



# Exercise & Mental Health

An eBook by

**ESSA:**

EXERCISE & SPORTS SCIENCE AUSTRALIA

# Foreword

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## DR SIMON ROSENBAUM

Our understanding of the relationship between exercise and mental health has evolved considerably in recent years. Once viewed as ‘just’ a distraction from negative thoughts, exercise is now recognised as an evidence-based, fundamental component of treatment for a range of mental illnesses.

The acute and chronic mental health benefits of exercise extend beyond reducing the symptoms of common conditions such as depression and anxiety. Increasingly, the mental and physical effects of exercise are being used as an integrated part of routine treatment for psychotic disorders including schizophrenia, substance abuse disorders, eating disorders, and cognitive impairment.

Importantly, although often confused, mental health and mental illness exist on separate continuums, whereby at any point in time, people experiencing poor mental health (i.e. feeling down) may not necessarily be experiencing a mental illness. Similarly, someone living with a chronic mental illness can be free of symptoms and experiencing good mental health. What is clear from a now overwhelming body of scientific evidence is that regardless of where along the two continuums someone is, exercise has an important role to play in improving mental health.

Although not a cure, exercise should be seen as a ‘tool in the tool belt’ for people living with mental illness and as a strategy for helping to manage symptoms, improve physical health, improve sleep quality, and improve overall quality of life.

While exercise may indeed be a ‘pill’ for improving mental health, the challenge is helping those who may need it most to strap on the sneakers and ‘swallow’ it. We all have barriers to being physically active, and typically people experiencing mental illness or poor mental health may find it even more difficult than the rest of the population to engage in regular exercise.

This eBook captures the key themes of recent research including the message that when it comes to the mental health benefits of exercise, anything is better than nothing and seeking help from an appropriately qualified health professional, such as an Accredited Exercise Physiologist can significantly increase chances of success over the long term.

**Dr Simon Rosenbaum is a mental health researcher with the School of Psychiatry, UNSW, Sydney, and Black Dog Institute.**

## ANITA HOBSON-POWELL

As we see more and more research come to light on the benefits of physical activity on our mental health and, more specifically, mental health disorders, helping people experiencing mental illness to live active lives is not a gap in knowledge, rather a lack of implementation.

In 2018, ESSA, alongside the American College of Sports Medicine (ACSM), British Association of Sport and Exercise Science (BASES), and Sport and Exercise Science New Zealand (SESNZ), officially released the first joint international consensus statement on *'The Role of Sport, Exercise, and Physical Activity in Closing the Life Expectancy Gap for People with Mental Illness'*.

This international consensus statement aims to delineate the key factors that must be addressed by key decision makers to increase access to appropriate exercise programs for people with mental illness and subsequently contribute to closing the life expectancy gap.

At ESSA, we are committed to promoting the role of exercise interventions as a key component of a global strategy toward achieving a 50% reduction in the life expectancy gap of people experiencing mental illness by 2032.

Both the international statement and this eBook identifies that exercise practitioners (such as Accredited Exercise Physiologists), as members of a multidisciplinary team, play a core role as advocates for positive lifestyle change, with the ability to address major modifiable risk factors contributing to premature mortality in mental health disorders.

Although not a magic bullet, physical inactivity is a key, modifiable risk factor that we overwhelmingly know how to address, and accredited exercise professionals play a significant role in achieving the motivation to move more for improved mental health.

**Anita Hobson-Powell is the Chief Executive Officer of Exercise & Sports Science Australia (ESSA).**



# ESSA:

EXERCISE & SPORTS SCIENCE AUSTRALIA

## Who is ESSA?

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Founded in 1991, Exercise & Sports Science Australia (ESSA) is the peak professional body and accrediting authority for over 7,000 university qualified and Accredited Exercise Physiologists, Exercise Scientists, Sports Scientists, and High Performance Managers.

Find your local accredited exercise professional:  
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Thank you to the Accredited Exercise Physiologists who contributed their expert knowledge to this eBook.



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# What does mental health look like in Australia?

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It is the sad reality that each year 1 in 5 Australians will experience a mental illness, yet there is still a poor understanding and acceptance of mental illness. Due to this, it often goes undiagnosed and either untreated or poorly treated.

People living with a mental illness die much earlier than the rest of the population, mostly due to preventable cardiovascular disease. Dying 15 to 20 years earlier means that life expectancy for people with mental illness is similar to that seen in the population at large in the 1950s.

Mental illness can have an impact on a person's cognitive, behavioural and social functioning. Those with a mental illness often struggle to engage in their regular work, social and physical activities to the full extent which further impacts the illness as social isolation then often occurs.

Mental illness includes a range of conditions including affective, anxiety, psychotic, personality, and substance related disorders. General Practitioners (GPs), alongside Psychologists and Psychiatrists, form part of a multidisciplinary care team aimed at improving the long-term mental health and well-being of patients.

For full background information on mental health conditions please visit [Beyond Blue](#) or the [Black Dog Institute](#).



# Why exercise is important

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There is mounting evidence that suggests exercise is an effective component of treatment for people living with acute and chronic mental illness. With exercise making a big difference in mood and promoting a positive mental health, whilst also helping to reduce the symptoms of mental illness, there is a significant need for exercise to be a fundamental part of mental health treatment.

It's important to remember that it's not about what type of exercise is the best kind, it's about what works for the individual, and that doing something is better than doing nothing at all. Even one workout a week is known to have great benefits.



# THE STATS

Physical inactivity is the cause of approximately 9% of premature mortality worldwide, with people experiencing a mental illness being particularly vulnerable to inactivity. The high risk of poor physical health in those with a serious mental illness is acknowledged as one of the major reasons for high mortality rates. The relative risk of death is estimated to be 2.2 times higher in people with mental disorders compared to the general population and this is largely due to chronic physical health problems rather than the mental health issues.

