FAMILY FUNCTIONING AND PARENT-CHILD COPING DURING CHILDREN’S ACUTE PAIN

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INTRODUCTION / AIM

Existing theories and empirical research have focused on the role of family functioning in pediatric chronic pain, without exploring any influence of family factors in children’s acute pain experience. The objective of this study was to explore relations between family functioning and child acute pain, including observed parent-child behaviors, coping, and ratings of child pain.

METHODS

Community sample of 171 dyads comprised of one child aged 8-12 (52% girls) and one parent (79% mothers) from Nova Scotia. Family functioning was assessed using a multi-method multi-informant design, including child and parent report and observation during a conflict discussion task. Using validated measures, children and parents rated their trait anxiety and pain catastrophizing, and situational distress and child pain following the child’s completion of a cold pressor task (CPT). Parent-child interactions during the CPT were coded for observed behaviors.

RESULTS

Poorer family functioning as reported by children and parents predicted greater ratings of children’s and parents’ own trait anxiety and catastrophizing about child pain. Poorer parent-reported family functioning predicted greater parent situational distress. Greater child symptom complaints were observed in families that displayed lower negativity/conflict and cohesiveness, and greater parent emotional support and family-centered understanding of family problems. Family functioning was not associated with child or parent ratings of child pain intensity.

DISCUSSION / CONCLUSIONS

Family functioning was influential in parent and child coping and child pain expression, but did not influence child or parent ratings of child pain.

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