



ΚΟΙΝΩΝΙΚΕΣ ΣΥΝΕΤΑΙΡΙΣΤΙΚΕΣ
ΔΡΑΣΤΗΡΙΟΤΗΤΕΣ ΕΥΠΑΘΩΝ ΟΜΑΔΩΝ

2018

***RESEARCH ACROSS 12 EUROPEAN
COUNTRIES ON THE CONNECTION OF
SPORT & PHYSICAL ACTIVITY WITH
THE FIELD OF MENTAL HEALTH.***

EXPLORING THE FIELDS AND SPREADING AWARENESS.

MENTAL
EUROPEAN
NETWORK
OF SPORT
EVENTS

**MENS
PROJECT**



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PROLOGUE

The current document is the second deliverable within the project **Mental European Network of Sport events** - "MENS". It Includes the results of the qualitative and quantitative survey and is divided into four chapters.

The purpose of MENS Research was doubled.

First of all, it aimed to collect data on the current situation on the connection of Sport & Physical Activity and Mental Health throughout organizations and individuals across European countries, using a number of specifically designed surveys for the first stage and semi-structured interview questionnaires for the second stage.

Secondarily, it was always meant to serve as a prelude for the European Awareness Campaign which would follow immediately after. Indeed, the philosophy and spirit behind the campaign's materials found their origins in the results of MENS Research, greatly aligned with the answers provided by all target groups which operate daily in the fields. The aim of the survey, with regard to the general population and the mental health users, was to identify the degree of exercise but also to ascertain the positive effect of physical exercise on mental health. In the case of health and sports organizations, the aim was to ascertain the understanding of the positive effect of exercise on mental health and the extent to which physical exercise was utilized as a means of improving mental health.



The Project.

Mental **E**uropean **N**etwork of **S**port events- "MENS", which in Latin is "mentis" and means: Mind, thought, intention and intellect.

"MENS" Project aims to develop strong institutional procedures for the specific contribution of sports and physical exercise to the prevention, therapy and rehabilitation of the Mentally Ill at a European level.

Due to four key reasons these procedures are currently in nil to low:

- * The stigma is still associated with current procedures and therapeutic intervention courses and the mental patients themselves.
- * The lack of widespread documentation of the importance and effects of sports in rehabilitation of mentally ill.
- * The lack of expertise of health professionals for the integration of sports activities in the current treatment concepts.
- * The absence of specific cross-sectoral policies to encourage the integration of sports activities in the rehabilitation processes of the mental patients.

Actions

- * Desk review for recording national policies and good practices conjugating sports and mental health
- * Creation of models for sport events involving mentally ill at a local / national level as parts of the "Sports for all" movement and steps towards a European Mental Health Sport Event.
 - * Conduction of policy documentation papers for critical scientific issues on the use of sports in rehabilitation of mental health as specified below.
 - * Implementation of an Awareness Campaign in European level aiming at building a defined framework for the connection of Sport with Mental Health
 - * Publicity and dissemination activities of high effectiveness

Core target of the project has been the establishment of a European Network aiming at the conjunction of Mental Health and Sport/ Physical Exercise.



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Executive Summary

The research took place in 12 European Countries (Greece, Italy, Spain, Ireland, Croatia, Slovenia, Lithuania, Turkey, UK, Belgium, Czech Republic, and Portugal) and was carried out by all 17 partners of the MENS Project.

The Target Groups were:

For the first stage (quantitative research):

- Organizations/Entities/Structures/Research & Educational Institutions/ Policy & Decision Makers active in Mental Health Field
- Organizations/Entities/Federations/Research & Educational Institutions/ Policy & Decision Makers active in Sport/ Physical Activity Field
- Mentally Ill/ Users of Mental Health Services
- General Public–Brief

Presentations of the results from each group separately can be found in the project's web page.

For the second stage (qualitative research):

- Policy Makers/ Representatives of State Authorities
- Representatives of Local Authorities (Municipalities, Regions etc.)

The first chapter analyzes the main points of the survey, describes the objectives and the overall work of the Researcher. It describes the key questions that the Researcher analyzed through the collection of primary data and the environment of the project.



Chapter two details the results obtained through quantitative analysis of the primary data. The analysis is performed for each Country separately and identifies points of convergence or divergence between all Project stakeholders.

Chapter three includes the interviews of the representatives of State and Local Authorities.

Chapter four includes the key points of the survey.



Chapter 1.

Methodological approach

1.1 Questionnaire

The research questionnaire is the primary research tool and its structural design comprises of several thematic units, which permit the multi-levelled analysis of the data and relate to:

- Involvement in exercise
- The effects of exercise
- Benefits of exercise to mental health

1.2 Interviews

In addition to the quantitative survey several interviews took place with State and Local Authorities (Municipalities, Ministries etc.). The Interviews were conducted via phone or Skype.

1.3 Research field

Target population – Population Framework

The research took place in 12 European Countries (Greece, Italy, Spain, Ireland, Croatia, Slovenia, Lithuania, Turkey, UK, Belgium, Czech Republic, and Portugal) and was carried out by all 17 partners of the MENS Project.

The Target Groups include:

- Organizations/Entities/Structures/Research & Educational Institutions/
Policy & Decision Makers active in Mental Health Field



- Organizations/Entities/Federations/Research & Educational Institutions/ Policy & Decision Makers active in Sport/ Physical Activity Field
- Mentally Ill/ Users of Mental Health Services
- General Public–Brief

Form of Research

Sample research field with a structured, electronic questionnaire.

Sample size – sampling framework

The following table displays the distribution of the sample among the countries participating in the study.

