

Experiences of Pain Dismissal in College Students with Marginalized Identities

Chloe Crosby, Paulina Paredes Cienega, M.A., Keely Bieniak, M.A., Kayla McCracken M.A., Elizabeth Fenelon, B.A.

Faculty Mentor: Susan T. Tran Ph.D.

DePaul University

Abstract



Introduction

Experiences of chronic pain are frequently misinterpreted and dismissed. While there are a plethora of studies on chronic pain, few assess pain dismissal specifically among people from marginalized identities known to experience increased barriers to health care. We hypothesize that people with marginalized identities and chronic pain will experience greater pain intensity and higher incidence of dismissal.

Methods

Participants ($N = 419$; M age = 19.44, SD age = 1.51), enrolled at a Midwestern United States university completed an online survey about their pain, mental health, and demographics.

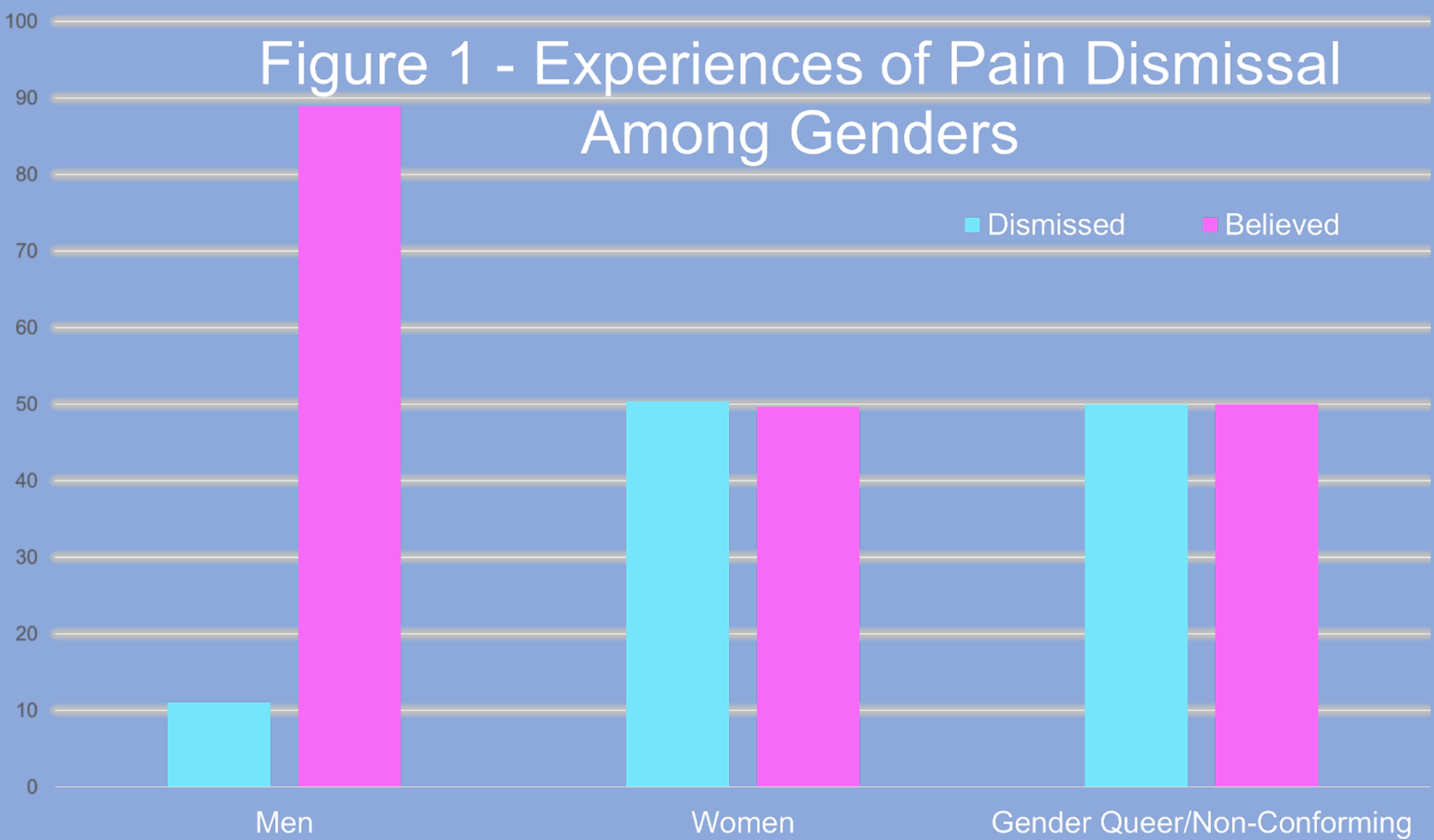
- Pain questions:
 - Pain duration
 - Usual and worst pain intensity
- Whether or not someone had ignored/not believed their pain

Participants were only included in analyses if they had chronic pain ($n = 146$). We looked at demographic questions to identify marginalized identities.

