

Supplement 1: Summary of participant responses regarding receiving information about their pain and its treatment**Summary of participant responses regarding receiving information about their pain and its treatment**

How much information you would have liked to have received about...	I would have liked much more information n (%)	I would have liked a little more information n (%)	The amount of information was right for me n (%)	I would have liked less information n (%)	I would have liked no information n (%)
My illness or injury	34 (51)	15 (22)	17 (25)	0 (0)	1 (1.5)
The cause(s) of my pain	31 (46)	17 (25)	19 (28)	0 (0)	0 (0)
Treatment options for my pain	28 (42)	19 (28)	19 (28)	1 (1.5)	0 (0)
Pain medication in general	25 (37)	26 (39)	16 (24)	0 (0)	0 (0)
Possible side effects of pain medication	40 (60)	15 (22)	10 (15)	0 (0)	2 (3)

Supplement 2: Summary of participants' responses to statements about their current pain medication**Summary of participants' responses to statements about their current pain medication (n = 67)**

	Strongly agree n (%)	Somewhat agree n (%)	Neither agree nor disagree n (%)	Somewhat disagree n (%)	Strongly disagree n (%)
Has a positive effect on my physical health	17 (25)	25 (37)	7 (10)	11 (16)	7 (10)
Helps me have a better outlook on life	21 (31)	20 (30)	10 (15)	8 (12)	8 (12)
Allows me to perform my daily activities more easily	15 (22)	23 (34)	12 (18)	7 (10)	10 (15)
Allows me to participate in my leisure activities more often	11 (16)	18 (27)	16 (24)	12 (18)	10 (15)
Helps me do things independently	23 (34)	20 (30)	8 (12)	9 (13)	7 (10)
Allows me to have better relationships with others	19 (28)	22 (33)	10 (15)	8 (12)	8 (12)
Improves my mood	26 (39)	10 (15)	13 (19)	8 (12)	10 (15)
Allows me to concentrate better	15 (22)	21 (31)	15 (22)	6 (9)	10 (15)

Supplement 3:

