

# Sociology of Pain for Physiotherapists

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## Abstract

**Background:** Pain is increasingly recognized as a complex experience influenced by physical, psychological, and social factors. Traditional biomedical models of pain often overlook sociocultural dimensions that are critical for a holistic understanding, especially in fields like physiotherapy.

**Objective:** This review aims to explore the sociological dimensions of pain and their implications for physiotherapy practice, emphasizing the need for a biopsychosocial approach to pain management.

**Methods:** A narrative review approach was used to analyze literature on sociocultural influences on pain, focusing on aspects such as cultural norms, gender roles, and social support networks, as well as psychosocial factors like emotional responses and coping mechanisms.

**Findings:** The review highlights how cultural norms shape pain perception and communication, how gender influences both pain expression and treatment biases and how social support impacts pain management outcomes. Additionally, psychosocial factors – including cognitive attention, emotional responses, and coping strategies – are essential in modulating the pain experience.

**Implications:** For physiotherapists, understanding these sociocultural influences is crucial for delivering patient-centered care. Incorporating cultural competency, gender sensitivity, and psychosocial evaluation into practice can enhance treatment outcomes and improve patient satisfaction.

**Conclusion:** Adopting a biopsychosocial approach allows physiotherapists to provide more effective and equitable care, ultimately promoting a comprehensive understanding of pain. Future research and professional development in these areas are recommended to further advance physiotherapy practice.

**Keywords:** Pain management, Biopsychosocial model, Physiotherapy, Psychosocial factors, Chronic pain

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## INTRODUCTION

Pain is one of the most frequently reported medical symptoms worldwide, and it significantly impacts individuals' quality of life. Pain management has become one of the most critical areas in healthcare, with physiotherapists playing a central role in its treatment. As the third leading cause of work absenteeism, pain is not just a physiological condition but a pervasive issue deeply embedded in personal, social, and economic contexts.<sup>1</sup> To understand pain in its entirety, it must be approached as a biopsychosocial phenomenon – one that is shaped not just by biological signals but also by psychological and sociocultural factors.<sup>2,3</sup>

Pain is defined by the International Association for the Study of Pain (IASP) as “an unpleasant sensory and emotional experience associated with, or resembling that associated with actual or potential tissue damage.”<sup>4</sup> This definition underscores the multidimensional nature of pain and suggests that its experience is more complex than a straightforward bodily response to injury. While the physiological aspects of pain have long been studied, less attention has historically been given to the social and cultural determinants that influence how individuals perceive, express, and respond to pain.<sup>5</sup>

For physiotherapists, understanding pain through a sociological lens is vital. The way patients experience and express pain is profoundly shaped by their societal context, including cultural norms, gender expectations, and the support they receive from social networks. Sociocultural factors can determine whether a patient seeks medical help, how they describe their symptoms, and what treatment methods they are open to.<sup>6</sup> These elements influence not only patient behavior but also the healthcare provider's response, shaping the interaction between physiotherapist and patient.<sup>7,8</sup>

This narrative review aims to explore how the sociology of pain can inform physiotherapy practice, helping physiotherapists deliver more holistic, patient-centered care.

### Historical Evolution of Pain Understanding

#### *Historical Perspective on Pain*

Historically, pain was viewed from a biomedical perspective, heavily influenced by Cartesian dualism.<sup>9</sup> Rene Descartes, the French philosopher, proposed that the body and mind were distinct entities, and this separation laid the groundwork for

the biomedical model, which focused exclusively on the physical mechanisms of pain.<sup>10,11</sup> Pain was thought to be the result of damage to tissues, and treatment was directed at alleviating this damage.<sup>12</sup>

For centuries, this reductionist approach dominated medical thought, and pain was considered a purely physiological response to injury or illness. The healthcare provider's role was to identify the source of tissue damage and administer appropriate medical interventions to alleviate the physical cause of pain. In this view, psychological and social factors were seen as secondary, or even irrelevant, to the experience of pain. Patients whose pain did not have a clear physical cause were often dismissed or labeled as malingerers.<sup>13-15</sup>

Over time, the limitations of the model became clear. Many patients still experienced pain after injuries healed, and some had severe pain without tissue damage. This highlighted that pain is influenced by psychological and social factors, not just physical ones.

### The Biopsychosocial Revolution

The biopsychosocial model, proposed by George Engel in 1977, marked a significant shift in how pain is understood.<sup>16</sup> This model posits that pain is a dynamic interaction between biological, psychological, and social factors. It acknowledges that no two individuals experience pain in the same way, as personal history, mental state, cultural background, and social environment all shape how pain is perceived and expressed.<sup>17,18</sup>

Physiotherapists, in particular, have embraced this model, recognizing that patients' psychological well-being and social circumstances must be considered alongside their physical symptoms to provide effective pain management. The biopsychosocial approach represents a more holistic understanding of pain, one that considers the whole person rather than just their physical body.

### Gate Control Theory and Beyond

Melzack and Wall's Gate Control Theory, introduced in the 1960s, provided a framework for understanding the complex interactions between the mind, body, and environment in the experience of pain.<sup>19</sup> This theory proposed that pain signals from the body are modulated by a “gate” in the spinal cord that can be influenced by cognitive and emotional factors. In other words, psychological and social factors can “open” or “close” the gate, making pain worse or better depending on the individual's mental and emotional state.<sup>20,21</sup>

This theory was groundbreaking because it acknowledged that pain is not just a result of physical stimuli but is also shaped by psychological processes. It paved the way for further research into how sociocultural factors influence pain perception and provided physiotherapists with a more nuanced understanding of how to manage pain in their patients.

### **Cultural Influences on Pain**

Culture plays a profound role in shaping how individuals perceive, express, and manage pain. Cultural norms and values influence not only how pain is experienced but also how it is communicated and treated. Understanding these cultural influences is essential for physiotherapists, as patients from different cultural backgrounds may have widely varying attitudes toward pain and healthcare.

### **Pain Communication Patterns**

The way pain is communicated varies significantly between cultures. In some cultures, pain is seen as a private experience, and individuals may be reluctant to express it openly. For example, in many Asian cultures, stoicism is highly valued, and individuals may downplay or hide their pain to avoid burdening others or showing weakness. In contrast, some Latin American and Mediterranean cultures may view pain expression as a way of seeking empathy and support from others, leading to more vocal and demonstrative expressions of pain.<sup>22,23</sup>

Physiotherapists must be aware of these cultural differences in pain communication. A patient from a culture that values stoicism may not fully express the extent of their pain, leading the physiotherapist to underestimate the severity of the condition. Conversely, a patient from a culture that encourages open expression of pain may be perceived as exaggerating their symptoms. Understanding these cultural nuances can help physiotherapists make more accurate assessments and provide more effective treatment.

### **Cultural Beliefs and Values**

Cultural beliefs about pain and its causes can also influence how patients perceive and respond to pain. For example, some cultures may have traditional healing practices that view pain as a result of spiritual or supernatural forces. In these cultures, patients may seek out traditional healers or use alternative treatments such as herbal remedies, acupuncture, or religious rituals before turning to

Western medicine.<sup>24,25</sup>

Physiotherapists should respect cultural beliefs about pain and integrate appropriate cultural practices into treatment, potentially collaborating with traditional healers to build trust.

### **Healthcare-Seeking Behaviors**

Cultural norms also influence when and how individuals seek medical help for pain. In some cultures, people may delay seeking treatment for pain due to beliefs that it is a natural part of life or a test of endurance. In other cases, individuals may rely on family members to make healthcare decisions on their behalf, particularly in cultures where family involvement in medical care is highly valued.<sup>25,26</sup>

Physiotherapists should adapt their communication and treatment approaches to respect cultural differences in healthcare-seeking behavior, including family involvement when appropriate.

### **Gender Perspectives on Pain**

Gender plays a significant role in pain perception, expression, and management. Both biological and social factors contribute to the differences in how men and women experience pain, and physiotherapists must be aware of these differences to provide effective care.