With 20% of the Australian population experiencing a mental illness in any given year, overwhelming research has shown that physical activity is not only an effective part of treatment alongside standard care, but can also help protect against future episodes of mental illness.

Results of the 2018 HUNT study highlighted that 12% of cases of depression could have been prevented by just one hour of exercise a week.

Further research tells us that physical activity can then protect against developing future mental disorders. A study in The American Journal of Psychiatry found physical activity can protect against the emergence of depression, regardless of age and geographical region.

The research team found consistent evidence based on data from more than 260,000 people that physical activity decreases the odds against depression development by 17%. The results were consistent in analyses that have adjusted for potential variables like sex, age, smoking and body mass index.

**PHYSICAL INACTIVITY IS THE CAUSE OF APPROXIMATELY**

**9%**

OF PREMATURE MORTALITY WORLDWIDE



The relative risk of death is estimated to be

**2.2 TIMES HIGHER**  
in people with mental disorders



**12% OF CASES OF DEPRESSION COULD HAVE BEEN PREVENTED**  
by just one hour of exercise a week



# THE EFFECTS ON OUR PHYSICAL HEALTH

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Generally, individuals experiencing mental health conditions will also experience some elements of poor physical health, and vice versa.

According to data from the Australian Institute of Health and Welfare, [Australia's Health 2016 National Report Card](#), mental health conditions were reported as a co-morbidity among:

- 36% of people with chronic obstructive pulmonary disease (COPD)
- 30% of people with back pain and problems
- 29% of people with asthma

Australians who are then living with a mental illness:

- Are 2-3 times more likely to suffer from diabetes than the general population
- Are almost four times more likely to suffer from cardiovascular disease (CVD) and also significantly more likely to die from CVD as opposed to those without mental illness
  - » Coronary heart disease carries the independent risk factor of depression, which can affect the recovery of those with CVD and increase the risk of future heart problems.

These physical health implications on those living with a mental illness is due in part to the range of lifestyle factors such as poor diet and low levels of physical activity. Given this well-known relationship between physical and mental health, it is imperative that individuals living with a mental health condition have access to a multidisciplinary treatment to enhance their quality of life and improve their physical and mental health outcomes.



# OVERVIEW OF MENTAL HEALTH AND EXERCISE

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The provision of the specific and client focused exercise plan becomes crucial, not just for the short-term benefits on mental health, but more importantly for the long standing effect exercise has on overall mental health and wellness.

Exercise, when provided suitably and in a way that is specific and individual to the needs of the client, is an excellent addition to other treatment for the ongoing journey towards good mental health.

If you know of someone in your life who is wanting to commence exercise but is living with some mental health challenges, or if you yourself have or are living with a mental illness, make your first choice an Accredited Exercise Physiologist – they are qualified allied health professionals who can work with you to better your mental health through appropriately designed exercise.



# Who are the exercise professionals?

Just like any physical illness or disability, treatment for a mental illness should be provided by a tertiary qualified health professional. It's therefore best to work with an exercise professional that has the skills and knowledge to help you manage your mental health condition with physical activity.

This makes Accredited Exercise Physiologists (AEP) pivotal in the multidisciplinary treatment environment. Working alongside General Practitioners (GPs) and Psychologists/Psychiatrists, these accredited professionals can tailor a plan suited to the client's needs, ability and motivation level, and address any psychosocial barriers that the client may address towards exercise participation.

By consulting an Accredited Exercise Physiologist (AEP) you will be working with someone who cares about your well-being and can prescribe an individual exercise plan to help you get started. The development and adherence towards good positive habits like exercise allow for the development and increase in client confidence, self-esteem and assertiveness, which are all important aspects in the management of mental illness.

In populations with mental illness, regular physical activity prescribed by an accredited exercise professional has been shown to:

- Improve cardio-respiratory fitness and reduce all-cause mortality risk
- Help control weight gain induced by medication (despite any side effects, medication still plays an important role in treatment)
- Improve chronic disease outcomes, especially type 2 diabetes and cardiovascular disease
- Decrease symptoms of depression and anxiety
- Improve sleep quality and increase self-esteem

It can take time for the benefits of exercise to be noticeable. Studies show a significant reduction in depressive symptoms after eight weeks. By introducing exercise interventions for those with mental health issues, evidence shows that there can be significant improvements in physical and mental health. However, it can be more difficult for those experiencing mental illness to initiate and maintain an exercise program due to the complex nature of their health.

To get in contact with your local accredited exercise professional to help start the process, visit the ESSA website: [www.essa.org.au](http://www.essa.org.au) or speak with your GP for a referral to an Accredited Exercise Physiologist.



Accredited Exercise Physiologists (AEP) are qualified allied health professionals that hold a minimum of 4-years of university training. AEPs are equipped to design, deliver and evaluate safe and effective evidence-based exercise interventions to individuals at high risk of developing, or with existing, chronic and complex medical conditions and injuries, including any conditions for which there is evidence that exercise can improve the client's clinical status.



# Exercising for depression

While the exact cause of depression is unknown, a number of factors can be associated with its development such as life events, changes in the brain, a family history of depression, serious illness, or drug and alcohol use.

## WHAT TYPE OF EXERCISE IS EFFECTIVE IN TREATING MAJOR DEPRESSION?

Exercise is listed as a recommended part of treatment in the Royal Australian and New Zealand College of Psychiatrists clinical practice guidelines for mood disorders, American Psychiatric Association guidelines for treatment, the National Institute for Health and Care Excellence (UK), and the Canadian Psychological Association guidelines. As well as having a significant effect on mood, regular exercise can help to reduce the risk of diseases commonly associated with depression such as heart disease and diabetes, the rates of which are higher in people with a mental illness (Correll, 2017; Vancampfort, 2016).

Aerobic exercise and weight lifting have been shown to be effective in reducing the symptoms of major depression.

