

The Influence of Parenting Styles on Emerging Adults' Pain

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Introduction

- Higher parental control and lower parental involvement lead to greater youth difficulties.
- Solicitous parenting behavior is related to youths' higher pain.
- There is a lack of research on how parenting styles influence emerging adults' (EA) pain and whether living situations during COVID-19 influenced this relationship.

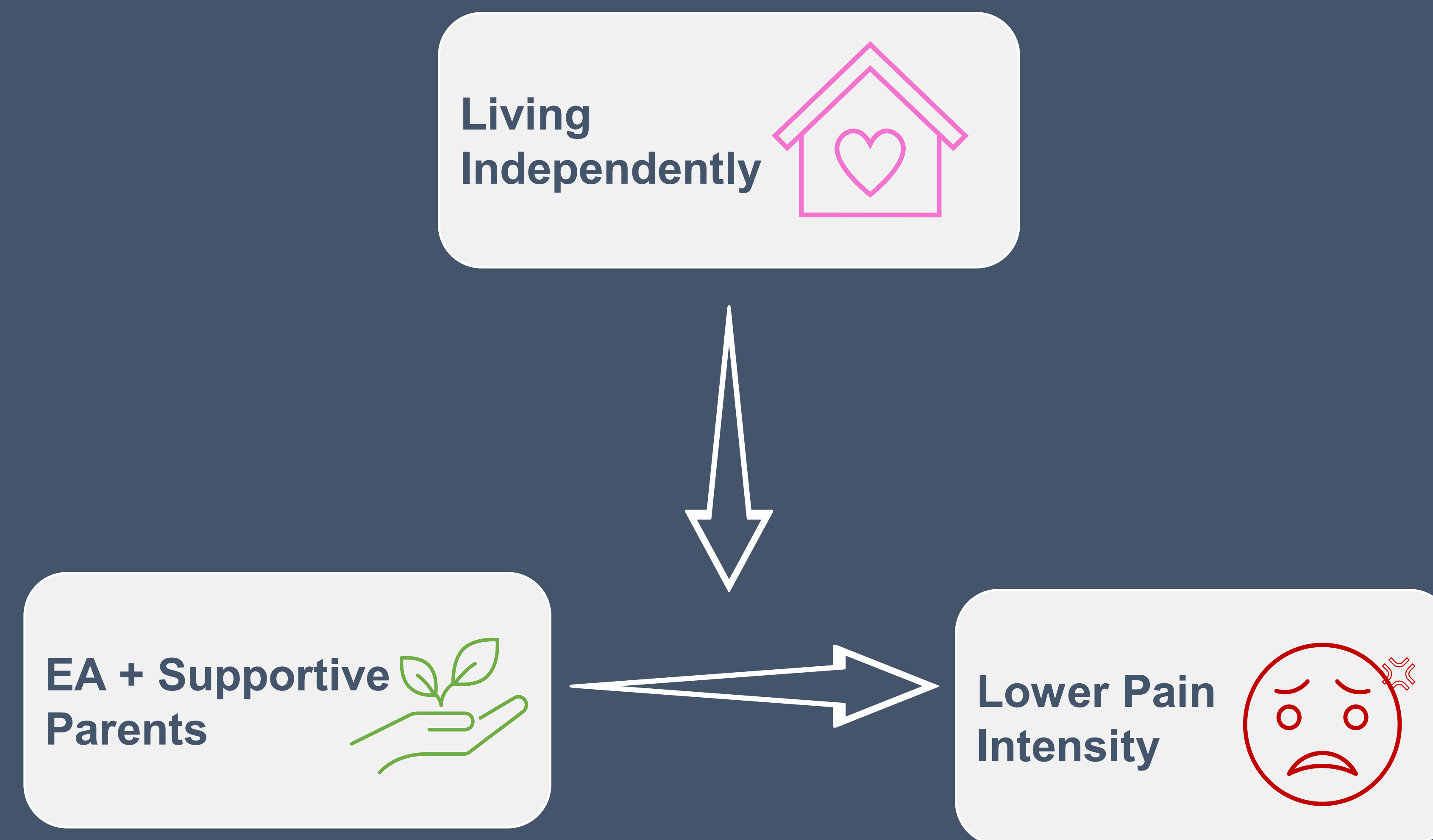
Methods

- Recruited 1053 undergraduate students from psychology classes at 3 universities.
- Age $M = 19.85$, $SD = 2.22$
- 20.9% male; 77.3% female; 1.8% other gender identity
- 74% white; 19% Hispanic/Latinx
- Students completed an online survey and reported on pain intensity, frequency and duration.
- Students also reported on perception of caregiver behavior including parental autonomy (12-48 range), involvement (10-40 range), control (7-28 range) and structure (11-44 range).

