INTERNATIONAL JOURNAL OF NURSING, HEALTHCARE AND HOSPITAL ADMINISTRATION **VOL. 1 NO. 1**
E-ISSN: 3116-5974 P-ISSN: 3116-5966
https://doi.org/10.66206/eduheart.ijnhha.21

Assessing The Different Strategies for Managing Chronic Pain in the Aging Population: A Quantitative Study

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ABSTRACT

The purpose of this study is to evaluate the strategies older adults use to manage chronic pain, assess their perceived effectiveness, and provide evidence-based recommendations for patient-centered, multimodal care. This study employed a ***quantitative, descriptive-correlational design*** *to examine chronic pain management strategies among older adults aged 60 and above. Data were collected through a validated structured survey and analyzed using descriptive statistics and correlation tests to identify patterns and relationships between demographics, strategies used, and perceived effectiveness. Ethical protocols, including informed consent, confidentiality, and IRB approval, ensured the validity and integrity of the research. The study found that chronic pain in older adults, particularly women aged 65–69 with common comorbidities like hypertension, diabetes, and arthritis, is best managed through a multimodal approach that combines medication with lifestyle modifications and psychological support, as these strategies showed significant effectiveness in improving independence and quality of life despite barriers such as cost, side effects, and limited access to physical therapy. Provides empirical evidence supporting multimodal, culturally adapted pain management strategies for older adults in the Philippines. Guides clinicians, caregivers, and policymakers in implementing accessible, patient-centered interventions. This study offers context-specific insights into chronic pain management among Filipino seniors, addressing gaps in policy and practice.*

Keywords: *Chronic Pain, Aging Population, Pain Management Strategies, Quantitative Study, Patient-Centered Care*

INTRODUCTION

Chronic pain affects nearly 20% of the global population, with prevalence rising among older adults due to arthritis, osteoporosis, and neuropathic disorders. While medications remain common, concerns about opioid dependence have shifted focus toward non-pharmacological strategies such as physical therapy, CBT, lifestyle changes, and mindfulness. Telemedicine and digital health platforms expand access to care, especially in underserved areas. In the Philippines, chronic pain among seniors is increasing, yet policies and specialized services remain limited, particularly in rural communities. This highlights the urgent need for culturally appropriate, comprehensive, and multidisciplinary strategies to improve pain management.

Statement of the Problem

The study profiles older adults with chronic pain, identifies common management strategies (medication, physical therapy, psychological support, lifestyle modification), and evaluates their perceived effectiveness. It examines links between demographics, chosen strategies, and outcomes, explores influencing factors, and proposes evidence-based guidelines to improve

pain management in the aging population.

Scope and Delimitations

This study assessed chronic pain management in older adults by comparing pharmacological and non-pharmacological strategies and examining preferences and effectiveness across demographics. It acknowledged limitations in scope and reliance on self-reported data but offered valuable, culturally sensitive recommendations for improved care.

Review of Related Literature

Global Perspectives on Chronic Pain Management

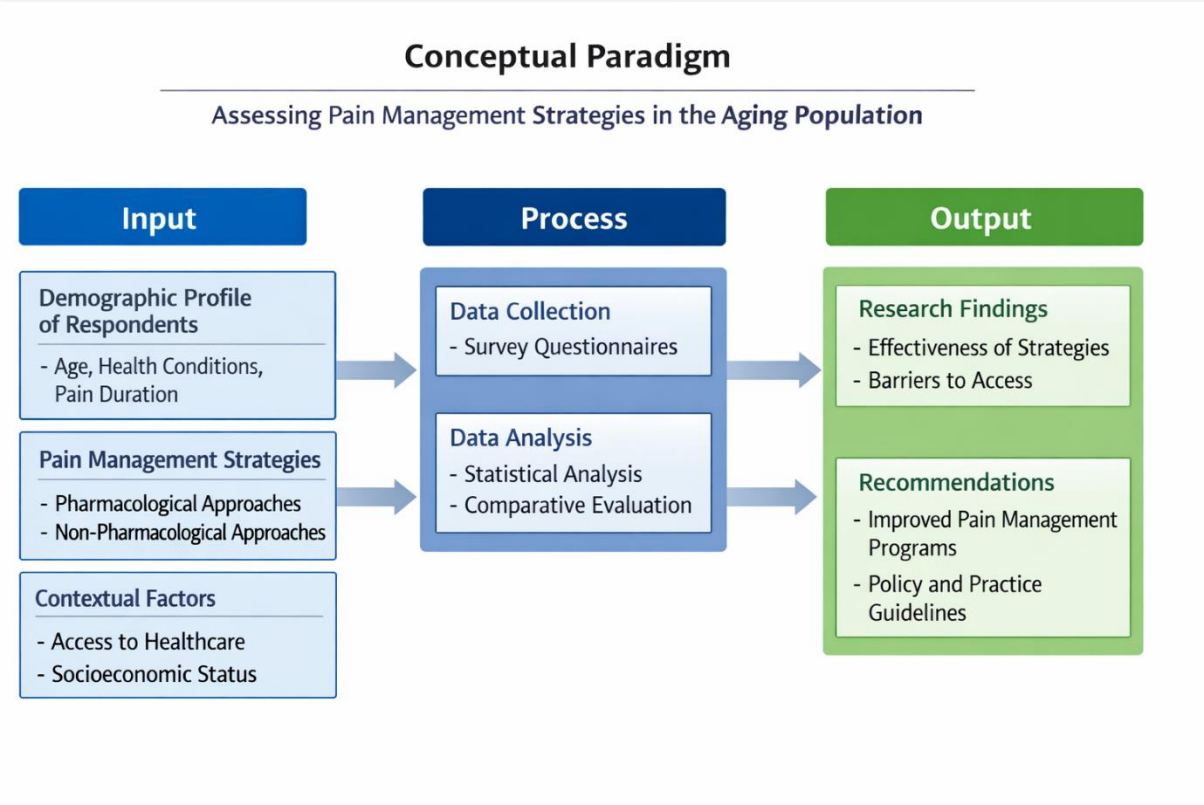
Chronic pain is a global public health issue affecting nearly 20% of the population, with prevalence rising among older adults due to conditions such as arthritis, osteoporosis, and neuropathic disorders (Dagnino & Campos, 2022; Cohen et al., 2021). Pharmacological treatments remain common, but concerns about opioid dependence have shifted attention toward non-pharmacological strategies like physical therapy, CBT, mindfulness, and lifestyle modifications (Kang et al., 2023; Yong et al., 2021). Emerging technologies such as telemedicine and digital health platforms have expanded access to care, particularly in underserved areas, while multimodal approaches that combine these methods yield better outcomes (Raffaeli et al., 2021). In the Philippines, chronic pain among seniors is increasing, yet policies and specialized services remain limited, especially in rural communities (Philippine Statistics Authority, 2021; Van Orden et al., 2020). Local studies highlight sleep disorders and psychosocial factors as key predictors, and although pilot programs integrating multidisciplinary care show promise, nationwide strategies tailored to older Filipinos are urgently needed (Guven Kose et al., 2023; Fulmer et al., 2021).