- Moderate intensity aerobic exercise such as walking, running or cycling: 30 – 60 minutes per session at least 3 days per week.
- High intensity resistance training: 3 sets of 8 repetitions for 60 minutes at least 3 days each week.

## DOES EXERCISE HAVE A POSITIVE EFFECT WHEN COMBINED WITH MEDICATION?

Although it is strongly recommended to not change or stop taking medication, exercise does have similar effects to medication but none of the side effects. Exercise can also counteract the side effects of some medications such as reducing the risk of falling by strengthening muscles and helping control body weight and blood pressure.

It is accepted worldwide that exercise is an effective treatment and management tool for mood related disorders, including depression, and should be incorporated into any depression treatment plan.

## WHAT IS THE MOST EFFECTIVE INTENSITY TO IMPROVE MOOD?

Using guidelines similar to that for the general public is recommended – moderate to vigorous intensity a few times a week. Different studies have shown beneficial results with everything from walking and yoga (low intensity) to 80% of maximum weight training (high intensity).

While this might be confusing, it's best to look at the silver lining: any intensity from low to vigorous could be beneficial, depending on the person exercising.

If you're looking to start using exercise as a way to manage your depression, it's advised that you first speak with an Accredited Exercise Physiologist (AEP). Although it's possible that any intensity might work for you, it's important to have clear goals, strategies and plans in place to ensure you find an exercise program you can stick to. An AEP can also make sure any other health conditions are taken into account.

# Exercising for anxiety

Feeling anxious? Movement is medicine. In a world of deadlines, distractions and information overload, there are 5 simple steps that can help soothe feelings of anxiety.

## WHAT IS ANXIETY?

Did you know that one in every six young Australians experiences anxiety? Chances are, you might be one of them, or at least know someone who is. Feeling worried is actually a normal part of life, but occasionally the fear response gets turned up too high, when nothing is posing a danger to us. Along with consulting your General Practitioner, who may refer you to counselling under the Mental Health Treatment Plan, try the following physical activity tips to regain control of your brain during moments of anxiety.

## 1. BREATH IN, BREATHE OUT

Your nervous system works like a car does – it has an accelerator (sympathetic) and a brake (parasympathetic). It takes a balance of these two systems to achieve a feeling of calm. Perhaps it is time that you took your foot off the pedal! The easiest way to reset the system is to control your own breath.

Breathing can happen automatically, like right now, or you can manipulate your breath – think about when you sniff a flower, blow out candles, or sing loudly in the car. Feeling worried or stressed out can create shallow, ineffective breaths, and the brain will respond accordingly. Stimulating the vagus nerve by breathing deeply can bring about the relaxation response. Try it now:

- Take a huge breath in, feel the belly expanding, feel the lungs full of air
- Hold on to the breath (without closing off the throat), just for 2-3 seconds
- Breathe all of that air out, in a relaxed, long way. You could almost make it an audible sigh (making a 'ha' sound)
- Repeat for 1 minute.

See? Much better.

## 2. TAKE A HIKE...

Which may not always be convenient, but if you can replicate the great things about hiking (the walking part and the nature part), you'd be off to a good start! Aerobic, rhythmic, predictable activities such as walking, cycling and swimming all feel good for a few reasons. They can allow you to correctly assess nervous system responses – the heart is beating faster, but it's because of exercise, not high levels of stress. Anti-anxiety benefits have also been proven if walking in a 'green', natural environment, and bonus points if there is water present.

Beach trip anyone?

### 3. GET UP, STAND UP!

Research out of Deakin University, Melbourne has demonstrated that sitting too long is linked to anxiety; that too much time in front of a screen can over-excite the fight or flight response, disrupt sleeping patterns and eventually lead to social withdrawal. Standing up periodically comes with a multitude of health benefits. For the restless mind, it can provide a 'refresh' button and interrupt the flow of anxious thoughts. If you work or study predominantly at a desk, set an alarm every 30 minutes to stand up - your mind and body will thank you!

### 4. YOGA (GREEN SMOOTHIES, OPTIONAL)

Have you *seen* people walking out of yoga? They practically levitate out of those classes, all glowing and at-one-with-the-universe. Studies now know why: yoga increases GABA (gamma-aminobutyric acid) levels in the brain, which happens to be the main function of anti-anxiety medication. No wonder it feels so good.

Yoga classes also create a sense of community, and many lessons include guided meditation at the end, another known anxiety zapper. As for after-class hydration options, try to stay away from sweeteners and stimulants which can stir up the nervous system. Water is always a good option - it's what we are made of.

### 5. JUST DO SOMETHING

You have the power to break an anxious cycle, whether it is with a deep anchoring breath or a quick walk around the block. Remember not to put unrealistic expectations on yourself which can create more worry. Start by adding just one thing to your day - set aside time for breathing, or schedule in a lunchtime walk.

Bring awareness to the fact that you can choose to give power to worry - or you can choose to move.

### SO IF EXERCISE WAS A PILL FOR ANXIETY, HOW WOULD YOU TAKE IT?

Research recommends 30 minutes, 3 times, every week. An Accredited Exercise Physiologist can also help with strategies to achieve this.

For a quick fix, remember that just 10 minutes of walking in nature can lift your mood and decrease fatigue levels!

***Expert Contributor: Jennifer Smallridge, Accredited Exercise Physiologist***



# Exercising for PTSD

## WHAT IS POST-TRAUMATIC STRESS DISORDER?

Post-traumatic stress disorder (PTSD) can occur following exposure to potentially life-threatening or traumatic events. This can include events such as motor vehicle accidents, assault or experiencing the atrocities of war and combat. Being survivors of these events can cause elevated levels of continual stress that has negative effects on the body. PTSD can cause overwhelming sense of guilt and create negative thought patterns, including replaying the traumatic scenes in the mind of people with PTSD and being on high alert a lot of the time, so that the body is continually in a state of 'fight or flight', so people experiencing PTSD may find it difficult to feel at rest.

