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1 IN 2 WOMEN WITH BACK PAIN REPORT MENTAL HEALTH IMPACTS AS COST OF LIVING PREVENTS THEM SEEKING TREATMENT

National Spinal Health Month - A Healthy Spine Supports A Healthy Mind

TODAY, the Australian Chiropractors Association (ACA) released new national survey data revealing that 86.7% of Australian women suffered back pain in the past 12 months.

Of those women afflicted 57.5% experienced mental fatigue, 54.8% reported it added to their mental load, and 47.6% experienced a moderate-to-extreme mental health impact as a result of back pain.

The survey also highlighted spinal health issues in the context of family households revealing that back pain extends well beyond individual sufferers affecting 9.7 million Australian households (89.7%) with respondents reporting that in 5.4% of households a child under 18 is also living with back pain.

The new data obtained from the 2026 *Spinal Health Survey*, an independent national survey by *Pureprofile* (May 2026) of 1,040 Australian adults (528 Women and 512 Males), revealed that although the prevalence is slightly lower than men (87.5%), women experience significantly higher psychological consequences due to back pain with 47.6% of women with back pain in the last year reporting moderate-to-extreme mental health impact, compared to 44.2% of men.

ACA Women In Chiropractic Chair Dr Ali Young said, "Although it's well documented that back pain and mental health conditions are linked and can cause an impaired quality of life, the survey data is unambiguous with women suffering from back pain reporting higher rates of mental exhaustion, sleep disruption, depression and mental load compared to men; and were less likely to have sought diagnosis or professional treatment.

"With 53.7% of women suffering back pain reporting they've never sought a formal medical diagnosis, saying the barriers partly financial; 49.7% of women said the cost of living has prevented them from seeking treatment which was 10.9 percentage points (a relative increase of 28.1%) higher than men (38.8%).

"The survey results should prompt a serious national conversation about how women can improve their spinal health because back pain is not just a musculoskeletal problem; it incorporates mental health, equity and quality-of-life issues that deserve far greater attention," she said.

The mental health burden of back pain in Australia shows the gender gap in mental health impact to be widest in the 25–30 age group, with 63.5% of women aged 25–30 having back pain reporting moderate-to-extreme mental health impact compared to 44.7% of men in the same bracket - an 18.8 percentage point difference and the largest gender gap of any age group in the survey.

The survey also revealed that women are significantly more likely to suffer chronic pain than men with 46.5% of women with back pain reporting having chronic pain compared with 41.6% of men, while among women aged 41–50, the chronic pain rate reaches 46.8% - 13.1 percentage points above men in the same bracket.

"With numerous studies finding people living with chronic back pain are at heightened risk of experiencing mental health problems including a study by the International Association for the Study of Pain (2021), the significantly high number of women reporting chronic back pain is concerning," said Dr Young.

"Women are managing back pain alongside the mental, physical and financial demands of family life with the data showing the combined load is substantial," said Dr Young.

Women reported that they were more likely than men to cite caregiving and household responsibilities as contributing to their back pain with 16.4% of women nominating housework as a trigger (vs 9.5% of men), and 7.6% cited caring for a child, elderly person or person with disability.

Pregnancy is also reported as a contributing factor by 6.9% of women with back pain, with the physical demands of pregnancy followed by the sustained physical demands of early parenthood that represents a significant risk window for the development or worsening of spinal conditions.

In women, depression or anxiety from back pain peaked in the 51–60 age group at 17.1% - a critical age that coincides with peak income-earning, caring responsibilities and hormonal changes.

“It’s recognised by healthcare professionals that chronic back pain can lead to psychological and social problems when depressive symptoms worsen back pain and increase the disability associated with it, which in turn can exacerbate back pain’s negative impact on the mental health of sufferers,” she said.

“The vicious cycle of back pain triggering a mental health problem can lead to the original back pain problem worsening and continue to accelerate unabated in the absence of interventions to break the pain cycle, while the costs of musculoskeletal disorders (MSDs), including back pain, to the Australian economy continue to rise substantially,” Dr Young said.