Table 1. Sample distribution

	M.H. Sample	S.S Sample	Users Sample	G. Public Sample
Slovenia	5	3	25	50
Lithuania	6	4	30	60
Croatia	8	5	40	80
Ireland	10	6	50	100
Portugal	12	7	60	120
Czech R.	12	7	60	120
Greece	12	7	60	120
Belgium	13	8	65	130
Spain	26	16	130	260
Italy	31	19	155	310
Uk	33	20	165	330
Turkey	34	20	170	340
	<u>202</u>	<u>121</u>	<u>1010</u>	<u>2020</u>



Data collection

The data was collected using an anonymous, structured, electronic questionnaire, which was uploaded onto the program's website.

The electronic questionnaire was developed with the assistance of the Question Pro platform.

Advantages of an electronic questionnaire

Among the advantages of an electronic questionnaire are:

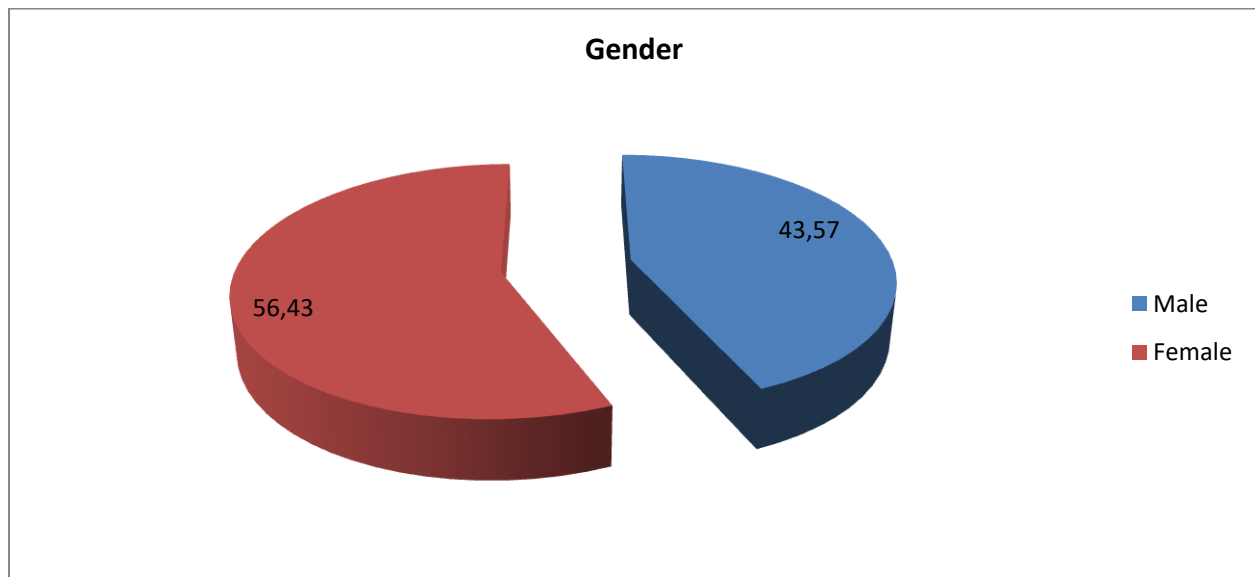
- Reassurance of respondent's anonymity
- Greater honesty by participants given that there is no personal contact with the researcher
- Mistakes are avoided during questionnaire puncturing
- Research is completed much faster
- Remote regions can be approached.