## HOW MANY PEOPLE DOES THIS AFFECT?

Traumatic events are tragically common among the population, with [Phoenix Australia's Australian Guidelines for the Treatment of Acute Stress Disorder and Posttraumatic Stress Disorder](#) outlining that around 75% of the population are exposed to trauma in their lifetime, with around 10% of those exposed to those events likely to develop PTSD. PTSD is especially common among groups exposed to trauma on a regular basis including combat veterans and first responders – such as police officers, ambulance workers and firefighters.

Unfortunately, there are many other health conditions that are strongly linked to PTSD.

## WHAT COMORBIDITIES DO THOSE WITH PTSD FACE?

The continual stress associated with PTSD affects the way that body works which may lead to secondary conditions such as [hypertension](#), [cardiovascular disease](#), [musculoskeletal aches](#), weakened immune function, [depression](#), [obesity](#), reduced libido, and increased risk of [diabetes](#).

There have also been some observed lifestyle factors among people with PTSD that may contribute to the development of secondary conditions such as sedentary behaviour, poor dietary and sleeping habits, smoking, and alcohol abuse. These can compile to hinder the recovery process and can often make PTSD-related symptoms worse.

## WHAT CAN EXERCISE DO?

Research is building to support the role of exercise as treatment for those with PTSD and the significant benefits it provides in reducing symptoms and managing the secondary conditions that are prevalent among those with PTSD.

Moderate to high intensity aerobic exercise (60-80% of age predicted max heart rate) can reduce depressive, anxiety related and PTSD symptom severity, and it can serve as an additional form of treatment that is easily accessible and has minimal risk of adverse side effects. Combining it with appropriate resistance training would also serve additional benefits. Some theorise that the distraction aspect of exercising is the basis of its therapeutic effect. This makes it a highly feasible form of treatment among

people with PTSD as it is non-stigmatising and socially acceptable, especially among emergency workers and military veterans.

It also serves as an appropriate additional part to routine care like psychotherapies such as cognitive behavioural therapy (CBT) that involves recalling the trauma or being exposed to reminders that trigger memories of the trauma in the therapeutic process.

## SO, WHAT NOW?

It all starts with how we view mental health. We put our front foot forward and give our best efforts to take care of our physical health when something happens to it, whether it's an injury or disease of some sort, but there is a certain type of lag when it comes to seeking treatment for mental health issues. Maybe it's because of societal misconceptions of those with mental illnesses or maybe it's due to the stigma. That crippling stigma can be broken by those in the general population and among health professionals in how we communicate and view people living with mental disorders such as PTSD. People with post-traumatic stress disorder want to live life well again, and we can all contribute to make that happen.

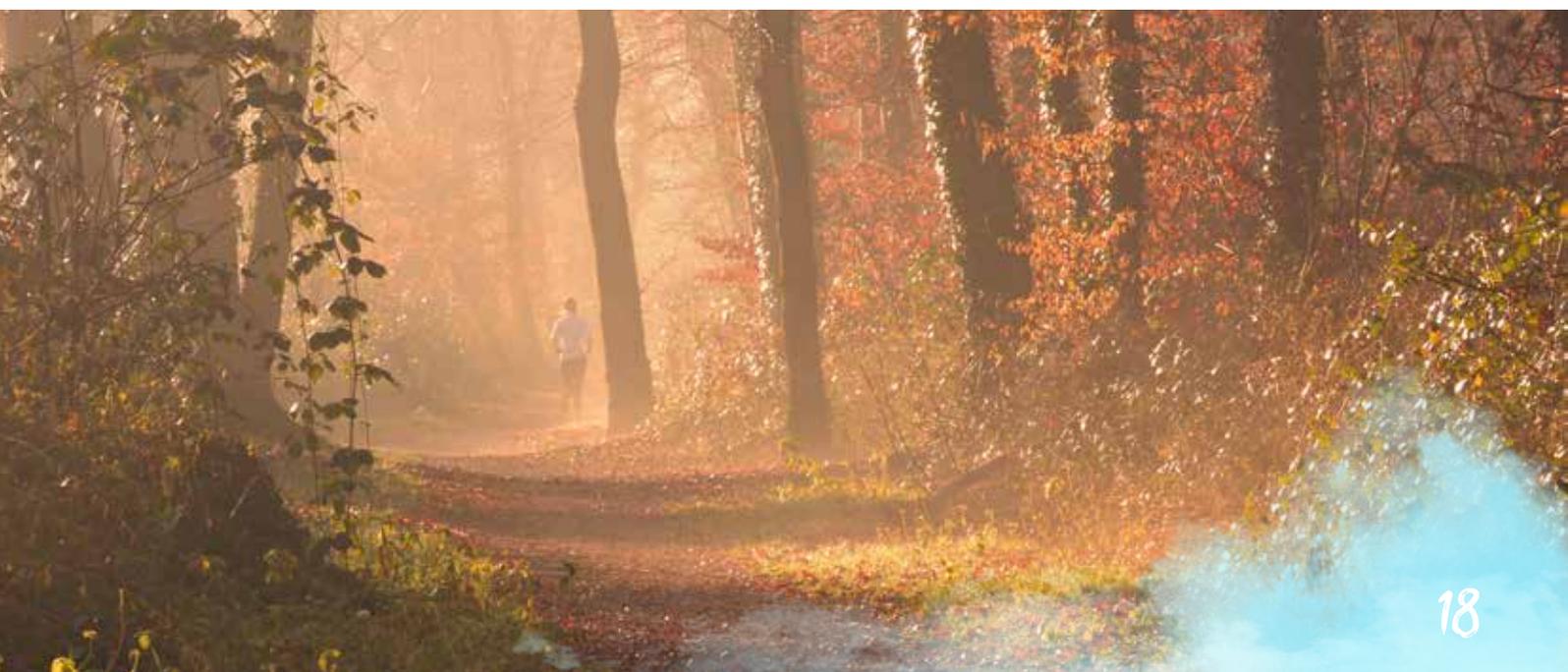
Our physical health is clearly not separate to our mental health. This was highlighted brilliantly by Brock Chisholm, the first director-general of the World Health Organisation (WHO) that stated in 1954: *"Without mental health, there can be no true physical health."*

Exercise appears to be essential for both.

