Introduction to Learning About Managing Pain (LAMP) Patient Workbook

The workbook accompanying this introduction is the result of a multi-year effort to disseminate efficacious cognitive-behavioral therapy for chronic pain to people with low health literacy. This effort grew out of feedback I received after publishing the first edition of Cognitive Therapy for Chronic Pain: A Step-by-Step Guide (Thorn, 2004). Although it was gratifying to receive positive notes from practitioners around the world, one particular question surfaced that piqued my curiosity: Was this treatment appropriate for individuals with limited literacy? As with most cognitive therapy techniques, this approach makes use of patient workbooks, handouts, and worksheets. Would this mode of treatment delivery pose a barrier to those with limited literacy? Further, cognitive therapy requires a certain amount of abstract thinking and problem solving, and it is not clear how to best promote these skills in patients with limited literacy. In my effort to answer these questions, my clinical research lab team embarked upon an NIH-supported research endeavor that began with adapting the existing manual found within the above-mentioned book. Results of this randomized controlled trial can be found in: Thorn, B.E., Day, M.A., Burns, J., Kuhajda, M., Gaskins, S., Sweeney, J., ~~~ Cabbil, C. (2011). Randomized trial of group cognitive-behavioral therapy compared to a pain education control for low literacy rural people with chronic pain. Pain, 152, 2710-2720. Since that time, we have conducted a large randomized controlled trial supported in part by the Patient-Centered Outcomes Research Institute (outcomes paper in revision: Thorn, B.E., Eyer, J.C., Van Dyke, B.P., Torres, C.A., Thorn, B.E., Kim, M., ….Tucker, D.H. Literacy-Adapted Cognitive-Behavioral Therapy vs Education for Chronic Pain at Low-Income Clinics: A Randomized Controlled Trial) and I have published a major revision of Cognitive Therapy for Chronic Pain, 2nd Edition: A Step-by-Step Guide (Thorn, 2017).

The problem of limited literacy is formidable. Millions of Americans are lacking in the ability to use print materials in everyday life. As the health care system becomes increasingly complex, functional literacy skills are needed more, rather than less. Numerous studies have demonstrated the link between limited literacy skills and poor health outcomes among adults in the U.S. Unfortunately, other research has shown that many of the materials available to health consumers, including patient workbooks, have been written at a level which is well above the understanding of many of our citizens. Limited literacy is considered so critical a problem in the U.S. that it has engendered a national priority within the healthcare system for the simplification of written patient education materials. The patient workbook and worksheets within the manual were reduced from the tenth grade level (in the original Thorn, 2004 manual) to the fifth grade level, consistent with recommended guidelines by the PLAIN Language U.S. Government directive and other health literacy experts.

Guilford publications has kindly given permission for making the literacy-adapted patent workbook available free of charge. The literacy-adapted patient workbook is not meant to stand alone. It supplements the source material, which is found in Thorn, B.E. (2017). Cognitive Therapy for Chronic Pain, 2nd edition: A Step-by-Step Guide, New York: Guilford Publications. The parent book covers the conceptual/theoretical underpinnings of the approach, the research supporting this approach, the training necessary to deliver this treatment, relevant cognitive assessments that can be used with patients in
this program, and explanatory remarks with examples from each session. The web address for the source material is the following:

http://www.guilford.com/cgi-bin/cartscript.cgi?page=pr/thorn.htm&dir=pp/acpp&cart_id=230964.27905

It is my hope that you will find these materials useful to you and your patients who suffer from persistent painful conditions. We see this as a necessary first step in providing appropriate psychosocial treatments to those with literacy barriers, and thus potentially reducing some of the rampant healthcare disparities in our society.

~ Beverly Thorn, Ph.D.