

# Running to Better Health

**Alison Hopkins and Beverley Edwards of Ealing IAPT explain the development of a physical activity programme to help with depression and anxiety.**

There is established evidence demonstrating that physical activity has clinically significant benefits for treating a range of mental health problems, including anxiety and depression. The NICE Guidance on Depression (CG90) recommends physical activity alongside guided self-help and computerised CBT. As an IAPT service, we recognise the benefits of including physical activity within treatment, particularly within behavioural activation where physical activity has a natural home.

Behavioural activation focuses on activity scheduling, encouraging people to approach activities that they are avoiding. Evidence suggests that physical activity has a positive effect on wellbeing and mood, providing a sense of achievement or relaxation and release from daily stress. It reduces the risk of depression and cognitive decline in older adults and can also play a part in preventing and treating physical health conditions such as coronary heart disease, type 2 diabetes, stroke, musculoskeletal conditions and some cancers.

Despite this, our clinical experience suggests that clients find it hard to engage with physical activity interventions due to mental health symptoms such as low motivation and withdrawal. Alongside this, therapists are not always confident about referring to outside physical activity interventions; due to lack of availability and not knowing if they would specifically be tailored to people experiencing anxiety and depression. As a result of this and our own personal experiences of physical activity we developed the Running to Better Health programme.

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## Programme development

The Running to Better Health programme is based on the NHS Couch to 5K programme and Brain Train self-help guide. It incorporated a local Parkrun – a free, weekly, 5km timed run held in local parks. Our aim was to link in with an established running organisation to ensure social inclusion and sustainability, offering the opportunity to continue indefinitely after clients had completed the course.

It is an eight-week programme, with each session comprising an hour of structured running with a warm up/cool down followed by an hour of psychoeducation which covers advice on activity and wellbeing, the links between mental health symptoms and activity, danger zones, activity diaries, goal-setting and diet. The last session focused on recognising clients' achievements with the view of setting new challenges.

Facilitators also ran in session to provide encouragement and motivation. Fostering the idea of doing this 'journey' together, highlighting they are not on their own.

The ethos of the course was to encourage people to become more active both inside and outside of the session via the formation of WhatsApp groups and sign-posting to local clubs/activities. All of this had the aim of supporting people to connect with others in their community to ensure longevity.

## Referral

Participants were required to meet the standard IAPT criteria and to be registered with Ealing IAPT service. A Physical Activity Readiness Questionnaire was completed to ensure there were no physical contraindications. One facilitator completed the England Athletics Leadership in Running Fitness course which teaches how to develop safe and enjoyable running experience.

## Results

In total, 109 people seeking help from Ealing IAPT service were recruited, with an age range from 21 to 86 years old, with 91 per cent of participants being women. Of the 109 referrals received 79 started the programme and 27 participants dropped out for various reasons. The programme saw a recovery rate of more than 80 per cent for the 52 participants who completed the programme. For those that did not reach recovery reliable change was achieved instead.

Attendance was not an issue; once people have completed a few sessions they tended to complete the programme. We found that the larger the group the smaller the dropout rate, which was possibly due to camaraderie amongst group members.

Qualitative feedback included comments on improved wellbeing, being social again and achieving a goal they never thought they would.

In summary the course showed that a structured running programme does help reduce depression and anxiety symptoms and increases individuals' wellbeing. Although the number of participants was small, we would recommend continued evaluation of the programme and in light of this have a further four courses arranged during 2018.

## Challenges

We noticed a reduction in participants over holiday periods and a discrepancy between the numbers of participants signed up compared to the numbers that actually started. We discovered that contacting participants a week before the start date acted as a reminder and provided encouragement and therefore reduced the numbers of non-starters.

Referral to the programme continues to be a challenge for several reasons: therapists not feeling confident talking about exercise or forgetting due to other demands. Activity programmes are also not given the same priority as talking therapy.

## What next?

Plans moving forward include closer links with the community, developing other sporting modalities and adaption for LTC programmes.

**Ealing IAPT services are available online at <http://www.ealingiapt.nhs.uk/> and they can be followed on Twitter @EalingIAPT**

**Details of Parkruns around the UK and Ireland can be found at <http://parkrun.org.uk> and [www.parkrun.ie](http://www.parkrun.ie)**

