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Introduction

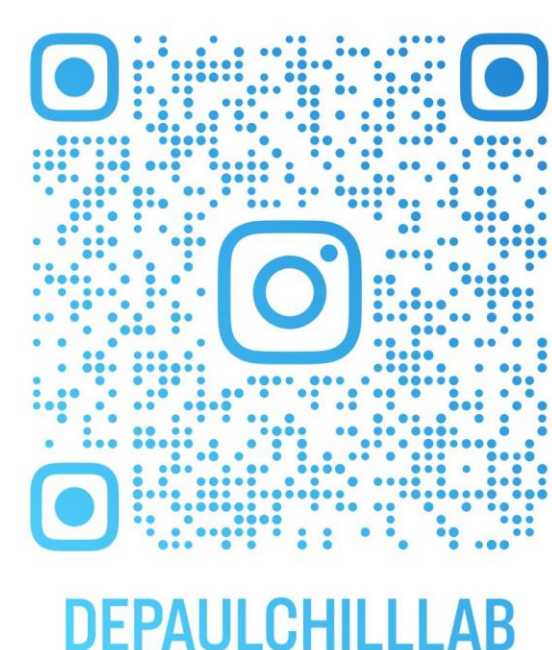
- 12% of emerging adults (EAs) experience chronic pain.
- Having one's pain dismissed is not uncommon and is an isolating feeling.
- There is already a known overlap between pain, anxiety, and depression.
- Substance-use may be a coping mechanism for these symptoms and may be exacerbated by pain dismissal.
- The purpose of this study is to investigate how the concepts of pain dismissal, anxiety, depression, and utilizing substances to cope with chronic pain are associated to create an impact on the lives of EAs.

Research Questions

- Is pain dismissal related to higher rates of anxiety and depression?
- Are rates of anxiety, depression, and substance-use coping correlated in this sample?

Method

- Undergraduate students with chronic pain ($N = 227$, age $M = 19.58$, $SD = 1.42$, range = 18-25) at a Midwestern university.
- Students reported if they had pain, if their pain had been dismissed, their rates of anxiety measured with the GAD-7, rates of depression measured with the PROMIS Depression Short Form 8A, and substance-use coping measured with the Brief COPE.
- Most participants identified as women (85.9%) and BIPOC, or non-white ($n = 131$, 57.7%).