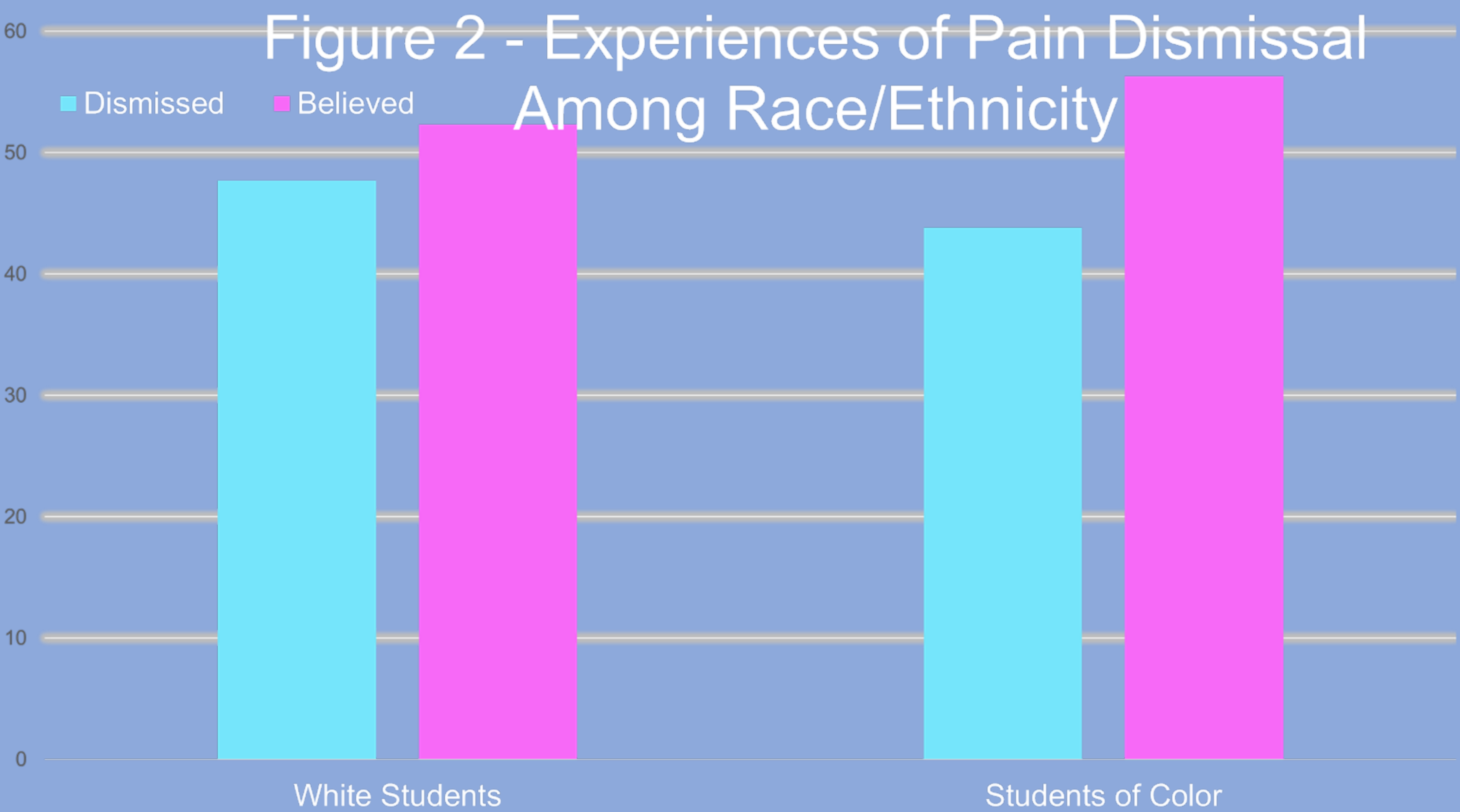
- Compared gender groups (i.e., female vs gender-non-conforming vs male) in measures of pain intensity and dismissal.
- Compared students of color to white students in measures of pain intensity and dismissal.

Chronic Pain & Ethnic Identity*

- 33% (138) of participants identified as Latino(a)/Hispanic
 - 29% had chronic pain
- 11% (44) of participants identified as Black/African
 - 36% had chronic pain
- 17% (71) identified as Asian American/Asian
 - 37% had chronic pain
- 51% (212) identified as white/ European American
 - 41% had chronic pain
- 6% (23) identifies as an “Other ethnic group”
 - 22% had chronic pain



College students with marginalized gender identities and chronic pain have more experiences of pain dismissal.



* Participants could check more than one ethnicity so total is more than 100%

Chronic Pain & Gender Identity

- 5% (23) of participants identified as gender-non-conforming / genderqueer
 - 60% of them reported experiencing chronic pain
- 74% (309) of participants identified as female
 - 37% of them reported experiencing chronic pain
- 20% (82) of participants identified as male
 - 21% of them reported experiencing chronic pain

Results – Pain Dismissal

- Higher levels of pain dismissal were found among female (50.4%) and gender non-conforming/genderqueer (50%) students with chronic pain than males (11%) (*see figure 1*, $\chi^2 (2) = 9.811$, $p = .007$).
- White students and students of color did not report significantly different rates of pain dismissal (*see figure 2*, $\chi^2 (1) = 0.225$, $p = .380$)

Results – Pain Intensity

- Female ($M = 5.67$, $SD = 2.32$) and gender nonconforming students ($M = 6.00$, $SD = 1.62$) with chronic pain reported higher worst pain intensity compared to males ($M = 4.00$, $SD = 2.26$), [$F(2) = 4.40$, $p = .014$]
- Students of color with chronic pain reported higher usual pain intensity compared to white students ($M = 3.74$, $SD = 1.90$, and $M = 2.80$, $SD = 1.72$ respectively, $t (143) = -3.08$, $p = .003$).

Discussion

- Emerging adults with marginalized gender identities and chronic pain experience higher amounts of pain dismissal.
- Understanding this is critical in the study of chronic pain going forward as it provides a deeper insight into the experiences of people with chronic pain and their experiences in healthcare.
- Increasing awareness of these discrepancies among clinicians and health care workers to promote empathy and equitable care is a recommended next step.
- More research is needed among emerging adults with chronic pain and marginalized identities outside of the university setting to gain a more generalized understanding of the topic.



CCROSBY8@depaul.edu

