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EXPERIENCES OF CHRONIC PAIN IN WESTON-SUPER-MARE: CHRONIC PAIN SURVEY REPORT

Authors: Mahira Budhraja & Dr. Jenny Lewis

Contents

Ms. Mahira Budhraja

Research associate in health inequalities in Long Term Conditions and Trainee Health Psychologist, Centre for Health and Clinical Research, University of the West of England Bristol.
Funded by the Wallscourt Foundation.

Dr. Jenny Lewis

Associate Professor in Clinical Research at the School of Health and Social Wellbeing,
University of the West of England, Bristol.
Director of Chronic Pain Health Integration Team (HIT), Bristol Health Partners.
Senior Clinical Occupational Therapist, Bath National Pain Centre, Royal United Hospitals, NHS Trust, Bath, UK

Executive Summary

This primary care network-wide survey aimed to capture patients' experiences living with chronic pain within the Weston-Super-Mare, Worle and Villages localities. Questions included pharmacological and non-pharmacological methods of pain management, pain education and experiences with attending pain clinics. The survey was shared with patients living with chronic pain via digital means by the Weston Pain Clinic and Pier Health Group. 2298 patients completed this survey between July and October 2025.

Key Points

- ➢ 75% (n = 1717) of respondents had not attended or been referred to a pain clinic.
- ➢ 65% (n = 1488) had never received pain education
- ➢ 50% (n=1145) wanted to have further conversations or learn more about pain
- ➢ 45% (n = 611) of those within working age, were not working (n=1358, 59% of the total respondents)

- ➢ Most participants (80%; n = 1831) were using medication to manage their pain
- ➢ Of these, approximately 30% wanted to reduce their medication and 29% did not know how or with whom to start a conversation about medication reduction

- ➢ 74% (n = 1694) of participants were already using a range on non-pharmacological methods of pain management and were open to trying other forms

Methods

This survey was disseminated across Weston Super Mare, Worle and Villages through the Weston Pain Clinic and the Pier Health Group Primary Care Network between July and October 2025. The survey was distributed via a text message from the patients GP practice with a link leading them to the survey.

Selection criteria

Participants were identified on a GP platform using the following criteria:

Criteria 1 - conditions very strongly associated with chronic pain[1]

Includes all people with a condition or diagnosis that almost always results in the individual having chronic pain. These 12 conditions have been labelled as 'tier 1' conditions.

Ankylosing spondylitis	*Complex Regional Pain syndrome*
Chronic low back pain	*Fibromyalgia*
Chronic osteomyelitis	*Fibrositis*
Chronic pain	*Periostitis*
Rheumatic pain	*Rheumatoid arthritis*
Rheumatism	*Still's disease*

This encompassed approximately 15% - 20% of the registered population at the Pier Health Group Primary care network, estimated to be approximately 15,000 - 20,000 patients. 2298 participants responded to this survey of which nine were identified as duplicates and removed. Therefore, data shared here is reflective of 2289 unique responses. A response rate of 15% to 11% is estimated based on the invitations sent and responses received.

The survey contained a mixture of open ended and multiple-choice responses which have been summarised below. Open ended responses were categorised into the following sections detailed within this report.

Results

Demographics

1. 65% of respondents had been living with pain for over 5 years and most participants tended to be between the ages of 35 and 74 years old (74%).
2. 73% of respondents were women and approximately 1% identified as non-binary.
3. Most participants were white British (96%). The remaining 4% were spread across ethnic groups (including multiple ethnic groups, Black/African/Caribbean/Black British and Asian/Asian British).
4. 63% of respondents were not employed at the time of the survey.

> Of the **59% who were of working age** (Calculated as those under 64 years), only **45% were currently not working**.

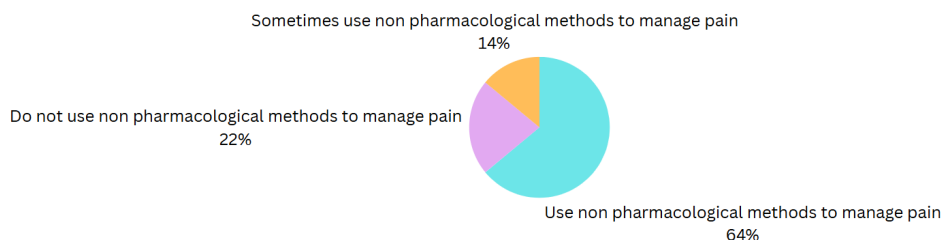Of working age not presently working 45%
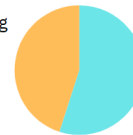
Of working age presently working 55%

Key Findings

Medication use and deprescribing

- 80% of participants were using medication to manage their pain
- Of these, approximately 30% wanted to reduce their medication
- 29% of people who wished to reduce their medication did not know how or with whom to start this conversation

Nonpharmacological treatments

Sometimes use non pharmacological methods to manage pain 14%

Do not use non pharmacological methods to manage pain 22%

Use non pharmacological methods to manage pain 64%

> 2**2% used medication only** to manage their pain

Non-pharmacological pain management techniques included:

1. Exercise (50%)
2. Physical agents like acupuncture or TENS machines (14%)
3. Hot or cold therapy (10%)
4. Diet (9%)

5. Other approaches included cannabis, alcohol, relaxation, meditation, mindfulness, breathing techniques, pacing, distractions, using braces, supports or compression devices and massages

