

Poetry

Black Pain, Black Voices: A Poetic Reckoning in Youth Pain Care

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Abstract

Background: Understanding conversations about pain management between healthcare professionals [e.g., doctors, nurses, psychologists] and Black youth and their caregivers is critical, as these encounters are shaped by systemic racism within the Canadian healthcare system. Consequently, these conversations can render Black youth unseen or unheard within healthcare settings. Recognizing the importance of creative knowledge mobilization strategies, particularly arts-based approaches that center participant voices, the purpose of this work was to translate the themes of invisibility and dismissiveness experienced by Black youth and their caregivers into free-verse poems constructed exclusively from the words of Black study participants.

Methods: This arts-based knowledge mobilization piece extends the findings from a completed qualitative narrative inquiry study involving interviews with five Black youth (ages 12–18) and their caregivers about their experiences of anti-Black racism during pain management conversations with healthcare professionals (Matthews et al., 2026). The study generated two central themes: the healthcare system rendering Black youth as invisible and healthcare professionals dismissing Black youth. By using free-verse poetry as a distinct knowledge mobilization output rather than a data analysis method, the researchers re-presented the themes from this separate narrative study to ethically center participant voices and reveal emotional depths often silenced by conventional research. One researcher selected and arranged participant interview quotes into free-verse poems that described the themes generated from the narrative study, preserving cadence, repetition, and emotional nuance. The process was iterative and collaborative: the researcher discussed drafts with other research team members, which included a patient partner, and poems were shared with participants for clarification and approval to ensure fidelity to their voices.

Findings: The resulting poems foreground participants' lived experiences of anti-Black racism in pain management conversations with Canadian healthcare professionals. The first poem, *Disappearing Act*, is voiced through youth perspectives and addresses invisibility. The second poem, *Heavy Shoulders*, is voiced through caregiver perspectives and addresses dismissal. The process of translating interview text into poetry highlighted the relational and embodied dimensions of pain, making visible dynamics of dismissal, invisibility, resistance, and advocacy that may be obscured in traditional narrative summaries. The poems give voice to participants in a way that complements narrative inquiry, allowing the reader to engage with the emotional and structural realities of their experiences.

Significance: Through their refusal of imposed boundaries, the poems display the impact of anti-Black racism experienced in pain management conversations. By positioning Black families' stories as sites of resistance, this knowledge mobilization output demonstrates how free-verse poetry enables the sharing of knowledge through valuing embodied ways of knowing.

Output: As community-facing knowledge mobilization outputs, these poems were performed and presented at a conference (Matthews et al., 2025), demonstrating the potential of poetry as a meaningful medium for sharing qualitative health research findings while maintaining fidelity to participants lived experiences.

Keywords: poetry; racism; pain; youth; knowledge mobilization

Introduction

This knowledge mobilization output includes two poems, *Disappearing Act* and *Heavy Shoulders*. Both poems were generated from a separate narrative inquiry study, with ethics approval from the IWK Health Research Ethics Board (#1031001), examining anti-Black racism in pain management conversations between Black youth, their caregivers, and healthcare professionals in Canada (Matthews et al., 2026). Guided by Critical Race Theory (Crenshaw et al., 1995) and informed by the Mechanisms of Injustice Model (Mathur et al., 2021), the research centered the experiences of five Black caregiver-youth dyads to understand how racism shapes discussions about pain care. Narrative analysis identified patterns of invisibility and dismissal within clinical encounters, demonstrating how anti-Black racism structures whose pain is legitimized and whose voices are minimized. The narrative inquiry study is complete, and the poetry presented here is a separate knowledge mobilization output. While narrative inquiry attends to experience through story, scholarly writing often requires compression and abstraction. Poetry offers a complementary mode of mobilization that resists that compression. By preserving cadence and repetition, free-verse poetry enables participants' words to be encountered as embodied testimony rather than solely as thematic illustration.

