

Table 1: Socio-demographic characteristics of the survey sample by episodic and chronic migraine type.

Characteristic	Migraine type					
	Chronic n=118 (22.2%)		Episodic n=412 (77.7%)		Total n=530	
Age-band	N	Col %	N	Col %	N	Col %
<18 years	1	0.8	1	0.2	2	0.4
18–24 years	5	4.2	15	3.6	20	3.8
25–34 years	16	13.6	64	15.5	80	15.1
35–44 years	30	25.4	93	22.6	123	23.2
45–54 years	35	29.7	120	29.1	155	29.2
55–64 years	15	12.7	55	13.3	70	13.2
65+ years	7	5.9	24	5.8	31	5.8
Missing data	9	7.6	40	9.7	49	9.2
Gender						
Female	96	81.4	337	81.8	433	81.7
Male	10	8.5	31	7.5	41	7.7
Another gender ¹	3	2.5	5	1.2	8	1.5
Missing data	9	7.6	39	9.5	48	9.1
Ethnic group						
Māori	7	5.9	32	7.8	39	7.4
Pacific peoples	0	0.0	6	1.5	6	1.1
Asian	2	1.7	21	5.1	23	4.3
NZ European/Other	99	83.9	310	75.2	409	77.2
Missing data	10	8.5	43	10.4	53	10.0
MIDAS Disability Score						
0–5 (little or no)	1	0.8	74	18.0	75	14.2
6–10 (mild)	3	2.5	74	18.0	77	14.5
11–20 (moderate)	11	9.3	105	25.5	116	21.9
>21 (severe)	103	87.3	159	38.6	262	49.4
Self-reported mental health						
Anxiety	50	42.3	120	29.1	170	32.0
Depression	34	28.8	91	22.0	125	23.6

Table 1 (continued): Socio-demographic characteristics of the survey sample by episodic and chronic migraine type.

Employment/education						
Student	1	0.8	13	3.2	14	2.6
Stay at home carer	8	6.8	14	3.4	22	4.2
Retired	6	5.1	22	5.3	28	5.3
Not employed, not looking for work	16	13.6	18	4.4	34	6.4
Not employed/looking for work	6	5.1	4	1.0	10	1.9
Employed part-time	30	25.4	94	22.8	124	23.4
Employed full-time	42	35.6	208	50.5	250	47.2
Missing data	9	7.6	39	9.5	48	9.1

¹3/8 people who responded with “another gender” indicated their gender: Non-binary, Pansexual, Gender queer (AFAB)

Figure 1: Days of activity missed in the last 3 months because of headaches.

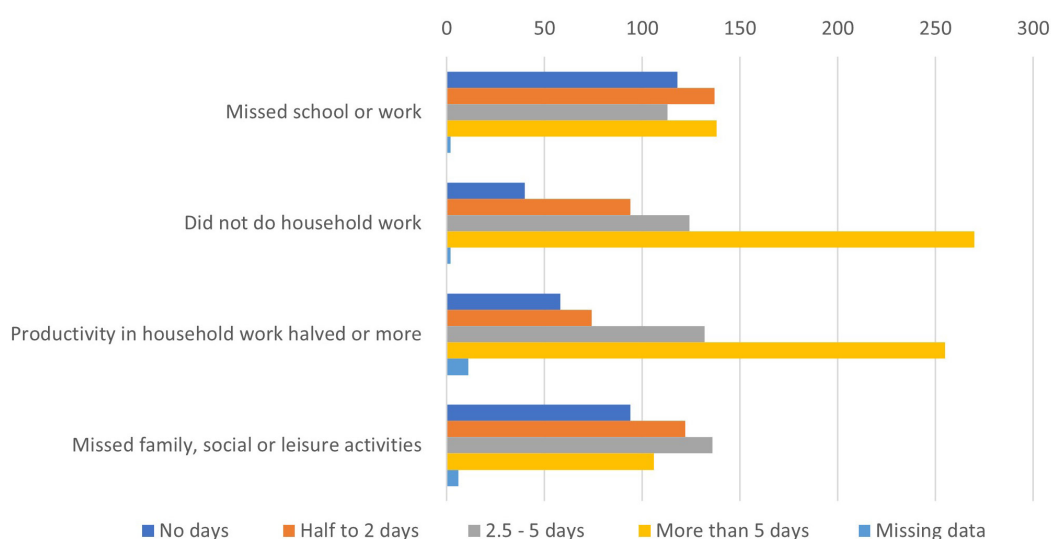


Figure 2: Impact of migraine on work, proportion by episodic and chronic migraine type.