Results

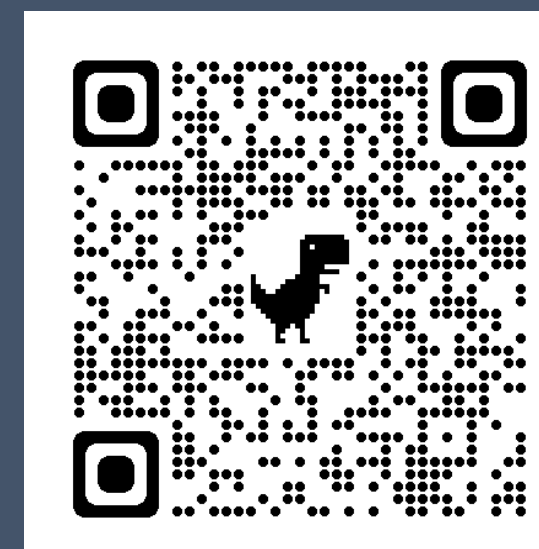
	No Pain N = 422	Acute Pain N = 376	Chronic Pain N = 255
Pain Duration	N/A	79% less than 1 month	78% longer than 6 months
Pain Frequency M (SD)	(.08) .33	(1.35) .75	(2.06) 1.26
Pain Intensity M (SD)	(2.13) 1.60	(2.72) 1.76	(3.68) 1.68
Parental Autonomy M (SD)	(41.25) 7.03	(39.15) 8.38	(38.66) 8.78
Parental Involvement M (SD)	(31.23) 6.11	(29.25) 6.89	(29.28) 6.84
Parental Control M (SD)	(16.69) 5.03	(17.44) 5.17	(17.27) 5.31
Parental Structure M (SD)	(32.46) 4.80	(31.15) 4.67	(30.88) 4.52

- ANOVAs showed that EA with no pain reported higher parental autonomy support $F(987) = 10.12$, $p < .001$, involvement $F(999) = 10.79$, $p < .001$, and structure $F(1007) = 11.37$, $p < .001$ compared to EA with acute and chronic pain.



Emerging adults with supportive parents experience lower pain intensity when living independently.

