

European Alliance for Sport and Mental Health

REPORT
EASMH PILOT ACTIONS
IN 4 EU COUNTRIES



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This document is part of a series of planned products from an ERASMUS+ funded EU project titled "EASMH – European Alliance for Sport and Mental Health".

What is EASMH?

European Alliance for Sport and Mental Health (EASMH) is a project which seeks to encourage participation in sports and physical activity (PA) for people with mental disorders. The project will increase the participation in sports of people with mental health problems, in different stages and clinical conditions, and in different EU countries through the promotion – in a proper, stable and organized way – of structured PA programs for the prevention, treatment and rehabilitation of mental disorders. The project is based on awareness-raising activities focused on the added value of sport and physical activity in psychiatry and on activities that promote innovative synergies between sports organizations and the health sector.

Project aim:

Increasing awareness and skills among mental health professionals and sports professionals, for the development of new sport-based integrated recovery and rehabilitation models for people with mental disorders.

Mental Health public and private Systems

- Increase awareness of the role of sport in treatment and rehabilitation programs among each level of the mental health sector: psychiatrists, psychologists, health operators, and technicians of psychiatric rehabilitation.
- Highlight the necessity of more scientific evidence and knowledge regarding the specific benefits of sport in recovery programs.
- Raise public awareness of the need for specific funds for sports.

Sports Trainers and Facilities

- Increase the skills and competencies of trainers to allow them to actively participate in psychiatric recovery programs.
- Promote the creation of specific training materials suitable for different specific conditions.
- Promote the presence of qualified sports trainers in the local communities and public/private health facilities.

EASMH Consortium

The Project, co-funded by the Erasmus+ Sports Programme of the European Union, is coordinated by the European Culture and Sport Organization (ECOS), in cooperation with:

- University of Constanta, "Faculty of Physical Education and Sport" Romania
- o Hämeen Liikunta ja Urheilu ry Finnish Sport Federation Tampere Region Finland
- European Platform for Sport Innovation Belgium
- Everton in the Community United Kingdom
- o University of Campania "L. Vanvitelli" Department of Psychiatry Italy
- European Psychiatric Association France

What is the aim of this document?

The aims of this document are to:

- **a.** Describe eight pilot actions (2 Italy, 2 Romania, 2 Finland, 2 UK) implemented by eight qualified sports coaches trained in the context of the EASMH project;
- **b.** Discuss the benefits of the actions for people with mental health issues;
- **c.** Inform on the potential of sport-based psychosocial rehabilitation activities for people with mental health issues.

What is included in the document?

The document described eight pilot projects implemented in four EU countries and suggests action to be taken to improve the availability and dissemination of sport-based interventions for people with mental disorders.

SUMMARY:

ITALY	
'Crazy for Rugby'	2
'Not only headshots'	
UNITED KINGDOM	
'Imagine Your Goals'	10
'Keep your Boots On'	13
ROMANIA	
'Get fit!'	16
'Get fit!'	18
FINLAND	
'Multiple Sport Group'	20
'Rehabilitating Sports'	22

1. Implementing pilot actions in the context of EASMH training

Eight coaches from four European countries (2 Italy, 2 UK, 2 Romania, 2 Finland) were involved in the EASMH training program. EASMH online training consisted of six modules led by expert clinicians in psychiatry/mental health.

At the end of the online course, coaches were asked to identify mental health services or therapeutic communities in which to implement a sport-based pilot program, as well as to develop an intervention methodology to address general and specific aims related to the population of interest.

During the 3rd Transnational project meeting held in Brussels (Belgium) on the 12th of July 2022, coaches presented their pilot actions to be implemented in the context of the EASMH project. Members of the ECOS Scientific Committee (Marta Borgi, Stefania Cerino) and the University of Vanvitelli Unicampania (Gaia Sampogna) were present at the meeting to give feedback to coaches about their proposed pilot programs.

At the end of the projects, coaches were asked to report their pilot actions and to describe methodologies applied, professionals involved, monitoring actions carried out, and events organized.

Descriptions of the eight pilot actions are provided in the following sections of this Report.