PainAustralia reports the annual cost to the Australian economy for chronic pain is \$73.2 billion, and Musculoskeletal Australia reporting MSDs costing \$55.1 billion, including direct health costs, lost productivity and reduced quality of life.

With 6.1 million Australians already affected by MSDs, according to a Deloitte Access Economics (2019) report the rising cost of MSDs in Australia presents a strong case for a proactive, strategic response to MSD management (including back pain).

Research by Monash University’s School of Public Health and Preventive Medicine (August 2025) has projected chronic back pain will cost the Australian economy \$638 billion in lost productivity over the next decade, and that if we fail to tackle common back pain through promoting advice to stay active and receive appropriate care, by 2033, 3.2 million working-age Australians will be living with chronic back pain, leading to a loss of approximately 4.6 per cent to Australia’s Gross Domestic Product (GDP) over a 10-year period.

“With back pain posing a major public health burden impacting millions of women across Australia and long-term chronic back disorders projected to cost the Australian economy an estimated \$638 billion in lost productivity over the next decade; greater awareness of the back pain burden women carry, early intervention and improved affordability would make a meaningful difference to the health and wellbeing of Australian women and their families,” Dr Young said.

During Week 3 of National Spinal Health Month (15–21 June), the ACA is encouraging women and families to prioritise their spinal health and seek evidence-based, drug-free healthcare to help prevent developing a chronic condition and minimise the impact back pain has on their mental health.

Women are encouraged to access free spinal health resources, practical guides and information for families and schools at www.spinalhealth.org.au to improve their spinal health and overall wellbeing.

– ENDS –

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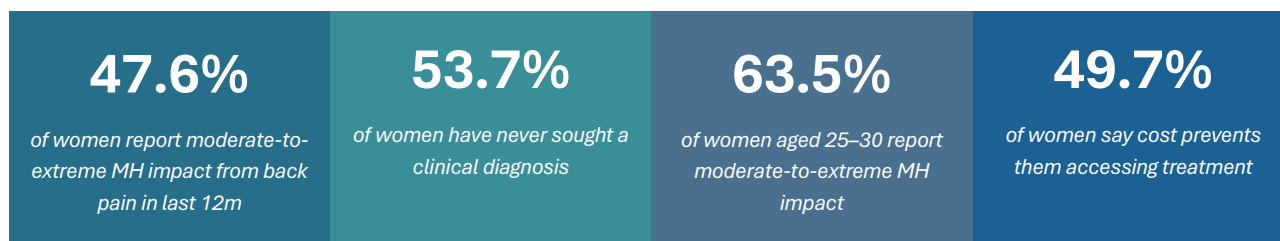


JOURNALIST NOTES

AUSTRALIAN WOMEN'S BACK PAIN - DATA AND BACKGROUND

1. National Independent Consumer Survey | n=1,040 Australian adults | Pureprofile, May 2026
2. National Member Survey | n=110 Members – 75% with 11+ Years clinical experience | ACA, May 2026

Download complete report for comprehensive data and analysis: <https://bit.ly/Back-Pain-Australia-2026>