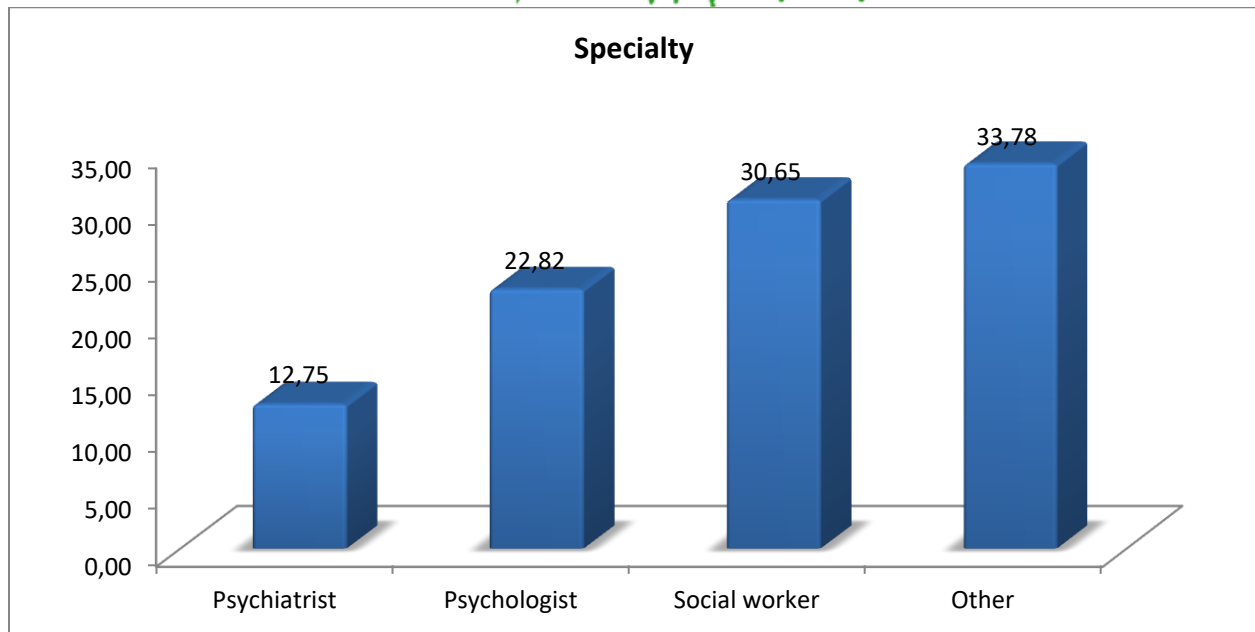
Chapter 2. Quantitative Research

Mental Health Organizations

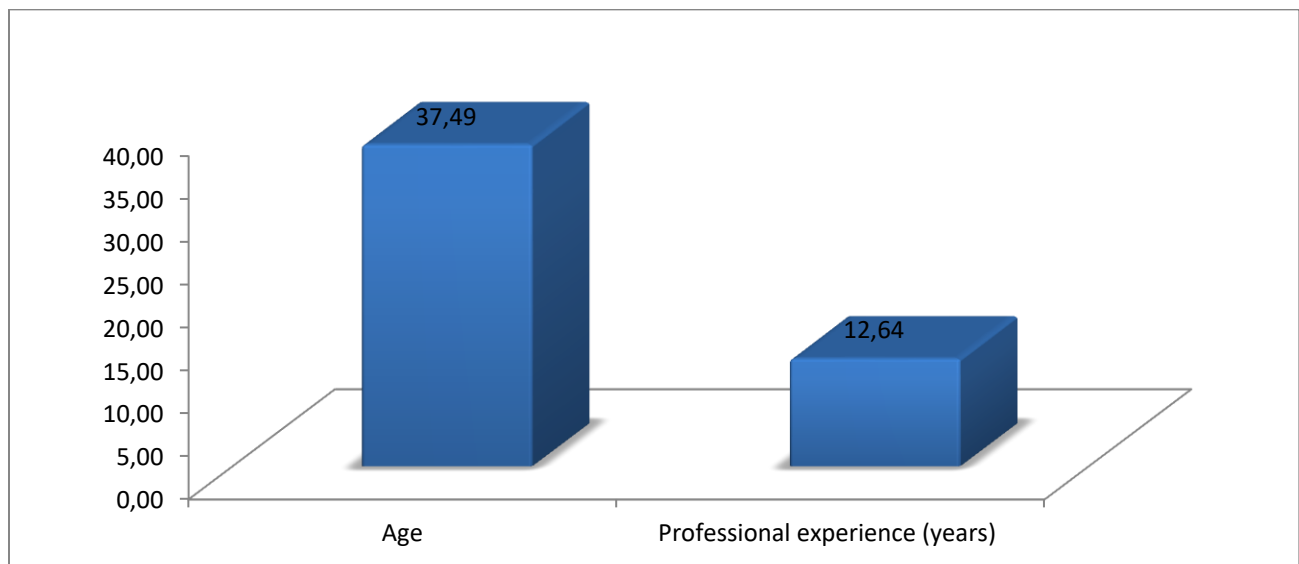
Demographics

The survey involved a total of 458 representatives of mental health organizations. 56% of the sample was female and 44% male. Regarding specialty, 12.7% were psychiatrists, 22.8% psychologists and 30.6% social workers.



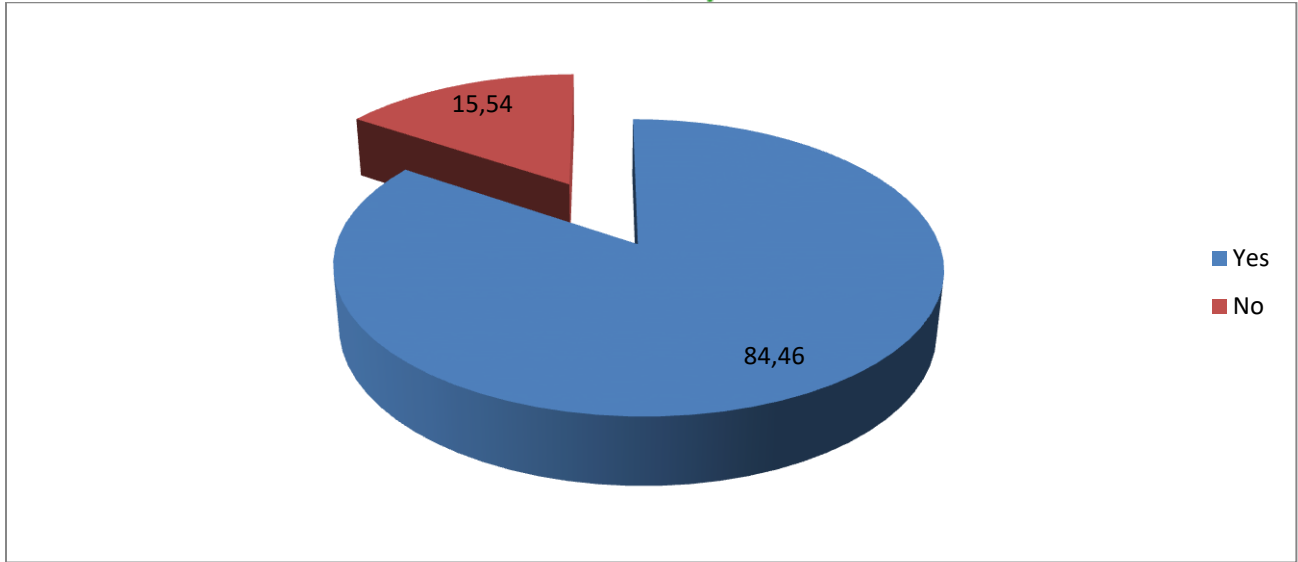


The sample's average age was 37 years while the average professional experience was 12.6 years.

