

Tables

Table 1. Demographic characteristics of adolescent participants (n=50)

	Adolescent participants (n=50)
Age in years (Range, Mean, SD)	14-25; 19.75 (3.68)
Gender	Female (n=45), Male (n=5), Did not wish to identify (n=1)
Current educational status	Full time (n=23), Part-time (n=7), Not in current education (n=20)
Employment status	Full time (n=7), Part-time (n=9), Unemployed (n=34)
Country of residence	UK (n=32), USA (n=9), Australia (n=4), Canada (n=3), France (n=1), Germany (n=1)
Current pain intensity level * (Range, Mean, SD)	0-10, 6.14 (2.13)
Duration of receipt of CRPS diagnosis (Range, Mean, SD)	0-11 years, 4.78 (3.00)

* Measured using 11-point Numeric Pain Rating Scale (NPRS). ‘0’ representing “No pain” and ‘10’ representing “Worst possible pain”.

Table 2. Affect codes and operational definitions of codes included in the modified version of the Narrative Coding Scheme

Code	Definition	Instructions
Intensity of positive affect	To what extent the participant expresses positive emotions	<i>Judge emotionality on a continuum from very emotive to emotionally flat. An <u>S</u> who is very emotional may use very emotive words, such as happy, excited, excellent, etc. An <u>S</u> who is emotionally flat will express no emotions of any kind, and typically use non-emotive, neutral words.</i>
Frequency of positive affect	How often the participant expresses positive emotion	<i>This is how often the individual exhibits positive affect throughout the story. Examples of positive affect include references to feelings of happiness, or excitability.</i>
Intensity of negative affect	To what extent the participant expresses negative emotions	<i>Judge emotionality on a continuum from very emotive to emotionally flat. An <u>S</u> who is very emotional may use negative emotive words, such as to express feelings of depression or sadness, <u>or</u> anger and aggression. An <u>S</u> who is emotionally flat typically will express no emotions of any kind, and typically use non-emotive, neutral words. This can also include expression of negative affect e.g. crying, tears, but these must not be an expression of pain.</i>
Frequency of negative affect	How often the participant expresses negative emotions	<i>This is how often the individual exhibits negative affect during the story. Examples of negative affect include references to being depressed, sad, tearful, or angry.</i>

Table 3. Content codes and operational definitions of codes included in the modified version of the Narrative Coding Scheme

Code	Definition	Instructions
Threat/anxiety	The participant expresses anxiety or fearfulness in their narrative	This may be statements pertaining to themselves, their family or the world at large and involve feelings of fear, or present- or future-oriented anxiety that may manifest cognitively (e.g., pertaining to beliefs about bad things happening or worries), socially (e.g., avoidance of people) or physically (e.g., tension, stomach aches, avoidance of places, sleep difficulties). The § also may describe catastrophic thinking in which they magnify the threat value of pain or a distressing event, perseverate on threatening details, or perceive themselves as being helpless
Benefit finding/Growth	The participant discusses positive changes that have resulted from their struggle.	The source of growth and benefit has to be from the pain itself, identifying positive outcomes in the face of adversity. The participant indicates that they have used the struggle of their pain to adaptively find meaning/growth from the situation. Benefits and growth may be related to the individual, family or broader, more existential purposes (e.g., “Dealing with my pain has taught me what is really important in life”). Also, count comparative statements (e.g., “it could be so much worse”)
Pessimism/Optimism	<u>Optimism:</u> The individual expresses a belief that things turned out well for them, their child or for their family, or will turn out well in the future. <u>Pessimism:</u> The individual expresses a belief that things turned out poorly for them,	Participants may make statements indicating that they believe the pain will get better or that they will become more functional. They may express that they believe that they will eventually achieve something (e.g., job, getting back to school). Alternatively, they may make statements indicating they do not

	their child or for their family, or will turn out well in the future	believe that their pain or functioning can get better. Note: as the individual is reflecting on a pain memory, this code is not solely future-focused; it could also be that the individual did or did not take anything positive out of the pain experience they are reflecting on.
Coping	The individual refers to coping strategies that they employed during the pain experience. These can be either Attention-focused (strategies that involved attending directly to the pain) or Not-attention focused (strategies that involved not attending to the pain).	This can come from the individual, or through more indirect routes, such as the environment and the people around the. Note: certain individuals may refer to BOTH types of coping strategies. In this instance, code for the strategy that is referred to the most; for example, if an individual refers to five attention-focused and three not attention-focused, please code as attention-focused.
Social: Type of Observer	The individual refers to the type of observer(s) that were present at the pain experience.	This can be either the presence of a loved one, the presence of a stranger or being alone.

Table 4. Codes included in the deductive code manual.

Label and definition	Distress (Noel et al, 2016)	Resilience (Noel et al, 2016)
Definition of code	Feelings of extreme upset or anxiety.	Ability to find positivity in the face of adversity.
Description of code	Incidence of the individual recalling feelings of distress caused by the pain or by events surrounding the pain, to themselves or others.	Incidence of the individual recalling positive outcomes caused by the pain or by events surrounding the pain, to themselves or others.
Example data	“There was lots of others around which makes being in pain worse as u don’t want them to see u upset or in pain as it kinda feels like weakness and its embarrassing” (CYP4)	“...decided after that to change the way I used to heal myself. I stopped taking so much drugs and started to accept the fact I had pain” (CYP38)

Table 5. Descriptive statistics for adolescent pain narrative codes.

Pain Narrative Code	Mean (SD) or Frequency (%)	Possible Range	Actual Range	Percentile (Score)
Positive affect intensity	1.20 (.53)	1-5	1-3	25 (1) 50 (1) 75 (1)
Positive affect frequency	1.22 (.61)	1-5	1-4	25 (1) 50 (1) 75 (1)
Negative affect intensity	2.80 (1.52)	1-5	1-5	25 (1) 50 (3) 75 (4)
Negative affect frequency	2.59 (1.50)	1-5	1-5	25 (1) 50 (2) 75 (4)
Threat/Anxiety	1.55 (.92)	1-5	1-4	25 (1) 50 (1) 75 (2)
Benefit Finding/Growth	1.39 (.75)	1-5	1-4	25 (1) 50 (1) 75 (2)
Optimism/Pessimism	2.82 (.99)	1-5	1-5	25 (2) 50 (3) 75 (4)
Coping Style				
Attention-focused	33 (64.7%)			
Non-attention	18 (35.3%)			
Observer Type				
Loved one	46 (90.2%)			
Stranger	3 (5.9%)			
Alone	2 (3.9%)			

Table 6. Correlations between adolescent pain narrative codes (n=50).

Variables	1	2	3	4	5	6	7
1 Positive Affect Intensity	1.00	.86**	-.24	-.20	-.10	.31*	.30*
2 Positive Affect Frequency		1.00	-.19	-.19	-.07	.38**	.33*
3 Negative Affect Intensity			1.00	.89**	.25	-.20	-.29*
4 Negative Affect Frequency				1.00	.40**	-.20	-.41**
5 Threat/Anxiety					1.00	-.09	-.42**
6 Benefit Finding/Growth						1.00	.50**
7 Optimism/Pessimism							1.00

Note: * p< .05, ** p<. 01