

Distinct gender norms in descriptions of chronic pain affect medical treatment, says researcher

February 6 2023



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Sensitive women and stoical men are the prevalent images of people in chronic pain. Unwarranted differences in medical treatment may result,

as a University of Gothenburg doctoral thesis emphasizes.

Approximately a fifth of the Swedish population have long-term pain that can affect their quality of life, work capacity, relationships, [family life](#), and leisure activities. Treatment of chronic pain has been described as a challenge to patients and [health professionals](#) alike.

Gender norms, stereotypical notions of how men and women are—or should be like—can affect how health care staff treat people in pain. This, in turn, may result in medically unjustified disparities in treatment of men and women, or gender bias.

The present [doctoral thesis](#), in the area of community medicine and [public health](#), describes the author's investigation of existing gender norms linked to long-term pain and how gender norms, chronic pain, and psychosocial resources such as [social support](#) are interrelated.

Adaptation versus external help

The subject of how men and women with [chronic pain](#) are described in research was studied in 77 scientific articles. The results show that women were portrayed as sensitive and expected to learn to adapt their ways of life to the pain. Men, on the other hand, were described as enduring pain and expected to search for the cause of their pain, and its treatment, outside themselves.

When a population sample of 4,010 individuals were examined, unexpected gender patterns—"gender norm disruptions"—emerged. Among the studied factors were self-assessed practical and emotional social support and the associations between social support and frequent pain. The follow-up period was one and a half years.

Unexpectedly, a lack of emotional social support proved to be a greater

risk factor for men than for women. Men with weak emotional social support were twice as likely to develop frequent pain as men with strong support of this kind. Otherwise, emotionality is usually associated with women and femininity.

For women, a lack of practical social support was a major risk factor. Women whose practical support was weak had a 62% higher risk of developing frequent pain than those who enjoyed strong support.

Key knowledge for health care and research

One result, in line with prevailing gender norms was that women enjoyed stronger practical social support than the men. However, this applied only to women without frequent pain. In the group with frequent pain, women did not have stronger practical social support than men.

Another result shows that the men with frequent pain and strong emotional social support had a lower chance of no frequent pain at follow-up than men with weak support.

The author of the thesis is Anke Samulowitz, who gained her doctorate at Sahlgrenska Academy, University of Gothenburg. A physiotherapist and psychologist, she works at Region Västra Götaland's Center for Equity in Health Care.

"Awareness of prevailing gender norms and unexpected gender patterns can help [health care](#) staff to counteract gender bias and offer equal care that's based more on the individual's needs. Becoming aware of [gender norms](#) and gender norm disruptions may also enhance quality in research and lead to new strategies in preventive care," Samulowitz says.

More information: Pain, gender norms and psychosocial resources. A critical appraisal of taken for granted ideas on men and women with

pain: gupea.ub.gu.se/handle/2077/73769

Provided by University of Gothenburg

Citation: Distinct gender norms in descriptions of chronic pain affect medical treatment, says researcher (2023, February 6) retrieved 4 May 2024 from

<https://medicalxpress.com/news/2023-02-distinct-gender-norms-descriptions-chronic.html>

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