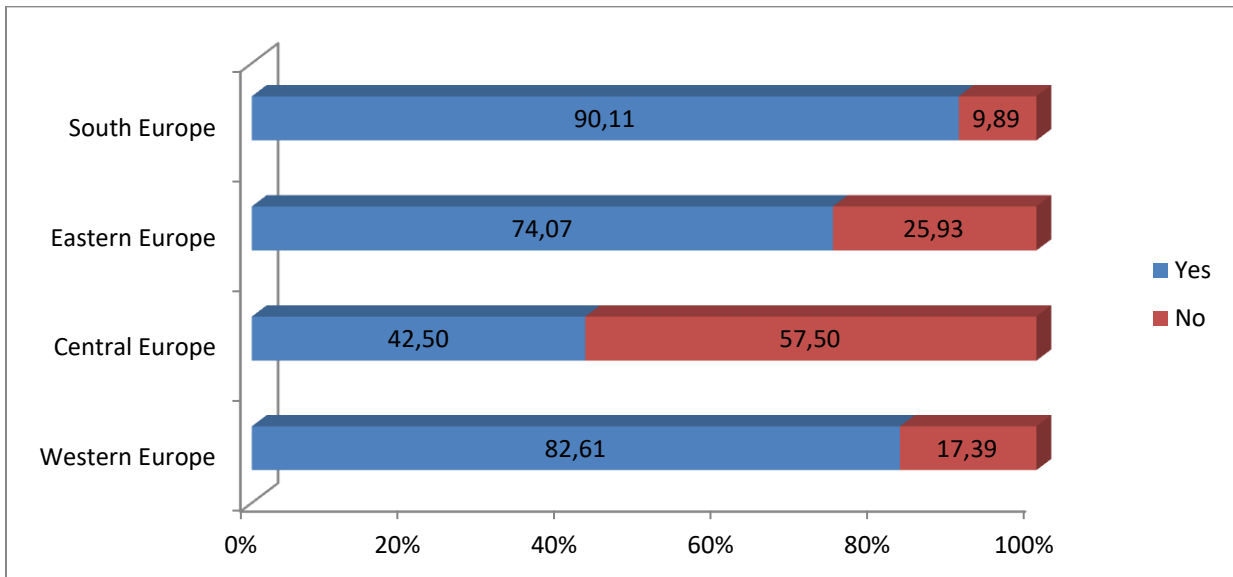


Exercise as Supplementary Therapy

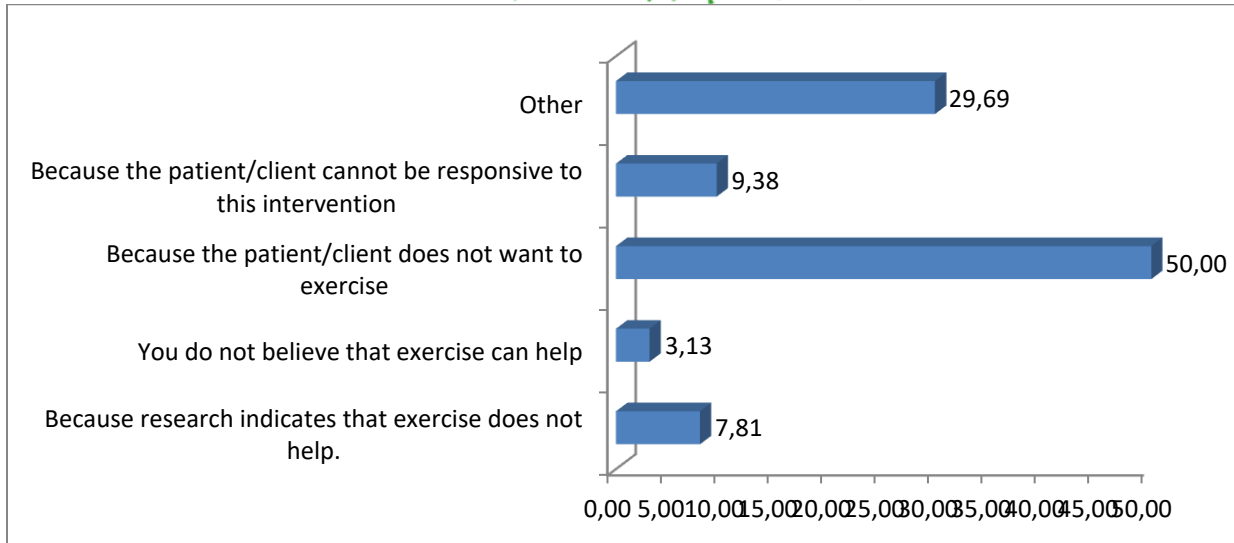
84.46% of the sample stated that they use physical exercise as a means of improving mental health.



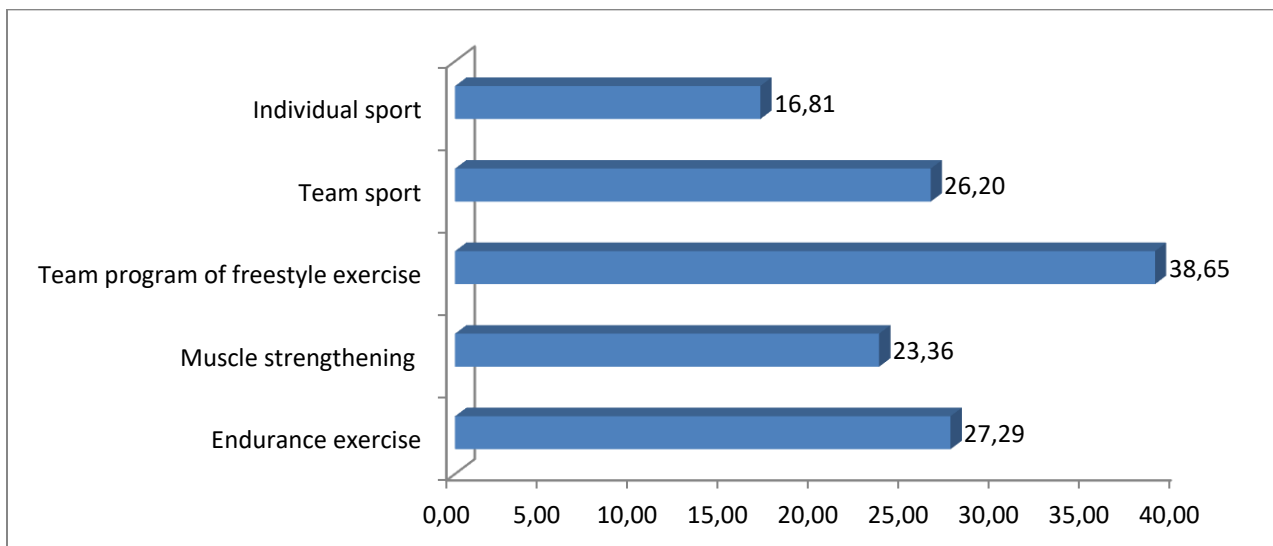
However, there are major differences between the four regions as the Central European countries show a significantly lower rate.