### **Biological Differences**

Research has shown that women tend to have lower pain thresholds and report more frequent and intense pain than men. These differences are partly due to hormonal influences, such as fluctuations in estrogen levels, which can affect pain sensitivity. Additionally, women are more likely to suffer from certain pain conditions, such as fibromyalgia and migraines, which are less common in men.<sup>27-29</sup>

Physiotherapists need to consider these biological differences when assessing and treating pain in their patients. For example, a female patient with chronic pain may require different treatment strategies than a male patient with a similar condition. Understanding the biological factors that influence pain can help physiotherapists tailor their interventions to meet the unique needs of each patient.

### **Societal Expectations and Gender Roles**

Social and cultural expectations regarding gender also play a significant role in how pain is expressed and managed. Traditional gender roles

often dictate that men should be stoic and refrain from showing vulnerability, while women may be more socially accepted in expressing pain. These gendered expectations can influence how individuals report pain to healthcare providers and how their pain is perceived by others.<sup>30-32</sup>

For example, men may be less likely to seek medical help for pain or may downplay their symptoms due to societal expectations of toughness. On the other hand, women who express pain may face stereotypes of being overly emotional or exaggerating their discomfort. These gender-based biases can affect the quality of care that patients receive, with men potentially being undertreated and women being dismissed or not taken seriously.

### **Treatment Implications for Gender**

Physiotherapists must be mindful of these gender-related dynamics when providing care. Gender-specific communication strategies may be necessary to encourage men to discuss their pain openly or to reassure women that their pain is valid and deserving of attention. Additionally, physiotherapists should be aware of potential biases in pain assessment and treatment, ensuring that both male and female patients receive equitable care.<sup>31,33,34</sup>

By recognizing how gender influences pain perception and treatment, physiotherapists can create more inclusive and effective pain management strategies that address the unique needs of both men and women.

### **Social Support and Pain**

Social support plays a critical role in shaping individuals' experiences of pain. The presence or absence of supportive relationships can have a profound impact on how patients cope with pain, their psychological well-being, and their recovery outcomes.

### **The Impact of Social Networks**

Individuals with strong social support networks, including family, friends, and community connections, tend to experience less severe pain and recover more quickly from injuries or surgeries. Social support can provide emotional comfort, practical assistance, and a sense of belonging, all of which contribute to improved pain management.<sup>35,36</sup>

For example, patients who have family members who are actively involved in their care may feel more motivated to adhere to treatment plans and engage in rehabilitation exercises. Conversely, socially isolated individuals may experience

greater psychological distress, leading to increased pain sensitivity and poorer treatment outcomes.

### **Socioeconomic Factors and Pain Management**

Socioeconomic factors, such as income, education, and access to healthcare, also play a significant role in pain management. Patients from lower socioeconomic backgrounds may face barriers to accessing quality healthcare, such as financial constraints or lack of transportation. These individuals may delay seeking treatment or may not have access to the same range of treatment options as those with higher socioeconomic status.<sup>37-39</sup>

Physiotherapists should address socioeconomic disparities by connecting patients with community resources and providing affordable treatment options, including self-management strategies.

### **Social Isolation and Chronic Pain**

Chronic pain often leads to social isolation, as individuals may withdraw from social activities and relationships due to their physical limitations or emotional distress. This isolation can create a vicious cycle, where the lack of social interaction exacerbates feelings of loneliness and depression, which in turn intensifies the experience of pain.<sup>40-42</sup>

Physiotherapists can help break pain-isolation cycles by encouraging social engagement through support groups, family involvement, and community programs.

### **Psychosocial Factors Affecting Pain**

The experience of pain is not solely a biological response to injury or illness; it is deeply influenced by psychosocial factors. These factors ranging from cognitive processes to emotional states and social interactions play a significant role in modulating pain perception, coping mechanisms, and recovery outcomes. For physiotherapists, understanding these psychosocial influences is crucial for providing holistic pain management and improving patient outcomes.

