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## **Is exercise the answer? Exploring the impacts of physiotherapist-prescribed home exercise plans for people with chronic pain**

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**Purpose:** The increasing prevalence of chronic pain (CP) conditions has highlighted the critical role of physiotherapist-prescribed home exercise plans (HEPs) in patient care. While extant research evidences a range of potential benefits of exercise for CP management, there remains limited understanding of patients' lived experiences with HEPs. This paper reports findings from a study manifestly designed to explore patient perspectives on physiotherapist-prescribed HEPs, with a particular focus on implementation challenges, effectiveness, and areas for service improvement. Of specific interest was how patients' experiences might inform more effective physiotherapy practice in CP management.

**Methods:** With institutional ethical approval, extended semi-structured interviews were conducted with N=4 participants recruited via CP-focused Facebook groups. Inclusion criteria required participants to: (a) have a diagnosed CP condition, (b) have previously completed (but no longer be undertaking) an NHS physiotherapist-prescribed HEP, (c) be fluent in English, and (d) be capable of providing informed consent. Emergent interviews lasted 45-60 minutes, were conducted via Microsoft Teams, transcribed verbatim, and analysed using reflexive thematic analysis. Participant identity protection was ensured through systematic redaction of identifying information.

**Results:** Analysis yielded three primary themes: (1) Professional Approach and Understanding: participants routinely emphasised the need for practitioners to actively listen and acknowledge their lived experiences, with particular concerns around feeling "gaslit" or dismissed by healthcare professionals; (2) Exercise Implementation: participants highlighted the importance of collaborative, individualised approaches over perceived 'prescribed' responses; (3) Future Development: participants identified key areas for service improvement, including enhanced CP-specific continuing professional development, greater transparency about practitioners' knowledge limitations, and the need for more specialised CP physiotherapy services.

**Conclusions:** The findings reveal a complex relationship between CP patients and physiotherapy services, particularly regarding HEP implementation. While participants recognised the potential value of exercise-based interventions, their experiences highlight the critical importance of individualised, holistic approaches that acknowledge the daily challenges of living with CP. The

research particularly emphasises the necessity of practitioners demonstrating active listening and adaptability in their approach to CP management.

***Impact:*** These findings provide valuable insights for physiotherapy practice development, suggesting the need for enhanced CP-specific training and more collaborative approaches to HEP design and implementation. While the sample size limits generalisability, the depth of participant experiences offers important direction for improving physiotherapy services for CP patients, particularly regarding the balance between standardised exercise protocols and individualised patient needs.