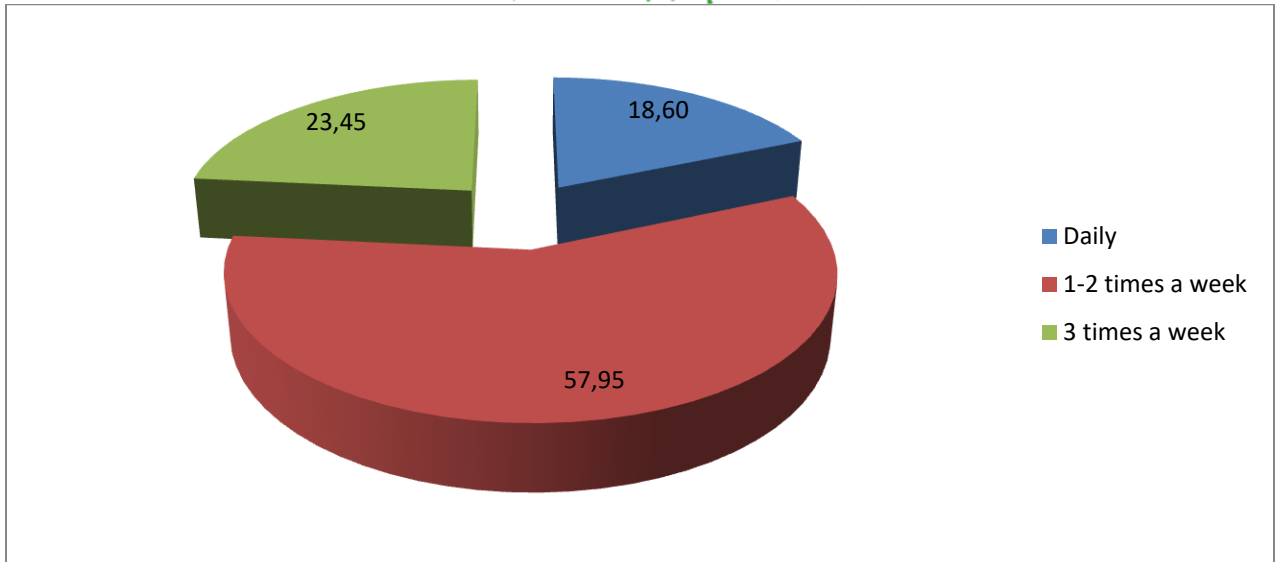
In cases where physical exercise is not used, the most common reason is the patient's lack of will. A small percentage (7.8%) argued that physical exercise does not help, according to the literature.



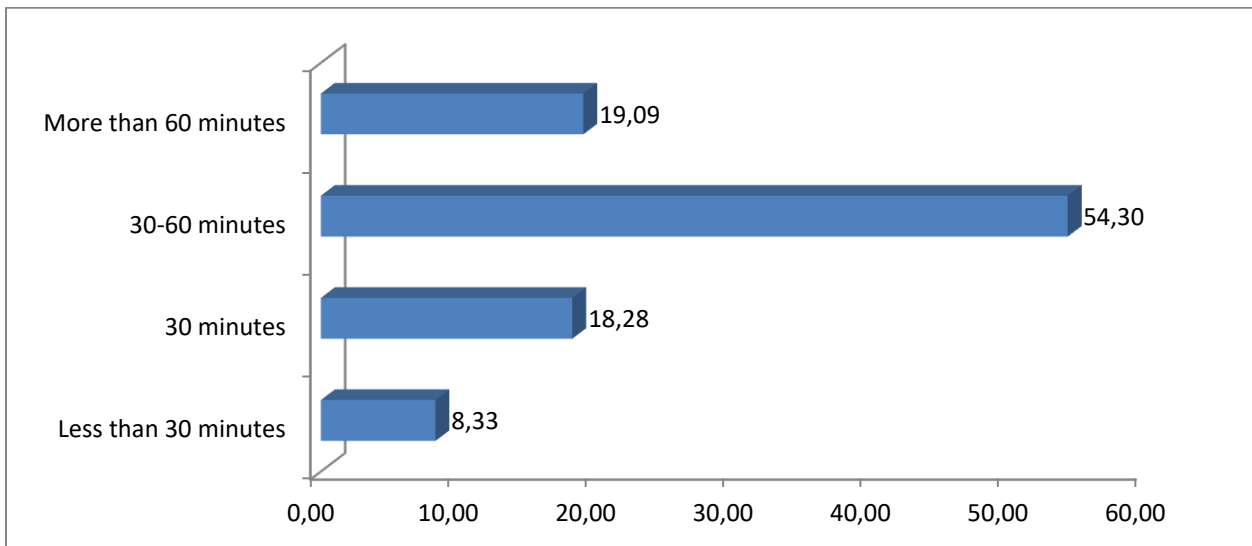
Team program, endurance exercise and team sport are the forms of exercise suggested by the majority of the sample.



