Manifesto 2027

Roadmap to Recovery:

Prioritising Arthritis and Musculoskeletal Health

A call for action in the next Assembly:

To make arthritis an immediate government priority through dedicated leadership, employment support and action on waiting times.

Arthritis UK
Northern Ireland

Foreword

550,000 reasons to make arthritis and musculoskeletal (MSK) conditions a priority.[1]

Over half a million adults, young people and children in Northern Ireland live with arthritis and other related MSK conditions.[1] Every day, an alarming number of them are forced to put their lives on hold, as they wait in agony for the care and support they desperately need.

Our orthopaedic and rheumatology waiting lists for diagnosis and treatment are the longest in the UK – up to 8 years in some cases.[2,3] Resulting in enormous personal cost to quality of life, employment, education and mental health.

The consequences of these delays are profound. For instance, 43% of people living with MSK conditions in Northern Ireland are economically inactive, with many forced to leave work due to a lack of employment support.[4] We also know that 79% of people with arthritis report living in pain most or all of the time and 76% report that waiting for treatment has harmed their mental health.[5]

As outlined in our 2026 report 'From Breaking Point to Recovery: Prioritising MSK Healthcare in Northern Ireland', **without urgent action, the burden of MSK conditions will continue to grow**, increasing pressure on people, families, health services and the economy.

Yet, despite the scale and impact of arthritis here, Northern Ireland has no strategy, targets or coordinated leadership for MSK health. Combine this with an ageing population, and it's not surprising that we have reached a breaking point. **This is why MSK health must be made an urgent priority.**

Prioritising MSK healthcare will mean focused attention on arthritis and recognition that the condition is a core part of the wider health transformation agenda, including the neighbourhood model of 'Care Closer to Home'.

Prioritising MSK healthcare will transform lives, unlocking access to treatment, reducing waiting lists and helping people get back to work if they want to – a win-win for our health and economy.

And prioritising MSK healthcare will ensure a better outlook for future generations, as they no longer have to live a life limited by the devastating impact of arthritis and related MSK conditions, setting our country up for a healthier, brighter future.

This manifesto calls for arthritis to become an immediate government priority through action on waiting times, employment support and, crucially, strong MSK leadership.

Sara Graham,
Head of Northern Ireland, Arthritis UK

Deborah Alsina MBE,
Chief Executive, Arthritis UK

Arthritis UK Northern Ireland Manifesto 2027

We believe real change happens through collaboration.

Political and system leaders must work in partnership with the voluntary and community sector and people living with arthritis to meet this public health crisis head on.

Our calls

Our manifesto sets out actions for the next Northern Ireland Assembly.

By implementing these calls, we can reduce the impact of arthritis and MSK conditions on individuals, health and care systems, and the wider economy, supporting people to manage their symptoms, maintain independence and improve quality of life now and for future generations.

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Call 1

Make arthritis a public health priority.

Arthritis and MSK conditions affect nearly a third of the population in Northern Ireland, with lengthy waits in every part of the MSK health system. As Margaret (who lives with osteoarthritis) told us: "Long waiting lists are not a 'nuisance', they are 'factory for disability'".

Arthritis and MSK conditions don't only affect people physically, though. For example, depression is four times more common among people who live in persistent pain.[6] In addition, people with osteoarthritis have a 61% increased risk of diabetes[7] and a 24% higher risk of cardiovascular disease[8].

In the context of an ageing population, with increasing co-morbidities, MSK healthcare must be urgently addressed and made a public health priority.

The scale and impact of arthritis demand a Clinical Lead within the Department of Health to have oversight of MSK healthcare policy and planning across adult and paediatric services. This would direct MSK care and treatment across the health system, reduce waiting times and standardise care pathways for better patient outcomes.

Our Breaking Point to Recovery report demonstrates clinical demand for a Regional Strategy for MSK healthcare with clear public health messaging early in life to promote prevention.

The Department of Health also has an opportunity through their neighbourhood model of 'Care Closer to Home' to introduce models of MSK care. Prioritising MSK health in this context will help people to move, function and participate in everyday life, as well as supporting healthy ageing and reducing the risk and impact of other conditions.

Good MSK health is the bedrock of a healthier Northern Ireland. We can't afford it to be anything less than a public health priority.

People with osteoarthritis have a 61% increased risk of diabetes[7] and a 24% higher risk of cardiovascular disease[8].

Call 1

Make arthritis a public health priority.

Margaret's story

"My life was dismantled by the orthopaedic waiting list in Northern Ireland."

