel, 1995).

In a longitudinal study to investigate the effects of indoor nitrogen dioxide levels on asthma morbidity amongst in inner-city (Baltimore) preschool predominantly African -American children, Hansel et al. (2008) reported that of the 150 recruited, 58% male, 91% African Americans and 42% from households with annual incomes <\$25,000; 63% had persistent asthma symptoms. They also reported that the use of gas stove, and space heater or oven/stove for heat were independently associat-

ed with high NO<sub>2</sub> concentration. Conversely, studies have showed an effect of air pollution on patients (children inclusive) with symptoms of active disease, with increased ambient air pollution levels especially respirable particulates such as

Ozone and SO<sub>2</sub> precipitating asthma symptoms. Exposure to Particulate Matter (PM) and co-pollutants in the ambient environment were suggested to explain increased morbidity and mortality in urban area Clark et al. (1999). The incidence of severity of respiratory disease or infection as well as the increased use of bronchodialtors by asthmatic patients is strongly attributed to air pollution Peter et al. (1997). Reduced lung function, increased morbidity, increased

creased morbidity, increased use of health care services and infant mortality are the many ways air pollution affects children. Concerned health care practitioners are challenged to be strong advocates for a safer, healthier environment.

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### PAGE 2

## Menace to the African Society – Dr. Edward Agbai



# IIAS

If you are a scholar of African descent, IIAS is your premium platform. Decide right now to become visible on your continent. Otherwise, others will come from afar to lead you. When I was working on an island on the shores of the Atlantic for about 15 years in Nigeria, I had witnessed firsthand how the introduction of addictive substances accessible to young people had made them more prone to violence with its attendant increase in crime rate. I had thought that this problem was localized until I travelled across the Atlantic to see that it was also ravaging neighbourhoods in North America. I realize that substance (Drug) abuse is a serious issue globally with varying abuse rates. It is not only peculiar to the young people; even the old (rich or poor, educated, or uneducated) are cut in the web of substance abuse. This is a menace to society. Simply put, drug abuse is using a drug for a purpose it is not meant for. It has destructive and addictive tendencies due to the hallucination under the influence of these drugs, making the people want to try it again and again.

A psychologist once informed me about the devastating effect of drug abuse in African society. He said that the most significant number of regular clients were children of religious leaders and politicians. The children of these two groups form a more substantial percentage of their client base. The rest are children of busy professionals who are at the peak of their careers, pursuing one big project or making waves in society. He observed that most of these persons identify themselves as believers in God and profess one religion or the other Being religious is good; are we communicating to our children during their difficult moments of changes to their body and outlook on life? And how effective does the parent deploy the communication style?

Let me speak from the religious part, this spiritual leader, because of what they stand for, in teaching morals to society, maybe selfrighteous and judgemental that they might fail to show empathy or reason when dealing with others, especially close family members who don't appear to fit into their standards. This lack of empathy led them to treat their wards and loved ones with an iron fist that forced



the kids to take solace in one form of addiction or the other. I have also observed parents who support their children cheating in exams rather than finding out the learning style of the child and helping the child develop that learning competency and career interest. When a child observes a parent's double standards and is not bothered to practice values, they are taught. The child carries this double standard forward, affecting the child's worldview. The double standard coupled with performance pressure, peer pressure, desire to be liked, lack of connection with family, feeling misunderstood, disillusionment, childhood trauma, bad parenting, Etc., all account for behaviours that lead to substance abuse.

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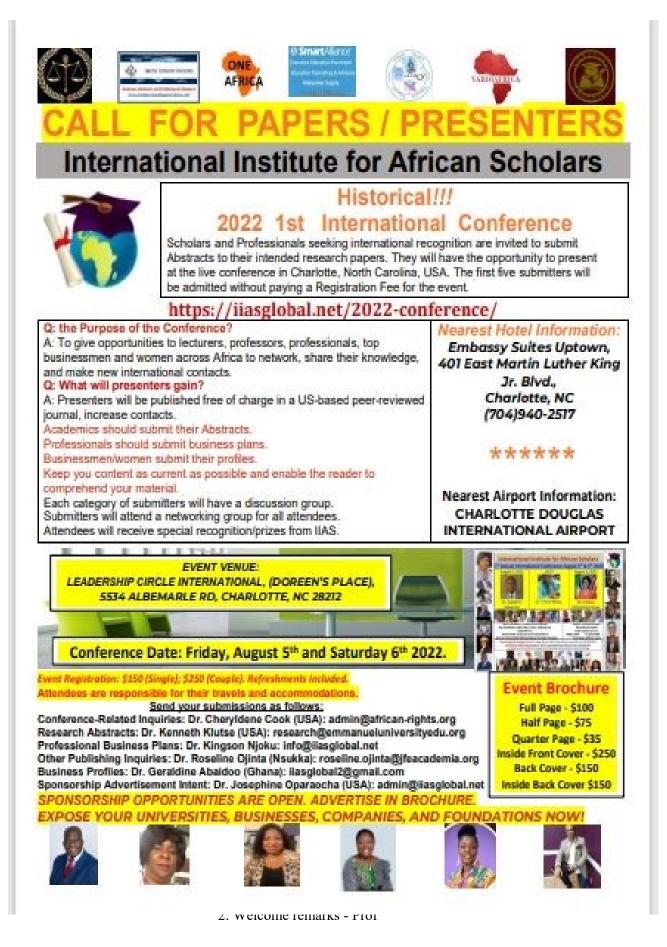
IIAS is the way! Walk Ye In it!