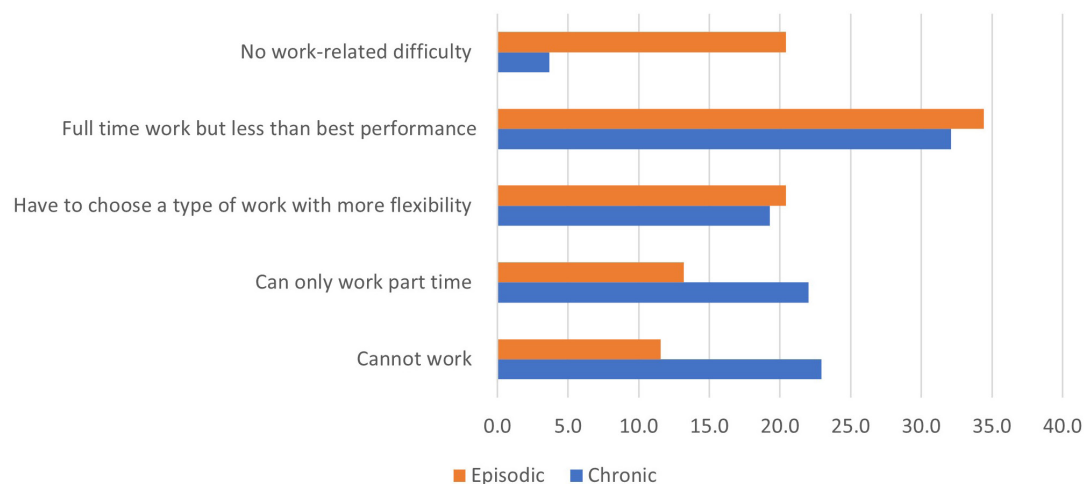


Table 2: Recommendations for supporting people with migraine.

Recommendations for supporting people with migraine		Supporting quote or information
Societal	More understanding, education and awareness for the general public	<p>“More awareness in how debilitating it is; you can’t just drink more water, rest, etc. It lasts days and it is not just the pain, though that can be very bad, [it’s] that other symptoms come with it.”</p> <p>“I feel like I live with a made-up illness, constantly having to over-explain myself and try to convince people that it’s a real condition.”</p>
	Recognition of migraine as a significant, complex neurological condition causing disability	<p>“People do not understand and think it’s just a headache. It is not seen as a serious neurological disease.”</p> <p>“If it were considered a disability, I feel like I would be treated differently.”</p>
	Better support for people who can’t work full-time or at all because of migraine (e.g., a benefit for people with a health condition or disability)	<p>“I’m unable to work, yet don’t qualify for a sickness benefit.”</p> <p>“Disability financial support (with a working partner I am ineligible for any support), as migraines are so debilitating that I feel incapable of working.”</p>
Workplace	Better sick and annual leave entitlements	<p>“Ability to have sick days when needed without guilt.”</p> <p>“Migraine leave for work. It takes a few days for me to get back to normal.”</p>
	Accommodation for people with migraine to manage their environment to avoid triggers.	<p>“Natural light in workspaces. Migraine-specific occupational health workplace assessments of computers and workstations/lighting.”</p> <p>“Working with my workplace to reduce triggers such as exhaust fumes.”</p>
	More understanding and awareness of migraine disease in workplaces	<p>“Workplaces see migraines as simply a headache and mine tends to put pressure on me to work despite my migraines being completely debilitating.”</p> <p>“Employer ... insisted I get a medical certificate any time I had one. Despite the cost and difficulty to do so while experiencing a migraine.”</p>
	Provide flexible work and education options	<p>“I work from home so that removes the biggest issue, as I can just sleep when I have a migraine and work flexibly.”</p> <p>“Having flexible teachers who understand how debilitating they are and help with setting work to catch up at home.”</p>
Health system	Access to more treatment options	<p>“Get new drugs that mean people can work ... We would rather work and pay taxes and pay back the cost of those drugs than be sick and costing via healthcare, welfare and more.”</p>