WOMEN AND BACK PAIN: THE MENTAL HEALTH BURDEN

- ⦿ **IN LAST 12 MONTHS:**
 - **86.7% of Australian women report backpain in last 12 months.** While prevalence is slightly lower than men (87.5%), women experience higher psychological consequences: 47.6% of women with back pain report moderate-to-extreme mental health impact, compared with 44.2% of men
- ⦿ **IN LIFETIME:**
 - **90.0% of Australian women report backpain in lifetime.** The prevalence is slightly lower than men (92.4%)
 - Women experience significantly higher psychological consequences: 45.9% of women with back pain report moderate-to-extreme mental health impact, compared with 41.9% of men.
 - 67.2% of all female back pain sufferers experience some level of mental health impact compared to 65.5% of men.
- ⦿ **Women report substantially higher rates than men across key psychological measures:** mental exhaustion 68.4% higher, lost sleep 43.2% higher, and depression or feeling low 42.1% higher. More than half of women with back pain (52.8%) say it adds to their daily mental load.
- ⦿ **The gender gap in mental health impact is widest in the 25–30 age group:** 63.5% of women aged 25–30 with back pain report moderate-to-extreme MH impact, compared with 44.7% of men in the same bracket — an 18.8 percentage point difference and the largest gender gap of any age group in the survey.
- ⦿ **Women are significantly more likely to have chronic pain than men:** 46.5% of women with back pain have chronic pain, compared with 41.6% of men. Among women aged 41–50, the chronic pain rate reaches 46.8% — 13.1 percentage points above men in the same decade.
- ⦿ **Among women aged 71–80, 51.1% have chronic pain, compared with 32.6% of men** — an 18.5 percentage point gap and the largest of any age/gender comparison in the survey. Women with disc injuries are three times more likely than men to rate their pain as severe (35.5% vs 11.8%).
- ⦿ **Depression or anxiety from back pain peaks in the 51–60 age group for women at 17.1%** — a critical decade that coincides with peak income-earning, caring responsibilities and hormonal change.

ACCESS TO CARE AND DIAGNOSIS

- ⦿ **53.7% of women with back pain have never sought a formal medical diagnosis** — the highest undiagnosed rate of any demographic group. The barriers are partly financial: 49.7% of women say cost of living has prevented them seeking treatment, compared with 38.8% of men — a 28% higher rate.
- ⦿ **For chiropractic care specifically, 54.7% of women cite cost as a barrier** — significantly above the national average of 49.6%. Women are less likely to have their back pain formally managed, and more likely to be self-managing a complex, psychologically burdensome condition without professional guidance.
- ⦿ **43.8% of women have consulted a chiropractor at some point in their lives.** Among those who consulted for back pain, 77.3% reported improvement and 39.2% significantly improved or totally resolved their condition. Despite this, declining consultation rates driven by cost pressures mean fewer women are accessing this care.

BACK PAIN AND FAMILY HEALTH

- **Back pain extends well beyond individual sufferers.** The 2026 survey found that back pain affects potentially 9.7 million Australian households — 89.7% of all homes. In 5.4% of households, a child under 18 is also living with back pain.
- **Women are more likely than men to cite caregiving and household responsibilities** as contributing to their back pain: 16.4% of women nominate housework as a trigger (vs 9.5% of men), and 7.6% cite caring for a child, elderly person or person with disability.
- **Pregnancy is cited as a contributing factor by 6.9% of women with back pain.** The physical demands of pregnancy, followed by the sustained physical demands of early parenthood, represent a significant risk window for the development or worsening of spinal conditions.
- **Chiropractors report that back pain presentations span all ages and family stages:** 67% of ACA member practices see children with back pain. 50% of chiropractors report that upper back pain more commonly affects women patients, and 34% say the same for mid back pain — suggesting women present with a broader and more complex range of conditions.

PAIN MEDICATION USE: PATTERNS AND CLINICAL EVIDENCE

- **85.0%** of low back pain sufferers use over-the-counter pain medication - up from 81.0% in 2024. **10.8%** use it daily. **60.9%** use prescription medication; **8.8%** daily.
- **37.9%** use OTC medication weekly or more; more than one-in-four (**27.7%**) use prescription medication at the same rate.
- Seniors report the highest daily rates: **15.7%** OTC daily, **14.7%** prescription daily.
- The University of Sydney's OPAL trial (**The Lancet, 2023**) found opioids no more effective than placebo for low back pain. The **WHO's 2023 guidelines** recommend non-pharmacological approaches and advise against routine medication as a primary or long-term response.

ACA MEMBER – BACK PAIN PRESENTATIONS IN CLINICAL PRACTICE DATA:

- Over-reliance on passive treatments is identified as a clinical challenge by 26% of chiropractors.
- Exercise rehabilitation (72%) and ergonomic assessment (67%) are among the most widely used treatment modalities.