## WHAT'S THE 'TAKE-HOME' MESSAGE?

- Exercise is an effective component of treatment for mental disorders like PTSD and can help manage symptoms and reduce risk of secondary health conditions.
- Programs will need to be individualised, as everyone's experience of PTSD is different. This will help with adherence and engagement to the program, and an [Accredited Exercise Physiologist](#) will be well equipped to be able to do that.
- Mental health and physical health are inseparable. You can't have one without the other.

**Expert Contributor: Andrew Chen. Accredited Exercise Physiologist**



# Exercising for Bipolar Affective Disorder

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Bipolar affective disorder (BPAD) is a mental health condition that is characterised by severe mood swings, between a state of depression and mania, which can last several months at a time. Not all BPAD symptoms are equal – some people experience very high manic and low depressive periods, others may present with severe depression and mild mania (hypomania).

When experiencing a **depressive episode**, people may appear low and flat in their mood, with low motivation, have guilt and sadness, lowered appetite and energy levels, and poor sleep.

A **manic episode** is the opposite of a depressive episode, where a person will have excessive energy, be more easily excitable, sleep less, talk with a more pressured voice, and potentially engage in unhealthy activities, i.e. gambling.

## HOW CAN EXERCISE HELP BIPOLAR AFFECTIVE DISORDER?

After exercising it is common for people to report they get a 'feel-good buzz', this feeling is attributed to that of increased circulating endorphins – our natural 'happy chemicals.' Additionally, it is not uncommon that post-exercise people may have improved cognition/focus whilst feeling more relaxed. These improvements in mental state can have a massive impact on someone's day; by reducing their anxiety so that they can go shopping or attend a social event and reducing feelings of sadness and potentially replacing those with joy.

On top of the psychological benefits of exercise, there are also physical benefits of exercise. The physical benefits of exercise are of great importance for those living with a mental illness. Unfortunately, anti-psychotic medication is associated with weight gain, and therefore an elevated risk of cardiovascular disease mortality. Patients often report having large increases in their appetite and cravings for sweet or energy dense foods, whilst at times reporting that they feel sedated. This creates an issue where an individual may be over-eating and exercising less, therefore throwing their energy equilibrium off balance.

Your medications should not be ceased or adjusted without consultation with your Psychiatrist and General Practitioner – but they can help by referring you to an Accredited Exercise Physiologist and Accredited Practicing Dietitian.

## **SO HOW MUCH EXERCISE SHOULD I DO AND WHAT TYPE OF EXERCISE IS BEST?**

Any exercise is better than none, and more exercise is better than some – this is a great way to think about it. The best thing that you can do today to start having an impact on your physical and mental health is to try and do some form of exercise. It can honestly be as simple as going for a 10 minute walk, a short bike ride, standing up and down from your chair at home, or doing a few push ups against a wall. The key is that you started exercising today, and tomorrow you can start to build on that.

The exercise guidelines for those with bipolar affective disorder and the general population are not dissimilar; be active on most (preferably all days of the week) and accumulate 150-300 minutes of moderate physical activity or 75-150 minutes of vigorous intensity per week – or a combination of both! These guidelines should be adjusted to your needs based on your goals, time available and co-morbid conditions.

The best type of exercise is one that you're going to keep doing; one that you enjoy and feel physical and psychological benefit from. It can also help to exercise with other people – this often makes it more fun and you can use each other for motivation!

Some common types of exercise that I use in my clinical practice are strength and aerobic training using machines or weights, yoga, Pilates, hydrotherapy and swimming, tai-chi, circuit/interval training, and the always fun – boxing!

## **THE HIGHS AND LOWS OF EXERCISE**

If a person is presenting in an elevated state, the exercise prescription must be adjusted to suit their needs. We should not be trying to stack high intensity exercises and over-stimulation on top of a mental state that is potentially manic. So, the exercises must be varied, with a focus on relaxation and mindful movements – tai chi, yoga and stretching are great here. Just simply going for a short slowed down walk can be helpful to bring awareness of the present moment.

When a person with bipolar affective disorder is in a depressive state they are going to be combatting a lack of energy and motivation and potential disinterest in anything and everything. The real win here can be just getting someone out of their bed and doing general strengthening exercises – if possible, some slightly higher intensity exercises may further improve their mood, alertness and cognition (jumping jacks, jogging on the spot).

It's important to remember that if a person is presenting in a way that may be of risk, then the appropriate members of their treating team must be contacted; Psychiatrist, General Practitioner, nursing staff, emergency services, and their support network.

## **HOW DO I ACTUALLY GET STARTED?**

Getting moving can be really hard! We often lack the motivation to actually start exercising because we have grand expectations that we need to be exercising and eating well all the time. Whilst getting as close as possible to the recommended dose of exercise is going to be great for all of us, it is an unrealistic expectation to assume that everything will change tomorrow morning and you will instantly become a fitness fanatic.

We are much more likely to make changes in our physical and mental fitness by slowly integrating exercise into our life:

- Start slow if you need to!
- Set realistic goals for the short-term; aim to get out of the house 3 times for 20 minutes throughout the week.
- Pick a time of the day that suits you best! Consider when your energy levels are at the highest during the day and aim to head out then.
- Pick a walking track or route that you feel safe on.
- Try to get a friend or family member to come along with you – exercise is going to be great for them too, so why not have a partner to take on the journey?