## **Identify The Personalities**







## Menace to the African Society – Dr. Edward Agbai (contd.)

As parents, we aren't paying enough attention to what the children say? or are we having limited conversations with the young ones? Because of the open communication line and family ties and connections, we might observe early warning signs before we lose our precious children and relatives to drugs. Because times have changed, parenting responsibilities are increasingly demanding in the ever-changing technology-savvy generation X and Z world.

We were trained in a different time by strict parents, who used harsh tactics, and the society supported these approaches to authoritarian parenting. However, today we need to combine toughness and empathy to adapt to today's parenting needs. A parental need where the child receives compassion from outsiders rather than insiders. Outsiders are ready to control the young ones through addiction to substances. These outsiders latch on to the experimental curiosity, peer pressure, poor socio-economic conditions at home, and sometimes they need extra energy for the young people's daily activities to push for substance abuse. These factors are usually not discussed in the house, and parents don't spend time with their wards.

We should pay more attention to whether there are historical antecedents to drug addiction in our genetic history or whether there is a mental health issue that people in our family lineage deal within the past. These triggers for drug addiction within a family, especially with highly addictive drugs, to manage mental health issues.

It has been over a year since the Chairman/Chief Executive Officer of the National Drug Law Enforcement Agency (NDLEA), Ltd. Gen. Muhammad Buba Marwa, was appointed by Nigerian President Muhammadu Buhari GCFR. Since his appointment, there has been a concerted effort to tackle the easy flow of drugs among the populace, which fueled crime and increased violent crime. We have seen seizures and confiscation of supplies through land, sea, and air. I hope these seizures will reduce the ease of getting these items on the street when the data come out this year.

In the interim, parents should adopt emotional intelligence in dealing with issues of mental health and physiological changes in adolescence living within our homes. Emotional intelligence is the ability to perceive and express emotions, use emotions to facilitate things, understand and reason with emotion, and effectively manage emotions within oneself and in relationships with others (Northhouse, 2013). It is the ability to understand one's feelings and have empathy while regulating one's emotions to enhance their quality of life. The world is changing, and things are evolving fast. Let us do our bit to curb the menace of drug abuse in African society.





## **Some IIAS Arms**





## Air Pollution Effects on Children with Asthma

## References

Center for Disease Control and Prevention. (2008). Asthma. Retrieved November 9,2008, from <u>http://www.cdc.gov/asthma/</u> faqs.htm

Clark,N.M., Randall,W.B., Parker,E., Robin,T.G., Remick Jr, D.G., Philbert, M.A., Keeler, G.J., & Isreal, B.A. (1999) Childhood Asthma. *Environmental Health PerspectivSupplements*, 107 (3),421-429.

Etzel,R.A. (1995).Indoor Air pollution and Childhood Asthma : Effective Environmental Interventions. *Environmental Health Perspectives*, 103(6),55-58. Retrieved November 9,2008, from <u>http://</u> www.pubmedcentral.nih.gov

## By Ms. Elizabeth Chinazor Asika

Hansel, N.N., Breysse, P.N., McCormack, M.C., Matsui, E.C., Curtin-Brosnan, J., Williams, D.L., Cuhran, J.L., and Ditte, G.B. (2008). A Longitudinal Study of Indoor Nitrogen Dioxide Levels and Respiratory Symptoms in Inner-City Children with Asthma. *Environmental Health Perspectives 116 (10), 1428-1432.* Retrieved November 09, 2008, from <u>http://www.ehponline.org/docs/2008/116</u> <u>-10/toc.html</u>

Peters, A., Dockey, D.W., Heinrich, J., & Wichmann, H.E. (1997). Short – term effects of particulate air pollution on respiratory morbidity in asthmatic children. *European Respiratory Journal*, *10*, *872-879*. Retrieved November 9, 2008, from <u>http://www.ersjournals.com/cgi/</u> <u>content</u>

U.S Environmental Protection Agency. (2008) *Asthma Facts*. Retrieved November 8, from <u>http://www.epa.gov/</u> <u>asthma/pdfs/asthma\_fact\_sheet\_en.pdf</u>

Wikipedia. (2008) Air Pollution. Retrieved November 8,2008, from <u>http://en.wikipedia.org/wiki/Air\_pollution</u>