For decades, I was trapped in a cycle: referred, seen and then discharged because I was 'coping'. But I wasn't 'getting on with it'. I was surviving – in agony. I lost my livelihood and my identity. I went from being an active member of the [Health] Trust workforce to being stuck in the house on two crutches, relying on benefits. My life was dismantled by the orthopaedic waiting list in Northern Ireland.

By 2022, I was on two separate waiting lists...[and] despite years of waiting, I was told I faced a further four to six years. Out of pure desperation, I went for two private consultations...[and] my right hip was replaced in January 2024.

But the damage of the 'long wait' was already done. My knee had become totally bowed; my leg was badly misshapen because I had been left for so long. What should have been a standard knee replacement had become a complex, high-risk surgery. The surgeon didn't just have to replace a joint; he had to try to reconstruct a misshapen limb.

If I had been operated on 10 years ago... I would not have lost my job, I would not have suffered a misshapen limb and I likely would not be dealing with the surgical injury today.

Margaret, 64, Belfast

Call 1 policy actions

- **The Health Minister must appoint a Clinical Lead** for adult and children's MSK health, with a mandate to work cross-departmentally to deliver a regional strategy and costed action plan to improve access to MSK treatment and services.
- **Public Health Agency to have a condition-focus on arthritis,** delivering a high-profile and sustained public awareness campaign highlighting prevention, symptoms, treatment and condition management.

Call 2

Tackle long waits for people with arthritis.

Northern Ireland has some of the longest waiting lists in the UK. And people with arthritis are at the sharp end of this crisis.

Orthopaedics and rheumatology have the most people waiting and the longest waits, with some individuals waiting up to 8 years for their first outpatient appointment.[2,3] An outrageous amount of time, with staggering repercussions not just on a person's physical health but their mental health, too.

After all, waiting lists are more than statistics. They represent:

- Lives lived in pain and declining health.
- Lives put on hold, where jobs, income and independence hang in the balance.
- Lives lived without answers or any idea of when support will come.

This cannot continue. We must take decisive and sustained action now to tackle the backlog and stop this happening to future generations.

Some people in Northern Ireland wait up to 8 years for their first outpatient appointment with rheumatology.[2,3]

The moral and economic case is also clear. Joint replacement surgery is life changing, but the longer a person waits, the worse their healthcare outcomes will be. Surgery will become more complex or even unsuitable for them. And ultimately, people end up in worse health, increasing demand on primary care, which is itself almost at breaking point.

Our Breaking Point to Recovery report found that treatment and support vary across and within Trusts. People reported issues with getting a timely diagnosis and referral into a clear treatment pathway.

Furthermore, timely diagnosis of inflammatory arthritis can be especially difficult for children and young people; they also face challenges in moving from paediatric to adult rheumatology as there is currently no managed transition service, despite this being a requirement within NICE clinical guidelines.

A survey into the lived experiences of people with arthritis and MSK conditions[5] showed that in Northern Ireland:

76%
report that waiting for treatment has harmed their mental health.

79%
of people live in pain most or all the time.

Call 2

Tackle long waits for people with arthritis.

Sally's story

"Growing up with arthritis is challenging enough. The healthcare system shouldn't add to that challenge."

I had been under children's services for nearly 14 years throughout primary school, secondary school and university. Transitioning [into the adult healthcare system] isn't just changing doctors. It's moving from a child-centred environment where parents are heavily involved to an adult system where you're expected to manage independently.

Transition clinics would allow young people to meet the adult team before discharge, understand how things will work, know who their point of contact is, and feel prepared rather than suddenly cut off, facing anxiety from delays in communication and treatment.

Sally, 21, Belfast

Call 2 policy actions

- **Department of Health to target long waits in orthopaedics and rheumatology by:**
  - Increasing orthopaedic capacity and maximising theatre time to deliver more surgeries.
  - Undertaking a comprehensive review of adult and paediatric rheumatology services.
  - Committing to multi-year funding to address the backlog of tens of thousands of patients, with or without an agreed 3-year Executive budget.
- **Department of Health to mandate a standardised transition pathway from paediatric to adult rheumatology services.**
- **Health Trusts to provide clear and regular communication with patients while they wait for treatment including:**
  - How to access additional support to manage their mental and physical health.

Call 3

Improve in-work support for people with arthritis.

Arthritis and MSK conditions are the single biggest cause of disability in Northern Ireland.

In fact, 43% of people with either arthritis or a related MSK condition are economically inactive, often forced to give up work prematurely due to declining health and long waits for care.[4]

In our health intelligence report 'Left Waiting, Left Behind' (which summarises the findings of a lived experience survey and presents a powerful snapshot of the reality of living with arthritis), 67% of people said that arthritis had impacted their ability to work in some way.[5]

Arthritis and MSK conditions are one of the most common reasons for workplace absence in the UK, accounting for 23.4 million days lost in work in 2022.[9]

These conditions often affect people in mid-life, between the ages of 40 and 65, at the very point when they should be at their greatest earning potential. However, people with arthritis and related MSK conditions face multiple barriers to staying in work and need better support from employers and Government to overcome them.

