Additional file 1: Description of two main interventions within BMR - psychological group therapy and standard exercise therapy (SET) in both participating rehabilitation centres (control group)

		REHABILITATION CENTER 1		REHABILITATION CENTER 2
		psychological group the	rapy	
theoretical	-	cognitive-behavioural approach	-	cognitive-behavioural approach
approach				
frequency/	-	six sessions each 60 minutes	-	eight sessions each 60 minutes
duration				
delivery	-	closed group	-	closed group
	-	consistency of the therapist	-	consistency of the therapist
objectives and	-	introduction to the multimodal	-	introduction to the multimodal
contents		therapeutic approach of the		therapeutic approach of the
		BMR the instruction of a		BMR, education about the
	-	biopsychosocial approach	-	biopsychosocial model
		regarding the chronification of		regarding a chronification of
		pain		pain
	-	the instruction of the avoidance-	-	pain acceptance
		endurance-model, techniques to	-	the role of thoughts and
		control attention,		feelings/emotions
	-	emergence of a memory of pain	-	the perception of pleasure and
	-	how to use enjoyment and		enjoyment
		pleasure as a resource,	-	pain-related behaviour
	-	self-care	-	sleep hygiene
	-	helpful thoughts when coping	-	social competence
		with pain relationships between pain and	-	excessive demand and retreat the development of goals for
	-	social competence	-	every day life
	_	self-management is encouraged		every day me
	_	with techniques such as		
		homework after the course		
standardization	-	manualised	-	manualised
	-	handouts for patient	-	handouts for patient
additional	-	progressive muscle relaxation	-	progressive muscle relaxation
interventions	-	opportunity of regular individual	-	Feldenkrais
		visits of the psychotherapist	-	opportunity of regular individual
		a fa a da a da a da a da a da a		visits of the psychotherapist
theeretical	1	standard exercise ther	ару	mainly compting functional
theoretical approach	-	mainly somatic-functional approach	-	mainly somatic-functional
objectives		approach		approach
objectives	_	physical conditioning via	_	improvement of physical
-	-	physical conditioning via mobilisation and strengthening	-	improvement of physical capability
-	-	mobilisation and strengthening	-	capability,
-	-	mobilisation and strengthening of the muscles	-	capability, reduction of endurance- and
-		mobilisation and strengthening	-	capability, reduction of endurance- and avoidance behaviour,
-		mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of	- -	capability, reduction of endurance- and
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures,	-	capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain,
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures,	- - -	capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures, education about (patho-)	- - -	capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement boundaries and the re-gain of
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures, education about (patho-) physiological relation as an	-	capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement boundaries and the re-gain of confidence in one's own
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures, education about (patho-) physiological relation as an improvement in well-being due		capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement boundaries and the re-gain of confidence in one's own capability
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures, education about (patho-) physiological relation as an	- - -	capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement boundaries and the re-gain of confidence in one's own capability water-based exercise is
-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures, education about (patho-) physiological relation as an improvement in well-being due		capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement boundaries and the re-gain of confidence in one's own capability water-based exercise is dedicated to a reduction of pain
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-	-	mobilisation and strengthening of the muscles improvement of cardiopulmonal endurance, a reduction of pain as result of good postures, introduction of relief-postures, education about (patho-) physiological relation as an improvement in well-being due		capability, reduction of endurance- and avoidance behaviour, improvement of one's body perception and with existing pain, testing of one's movement boundaries and the re-gain of confidence in one's own capability water-based exercise is dedicated to a reduction of pain

delivery	closed group	- closed group
	consistency of physical therapist	- consistency of physical therapist
contents (frequency/ duration)	 strengthening, stabilizing, coordination and flexibility exercises (5 sessions/30 minutes) introduction to weight-lifting training (2 sessions/30 minutes) weight-lifting training (5 sessions/60 minutes) back school consisting of education about anatomy and physiology of the spine, causes of clbp and body mechanics for daily activities (3 sessions/60 minutes) 	 strengthening, stabilizing, coordination and flexibility exercises education about muscular imbalances and the anatomy of the spine good or healthy posture in every day life: when sitting, standing, getting up, laying down, lifting and carrying objects (content of 5 sessions/45 minutes and seven sessions/30 minutes) water-based therapy (10 sessions/30 minutes) instruction to weight-lifting training (2 sessions/45 minutes) weight-lifting training (6 sessions/30 minutes) cycling on an ergo-bike (6 sessions/30 minutes) assessment of physical capability in the beginning of the BMR (1 sessions/100 minutes) and at the end of it (1 sessions/ 60 minutes) with a functional test
standardization	manualized leaflet with strengthening exercises for the back take-home charts with the strengthening exercises to foster long-term adherence after rehabilitation training schedules	 manualized take-home handout with exercises training schedules
additional interventions* (*delivered in open groups)	introduction to walking (1 session/30 minutes) walking, or cycling on an ergo- bike (7-10 sessions/90 minutes) water-based exercise (6 sessions/30 minutes)	 introduction to (nordic-)walking (1 session/45 minutes) (nordic-)walking (5-9 sessions/60 minutes)