### **Awareness and Attention in Pain Perception**

Pain is often described as a subjective experience, and the way individuals perceive pain is heavily influenced by where they focus their attention. The amount of attention given to a pain stimulus can amplify or diminish the pain experience. For instance, patients who are highly focused on their pain often report more intense and debilitating symptoms, while those distracted by engaging in activities may experience a reduction in pain perception.<sup>43,44</sup>

This phenomenon can be explained by the Gate Control Theory, which posits that cognitive and emotional factors can influence the “gate” that controls the flow of pain signals to the brain. When individuals focus their attention on pain, the gate is more likely to remain open, increasing pain signals. Conversely, when attention is diverted, the gate may close, reducing the perception of pain.

### **Attention Management Strategies in Physiotherapy**

For physiotherapists, implementing strategies to help patients manage their attention can be a powerful tool for pain management. Techniques such as mindfulness, guided imagery, and cognitive distraction can help shift the patient’s focus away from pain and toward more positive or neutral sensations. Mindfulness, in particular, has been shown to reduce pain intensity and improve emotional resilience by helping patients observe their pain without judgment.<sup>45</sup>

Engaging patients in physical activities that require mental focus, such as balance exercises or task-oriented movements, can also help divert attention from pain. By integrating these strategies into physiotherapy treatment plans, therapists can help patients regain control over their pain experience and reduce its impact on their daily lives.

### **Interpretation and Meaning of Pain**

How individuals interpret the meaning of their pain can profoundly affect their emotional and psychological response to it. For example, patients who view their pain as a sign of serious, uncontrollable damage may experience higher levels of anxiety, stress, and even depression. In contrast, individuals who perceive their pain as temporary or manageable are often better able to cope with it and remain optimistic about their recovery.<sup>46,47</sup>

Personal pain beliefs are shaped by a variety of factors, including past experiences, family attitudes, cultural values, and educational background. For instance, someone with a family history of chronic pain may have a heightened sense of fear or fatalism about their pain. Similarly, cultural beliefs about illness and recovery can influence how patients interpret and respond to pain. In some cultures, pain may be viewed as a test of endurance, while in others, it may be seen as a sign of weakness.<sup>46,47</sup>

### **Expectation Management and Psychological Support**

One of the key roles of physiotherapists is to help

manage patients’ expectations about their pain and recovery. Setting realistic goals and providing clear, evidence-based information about the recovery process can alleviate patients’ fears and reduce the psychological burden of pain. Physiotherapists can also encourage patients to reframe their pain in a more positive light, emphasizing their capacity for healing and the progress they can make through rehabilitation.<sup>48,49</sup>

In addition, providing psychological support through empathy, active listening, and validation of the patient’s pain experience can significantly enhance the therapeutic relationship. Physiotherapists may also collaborate with psychologists or pain specialists to address deeper emotional and cognitive aspects of pain, particularly in cases where anxiety, depression, or catastrophizing are present.<sup>48,49</sup>

### **Emotional Response and Coping Mechanisms**

The emotional response to pain is a critical aspect of the pain experience. Chronic pain, in particular, is often accompanied by psychological issues such as anxiety, depression, and mood fluctuations. The interplay between pain and emotion can create a vicious cycle where negative emotions exacerbate the perception of pain, which in turn worsens emotional distress. This cycle can be challenging for patients to break without appropriate support.<sup>50,51</sup>

Coping mechanisms play a key role in how individuals manage their pain and emotional responses. Problem-focused coping strategies, which involve actively addressing the cause of pain or taking steps to alleviate it, are generally associated with better outcomes. In contrast, emotion-focused coping strategies, such as avoidance or denial, can lead to maladaptive behaviors and prolong pain-related distress.<sup>52</sup>

Physiotherapists can teach patients coping strategies like stress management and relaxation techniques while encouraging social support and physical activity to improve pain management and quality of life.

### **Implications for Physiotherapy Practice**

Incorporating the sociological and psychological understanding of pain into physiotherapy practice is essential for providing patient-centered care. Physiotherapists must not only address the physical aspects of pain but also consider the broader social, cultural, and emotional contexts that influence each patient’s pain experience. This holistic approach leads to more effective treatment strategies and improved patient outcomes.