Theoretical Framework

The study is anchored in the **Biopsychosocial Model of Pain**, which views pain as shaped by biological, psychological, and social factors, and **in Roy's Adaptation Model, which highlights older adults as adaptive systems that respond** to chronic pain through coping mechanisms.

Conceptual Framework

Guided by these models, the framework links older adults' demographic profiles, the pain management strategies they use (pharmacological and non-pharmacological), and the perceived effectiveness of these strategies in improving quality of life.



METHODOLOGY

The study employed a quantitative, descriptive-correlational design to assess chronic pain management strategies among older adults.

Research Steps

Older adults aged 60+ with chronic pain were purposively sampled from a healthcare facility. Data were collected using a validated, structured survey covering demographics, pain types, strategies, and perceived effectiveness, ensuring cultural relevance**.**

Data Collection Surveys

The study was administered directly, with assistance provided when needed. Ethical safeguards included informed consent, voluntary participation, confidentiality, and IRB approval.

Data Analysis

Descriptive statistics were used to summarize participant profiles and strategies, while correlation analysis examined links between demographics and perceived effectiveness, ensuring validity and real-world relevance.

Research Hypotheses and Validation

1. Demographic profiles (age, gender, health conditions, pain duration) significantly influence the pain management strategies employed by older adults.
2. Demographic profiles significantly affect the perceived effectiveness of these strategies.
3. Non-pharmacological approaches (e.g., physical therapy, psychological support, lifestyle changes) are perceived as more effective than pharmacological ones in enhancing quality of life.

Study Limitations & Ethics

The study upheld strict ethical standards, ensuring informed consent, voluntary participation, confidentiality, and IRB approval to protect participant rights and welfare.

RESULT AND DISCUSSION

Chronic pain was most prevalent among women aged 65–69 with comorbidities. Medications offered immediate relief but raised dependency concerns, while physical therapy, psychological support, and lifestyle changes provided sustainable outcomes. Multimodal approaches proved most effective overall.

SUMMARY

Using a quantitative, descriptive-correlational design with 119 participants, the study identified the most preferred lifestyle and psychological strategies, though medications remained common. Significant links between demographics, strategies, and outcomes highlighted the value of integrated approaches.

CONCLUSIONS

Holistic, patient-centered care integrating pharmacological and non-pharmacological strategies is essential. Strengthening healthcare access, education, and culturally sensitive policies supports healthier aging and improved quality of life.

RECOMMENDATIONS

Adopt multidisciplinary care combining medications, therapy, psychological support, and lifestyle interventions. Enhance patient education, improve accessibility for disadvantaged groups, and develop affordable, culturally sensitive policies for chronic pain management

ACKNOWLEDGMENT

I extend my heartfelt gratitude to my family for their love and sacrifices, to my friends and colleagues for their support and motivation, and to the panelists for their valuable insights and guidance. Special thanks to my research chair and adviser for their mentorship and expertise, which greatly shaped this study.

AI DECLARATION STATEMENT:

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

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