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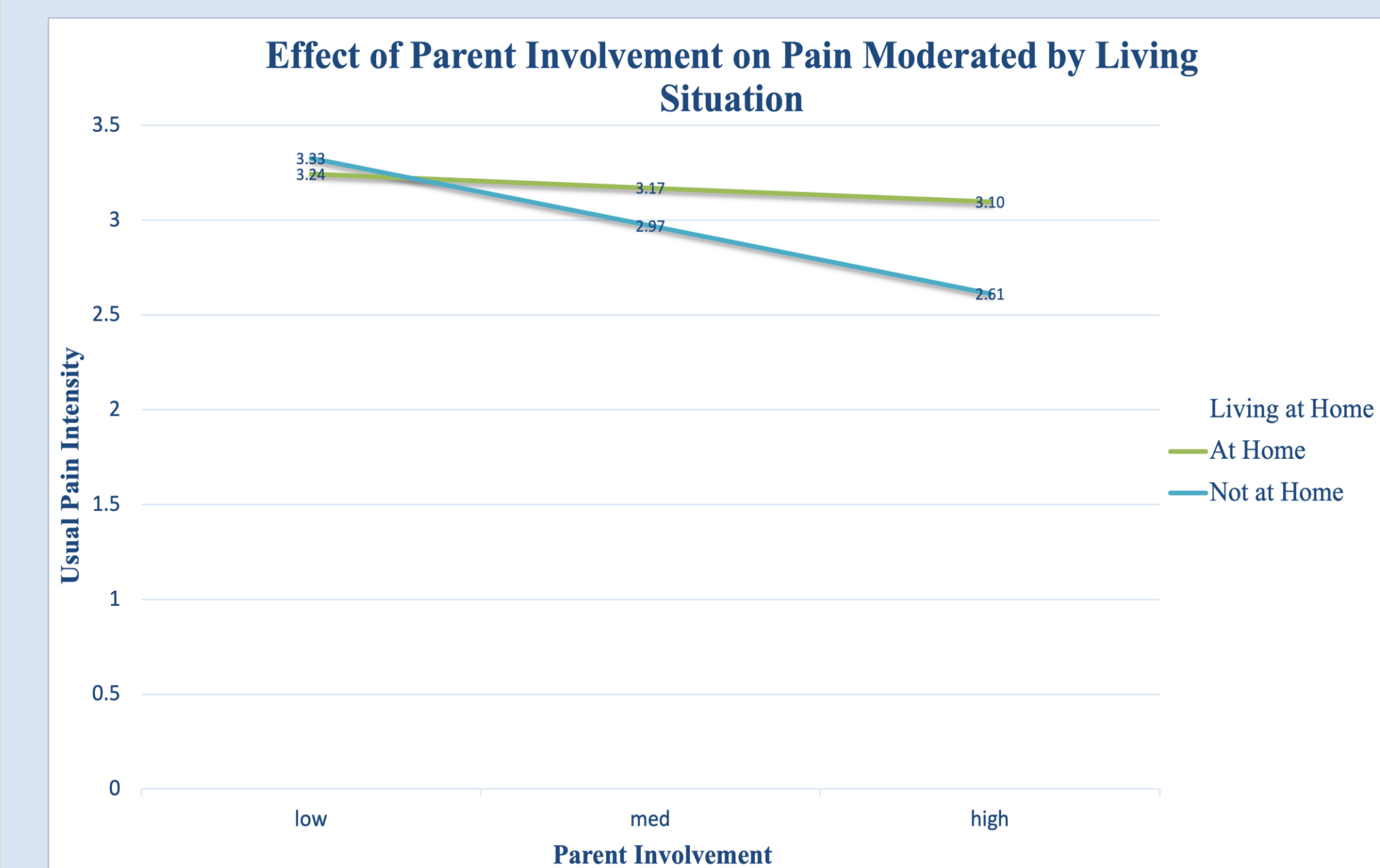
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Results (continued)

- Overall, more frequent pain days were associated with lower parental autonomy support, $r(992) = -.15$, $p < .001$, involvement $r(1006) = -.16$, $p < .001$, and structure $r(1014) = -.13$, $p < .001$, as well as higher parental control $r(1012) = .06$, $p = .047$.
- Higher pain intensity was associated with lower parental autonomy support $r(616) = -.12$, $p = .003$, involvement $r(625) = -.11$, $p = .004$, and structure $r(628) = -.10$, $p = .014$.
- Living status moderated the relationship between parental involvement and pain intensity such that those not living at home had lower pain intensity when parent involvement was higher ($\beta = .04$, $p = .044$).



Discussion

- Findings suggest higher autonomy and parental involvement may be protective among EA with pain
- Limitations: The cross-sectional nature of this study limits us in making causal conclusions about how the living independently and having supporting parents affects pain intensity.
- Further examination into how parenting styles impact dimensions of EA pain is needed.
- More research is needed among emerging adult pain populations outside of the university setting to increase the generalizability of findings.