'Crazy for Rugby'

A rugby program for adolescents and young adults with mental issues

Coach: Alejandro Villalon

Place: Therapeutic Residential Community "La Casa", Rome, Italy

Start date: 18\10\2022 **End date:** 21\02\2023

Participants/beneficiaries

The project engaged 25 adolescents and young adults (14-24 years; mean age: 16; males and females, other gender identities) with a range of different psychiatric disorders, psychological suffering, and social disadvantage. Participants were recruited from two therapeutic residential communities for adolescents and young adults: "La Casa", Rome, Italy, and "Villa Von Siebenthal", Genzano di Roma, Italy. Adolescent dwellers in both communities have a range of mental issues (e.g., onset of psychotic disorders, disorders in the affective spectrum, anxiety disorders, personality disorders, depression), relational difficulties, addictive behaviours, self-injury behaviours, and suicidal ideation. They experience a temporary separation from the usual life context and a temporary inclusion in a therapeutic context.

General aim

The general objective of the project was to improve mental well-being, social integration and physical/motor condition among community-dwellers adolescents and young adults, using playful activities, fun and participation as the main tools.

Specific aims

Therapeutic: to improve participants' mental health and general well-being.

Social inclusion: to improve participants' social connection (among community dwellers and with people outside the communities).

Cognitive modification: to improve 'theory of mind' skills (understanding of others in social contexts).

Behavioural modification: to promote participant's lifestyle behaviours (e.g., cigarette smoking).

Sports performance: to improve physical/motor condition.

Type of sports activity

Rugby. Rugby is a team sport, involving much physical contact. In this pilot, rugby techniques and rules were modified (e.g., controlled-contact mode, rugby touch, rugby flag) to adapt them to the physical condition of participants, as well as to their skills and competencies. The aim was to minimize the risk of injuries or the emergence of aggressive behaviours. All

activities were based on the assumption that rugby is a means, not an end; a means to socialize, educate, develop, integrate, and improve physical and mental health. The *third half* is a tradition in rugby: at the end of the match, the opponent players meet to share some time together and to have a drink and a snack. The third half philosophy was at the base of this pilot: rugby activities - as well as the recreational time spent outside the field - were offered as an opportunity for participants to improve their understanding of others in social contexts (*theory of mind* skills) and to learn to manage the emotions that may have arisen during the match. Many adolescents and young adults participating in the project show provocative/oppositional behaviours. The rugby third half represents a symbolic place where to ease any resentment and establish healthy social relationships as a result of the shared experience of the sport.

Short description of the activities

<u>Frequency of the sessions</u>: once a week (Thursday in the morning)

Duration of each session: 2 hours

<u>Duration of the program</u>: 20 weeks (20 sessions)

During the first sessions, participants' motor and cognitive competencies were evaluated through <u>questioning techniques</u>. The coach asked open and closed questions about what they did or enquire about their opinions and feelings and used probing questioning to build relationships with participants. By asking questions functional to the performance of the motor task presented, the coach aimed at a real understanding of the activities/games and translated concretely into the ability to organize the most appropriate setting. The model allows defining what is already known through a technical performance and promotes the acquisition of new competencies. The coach had a central role in the transmission of knowledge (mainly technical) to the learners, focusing on the single motor skill to teach skills increasingly complex to be used in a sport/game context.

Teaching activities were split into 4 phases: in the first two phases of the pilot, the coach aimed at developing motor control of the tools (e.g. ball, flags, etc), to allow the transfer of these skills into a game context. In the third stage, participants were introduced to an adapted game context, in which the numbers of players, rules and conditions of the game were gradually introduced. In stage four, i.e. in the final stage, the participants were involved in games under conditions and rules that represent the standards of the official games.



Figure. Stages of the learning process (from simple to complex)

Equipe

The pilot was supported by the following professional interdisciplinary team:

Professional rugby coach: (Alejandro Villalon) in charge of the sport-based program; provided individual/tailored technical coaching to facilitate progress in participants, organized activities and events, and provided feedback to the team.

Psychiatrist (Responsible "La Casa"): (Dr Santo Rullo) in charge of the comprehensive care pathway for the mental health needs of the population of adolescents and young adults in the residential community.

3 Psychologists: (Francesco Tomassini, Diletta Fagiolo, Antonella Giuliani) attended all sports activities and were available for participants to seek support and advice (reference persons for participants' needs)

Football coach: (Cristian Simina): professional coach with experience in adolescents with mental issues; assisted the rugby coach with physical/motor aspects, managed behavioural issues eventually emerging during the activities.

Researcher: (Marta Borgi) was responsible for the monitoring/evaluation of the pilot program.