### **IMPORTANT THINGS TO CONSIDER**

- Higher intensity doses of exercise may be more effective at improving mental illness, but these are hard to maintain. Start slow and aim to build up your exercise tolerance each week with slight increases.
- Your mood, alertness and cognition can improve in the short-term with exercise. Try and work on some of your other psychological interventions in this time. Exercise is a great physical and mental warm-up.
- It can take quite some time before you notice physical changes in your body with exercise – this is completely normal!
- Pick a form of exercise that you find enjoyable, this is the one that you are likely to stick with!
- Speak with an Accredited Exercise Physiologist (AEP) who understands mental health conditions and challenges that often come with them. You can speak to your General Practitioner who can refer you to an AEP through Medicare pathways.

**Expert Contributor: Patrick West, Accredited Exercise Physiologist**



# Exercising for an eating disorder

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Eating disorders are serious psychiatric illnesses which do not discriminate age, gender, race, or size, and are not at all a choice. People with eating disorders experience extreme concerns and distorted beliefs about their weight, shape, eating, and body image and suffer severe medical and psychological symptoms.

## THE STATS

- At least 1,000,000 Australians (9%) are reported to be living with an eating disorder (these estimates do not include the large under-reporting and under-treatment in Australia).
- Eating disorders include Anorexia Nervosa (AN), Bulimia Nervosa (BN), Binge Eating Disorder (BED), Avoidant-Restrictive Food Intake Disorder (ARFID), and Other Specified Feeding and Eating Disorders (OSFED).
- The medical effects of starvation and suicide place Anorexia Nervosa at a mortality rate 3 times higher than depression, schizophrenia or alcoholism, and 12 times higher than in the general population.
- Compulsive exercise engagement occurs in up to 80% of people with an eating disorder, and is employed unhealthily and dangerously in an effort to control weight and shape, avoid negative affect, to implement rules and rigidity, and to attempt to achieve body ideals tied up in perfectionism.
- Compulsive exercise can predict poorer outcomes for people with an eating disorder due to longer lengths of hospitalisation, being a strong risk factor for relapse, and is one of the last symptoms to subside in recovery.
- Dangerous exercise exacerbates the risk of: Cardiovascular issues (i.e., sudden cardiac death), vital organ dysfunction, bone damage, reproductive issues, muscular and metabolic issues, relapse/delayed recovery, and takes away time from family/friends, work, study, and other important areas of one's life.

## THE INCOMPLETE MODEL OF CARE

It wasn't long ago that we prescribed three months of bed rest to those who'd had a heart attack, and now we help get this population moving as soon as we can, as well as provide education and support around how engaging in safe exercise can help improve each individual's prognosis.

We now know this is a similar case with eating disorders, and that failing to address, moderate (when compulsive) and promote (when low or non-existent) exercise or exercise education under appropriate conditions (such as appropriate medical and dietary monitoring) is not only unethical but is also shown to continue to maintain the eating disorder.

Further, in a population where the maladaptive exercise behaviour is associated with a psychological need for coping and control, the common recommendation of exercise abstinence is being recognised as doing more harm than good as it removes both these resources from the patient (who often employs exercise as the only way to cope) and also causes negative affect withdrawal symptoms.

There are some cases (not the majority) where movement restriction is still the evidence-based approach to treatment in the short-term, however once a patient is medically stabilised and progressing through nutritional rehabilitation then re-introducing exercise and movement at safe levels is important.

As a result, other dangerous coping such as suicidal ideation, self-harm, vomiting, laxative, restriction, or secretive exercise may be employed or increased in severity.

## **ENTER: EXERCISE PHYSIOLOGY**

Eating disorders are multifaceted. We therefore know it is important to address the psychology underpinning the eating disorder, provide food and nutrition therapy, and medically monitor patients, however the missing link in the space is harm-minimisation and a reintroduction to healthy movement via exercise therapy. The link between healthy movement and healthy mind is heavily researched and acknowledged. It's time to start introducing clinically safe, effective and therapeutic movement and education to this population. Enter: Exercise Physiology.

## **HOW DOES EXERCISE THERAPY AND EDUCATION POSITIVELY AFFECT THOSE LIVING WITH AN EATING DISORDER?**

### **INCREASES:**

- Safe exercise engagement
- The opportunity for distorted exercise beliefs to be altered positively
- Associations with exercise that are not related to the eating disorder
- Feasibility and acceptability of interventions; program compliance
- Vital organ function
- Emotional stability
- Functional independence
- Compliance to treatment
- Trust in the treating team
- Physical growth
- Quality of life
- Sleep
- BMD
- Positive connectedness to the body
- Community involvement and socialising

### **DECREASES:**

- Compulsive exercise as a primary means of coping
- Exercise rules and rigidity
- Covert and secretive activity
- Weight and shape manipulation
- Depression and anxiety
- Risk of progression of disease
- Exercising whilst injured, dehydrated (or sedentary behaviour)
- Powerless feelings of restricting exercise
- Relapse
- Isolation
- Food and image preoccupation
- Musculoskeletal and cardiometabolic consequences

## **LET'S GET STARTED**

It is important to see an Accredited Exercise Physiologist (AEP) before engaging in exercise. The AEP will understand your condition and work with the other allied health professionals in your team to form the most appropriate treatment plan for you as an individual.

Sessions can range from education and information (if the patient is not ready to medically or emotionally to engage in movement) to many forms of clinically safe exercises as per the **Safe Exercise for Eating Disorders (SEES) guideline.**

*Expert Contributor: Alanah Dobinson, Accredited Exercise Physiologist*

# How to exercise with your mental health at home

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Struggling to leave the house? That's okay too. There's a range of exercises you can do within your home that can help to keep you active or get started on your new exercise journey.

