

## Pain risk factors questionnaire

The pain risk factors questionnaire was developed to assess the likely contribution of known physical and non-physical risk factors for chronic pain. Responses to this questionnaire can be used to help guide treatment planning.

		True	Not True
1	I have suffered an accident, illness or injury		
2	I have chronic pain		
3	As a child I didn't have anyone to turn to for help or even if I did I kept my feelings to myself		
4	I never felt safe		
5	There was conflict or violence at home		
6	One of my parents had a mental illness/drug or alcohol problems/com-mitted suicide/died		
7	My family life was very unstable		
8	I was physically and/or sexually abused		
9	I have suffered or am facing threatening circumstances over which I feel I have no control		
10	If I have a problem, the only person I can rely on is myself		
11	I have trouble sleeping		
12	I often feel tired and lacking in energy		
13	I find it hard to relax		
14	I don't know what's going on inside me		
15	I have feelings I can't quite identify		
16	Sometimes I feel like my body is disconnected from my mind		
17	I feel like a failure		
18	I worry all the time about whether my problems will ever end		
19	Sometimes I have disturbing memories or dreams about the past		
20	I often feel "super alert," or watchful, or on guard		

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### Scoring

The 20 items are divided into seven sections. Each set of two or three questions assesses a different type or effect of stress. To assess the client's risk factor exposure, give them one point for each "true" response in the scoring key below. Write the total number of true responses for each risk factor in the right-hand column of the scoring key. For example, if the client answered "true" to two items in questions 1–5, their score for "Emotional neglect" would be "2." If the client answered "not true" to all questions 6–10, their score for "Trauma" would be "0," and so on.

Q	SCORING KEY	Total
1–2	Physical injury or illness	
3–5	Emotional neglect	
6–8	Childhood trauma	
9–10	Safety and support	
11–13	Increased physiological arousal	
14–16	Emotional disconnection	
17–18	Negative thinking/"catastrophizing"	
19–20	Post-traumatic stress disorder	
	Total	

Once the client has completed scoring the questionnaire, evaluate their pain risk factors as follows:

1. A score of one or more for any individual risk factor means the client is affected by that pain risk factor.
2. If the total score was over three, the client has suffered moderate but significant stress.
3. If the total score was over five, the client has likely suffered severe stress and exposure to pain risk factors.

### Treatment planning

The next step is to use the results from the questionnaire to plan the client's treatment. This is best done by making a case conceptualization around the 7 tasks from least to most urgent (case conceptualization comet).

- Injury and illness (questions 1–2)  
If the client scored one or more on this risk factor, they have been exposed to one of the leading risk factors for chronic pain and treatment will need to proceed with some mindfulness of the impact and progress of the injury. Particular attention may need to be paid to the diagnosis, medical treatments, and outcomes.
- Emotional neglect/childhood trauma (questions 3–8)  
If the client scored one or more for either of these risk factors, they have been exposed to leading non-medical risk factors for chronic pain. Treatment is likely to need to incorporate emotional skills training, ego work, and self-care skills training.
- Safety and support (questions 9–10)  
If the client scored one or more for this risk factor, they have insufficient safety and support. Treatment is likely to need to incorporate safe place installation and development of psychological support structures. These needs can be addressed within the first 3 tasks of pain management (below).
- Increased physiological arousal (questions 11–13)  
If the client scored one or more for this risk factor, it is likely that they are suffering from the effects of increased physiological arousal and they will need to learn how to de-arouse themselves. Treatment is likely to need to incorporate self-awareness training, self-soothing with BLS, relaxation training, and self-care work. These issues are addressed in the first 3 of the 7 tasks of pain management.
- Emotional disconnection (questions 14–16)  
If the client scored one or more for this risk factor, it is likely that emotional disconnection is contributing to their pain. Treatment will need to incorporate elements of awareness and emotional self-regulation training.
- Negative thinking/“catastrophizing” (questions 17–18)  
If the client scored one or more for this risk factor, negative attitudes and thinking patterns are likely to be exacerbating their pain. Treatment should incorporate cognitive restructuring. The development and installation of a positive cognition and more positive attitudes and beliefs will be essential. This issue is usually addressed in the

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trauma processing, dealing with other stressors and uncovering meaning of the pain tasks.

- Post-traumatic stress disorder (questions 19–20)  
If the client scored one or more for this risk factor, it is likely that symptoms of post-traumatic stress are exacerbating their pain. Treatment will need to focus on reprocessing the trauma, safety and support, and emotional skills training for coping with any residual anxiety and/or pain. PTSD is obviously addressed in task 2, trauma processing.

The treatment planning chart (below) can be used to summarize the goals and directions of treatment, based on the above results. There is also a blank column at the end which can be used for any additional elements of treatment not mentioned here. In general, treatment should attend to these elements in the order in which they are listed. For example, most experts recommend attending to safety and support before commencing trauma work. However, it's also recognized that in practice, therapy is not so black and white and there will inevitably be some degree of overlap in how and when the therapist addresses each of these treatment elements.

Treatment element →	Tame the pain	Trauma processing	Emotional regulation	Self-care	Uncovering the meaning of pain	Dealing with other stressors	Reintegration	
Risk factor ↓								
Injury or illness								
Emotional neglect								
Childhood trauma								
Safety and support								
Increased physiological arousal								
Emotional disconnection								
Negative thinking								
Post-traumatic stress disorder								
Total								

Additional notes \_\_\_\_\_