Pilot monitoring and evaluation

To evaluate the impact of the pilot project, the following monitoring tools were used at the beginning and at the end of the program:

- Warwick Edinburgh Mental Well Being Scale [wellbeing]
- Theory of Mind Assessment Scale [theory of mind]

Moreover, a tool specifically developed in the context of the project was used to observe and evaluate behavioural aspects during the individual sessions:

- attendance
- punctuality
- autonomy
- interest/participation
- behavioural issues (e.g., provocative behaviour)
- teamwork/socialization
- use of sports tools

Regular brief team meetings were organized to update and provide feedback about activities.

Events organized in the context of the pilot project

20/12/2022. *Christmas party*. Attended: project's team, participants from both communities, community's staff.

25/02/2023. *Final event. Italy vs Ireland Match Six Nations.* Participants were involved in friendly matches with junior female rugby players and attended the Six Nations match. Attended: project's team, ECOS team, participants from both communities, community's staff, some family members.









WATCH THE VIDEO!

'Crazy for rugby' was mentioned in 'Fame d'amoré', a TV series broadcast by RAI (the public Italian broadcasting company) [Italian language]

https://www.raiplay.it/video/2022/12/Fame-damore---Puntata-del-12122022-64c0f9ba-0fa5-4e76-86a0-42c86ea1904c.html?wt_mc=2.www.wzp.raiplay

Final event

Italy vs Ireland Match Six Nations

Stadio dei Marmi, Stadio Olimpico, Rome, Italy









'Not only headshots'

A football program for adults with mental disorders

Coach: Matteo Losito

Place: Community "Il Faro", Cesena, Italy

Start date: 30\09\2022 **End date:** 27/02/2023

Participants/beneficiaries

The project engaged 5 participants, 30-65 years old, male and female, with diagnoses of psychotic disorders, eating disorders, and affective disorders (bipolar disorder or depressive disorder). They were recruited from "Il Faro" (a community setting for adults with mental health issues based in Cesena, Italy).

General aims

Therapeutic: symptoms reduction (e.g., anxiety reduction, regularization of circadian rhythms and sleep, decrease in perceived stress). Given the high variability of the participants' symptoms, more specific aims – tailored to each participant - were defined. As an example, in the case of a patient with a mood disorder, reduction of apathy and increase in self-esteem were the main aims, to be achieved through calibrated exercises allowing him/her to make small constant progresses, thus acting on his/her sense of self-efficacy. In the case of a patient suffering from a generalized anxiety disorder, exercises of increasing intensity were planned and the participant was invited to "think" less and to focus on the body (perceived fatigue was taken into account to calibrate the activity to acceptable levels for the patient's condition). **Social inclusion:** all activities were inclusive; training, matches, and events were organized involving people without mental issues (family members or volunteers). During the activities, participants were free to express themselves, the first step for future integration and inclusion in other activities.

Cognitive skills: participants were invited to use different cognitive resources, such as executive functions, especially working memory, planning, and task-shifting abilities. For example, participants were invited to memorize two or more starting signals, while their attention was diverted by some distracting signals.

Performance: although performance was not specifically addressed, a general improvement in the participants' fitness was still hypothesized.

Type of sports activity

Outdoor football. Football is the most popular sport in Italy: many people, even if they have never played it, know its rules. For this reason, it is considered a very inclusive sport in our culture and a sport whit rules easy to learn.

Short description of the activities

<u>Frequency of the sessions</u>: once a week <u>Duration of each session</u>: about 90 minutes

Sessions were held once a week and lasted 1 hour/2 hours. All sections were split into 12-min mini-sections, called "stations". Each of them had a specific objective (e.g., coordination, motor skills, fundamentals of football). Activities were proposed in the form of games, coordination-motor paths, and pure technique exercises. The intensity and degree of difficulty were calibrated on the participants' needs and athletic skills. The subdivision into stations had the aims of minimizing downtime, making the session more fluid and intense, and preparing participants in advance. In fact, the exercises were illustrated at the beginning of the session in a brief meeting. Activity time in each station lasted between 12 and 15 minutes; a short recovery break (depending on the participants' needs and their degree of involvement with the activities) was planned for each station. To obtain greater participants' involvement, various strategies have been used, including team (collaborative) activities, individual challenges, as well as competitive activities (matches). A briefing meeting (circletime) was planned at the beginning and at the end of the session during which the coach has given participants the floor to talk about the training, their emotions and physical condition, as well as time to express their opinions, perplexities, and any other topic of their choice.