## USE YOUR BODY

Your body is **THE** best piece of workout equipment you could possibly need! Without even leaving your house, or needing any other fancy equipment, you can train practically every muscle group in your body effectively.

Start by completing however many that you can, as some exercise is better than nothing, and then slowly increase the intensity and challenge each time when you feel strong enough to.

As with any exercise, it is still important to ensure you're doing exercises correctly so not to cause any injury or strain to your joints. An accredited exercise professional can advise on correct movement.

Here are a few examples of body weight exercises anyone can do, at any time, all within your own home and room. However, we always suggest talking to a GP or an Accredited Exercise Physiologist first.

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## SQUAT JUMPS

**They strengthen the entire body, and improve your flexibility.  
They're also a great move for getting your heart rate up!**

1. Start position is standing with the feet shoulder width apart.
2. Lower into a squat with the knees aligned over the toes. The heels should be on the floor with the back straight and the head upright, eyes looking forward.
3. Leap upwards out of the squat by swinging your arms behind you and extending through the hips, the knees and the ankles to jump as high as possible. Use the motion of the arms swinging forward to carry to the leap upwards.
4. Land back into the squat position with the knees bent to absorb the impact through the leg and hips.



## WALKING LUNGES

To build strength in your legs, and improve your balance.

1. Stand up straight.
2. Take a large step forwards into a lunge.
3. Both hips and knees should be at 90 degrees as you lunge down.
4. Make sure your front knee is directly above your ankle, and pointing forwards.
5. Push up, stepping your back leg to the front leg.
6. Repeat the movement, leading with the other leg.
7. Continue this sequence in a straight line.



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## PUSH UPS

Targets upper body, shoulders and abs.

1. Start position is in the press up position with the arms directly under the shoulders, fingers facing forwards and the back and trunk level and straight with the toes on the floor.
2. Lower the body using the arms and shoulders until the chest just touches the floor, keep the trunk straight and arms aligned with the shoulders.
3. Press up into the start position using the arms and shoulders only, keep the backside in line with the back and shoulders and do not arch the lower back.
4. This exercise can also be performed by starting with the knees on the floor and then commencing the press-up from this position.



# USE 'STUFF' E.G. A STAIRCASE OR A STURDY CHAIR

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## INCLINE PUSH UPS

1. Place your hands on a step, shoulder width apart.
2. Lift your body up onto your toes, so that you have a straight line from your head to your feet.
3. Bend your elbows, lowering your chest down towards the step, keeping your body completely straight.
4. Control the movement as you straighten your elbows back out to the start position.



## STEP UPS

1. Stand about two feet away from a chair/bench
2. Now step up onto the chair in a powerful movement one leg at a time.
3. Carefully step back down and then repeat with the other leg



## SPLIT SQUAT WITH FOOT ELEVATED

1. Stand with your back to the step and place your good leg onto the step.
2. Make sure there is a large distance created between your front foot and your back foot.
3. Place a stick behind your shoulders for balance if you need it.
4. Bend your knee, dropping your hips straight down towards the ground, and then straighten back up.
5. Make sure your front knee doesn't go in front of your front toe and that your hips come straight down.



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If you're not sure where to start, or if you're concerned about exercising or completing any movements, contact an [Accredited Exercise Physiologist](#) for advice.



# What is recommended?

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Here are some simple exercise recommendations, but speaking with an Accredited Exercise Physiologist can help determine and prescribe the right exercise plan for you and your mental health diagnosis, in conjunction with any other mental health treatments you're receiving.

- Aerobic exercise and weight lifting have been shown to be effective in reducing symptoms of mental conditions such as major depression but it's recommended trying a variety of different types of activities and choosing one that you enjoy the most.
- You don't have to join a gym – activities such as swimming, walking the dog, jogging whilst listening to music, riding a bike, gardening, bushwalking, yoga and weight-lifting can all be beneficial to your mental health. Choose an activity you enjoy.
- Thirty minutes brisk walking a few times a week is a good general starting point, and can be built on from there. It's better to do something than nothing. Every little bit can help.
- Get an accountability buddy – this might be a friend, family member or health professional – someone to help keep you on track during the hard days.
- Make a clear plan – take the requirement of daily decision making out of the picture – the 'do I or don't I' – a clear plan makes going ahead with your plans that much easier.
- Get outside – being in nature has extra mood boosting properties. A research team from the Peninsula College of Medicine and Dentistry found that outdoor exercise was associated with increased energy and revitalisation, as well as decreased confusion, anger, depression and tension, when compared with exercising indoors.
- Agree to 10 minutes as a minimum each time you've scheduled a workout. Even when you don't feel like it, if you at least do 10 minutes, you're keeping the habit going. Often getting started is the hardest part!

For more exercise recommendations, you can find out further information on the Exercise Right website, an ESSA initiative providing the public with information on how to exercise right for your health: [www.exerciseright.com.au](http://www.exerciseright.com.au)

# What do our professionals have to say?

## 10 ACCREDITED EXERCISE PHYSIOLOGISTS (AEPS) SHARE HOW AND WHY THEY EXERCISE FOR THEIR MENTAL HEALTH.

Playing roller derby and attending the gym helps keep me present in the moment rather than worrying about the things on my mind. It also gives me a mood boost to be around others and reminds me that I am strong and powerful and capable of getting through anything.

**Lauren Foote, AEP**

It comes down to 'me' time. As health professionals, we are always looking after 'others' (plus family time, etc.). My preference is to exercise outdoors (as I work indoors!), particularly road cycling through the beautiful Adelaide hills, or mountain biking. My strength training then supports those pursuits.

**Max Martin, AEP**

I exercise to keep my mind clear, focused, happy and motivated. I love the boosted feelings of success and strength it gives me. It also helps me sleep. I play netball, go to gym, pole dancing and love to hike and bush walk.