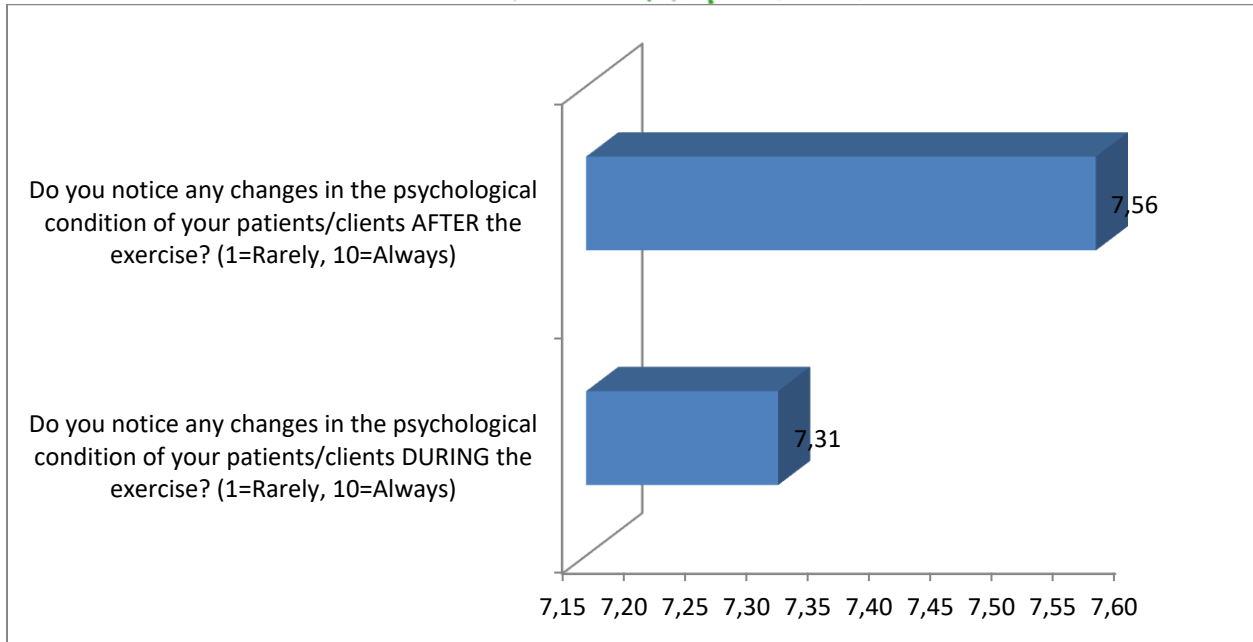
The frequency of exercise is shown in the following chart. 1-2 times a week suggests 57% of the sample. On the contrary, daily exercise is only suggested by 18% of mental health professionals. On a scale of 1-10 in terms of intensity of exercise, mental health experts suggest exercise of average intensity (6/10).



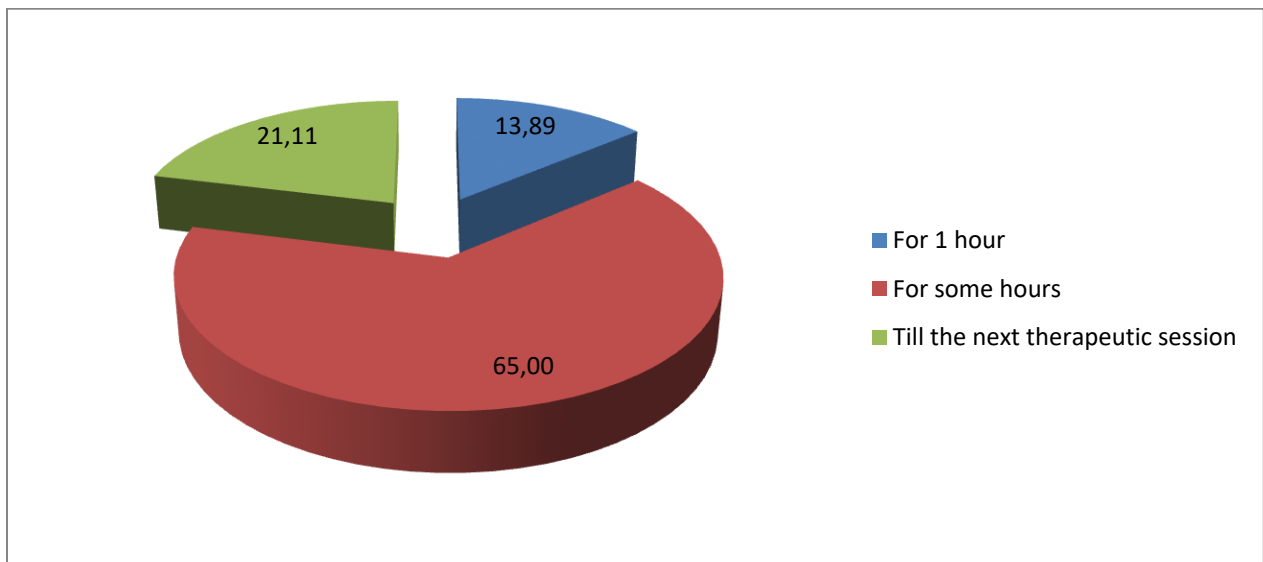
The optimal duration of exercise, according to expert opinion, is 30 to 60 minutes (54.3%). A very small percentage, just 8%, suggests a 30-minute exercise.