Each session was structured as follows:

Welcome and Circle time	15 min
Warm-up	12-15 min
Recovery	3 min
Coordination-motor path	12-15 min
Recovery	3 min
Exercises with the ball	12-15 min
Recovery	3 min
Playful activities (game)	12-15 min
Recovery	3 min
Circle time and Closure	10 min

The <u>Coordination-motor path</u> consisted of a track with some equipment laid out on the ground (cones, markers, circles, ladders, and obstacles). Depending on how the path is built, different objectives can be achieved. For example, by placing low obstacles at a distance in which only the foot passes, you can push the participant to stand on the forefoot (front of the foot), thus teaching him/her a more effective way of running without using the rear supports. The <u>Exercises with the ball</u> consisted of specific tasks using the ball, (e.g., conducting, receiving, transmitting/passing, dribbling, and shooting exercises). Participants could perform activities, such as dribbling, both in front of a fixed obstacle and in front of a moving opponent (game). <u>Warming-up</u> and <u>Recovery</u> involved stretching and breathing exercises. Teaching how to breathe profitably and efficiently is an objective that could have very important implications both in terms of physical and mental benefits.

Equipe

1 Coach, 1 Educator

Pilot monitoring and evaluation

To evaluate the impact of the project, the Warwick Edinburgh Mental Well Being Scale was used at the start and at the end of the program to assess change in participants' wellbeing.

Events organized in the context of the pilot project

20/12/2022. *Christmas party*. Lottery with some technical clothes donated by some local football associations. Attended: project's team, participants, community's staff. 05/03/2023 *Final event*. Attended: project's team, participants, community's staff.

















UNITED KINGDOM

'Imagine Your Goals'

A mental health football program

Coach: John Bilsborrow

Place: Everton in the Community (EitC) 'Peoples Hub', Liverpool, UK

Start date: 12\09\2022 **End date:** 30\11\2022

Participants/beneficiaries

This pilot project engaged 14 male and 1 female adults (18-45 years; mean age: 34 years) with a range of different psychiatric disorders recruited from different community mental health teams (CMHT) from across the wider City region of Liverpool (Merseyside)

General aims

Therapeutic: to improve participants' mental health and mood and to reduce levels of depression, anxiety, and suicidal ideation.

Social inclusion: to improve participants' social contact with like-minded people, social capital and to reduce feelings of social isolation of loneliness.

Cognitive Behavioural Modifications: to improve participant's lifestyle behaviour, understanding of goal-setting, and football intelligence/game understanding.

Sports performance: to improve participant's cardiovascular fitness, ABC'S (Agility, Balance, Coordination and Speed), and technical football ability.

The pilot action was expected to gain the following results: Improved psychological well-being; Improved self-confidence and self-esteem; Improved social connection and contact; Improved optimism for the future; Improve social capital; Improved physical fitness.

Type of sports activity

Football. Football is the most popular sport and has been strategically chosen to harness the universal passion it provokes, but also to ensure it is appropriate and inclusive for everyone this pilot aims to engage. There is significant research that physical activity such as football for people living with mental health difficulties can have a significant positive impact on their social, physical, and mental health, as well as their overall quality of life (Benkwitz and Healy, 2019). Football is a team game and when facilitated effectively can illicit significant health and well-being benefits to players, including increasing physical activity, forging peer-social support networks, and learning new skills, which are all key components to achieving positive health outcomes. Ultimately football has been chosen as the City of Liverpool is a football city and the playing of football is a tried-and-tested engagement methodology that has proven very successful in the past for multiple at-risk and marginalised population groups, (Hargreaves and Pringle, 2019).

Short description of the activities

<u>Frequency of the sessions</u>: twice a week (Monday and Thursday in the afternoon)

Duration of each session: 2 hours

<u>Duration of the program</u>: 12 weeks (24 sessions)

EitC's 'Imagine Your Goals' mental health football program used the medium of football as a therapeutic tool to positively address mental illness. The pilot supported participants' social, physical, and mental health by building individual levels of resilience, self-efficacy and self-esteem to combat social isolation and aid their ongoing rehabilitation. Training sessions were delivered in the afternoon, to mitigate the effects of antipsychotic medications leaving participants feeling drowsy in the morning. To foster greater social connection among participants and staff, time was assigned both before and after training sessions for participants to build robust and organic social connections with each other. Participants also set their own personal goals, which were reviewed at regular update/ feedback 1-to-1 meetings/ reflection diaries with support from EitC staff.

