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‘My Life’: How a co-produced lifestyle intervention can support individuals with severe mental illness to live well.

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Background

Individuals with severe mental illness (SMI) die twenty years earlier than the general population (Firth, 2019). This is partly attributable to the development of cardio-metabolic diseases, cancer and obesity, often as a result of sedentary lifestyles (Firth, 2019) and the side effects of prescribed medication (Vancampfort, 2015). Stigma, social exclusion, a lack of motivation, and social support compound these problems (Fortuna, 2021). To optimise chances of permanent lifestyle change, interventions are required that promote inclusion, acceptance, and a sense of belonging. The aim of this service evaluation was to increase physical activity levels working in partnership with a leisure centre provider to enable individuals with SMI to live well in their local community.

Method

A 12-week group programme was established. Facilitated by a mental health physiotherapist, this included education (healthy eating, physical activity, goal setting, dental health, sleep, and relaxation), physical activity (moderate to vigorous intensity exercise led by a Health & Fitness consultant) and peer discussion/reflection. Sessions were two hours long and participants were invited to attend twice a week. Participants paid £3 per session. Assessments were completed at weeks 1 and 12, and included: blood pressure, resting heart rate, height, weight, BMI, 1-minute sit to stand test (STS) (Strassmann, 2013), BORG 6-20 Rate of Perceived Exertion scale (RPE) (CDC, 2022), 6-minute walk test (6MWT) (Laskin, 2007), and the PROMiS Global 10 questionnaire (PROMIS, 2015). Each participant was provided with an activity tracker and a personal 'My Life' journal.

Results

Eight adults (4 female) with a mean age 40 (range 25-50) commenced the programme. 6 out of 8 (75%) completed the 12-week programme. 5 out of 8 (62.5%) completed 17 out of
20 (85%) sessions. There was improvement in muscular and cardio-respiratory endurance with a mean increase of 9 repetitions (range 2-16) in the 1-minute STS test and a mean increase of 186 metres (range 50-340) in 6MWT. Mean improvement in RPE was +4 (range 1-6) in the 6MWT. There was minimal change in weight and BMI. Participants feedback was positive reporting ‘feeling safe’, ‘trust’, ‘more confidence’ to exercise and enjoyed ‘being pushed’.

Participants also experienced ‘a camaraderie which helped to motivate myself and others in the group.’

Conclusion

The “My Life” group programme introduced adults with SMI to supervised physical activity and improved elements of their physical fitness and mental health. Participants felt part of their local community and confident to attend the leisure centre and “invest” in physical activity sessions to continue to live well.

References.


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