COMPARATIVE BACK PAIN & MENTAL HEALTH SUMMARY: WOMEN, MEN & SENIORS

The following tables provide a consolidated comparison of key mental health and impact metrics across all three population groups: the raw number of back pain sufferers who reported that outcome; the percentage of back pain sufferers within the group.

Table A - Back Pain Sufferers: During Lifetime (Low, Mid, Upper, Non Specific)

Metric	ALL BP (n=948)			WOMEN (n=475)			MEN (n=473)			SENIORS (n=261)		
	n	%BP	%All	n	%BP	%All	n	%BP	%All	n	%BP	%All
% of all 1040 Respondents	948		91.2%	475		90.0%	473		92.4%			
MENTAL HEALTH IMPACT												
Moderate to Extreme impact	416	43.9%	40%	218	45.9%	41.3%	198	41.9%	38.7%	79	30.3%	26.4%
<i>Any level of impact (incl. slight)</i>	629	66.4%	60.5%	319	67.2%	60.4%	310	65.5%	60.5%	139	53.3%	46.5%
CHRONIC PAIN												
Chronic pain (3+ months)	418	44.1%	40.2%	221	46.5%	41.9%	197	41.6%	38.5%	126	48.3%	42.1%
QUALITY OF LIFE												
Often / Always impacted	276	29.1%	26.5%	138	29.1%	26.1%	138	29.2%	27%	75	28.7%	25.1%
<i>Any level of impact</i>	767	80.9%	73.8%	382	80.4%	72.3%	385	81.4%	75.2%	217	83.1%	72.6%
MENTAL FATIGUE												
Often / Always	247	26.1%	23.8%	131	27.6%	24.8%	116	24.5%	22.7%	49	18.8%	16.4%
<i>Any level (incl. rarely / sometimes)</i>	686	72.4%	66%	354	74.5%	67%	332	70.2%	64.8%	169	64.8%	56.5%
MENTAL LOAD												
Adds to mental load	471	49.7%	45.3%	251	52.8%	47.5%	220	46.5%	43%	100	38.3%	33.4%

Metric	ALL BP (n=948)			WOMEN (n=475)			MEN (n=473)			SENIORS (n=261)		
	n	%BP	%All	n	%BP	%All	n	%BP	%All	n	%BP	%All
% of all 1040 Respondents	948		91.2%	475		90.0%	473		92.4%			
LIFE IMPACTS												
Struggled with depression / anxiety	97	10.2%	9.3%	53	11.2%	10%	44	9.3%	8.6%	32	12.3%	10.7%
Less physically mobile	240	25.3%	23.1%	118	24.8%	22.3%	122	25.8%	23.8%	111	42.5%	37.1%
Difficulty concentrating	215	22.7%	20.7%	100	21.1%	18.9%	115	24.3%	22.5%	39	14.9%	13%
Mental exhaustion	145	15.3%	13.9%	91	19.2%	17.2%	54	11.4%	10.5%	30	11.5%	10%

Table B - Back Pain Sufferers: Last 12 Months (Low, Mid, Upper, Non Specific)