Each training session adhered to the following format:

Welcomes, introductions and familiarisation	5 min
Warm-up	15 min
Technical football coaching	25 min
First- half of football practice match	45 min
Half-time psycho-educational 'team talk'	15 min
Second half of football practice match	45 min
De-brief and cool-down	10 min

Equipe

The pilot was supported by the following professional inter-disciplinary team:

Professional football coach: provided technical coaching to tailor activities to individual needs and facilitate regular progress/ feedback meetings with participants;

'Living Well' Coordinator: provided participants with health and wellbeing support, guidance, and information related to healthy lifestyles and extension opportunities beyond the pilot action;

Health and Wellbeing manager: supported with monitoring/evaluation of the pilot;

EitC GP: Dr. Chris Pritchard was available for participants to seek medical support and advice.

Pilot monitoring and evaluation

To evaluate the impact of this pilot a number of quantitative and qualitative measures tools were deployed at 3 weeks intervals 0, 3, 6, 9 and 12.

Quantitative methods:

- Warwick Edinburgh Mental Well Being Scale
- Illinois Agility run (football specific)
- IPAQ (pre and post)

Qualitative methods:

- Participant reflection diaries
- Regular update/ feedback meetings with the coach
- Pre, mid-point (week 6) and end of pilot review meetings
- Video impact case studies

Events organized in the context of the pilot project

World Suicide Prevention Day Football tournament: 10/09/2022 (80 people engaged) World Mental Health Day Football tournament: 10/10/2022 (120 people engaged) Christmas party and graduation ceremony: 16/12/2022 (75 people engaged)











WATCH THE VIDEO!

Watch the participants giving their feedback about the project! https://www.youtube.com/watch?v=jEqkOqDmohq



'Keep your Boots On'

A walking football program

Coach: Lewis Garside

Place: Everton in the Community (EitC) 'Peoples Hub', Liverpool, UK

Start date: 12\09\2022 **End date:** 30\11\2022

Participants/beneficiaries

The program engaged 15 male participants aged 40+ (mean age: 56 years) with mental health difficulties. This age group has been chosen, as there are more at risk of suicide according to statistics (The Mental Health Foundation).

General aims

Therapeutic: to improve participants' mental health and mood and to reduce levels of depression, anxiety, and suicidal ideation.

Social inclusion: to improve participants' social contact with like-minded people, social capital and reduce feelings of social isolation of loneliness.

Cognitive Behavioural Modifications: to improve participant's lifestyle behaviour, understanding of goal-setting, and football intelligence/game understanding.

Sports performance: to improve participant's cardiovascular fitness, ABC'S (Agility, Balance, Coordination and Speed), and technical football ability.

The pilot action was expected to gain the following results:

Improved psychological well-being; Improved self-confidence and self-esteem; Improved social connection and contact; Improved optimism for the future; Improve social capital; Improved physical fitness.

Type of sports activity

Walking Football. Walking football is a slow-paced version of the beautiful game and is a great way to maintain an active lifestyle for people of any age. Walking Football is the fastest-growing sport in the U.K, with an estimated 60,000 people playing regularly across the UK and is a great way to keep active, make new friends and learning new skills. There is growing research that physical activity such as walking football for people living with mental health difficulties can have a significant positive impact on their social, physical and mental health, as well as on their overall quality of life. Walking Football has been strategically chosen to harness the universal passion shared for football, but also to ensure it is appropriate and inclusive for the age and ability profile we seek to engage. Ultimately football has been chosen as the City of Liverpool is a football city and the playing of football is a tried-and-tested

engagement methodology that has proven very successful in the past for multiple at-risk and marginalised population groups, (Hargreaves and Pringle, 2019).

Short description of the activities

<u>Frequency of the sessions</u>: twice a week (Monday and Wednesday in the afternoon)

<u>Duration of each session</u>: 1 hour and 30 minutes <u>Duration of the program</u>: 12 weeks (24 sessions)

The program delivered fun and inclusive walking football training sessions to improve participants' physical, social and mental health. Sessions took place in the afternoon between 6:30 pm and 8:00 pm. This time has been chosen as a number of the participants we seek to engage in this pilot work in the day and therefore evening sessions work best for them. To foster greater social connection among participants and staff, time was assigned both before and after training sessions for participants to build robust and organic social connections with each other. Participants also set their own personal goals which were reviewed at regular update/ feedback 1-to-1 meetings/ reflection diaries with support from EitC staff.

