



Improving access to exercise training programs for patients with serious mental illness

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Abstract

In a recent issue of this journal, Pratt et al report on an important new position statement by the Society of Behavioral Medicine and the American College of Sports Medicine to improve access to exercise programming as a treatment for patients treated in community mental health settings. If implemented, these recommendations could greatly expand access to these services and improve outcomes for patients treated in community mental health settings.

Keywords

Exercise programs, Serious mental illness, Health policy

Physical activity is a rare health intervention—one that affords health benefits with few or no adverse side effects. Having a physical activity level at or above CDC guidelines of 150 min of brisk walking per week is associated with an overall gain of life expectancy of 3.4–4.5 years [1]. However, fewer than half of adults meet these guidelines [2]. These rates are disproportionately lower among disadvantaged populations including racial and ethnic minorities and those living in poverty, the very individuals who stand the most to gain from increasing their levels of activity [3].

There is evidence that patients with serious mental illness represent a group at particularly high risk for physical inactivity [4]. This results from a range of risk factors; some, such as motivation and psychotropic medication side effects, are specific to mental illnesses, and others, such as poverty and social disadvantage, are shared with other vulnerable populations. However, while effective interventions exist to improve physical activity in this population, [5, 6] they are not currently widely available in community mental health settings.

In a recent issue of this journal, Pratt et al. report on an important new position statement by the Society of Behavioral Medicine and the American College of Sports Medicine to improve access to exercise programming as a treatment for patients treated in community mental health settings [7]. The statement calls for efforts to include these interventions in registries of evidence-based mental health programs, to ensure that the services are reimbursable, to establish

Implications

Researchers: Research has demonstrated the benefits of exercise programs in improving physical activity in patients with mental disorders

Practitioners: Community mental health practitioners should consider incorporating these programs into routine practice.

Policymakers: Policymakers should implement policies to support the more widespread use of these programs.

standards of accreditation for professionals who deliver the programs, and to expand the number of allied professionals eligible to be reimbursed for delivering the services. If implemented, these recommendations could greatly expand access to these services, and improve outcomes for patients treated in community mental health settings.

Fully implementing these recommendations would require participation by multiple agencies including the Substance Abuse and Mental Health Services Administration, the Center for Medicare and Medicaid Services, state mental health authorities, and community mental health organizations. Recent bills passed in the House of Representatives (HR 2646) and pending in the Senate (S 2680) hold the potential to improve coordination across these agencies and facilitate better care for patients with serious mental illness. If these bills become law, addressing physical activity should be a core component of efforts to improve the overall health of this population.

Finally, this position statement can serve as a model for efforts to improve access to exercise training programs not only for patients with mental illnesses, but also for other poor and disadvantaged populations. High-quality training programs in these vulnerable populations can be a first step towards increasing physical activity, which in turn can enhance health, quality of life, and longevity.

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