Metric	ALL BP (n=906)			WOMEN (n=458)			MEN (n=448)			SENIORS (n=249)		
	n	%BP	%All	n	%BP	%All	n	%BP	%All	n	%BP	%All
% of all respondents	906		87.1%	458		86.7%	448		87.5%			
MENTAL HEALTH IMPACT												
Moderate to Extreme impact	416	45.9%	40%	218	47.6%	41.3%	198	44.2%	38.7%	79	31.7%	26.4%
<i>Any level of impact (incl. slight)</i>	629	69.4%	60.5%	319	69.7%	60.4%	310	69.2%	60.5%	139	55.8%	46.5%
CHRONIC PAIN												
Chronic pain (3+ months)	418	46.1%	40.2%	221	48.3%	41.9%	197	44%	38.5%	126	50.6%	42.1%
QUALITY OF LIFE												
Often / Always impacted	276	30.5%	26.5%	138	30.1%	26.1%	138	30.8%	27%	75	30.1%	25.1%
<i>Any level of impact</i>	767	84.7%	73.8%	382	83.4%	72.3%	385	85.9%	75.2%	217	87.1%	72.6%
MENTAL FATIGUE												
Often / Always	247	27.3%	23.8%	131	28.6%	24.8%	116	25.9%	22.7%	49	19.7%	16.4%
<i>Any level (incl. rarely / sometimes)</i>	686	75.7%	66%	354	77.3%	67%	332	74.1%	64.8%	169	67.9%	56.5%
MENTAL LOAD												
Adds to mental load	471	52%	45.3%	251	54.8%	47.5%	220	49.1%	43%	100	40.2%	33.4%
LIFE IMPACTS												
Struggled with depression / anxiety	97	10.7%	9.3%	53	11.6%	10%	44	9.8%	8.6%	32	12.9%	10.7%
Less physically mobile	240	26.5%	23.1%	118	25.8%	22.3%	122	27.2%	23.8%	111	44.6%	37.1%
Difficulty concentrating	215	23.7%	20.7%	100	21.8%	18.9%	115	25.7%	22.5%	39	15.7%	13%
Mental exhaustion	145	16%	13.9%	91	19.9%	17.2%	54	12.1%	10.5%	30	12%	10%

Note: n counts in Tables A and B are identical across all metrics. The 42 respondents with back pain in lifetime but no back pain in the last 12 months (i.e. their pain has resolved) recorded zero responses across all measures, consistent with recovery. The higher percentages in Part B reflect the smaller denominator: Part A expresses outcomes as a proportion of all BP lifetime sufferers (n=948), while Part B expresses the same outcomes as a proportion of those with active BP in the last 12 months (n=906). %All = percentage of all survey respondents (n=1,040). Metrics use 4 back conditions (LBP, Mid, Upper, Non-specific back pain).

Dr Ali Young – Western Australia

Dr Ali Young is a Chiropractor with over 23 years' experience working specifically with families, children and women. She has owned practices and worked in both Western Australia and Queensland, and loves taking care of those children who love that extra jolt of frivolity, playfulness and joy in their healthcare. She is an advocate for Working Mothers, with her book, *Work. Mama. Life* widely received upon its publication in 2022. She is a mother of two and now works with female chiropractors inside her coaching and membership programs, combining these two great loves with her chiropractic work. She is a sought-after speaker, MC, and strategist for female chiros wanting to "have it all" – a supercharged practice, a work/life balance and a whole lot of fun. She has written for most major newspapers around Australia, has a podcast "Work Mama Life" with over 20,000 downloads, and is often called upon as an expert for the neurological regulation for working mothers. She has been a chiropractic patient since she was 15 years old and thinks there is no greater gift than providing the support families need to allow their health to shine.

Dr Billy Chow – President, Australian Chiropractors Association – National & South Australia

Dr Billy Chow, President of the Australian Chiropractors Association, graduated as a chiropractor from RMIT University in 1998. Since graduating, he has built a varied career in private practice, on boards, and in business. Dr Chow is passionate about educating and inspiring people to make better choices and live healthier lives. He serves as a Lecturer and ACC Program Coordinator (Diploma) at the Australian Chiropractic College, Adelaide, and runs a healthcare business consultancy providing practitioners with personalised business support and mentorship.

Dr David Cahill – Vice President, National & Victoria

ACA Vice President, Dr David Cahill has been a registered, practicing chiropractor since 1991, in the Malvern East area of Melbourne since 1998. He loves helping people of all ages, from newborn babies and toddlers to those in their more senior years. David is very active in post-graduate education, continually upskilling in many aspects of chiropractic. David's passion is to help people have transformative experiences and help the chiropractic profession advance its standing in the Australian community.

