Adversity & Resilience Among Older Adults Living With Chronic Pain

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Table 1

Emotional Abuse

.740**

.756**

.636*

Physical Abuse

.720*

.631*

.764**

.637*



Sexual Abuse

.184

.270

.231

-.309

01. Background

Within the limited literature examining adversity among older adults with chronic pain, studies have focused on sexual abuse as an adverse childhood experience but have not examined emotional and physical abuse in addition to sexual abuse.

02. Objective

03. Methods

Examine the role of childhood abuse on pain-related outcomes among older adults.

Participant recruitment (N = 12)

purpose and inclusion criteria.

age) living with chronic pain.

a set of online questionnaires.

Analyses involved a one-way

ANOVAs for each type of abuse.

Participants included Canadian

involved advertisements of the study

older adults (i.e., at least 65 years of

Participants were asked to complete

04. Results

Preliminary analyses indicated the following results (Table 1):

- 1. Childhood physical abuse was significantly associated with activity engagement, pain willingness, pain self-efficacy, and pain resilience
- 2. Childhood emotional abuse was significantly efficacy, and pain resilience, but not pain willingness
- 3. Childhood sexual abuse was not significantly associated with activity engagement, pain

- associated with activity engagement, pain self-
- willingness, pain self-efficacy, or pain resilience

05. Implications

Older adults with chronic pain who experienced childhood emotional and physical abuse may present for treatment with reduced willingness or ability to engage in activities of importance to their well-being. Positive screens for childhood emotional and physical abuse may identify opportunities to address some of the psychosocial variables influencing outcomes of pain management interventions.

06. Future Directions

Activity Engagement

Pain Willingness

Pain Self-Efficacy

Pain Resilience

In contrast to existing literature, childhood sexual abuse was not significantly associated with pain-related outcomes, but given the preliminary nature of these findings, more research is needed. A larger sample size will be needed in order to better explore the indicated results. More attention needs to be given to the ways in which childhood abuse can be addressed through psychological treatment within the context of chronic pain treatment.

07. References

so caution should be

taken when interpreting

these results.

Burhmann & Fuller-Thomson (2022). Aging Health Res, 2, 100088.

Kamiya et al. (2016) Int Psychogeriatr, 28, 415-422.

Lalchandani et al. (2020). J Gen Intern Med, 35, 3210-3217.

Miaskowski et al. (2020). Pain Med, 21, 1793-1805.

Talbot et al. (2009). Psychosom Med, 71, 417-422.