Each training session adhered to the following format:

Welcomes, introductions and familiarisation	5 min
Warm-up and Technical football coaching	20 min
First- half of football practice match	25 min
Half-time 'team talk'	10 min
Second half of football practice match	25 min
De-brief and cool-down	5 min

Equipe

The pilot was supported by the following professional inter-disciplinary team:

Professional football coach: provided technical coaching to tailor activities to individual needs and facilitate regular progress/ feedback meetings with participants;

'Living Well' Coordinator: provided participants with health and wellbeing support, guidance and information related to healthy lifestyles and extension opportunities beyond the pilot action;

Health and Wellbeing manager: supported with monitoring/evaluation of the pilot;

EitC GP: Dr. Chris Pritchard was available for participants to seek medical support and advice.

Pilot monitoring and evaluation

To evaluate the impact of this pilot a number of quantitative and qualitative measures tools were deployed at 3 weeks intervals 0, 3, 6, 9 and 12.

Quantitative methods:

- Warwick Edinburgh Mental Well Being Scale
- Illinois Agility run (football specific)
- IPAQ (pre and post)

Qualitative methods:

- Participant reflection diaries
- Regular update/ feedback meetings with coach

- Pre, mid-point (week 6) and end of pilot review meetings
- Video impact case studies

Events organized in the context of the pilot project

World Suicide Prevention Day Football tournament: 10/09/2022 (80 people engaged) World Mental Health Day Football tournament: 10/10/2022 (120 people engaged) Christmas party and graduation ceremony: 16/12/2022 (75 people engaged) Friendly match against Tranmere Rovers: 12/10/2022 (32 people engaged)







WATCH THE VIDEO!

Watch the participants giving their feedback about the project!

https://www.youtube.com/watch?v=jEqkOqDmohq





ROMANIA



'Get fit!'

A gymnastics program

Coach: Alexandru Oltean

Place: Palazu Mare Psychiatric Hospital. Asociatia Clubul Sportiv Arena Constanta. Fit Arena

Studio Constanta, România Start date: 1\09\2022 End date: 31\12\2022

Participants/beneficiaries

The program engaged 8 persons, 4 men (ages between 29 and 49) and 4 women (ages between 32 and 39 years), some of them with a diagnosis of mental disorder (psychotic disorders, affective disorders, anxiety spectrum disorders). Participants were recruited from a health facility (Palazu Mare Psychiatric Hospital).

General aims

Therapeutic: to improve quality of life, and increase self-esteem and autonomy.

Social inclusion: to reduce shyness; to improve participants' social contacts and social capital and to reduce social isolation.

Cognitive Behavioural modifications: to improve participant's lifestyle behaviour.

Sports performance: to improve coordination skills.

Type of sports activity

Gymnastics, Yoga, Pilates. Individual sport, but training took place in groups of 4.

Short description of the activities

<u>Frequency of the sessions</u>: twice a week (in the morning)

<u>Duration of each session</u>: 1 hour and a half <u>Duration of the program</u>: 12 weeks (16 sessions)

Each training session adhered to the following format:

Welcomes, greeting and check on health status	5 min
Warm-up	10 min
Gym practice	35 min
De-brief and cool-down	5 min
Feedback	5 min

Equipe

The pilot was supported by the following professionals:

2 Coaches (Iulian Şerbu, Oltean Antoanela)

Mental health professional (Eda Maliche Ciorabai)

Teachers from the Faculty of Physical Education and Sport.

Pilot monitoring and evaluation

To evaluate the impact of the pilot project, the following monitoring tools were used at the beginning and at the end of the program (to participants or their legal guardians):

- Warwick Edinburgh Mental Well Being Scale [wellbeing]
- Questionnaire Training Feedback [feedback about the training]

Events organized in the context of the pilot project

17/12/2022. Final event. Event organized at the Physical Education and Sport Faculty of Constanta. A gymnastic event where all the people involved in this project along with others from the Sports Club ARENA demonstrate their abilities. The families were involved in the organization of the event (setting up the room, and supporting the participants during the event). The families were very surprised by the abilities of the members participating in the event and the level of autonomy demonstrated by the actions during the event, but also by the very motivating mental state in the context of a so-called competition.















'Get fit!'

A gymnastics program

Coach: Iulian Serbu

Place: Palazu Mare Psychiatric Hospital. Asociatia Clubul Sportiv Arena Constanta. Fit Arena

Studio Constanta, România Start date: 1\09\2022 End date: 31\12\2022

Participants/beneficiaries

The program engaged 8 persons, 4 men (ages between 29 and 49) and 4 women (ages between 32 and 39 years), some of them a diagnosis of mental disorder (psychotic disorders, affective disorders, anxiety spectrum disorders). Participants were recruited from a health facility (Palazu Mare Psychiatric Hospital).