Dr Damian Kristof – National & Victoria

Nutritionist, Naturopath and Chiropractor, Dr Damian Kristof is a highly sought-after presenter and speaker in the Wellness industry. With 30 years of experience, Damian's in-depth knowledge of the body, nervous system, food functions and responses coupled with his friendly and dynamic presenting style, has him in high demand. Focusing on food as key to unlocking optimal health and wellness, Damian presents in-depth facts and concepts that have never been readily available to the public - offering all audiences from industry experts to the general public highly valuable content as he engages, educates and inspires audiences across the globe.

Dr Kim Lie Jom – National & NSW

Dr Kim Lie Jom has been a registered and practicing chiropractor in NSW for 35 years. His commitment to the wellbeing of his patients extends beyond chiropractic adjustments, as he understands the importance of holistic health for every individual. With a family of three kids of his own, he truly comprehends the value of family wellness. As a respected community leader, Dr Jom has become an integral part of the local community. His reputation extends not only for his exceptional chiropractic skills but also for his dedication to community service. He is a Board Director and proud member of the Australian Chiropractors Association (ACA), showcasing his commitment to the highest standards of professional practice. His involvement in the ACA goes beyond membership, he currently holds several key positions within the organisation, including Public Education, Audit and Risk, the Eastern Regional Committee. He is a dedicated member of the Australian Spinal Research Foundation (ASRF), demonstrating his commitment to advancing chiropractic knowledge and contributing to research in the field. Dr Jom's prominence in the chiropractic community is exemplified by his passion, dedication, and leadership in promoting health and wellbeing for individuals and families.

Dr Michelle Ronan – Victoria

Michelle has been a registered chiropractor since graduating from RMIT in 2005 and has practiced in the Albert Park area since 2010. Michelle's passion lies in helping people's bodies perform better to allow them to get more out of life, whether that be to enhance sports performance, rehabilitation of chronic conditions, during pregnancy, or to support general health and wellbeing. Michelle loves helping people of all ages and stages of life on their health journey. Michelle previously sat on the Victorian branch of the CAA (now the Australian Chiropractors Association) and is currently completing a Master's through RMIT.

Dr Ashley Dent – Tasmania

Dr Dent graduated from Macquarie University in Sydney in 2010, where he received the Ed Devereaux Award for Services to the Student Body. He is actively involved with the Australian Chiropractors Association (ACA) at both state and national levels, currently chairing the Public Engagement Committee and contributing to two other committees. In 2023, he was recognised with a Meritorious Service Award from the ACA. Dr Dent has a keen passion for helping people improve their long-standing (chronic) back and neck pain and then progressing their spinal health through exercise and rehabilitation so that they are stronger and healthier than they've ever been.

Dr Adam Smith – Queensland

Dr Adam Smith (Chiropractor) has over 22 years of experience in family-based chiropractic care. He has experience working in many communities around Australia and internationally, including regularly serving on committees that guide health policy on a state and Australian federal level, as well as in the UK. With a special interest in family health and wellness, Dr Smith works with local community groups, charities, workplaces and schools to improve access to chiropractic care for those who want it. He believes that all Australians should have access to quality chiropractic services, so he is currently working with a group that is expanding chiropractic access in regional and rural areas of Australia across six states and territories.

Dr Joshua Tymms – Western Australia

Dr Joshua Tymms is a registered chiropractor with two decades of clinical experience, having graduated from Murdoch University in 2006. Throughout his career, he has worked with a wide range of patients, including elite-level athletes, with a strong focus on structural correction and long-term spinal health outcomes. Josh holds dual Master's degrees in Public Health and Business Administration, equipping him with advanced expertise in health leadership, strategy, and research. He serves as Vice President of the Advanced Bio-Structural Correction Australasia (ABCA), where he leads initiatives to expand the research base supporting structural correction and strengthen the profession's evidence-informed direction. Over the past decade, Josh has held multiple leadership and advocacy roles within the Australian Chiropractors Association, contributing to policy, professional standards, and the future direction of chiropractic in Australia. In addition to his clinical and leadership work, Josh is the founder of Chiro Van, a mobile healthcare service designed to improve access to chiropractic care across the community. He remains committed to helping people move better, feel better, and live more active lives through high-quality, patient-centred care.

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