Results

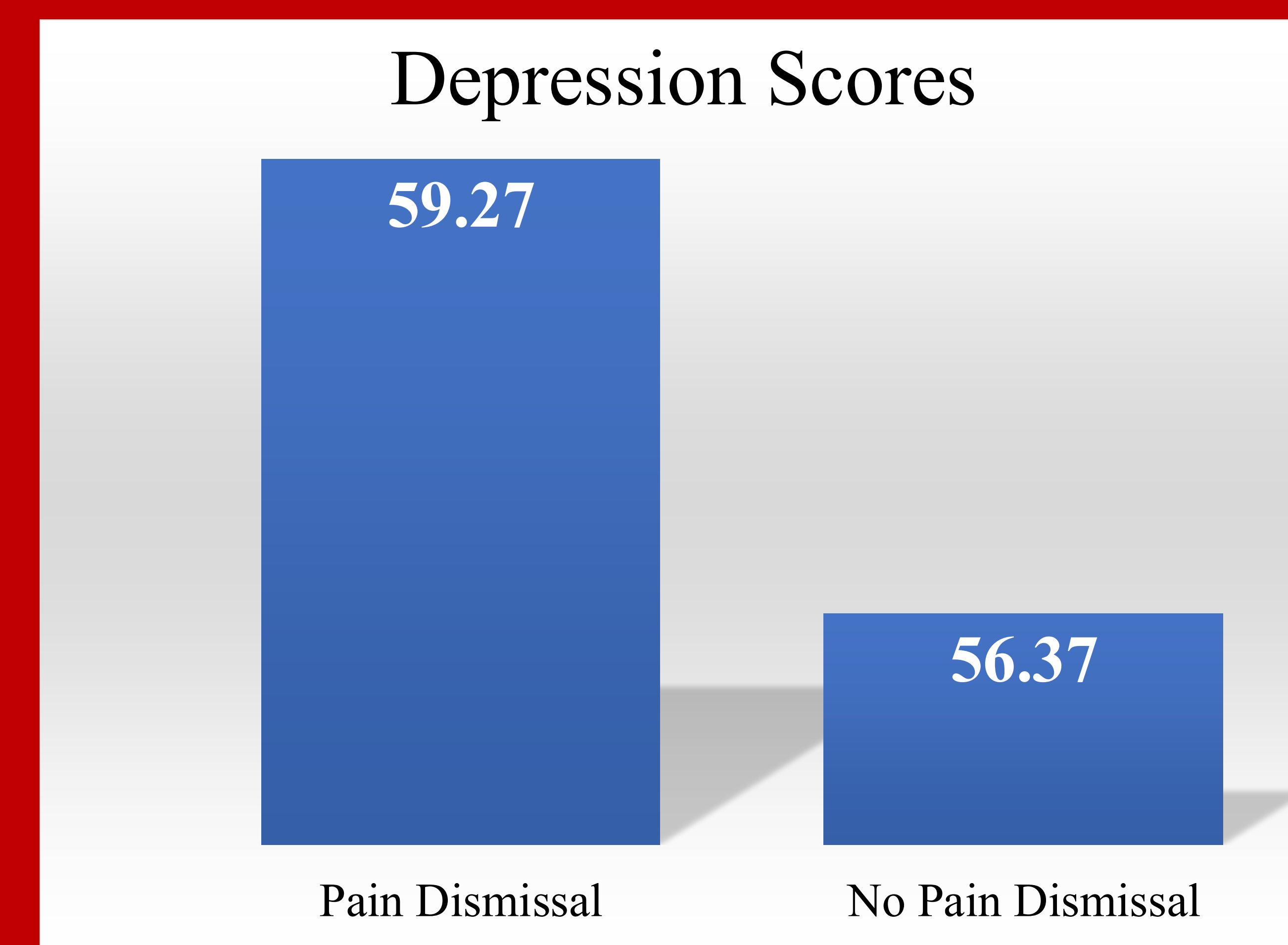
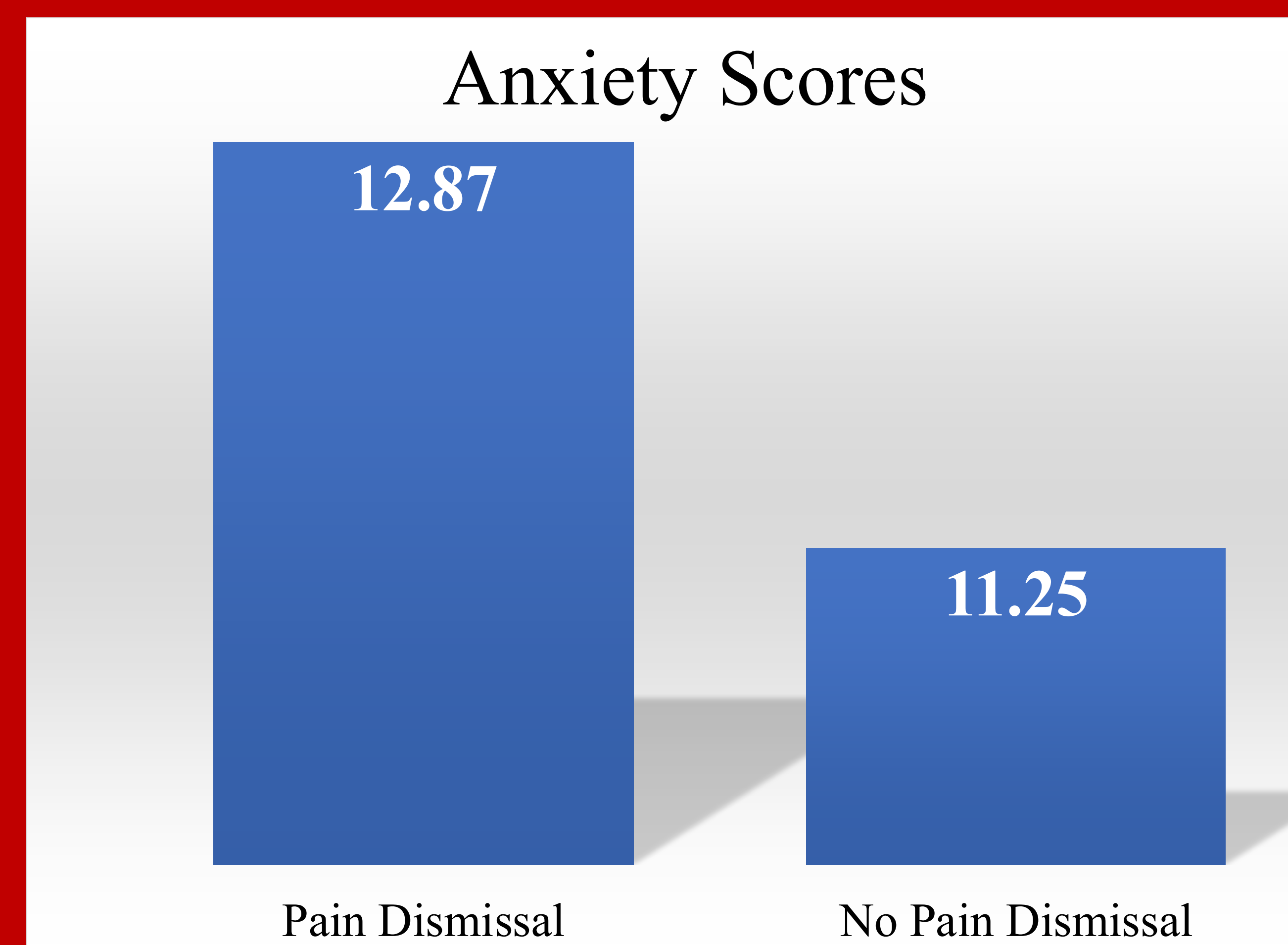
- EAs that experienced pain dismissal ($n = 98$) had higher anxiety scores compared to those that did not experience dismissal ($t(225) = 2.12$; $p = .035$).
- Those that experienced pain dismissal also had higher depression T-scores compared to those that did not experience dismissal ($t(225) = 2.65$; $p = .009$).
- EAs that experienced pain dismissal did not differ in their use of substances to cope compared to those that did not experience dismissal ($t(225) = .94$; $p = .347$).
- Anxiety was not found to be significantly related to substance-use coping.
- Pain dismissal is associated with depression, which in turn had a significant positive effect on substance-use coping.

Discussion

- Having one's pain dismissed was related to higher anxiety and depression, but not substance use for coping.
- It is important to educate individuals on chronic pain within EAs and the concept of pain dismissal because this could potentially lead to less instances of pain dismissal in the future.
- Next steps include investigating whether psychosocial interventions (e.g. cognitive-behavioral therapy or support groups) may reduce negative consequences of pain dismissal.

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Reducing instances of pain dismissal and increasing validation of pain symptoms may decrease symptoms of anxiety and depression in EAs with chronic pain.



Race/Ethnicity	n(%)
European American	96(42.3)
Other Multiracial/Ethnic Identity	44 (19.4)
Latinx	40(17.6)
Asian American	26(11.5)
African American	18(7.9)
Other Singular Identity	3(1.3)

Constructs	Correlation (Sig)
Anxiety & Depression	.616 (<.001)
Anxiety & Substance-use Coping	.107 (.108)
Depression & Substance-use Coping	.151 (.022)