Employment support initiatives such as Access to Work – which helps people manage their condition within the workplace through the provision of specialist equipment, workplace adjustments or travel support – can really make a difference, but there is a lack of awareness of the scheme.

43% of people with either arthritis or a related MSK condition are economically inactive.[4]

Similarly, flexible working arrangements have been shown to increase productivity, yet many people do not realise they have a right to ask for flexible working and some employers are inflexible in their approach or unable to accommodate. At the same time, there is also still stigma attached to ill health at work and people may be reluctant to disclose a health condition or disability that may impact their working life.

Gareth's story

"Having access to pain management support would help people with long-term conditions to remain in work."

After a serious accident led to arthritis, gaps in care left me unequipped to manage the resulting chronic pain.

I had to leave my job and not being able to work and support my family massively affected me. As a husband and a dad, I want to play football with my kids and spend quality time with my partner, but the fatigue and pain can really take a toll.

Having access to pain management support would help people to remain in work and reduce the number of people claiming out of work and disability benefits, who, like me, would rather be contributing to society and supporting their families.

Gareth, 44, Lisbane

Call 3

Improve in-work support for people with arthritis.

Pat's story

"Ultimately, it cost me my job... even though I felt I'd so much more to give."

My job involved being on my feet all day, which became increasingly difficult due to arthritis, and before long I even found the 10-minute walk too much.

Work became harder and harder and, although I'd been there 25 years, my employer didn't feel they could accommodate my needs, so I retired even though I felt I'd so much more to give.

I felt devalued, useless and wondered what my life was going to be. I couldn't go for walks with my grandchildren, take my wee dog to the park or do the shopping.

I happened across the website for Arthritis UK by pure chance. I got in touch and did a pain management course that changed my life completely. They said that, although I wouldn't be pain free, I'd learn to live with it differently and it really has made life doable again. If only I had known about this support I might have been able to stay in work.

Pat, 68, Belfast

Call 3 policy actions

The Communities Minister to lead cross-departmental action on targeted support for people with arthritis in the workplace. Actions to include:

- **Deliver an in-work support campaign specific to MSK conditions,** promoting reasonable adjustments that support and sustain employment and create 'arthritis-friendly' workplaces.
- **Increase visibility and access to Condition Management Programmes and the Access to Work scheme for people with arthritis.**

Our ask of you

If elected, be a voice for people with arthritis in the Northern Ireland Assembly

Arthritis is often called a ‘hidden’ condition because you can’t always see how it affects someone. As an MLA, your constituents with arthritis are relying on you to:

1. Meet with them to understand the challenges they face, day in and day out.
2. Support our calls and speak up for people with arthritis in the Northern Ireland Assembly.
3. Champion quality MSK healthcare in your local area so they can access the services they need, when they need it.

Work with us

By working with Arthritis UK Northern Ireland, you can make a difference to thousands of your constituents living with arthritis.

We are an experienced public policy team supported by our research community and can help you with policy development and scrutiny.

Our campaigning ethos is not just to highlight issues, but to help develop and deliver solutions. We’re committed to working constructively with the next Executive, MLAs, Health and Social Care (HSC) system and other stakeholders, to improve prevention, diagnosis, treatment and support for everyone affected by arthritis.

Signpost to us

Our services include self-management resources, local support groups, an online community and free Helpline: **0800 5200 520**. Please signpost constituents to us at **arthritis-uk.org**

You can also connect with us on social media:

/ArthritisUKNorthernIreland

@NIArthritis

Let’s work together to make sure that people with arthritis in Northern Ireland can live more active, and less painful lives.

Arthritis UK Northern Ireland can help you with your work in the Assembly.

Email Northern Ireland’s Policy and Influencing Team to start your conversation: **northernireland@arthritis-uk.org**

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About Arthritis UK

Over 10 million adults, young people and children in the UK live with arthritis – a condition that can affect a person's ability to work, study, care for family, move free from pain and live independently. Yet for a condition affecting so many, it's poorly understood and far too little is done.

That's why, at Arthritis UK, we invest in life-changing research into better treatments, support people through the daily challenges of life with arthritis, and campaign on the issues that matter most to people living with it.

We won't rest until everyone with arthritis has access to the treatments and support they need to live the life they choose, with real hope of a cure in the future.

For more information on our services, visit arthritis-uk.org

For services in NI, visit arthritis-uk.org/in-your-area/northern-ireland

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