### **Cultural Competency in Pain Assessment**

One of the most important implications of the sociology of pain for physiotherapy practice is the need for cultural competency. Patients from diverse cultural backgrounds may have different ways of expressing and interpreting pain, which can impact their interactions with healthcare providers. To deliver effective care, physiotherapists must develop an awareness of cultural differences and tailor their assessments and interventions accordingly.<sup>6</sup>

Cultural competency begins with understanding the patient's cultural background, beliefs, and values related to pain and health. Physiotherapists should ask open-ended questions and actively listen to the patient's concerns, avoiding assumptions based on stereotypes. For example, some patients may be hesitant to discuss their pain openly due to cultural norms that discourage vulnerability. In these cases, physiotherapists must create a safe and supportive environment that encourages honest communication.<sup>6</sup>

Language barriers can also pose challenges in pain assessment and treatment. When working with patients who do not speak the same language, physiotherapists may need to use interpreters or culturally appropriate educational materials to ensure that the patient fully understands their treatment options and can actively participate in their care.

### **Psychosocial Evaluation in Physiotherapy**

In addition to physical assessments, physiotherapists should incorporate psychosocial evaluations into their clinical practice. This includes assessing the patient's emotional well-being, social support systems, and environmental factors that may influence their pain experience. A comprehensive psychosocial evaluation can help identify barriers to recovery, such as social isolation, financial stress, or lack of access to healthcare resources.<sup>53,54</sup>

Addressing psychosocial factors allows physiotherapists to create personalized treatment plans that combine physical therapy with mental health support and community resources.

### **Patient-Centered Care and Holistic Treatment Approaches**

The sociological understanding of pain emphasizes the importance of patient-centered

care. This approach involves treating the patient as a whole person, rather than focusing solely on their physical symptoms. Physiotherapists should collaborate with patients to develop treatment goals that align with their values, cultural beliefs, and social circumstances. This collaborative process empowers patients to take an active role in their recovery and fosters a stronger therapeutic alliance.<sup>7,8</sup>

Holistic pain treatment combines physical interventions with psychological support and social strategies. Physiotherapists can integrate relaxation techniques and cognitive-behavioral approaches while involving family members to enhance patient support and motivation.

### **Future Directions for Research and Professional Development**

As the understanding of pain continues to evolve, there is a growing need for further research into the sociological and psychological dimensions of pain and how these factors can be integrated into physiotherapy practice. Future research and professional development efforts should focus on developing new tools, interventions, and educational programs that promote a more holistic approach to pain management.

### **Research Priorities**

One key area for future research is the development of culturally sensitive pain assessment tools. Current assessment methods may not adequately capture the full range of pain experiences in patients from diverse cultural backgrounds. Researchers should work to develop new tools that account for cultural differences in pain expression, communication, and healthcare-seeking behaviors. These tools should be validated across different cultural groups to ensure their effectiveness in diverse populations.<sup>55</sup>

Gender-specific interventions are another important area for research. Although there is a growing understanding of gender differences in pain perception and treatment, more work is needed to develop targeted interventions that address these differences. For example, research could explore the effectiveness of different pain management strategies for men and women, taking into account both biological and social factors.<sup>28,56</sup> More research is needed to identify which types of social support best help different chronic pain patients, enabling targeted interventions to reduce isolation.

### Professional Development for Physiotherapists

Physiotherapists should pursue continuous education in pain management that covers cultural competency, social factors, and interdisciplinary approaches. This includes developing communication skills for diverse patient populations and collaborating with mental health and social work professionals to provide comprehensive care.

### Healthcare System Improvements

Healthcare systems should adopt comprehensive biopsychosocial approaches to pain management, ensuring all patients have access to culturally appropriate care regardless of their background. This requires addressing social determinants of pain through policy changes, community programs, and improved healthcare access.

## CONCLUSION

Understanding pain's biopsychosocial nature is crucial for physiotherapists, as physical, psychological, and social factors shape pain perception. By integrating sociological insights, cultural competency, and social support considerations, physiotherapists can provide more effective, holistic pain management. This comprehensive approach helps address the multidimensional aspects of pain, leading to better patient outcomes.

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