General aims

Therapeutic: to improve quality of life, and increase self-esteem and autonomy.

Social inclusion: to reduce shyness; to improve participants' social contacts and social capital and to reduce social isolation.

Cognitive Behavioural modifications: to improve participant's lifestyle behaviour.

Sports performance: to improve coordination skills.

Type of sports activity

Gymnastics, Yoga, Pilates. Individual sport, but training took place in groups of 4.

Short description of the activities

<u>Frequency of the sessions</u>: twice a week (in the morning)

<u>Duration of each session</u>: 1 hour and a half

<u>Duration of the program</u>: 12 weeks (16 sessions)

Each training session adhered to the following format:

Welcomes, greeting and check on health status	5 min
Warm-up	10 min
Gym practice	35 min
De-brief and cool-down	5 min
Feedback	5 min

Equipe

The pilot was supported by the following professionals:

2 Coaches (Iulian Serbu, Oltean Antoanela)

Mental health professional (Eda Maliche Ciorabai)

Teachers from the Faculty of Physical Education and Sport.

Pilot monitoring and evaluation

To evaluate the impact of the pilot project, the following monitoring tools were used at the beginning and at the end of the program (to participants or their legal guardians):

- Warwick Edinburgh Mental Well Being Scale [wellbeing]
- Questionnaire Training Feedback [feedback about the training]

Events organized in the context of the pilot project

29/12/2022. *Final event.* Extra session of fitness training during which all participants do their best. Attended: project's team, participants, some families and friends.











'Multiple Sport Group'

A sport program to increase autonomy

Coach: Reetu Kulhua

Place: Näsinkulma Club House, Tampere, Finland

Start date: 23\08\2022 **End date:** 09\12\2022

Participants/beneficiaries

The program engaged 10 participants recruited from Sopimusvuori ry. Sopimusvuori ry offers social rehabilitation and rehabilitative work services in Tampere, to promote comprehensive well-being, especially from the point of view of mental health. Participants had different types of mental disorders.

General aims

The main aim of the pilot was to motivate participants and engage them in different types of sport-based activities. The objective was to find a sports activity they like and make a connection with them (both social and emotional) with the final aim of affecting their attitudes towards sports and providing tools and resources to practice sports by themselves.

Social inclusion: to improve participants' social relationships through team sport **Sports performance:** to improve participants' physical fitness (agility, coordination)

Type of sports activity

Different sport-based activities. Different sport-based activities (football, floorball, indoor walking, outdoor/green walking, gym, frisbee golf) were proposed to participants so that participants had the opportunity to try new activities and have a good experience with them. All activities were proposed as group activities. Various activities were offered because different people like different things and with the aim to offer new opportunities to people who never were engaged in sport-based programs.

Short description of the activities

<u>Frequency of the sessions</u>: once a week (Friday, in the afternoon)

Duration of each session: 2 hours

<u>Duration of the program</u>: 12 weeks (10 sessions)

Group-sessions. The aim of the group-sessions was to promote physical activity, and to propose new experiences for participants. The group always spent time together before and after the training which increased the commitment. Participants' attitudes and preferences

were always taken into account and their self-confidence and autonomy were always stimulated. Sessions started and ended at the clubhouse.

Equipe

Sports Instructors, Assistant coaches, Unit manager of Clubhouse, Staff of Sopimusvuorim (Anne Tuomanen, Kaisa Björ)

Pilot monitoring and evaluation

The professional coach was connected with HLU (Hämeen Liikunta ja Urheilu ry, Finnish Sport Federation Tampere Region, Finland) and organized regular meetings (group discussion) to give and have feedback about the activities, also with the presence of the Unit manager of Clubhouse (Anne Tuomanen). During the meetings, participants can report their feelings and thoughts about the sessions and about their every-day physical activity and mental condition and about their plans for future sport-based programs.

Events organized in the context of the pilot project

Näsinkulma Club House Sports Day organized by HLU in April 2023 for club house staff and members (30 participants)



'Rehabilitating Sports'

A team sport program to increase autonomy

Coach: Sami Ekmark

Organizers and Place: Nokia Municipality Mental Health Services and Nokia Football

Club, Finland

Start date: 01\09\2022 **End date:** 31\12\2022

Participants/beneficiaries

The program engaged 10 participants who were split into two groups: the first group involved people who hadn't experience in physical activity and the second was a more competitive group involving people who had more experience in physical activity.