The poems are researcher-initiated and researcher-written, created entirely from participants' words drawn from the verbatim interview transcripts. They were developed as a knowledge mobilization activity with permission from participants and in collaboration with the study's patient partner. Participants were not asked to engage in additional creative labour beyond their original interviews. The poetry was not used to generate or analyze data and does not constitute "generated narrative" within the study. Instead, it re-presents findings that have already been analyzed. The poems convey both caregiver and youth experiences of anti-Black

racism during conversations about pain management with healthcare professionals, revealing feelings of dismissal and invisibility alongside expressions of resistance.

The poems are also aligned with the theoretical commitments of Critical Race Theory (Crenshaw et al., 1995) and the Mechanisms of Injustice Model (Mathur et al., 2021) which served as a guiding framework for the narrative inquiry study by Matthews et al. (2026). In Critical Race Theory, racism is positioned as systemic and embedded within institutions (Crenshaw et al., 1995), while the Mechanisms of Injustice Model illuminates how pain inequities are reproduced through systemic practices that appear neutral yet have detrimental effects to racialized persons' pain management (Mathur et al., 2021). As a knowledge mobilization practice, poetry challenges Western assumptions that legitimate health knowledge must be detached, objective, and quantifiable. Instead, it centers emotional truth and relational impact as credible forms of evidence, thereby disrupting dominant Western ways of knowing. By foregrounding ways of knowing that resist narratives framing pain as individual, binary, or apolitical, the poems situate pain within structures of power. Biomedical paradigms often conceptualize pain as an individual physiological event, assessed through scales and managed through standardized protocols, which can obscure how racism and intergenerational histories of medical harm shape clinical interactions. Through fragmentation and juxtaposition, the poems reveal how dismissal and invisibility are produced in ordinary encounters, rendering pain not merely as a bodily symptom but as an experience mediated by racism, age, and institutional norms.

The authors begin with *Disappearing Act* and then follow with *Heavy Shoulders*. The first poem, *Disappearing Act*, is voiced through youth perspectives and addresses invisibility. The second poem, *Heavy Shoulders*, is voiced through caregiver perspectives and addresses dismissal. The readers are then left with the power of poetry.

Disappearing Act

In the waiting room, I sit.
Chest tight, breath thin,
each inhale barely holding me up from within
But you still don't believe my pain.

You look right through me,
I'm a shadow, not skin
my mother crying, "no empathy",
You give me nothing for my pain.

Seven hours pass
I slump beneath your silence

While my Black shoulders shrug
It's just like any other day
The Doctor will never see my pain.

Heavy Shoulders

The Doctor judges me and her.
Annoyance disguised by calm words,
while they explain my daughter's pain away.

As my daughter's voice shakes,
mine must remain steady
because I know how these people operate.
So despite the burden of responsibility,
and the anger within me,
it's a sacrifice I am willing to make.

I know that I must reiterate,
that I am not asking for special treatment,
much to their dismay.
I am simply advocating for equal treatment,
as a caregiver for a dismissed Black child in pain.

Acknowledgments

Bianca Matthews participated in this work as a Black female-identifying graduate student in Canada, conducting research in a primarily White institution that teaches psychological/health practices centering White voices. As a Black person who is passionate about health equity, she is working towards unlearning this institutional knowledge to further ground her research and uplift Black voices. She hopes to lend a hand in creating a healthcare system that centres cultural safety and humility. The authors also wish to acknowledge Dr. Justine Dol for her guidance and feedback throughout the narrative inquiry study (Matthews et al., 2026), Brittany Cormier for assisting with study administration, and Isabel Jordan for guiding patient partnership. In addition, we wish to thank the Health Association of African Canadians, the Sickle Cell Disease Association of Canada, Horace and Nicole Matthews, Dr. OmiSoore Dryden (Dalhousie

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Conflicts of Interest

The authors have no conflicts of interest to declare.

Contribution Statement

All authors are listed and have contributed substantially to the poem.

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