**Gemma Bird, AEP**

I exercise to help keep my mind clear as well and stop worrying about things I can't control. Exercise is something I can always control: what I do, how much I do and how hard I push myself. I play 5-a-side soccer and touch football, and attend the gym.

**Eden MacNeil, AEP**

I exercise for the meditative state my mind goes into when I start - whether it's strength or aerobic, as soon as I start, I feel an immediate sense of relief, control and empowerment from achieving activity goals.

**Jack Woods, AEP**

I use exercise/movement as a meditative tool. I find that it gives me a physical sensation to focus on the present moment which leaves me feeling calmer and less stressed. It also feels great when you push yourself and conquer that challenging work out.

**Jacinta Brinsley, AEP**

Exercise helps to distract my mind from any negative thoughts and improves my positive vibes - whether it be for the time I'm exercising, or all day or week. It helps me feel in control of myself and capable. I road and mountain bike, strength train, and use apps like 'Down Dog' and 'Smiling Mind' to help keep my mental health in check.

**Sarah Mengel, AEP**

Exercising helps to keep my mind clear and improves my mood - especially on days of greater stress. I find after exercise that I'm more focused and my productivity seems higher. I feel good and happy with what I've accomplished. I enjoy playing netball or going to the gym, doing weights or HIIT, and general walks or hiking when the weather is nice.

**Cassie Hovey, AEP**

Exercise helps me release any nervous energy so I can get stuff done. It's also a great reminder of how strong and capable I am so I can go back to work calm and kicking goals.

**Erica James, AEP**

I use movement to feel happier, free my mind and cope better with stress. I choose activities depending on how I'm feeling. When I feel low I choose energising activities - for me this looks something like going for a run or playing a game of tennis with a friend. When I'm feeling stressed out I tend to choose activities that calm my mind, like a walk along the river or a yoga class.

**Melissa Sbaraglia, AEP**

# Things to remember

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- It's more beneficial to work with an appropriately educated exercise professional such as an Accredited Exercise Physiologist who understands the complexity of the challenges faced with mental health conditions, and has the skills and knowledge to help individuals manage their condition and any barriers they may come up against.
- Higher doses of exercise may be more effective at improving mental illness but people may be less likely to stick to them. Something is better than nothing. As such, start slowly and build up gradually e.g. if you have not been exercising at all, start with a 10-15 minute walk each morning, and gradually increase this to 30 minutes per day.
- Set short-term realistic goals for exercising each week (e.g. 3 x 20 minute walks per week); plan to exercise at specific times of the day that fit in with your lifestyle and write your plan down.
- Remember that it can take time for the benefits of exercise to occur. Exercise studies have shown a significant reduction in some mental illnesses, such as depression, after eight weeks or more.
- The best time to exercise depends on when you have the most energy and motivation – whatever time works best for you. Once you find a time that works for you, try to stick to it. Not only will it become a habit (like brushing your teeth before bed), but studies show that once your body adjusts to exercising at a specific time each day, it will start to perform better at that time than any other time of the day.



# Need extra support?

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Speak with your GP. Your doctor is often a good place to start for most mental health conditions. GPs can provide you with a referral to see an Accredited Exercise Physiologist and may refer you to other services for mental health.

You can also get in touch with these national help lines and websites:  
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## **BEYOND BLUE**

1300 224 636

Works to raise awareness of depression, anxiety and suicide prevention, reduce the stigma surrounding these issues and to encourage people to seek support when they need it.

## **BLACK DOG INSTITUTE**

Information on symptoms, treatment and prevention of depression and bipolar disorder.

## **BUTTERFLY NATIONAL HELPLINE**

1800 334 673 (1800 ED HOPE)

The service is available to people with eating disorders, their carers and loved ones, and any professionals who need some assistance in knowing what to do next with a patient (note: this is general advice and not formal clinical consultation).

## **CARERS AUSTRALIA**

1800 242 636

Short-term counselling and emotional and psychological support services for carers and their families in each state and territory.

## **HEADSPACE**

1800 650 890

Free online and telephone service that supports young people aged between 12 and 25 and their families going through a tough time.

## **KIDS HELPLINE**

1800 551 800

A free, private and confidential, telephone and online counselling service specifically for young people aged between 5 and 25.

## **MENSLINE AUSTRALIA**

1300 789 978

A telephone and online support, information and referral service, helping men to deal with relationship problems in a practical and effective way.

## **HEAD TO HEALTH**

An innovative website that can help you find free and low-cost, trusted online and phone mental health resources.

## **MINDSPOT CLINIC**

1800 614 434

An online and telephone clinic providing free assessment and treatment services for Australian adults with anxiety or depression.

## **NATIONAL ABORIGINAL COMMUNITY CONTROLLED HEALTH ORGANISATION (NACCHO)**

Aboriginal Community Controlled Health Services and Aboriginal Medical Services in each state and territory.

## **QLIFE**

1800 184 527 – 3pm-12am

QLife is Australia's first nationally-oriented counselling and referral service for LGBTI people. The project provides nation-wide, early intervention, peer supported telephone and web based services to diverse people of all ages experiencing poor mental health, psychological distress, social isolation, discrimination, experiences of being misgendered and/or other social determinants that impact on their health and well-being.

## **RELATIONSHIPS AUSTRALIA**

1300 364 277

A provider of relationship support services for individuals, families and communities.

## **SANE AUSTRALIA**

1800 18 7263

Information about mental illness, treatments, where to go for support and help carers.

## **SUPPORT AFTER SUICIDE**

Information, resources, counselling and group support to those bereaved by suicide. Education and professional development to health, welfare and education professionals.



GOOD  
VIBES  
ONLY

The image features a black letterboard with white text. Above the text, there are three circular icons: a hand, a person, and a brain. Below the text, there are three circular icons: a brain, a person, and a hand. The background is a blurred outdoor setting with a sidewalk and a building.