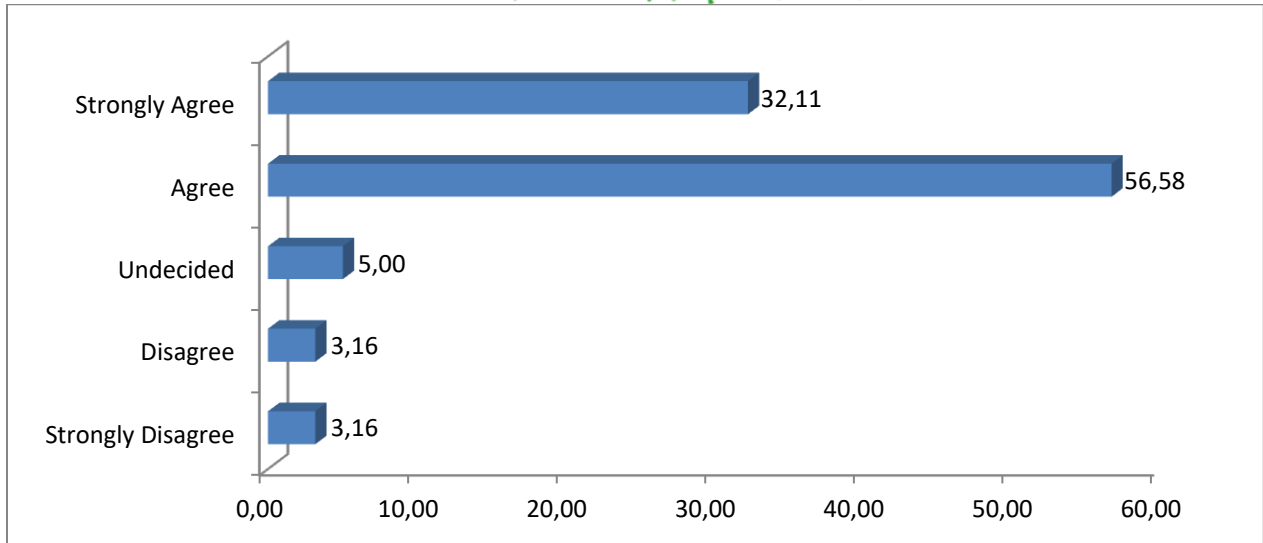
The effect of physical exercise either during or after it is shown in the following graph. Experts notice a significant impact on the psychological state of patients.



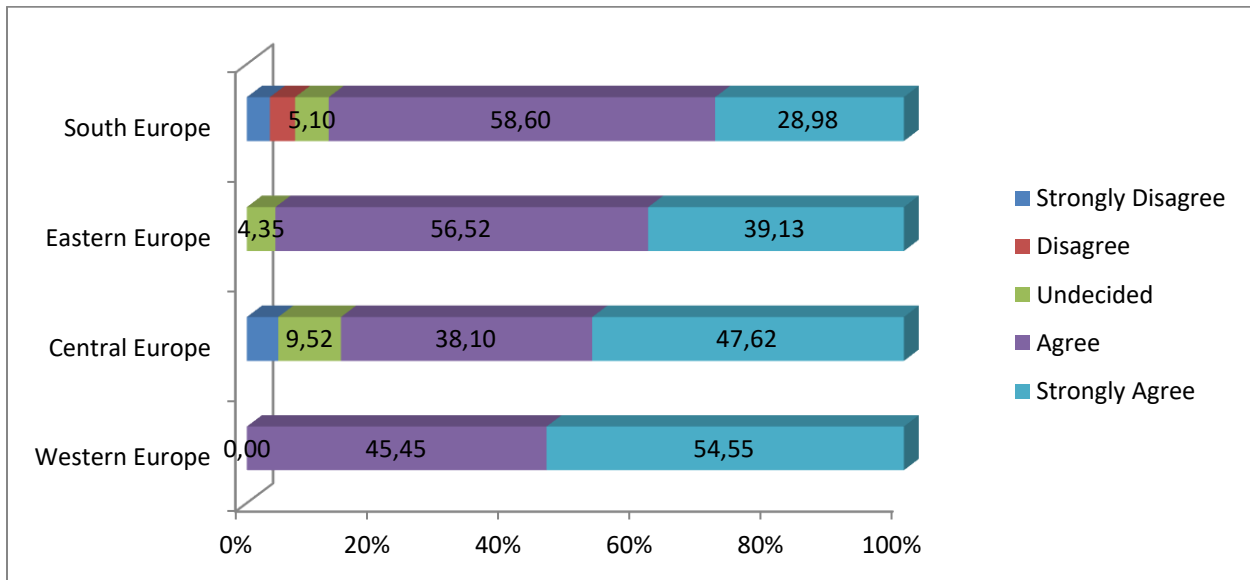
An important indication of the contribution of physical exercise to mental health is the fact that experts see changes in the psychological state for some hours after the end of the exercise (65%).



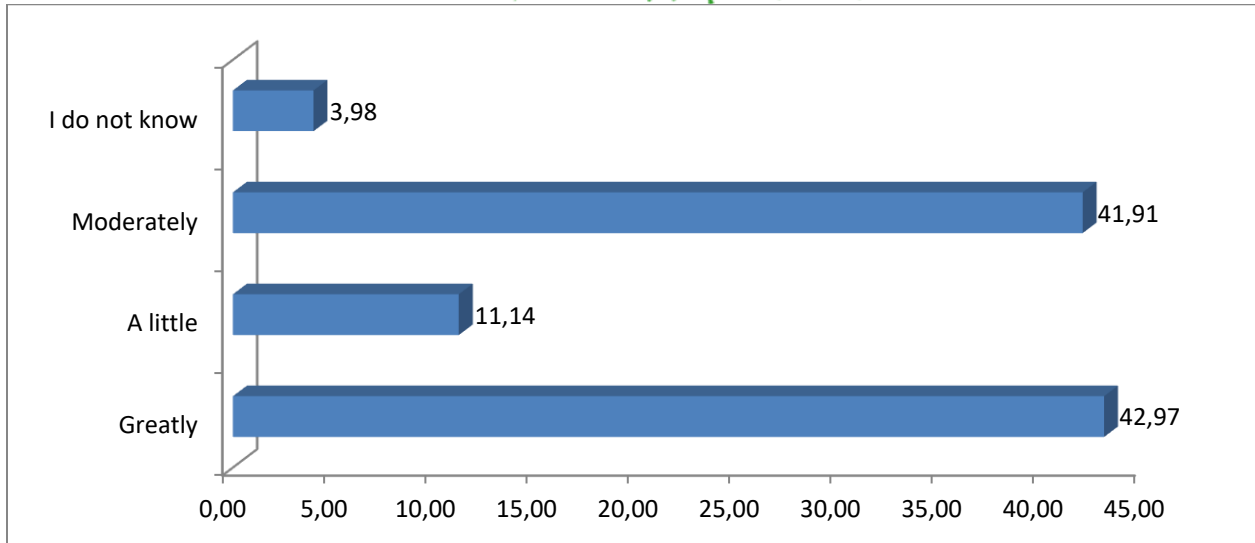
Indicative of the above conclusion is the fact that 88% of the sample agrees that the exercise assists in the therapeutic treatment of mental disorders.