Approximately **68% said they would want to try movement-based approaches** to manage their pain, **46% would like to try diet management** and **43% stress management.**

> **47% said they wanted to try psychological support** to manage their pain.
>
> Of these, 43% wanted 1-1 support & 29% would like to try a pain café

Interested in psychological support
22%

Not interested in psychological support
53%

Might be interested in psychological support
25%
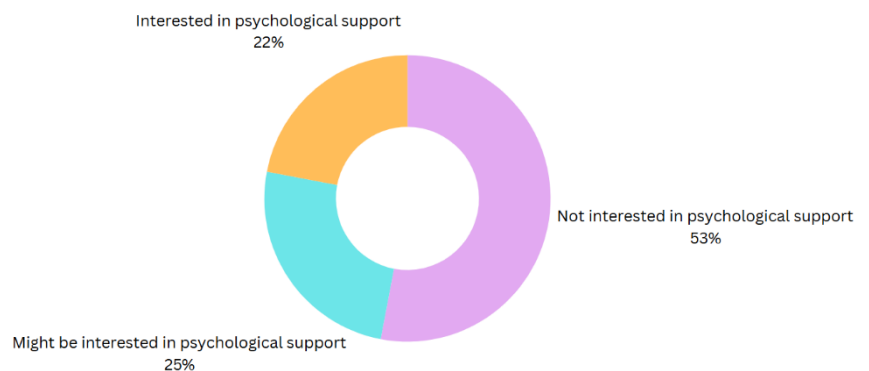
When asked what else they'd like to try:

1. 4% said anything, and 3% said they didn't know what else was available.
2. Approximately 3% said they needed some form of medical procedure such as surgery or injections, 2% said they needed medication of some kind 1% said they'd like to try some form of physical activity.
3. Other responses included acupuncture, osteopathy, chiropractors, hypnotherapy, cannabis, peer support, and psychological support among others.

Pain education

> **65% had never received pain education**
>
> **40% had used online resources** to learn more about pain.

Received pain education
35%

Did not receive pain education
65%
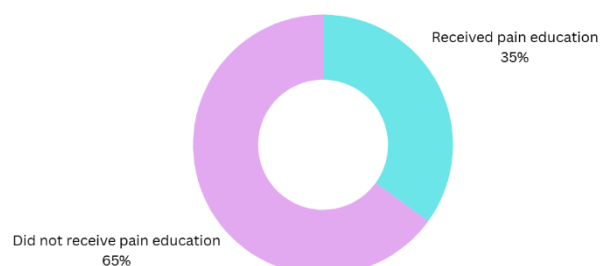
Of the 35% that had received pain education included;

- **Internet**: general internet searches, NHS websites, Charity Websites (like versus arthritis etc.)

- **Social media:** YouTube, Facebook groups and forums
- Health professionals
- Peers

About 50% of respondents said they would like to **learn more about** their **pain**.

Pain Clinic experiences

Attended a pain clinic
23%

Did not attend a pain clinic
75%
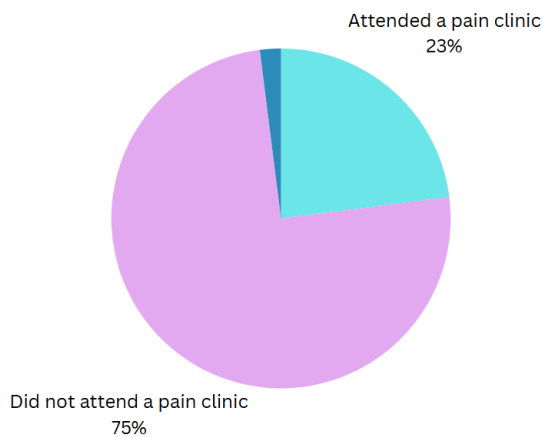
75% of respondents had **not attended a pain clinic**.

2% had been offered but declined, reasons included:

1. not being able to travel to Bristol
2. believed that it wouldn't be helpful, or it had nothing new to offer
3. mental health issues were reported as a barrier to attending

For those who had been to a pain clinic

1. Respondents attended in equal numbers across Southmead, Weston General and Bristol Central Health Clinic
2. **Satisfaction with the pain clinic** was calculated on a scale of 1 –10 (1 being completely unsatisfactory and 10 being very satisfactory) the **average score was 5.7 suggesting moderate satisfaction** with the pain clinic.

Conclusions

This survey reports findings from 2289 people living with chronic pain in Weston-Super-Mare and localities, approximately 10% of the affected population within this primary care network. Findings suggest that people living with pain use multiple methods to manage it, including pharmacological and non-pharmacological methods to manage their pain. Most respondents had never been to a pain clinic. Although most respondents use medication for pain relief, a sizeable proportion want to cut down their medication use but didn't know how. Over a third of those within working age were not employed at the time of the survey.

Most people reported not receiving any pain education and would like an opportunity to talk about their pain. Nearly half wanted to learn more and have further conversations about their pain and how to reduce medication.

References

1. Hafezparast, N., Bragan Turner, E., Dunbar-Rees, R., Vusirikala, A., Vodden, A., de La Morinière, V., Yeo, K., Dodhia, H., Durbaba, S., Shetty, S. and Ashworth, M., 2023. Identifying populations with chronic pain in primary care: developing an algorithm and logic rules applied to coded primary care diagnostic and medication data. BMC Primary Care, 24(1), p.184.