General aims

The main aim of the pilot was to provide low-threshold exercise and sport-based activities for people who have not yet found a comfortable social and physical environment to practice exercise or have negative experiences of sport. The final aim was to create a permanent low-threshold group in Nokia for mental health service users to start exercising.

Therapeutic: to improve participants' mental health

Social inclusion: to improve participants' social relationships through team sport

Sports performance: to promote participants' approach to sports and to positively change

their attitudes towards physical activity and sports.

Type of sports activity

Team sports. Team sports were proposed to participants so that they had the opportunity to try new activities and have a good experience with them. Various activities were offered because different people like different things and with the aim to offer new opportunities to people who never were engaged in sport-based programs.

Short description of the activities

<u>Frequency of the sessions</u>: once a week Duration of each session: 1 hour and half

Duration of the program: 16 weeks (16 sessions)

The session started with brief circle-time to express attitudes and preferences and give feedback about the program. Then some minutes to warm up. Then sport-base activities were implemented. The sessions ended with some recreational activities and with a closure circle (goodbye and feedback).

Equipe

Nokia mental health services. Football club Nops, the city of Nokia, and the mental health Centre of Nokia. The City of Nokia offered the facilities, and the participants came from health centres.

Pilot monitoring and evaluation

The professional coach was connected with HLU (Hämeen Liikunta ja Urheilu ry, Finnish Sport Federation Tampere Region, Finland) and organized regular meetings (group discussion) to give and have feedback about the activities, also with the presence of the Unit manager of Clubhouse (Anne Tuomanen). During the meetings, participants can report their feelings and thoughts about the sessions and about their every-day physical activity and mental condition and about their plans for future sport-based programs.



2. Sport-based interventions for people with mental disorders: actions needed

Physical activity and exercise have preventive and therapeutic effects on physical and mental health and may positively influence the brain and cognitive functioning (Cross-Villasana et al., 2019). In people with mental disorders, physical activity can improve a range of aspects, from cardiorespiratory fitness to personal functioning, self-esteem, and cognition, with an impact on the patient's quality of life. Physical and sport-base activities could also act indirectly, increasing patients' social connectedness, which represents an essential component of the recovery process in patients with mental disorders (Sampogna et al., 2022).

Despite accumulating scientific evidence showing the potential of sport-based programs as an effective component of personalized treatment approaches for people with mental disorders, the routine implementation of these programs in mental health care is still hampered by several factors.

The eight pilot actions here reported represent important case studies to promote these interventions and the connected methodologies. Feedback from coaches confirms the presence of many barriers limiting the possibility for people with mental disorders to engage in sport-based interventions, such as medications' side effects, being overweight, poor motivation, lack of resources (e.g., transportation), and lack of professional support.

Better integration and collaboration between mental health professionals and sports professionals and the presence of training programs for sports instructors on how to engage people with mental disorders in sport-based interventions represent critical issues. At the same time, it is of utmost importance to deliver training programs for mental health professionals in order to improve their knowledge of the benefits of physical activity and support them in the implementation of exercise interventions for people with mental disorders (Sampogna et al., 2022).

The EASMH project aims to fill all these aspects by creating an international and interdisciplinary 'alliance' among professionals with different backgrounds and stakeholders and by developing an innovative training program for sports coaches. This Report aims to favour the dissemination of sport-based interventions, trying to contribute to their diffusion and availability in routine clinical practice.

References

Cross-Villasana Fernando, Jürgen Beckmann, Paul Sellars, Diane Crone, Stefania Cerino, Santo Rullo, Francesca Cirulli, Stefano Moliterni, Valerio Di Tommaso, Sampsa Kivistö, Alberto Bichi, Tatjana Udovic, Jonathan Garside (2019). SPHERE - Sport Healing Rehabilitation / Training Guidelines Theoretical Framework. October, 2019.

Sampogna G, Borgi M, Collacchi B, Cirulli F, Cerino S, Rullo S, Di Vincenzo M, Luciano M, Di Tommaso V, Moliterni S, Bichi A, Garside J, Kivistö S, Iarion A, Fiorillo A (2022) Using sport-based interventions for people with severe mental disorders: results from the European EASMH study. Int Rev Psychiatry, 34:837-847.



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