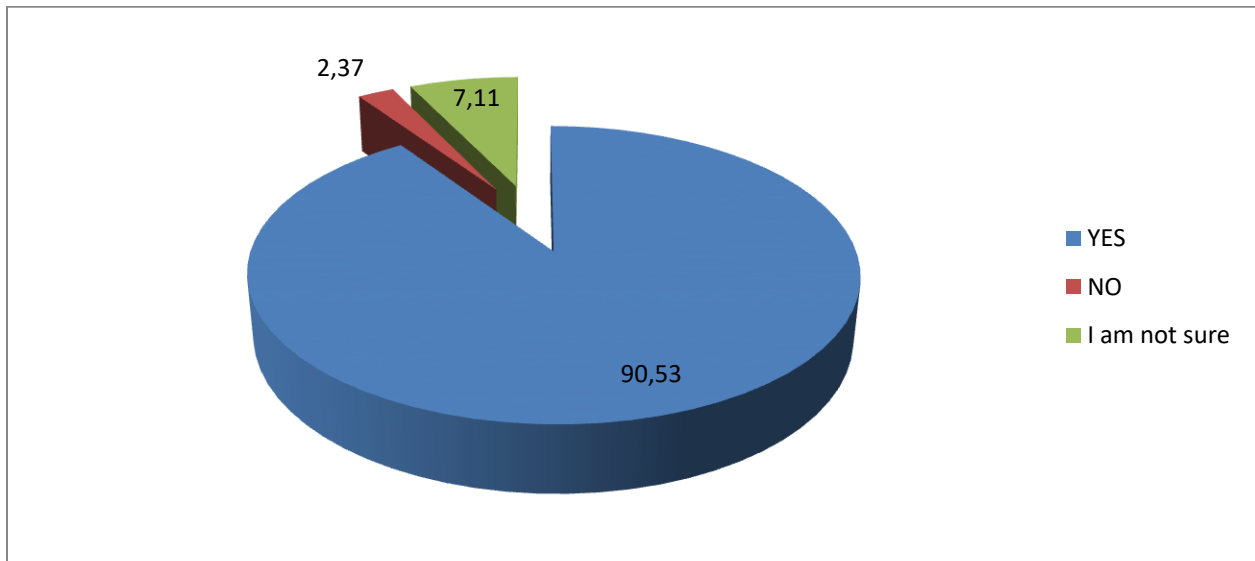
However, rates of physical activity acceptance as a factor in improving mental health are clearly higher in Western and Central Europe. The lowest rates are observed in southern Europe.



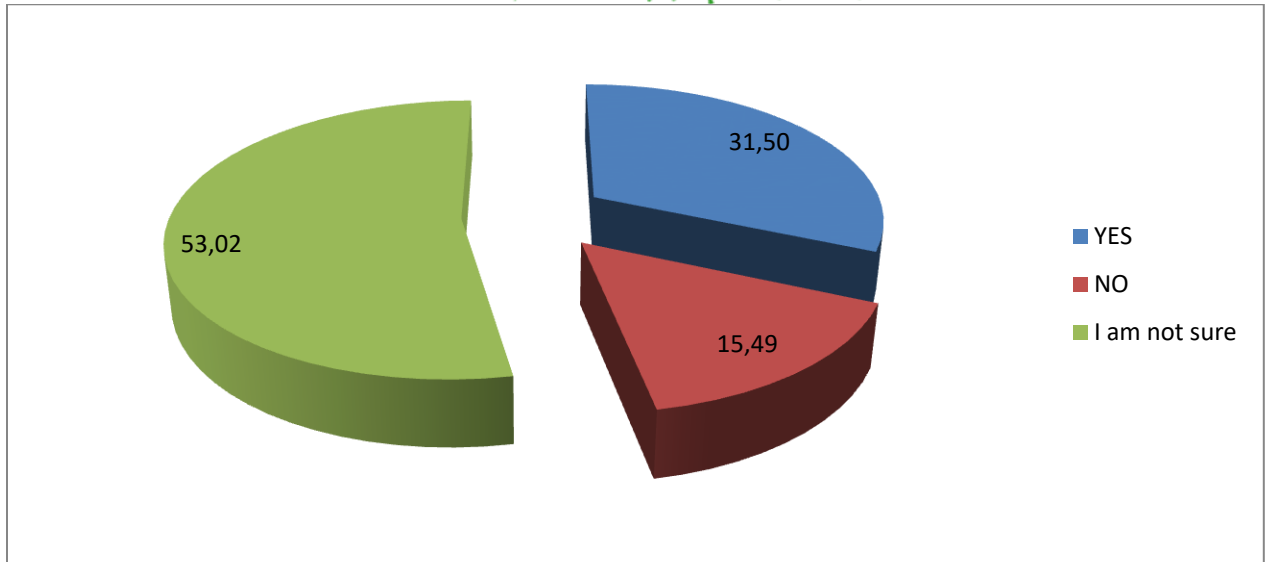
42% of the sample agrees that exercise contributes positively in the therapeutic treatment, greatly and 41% moderately.



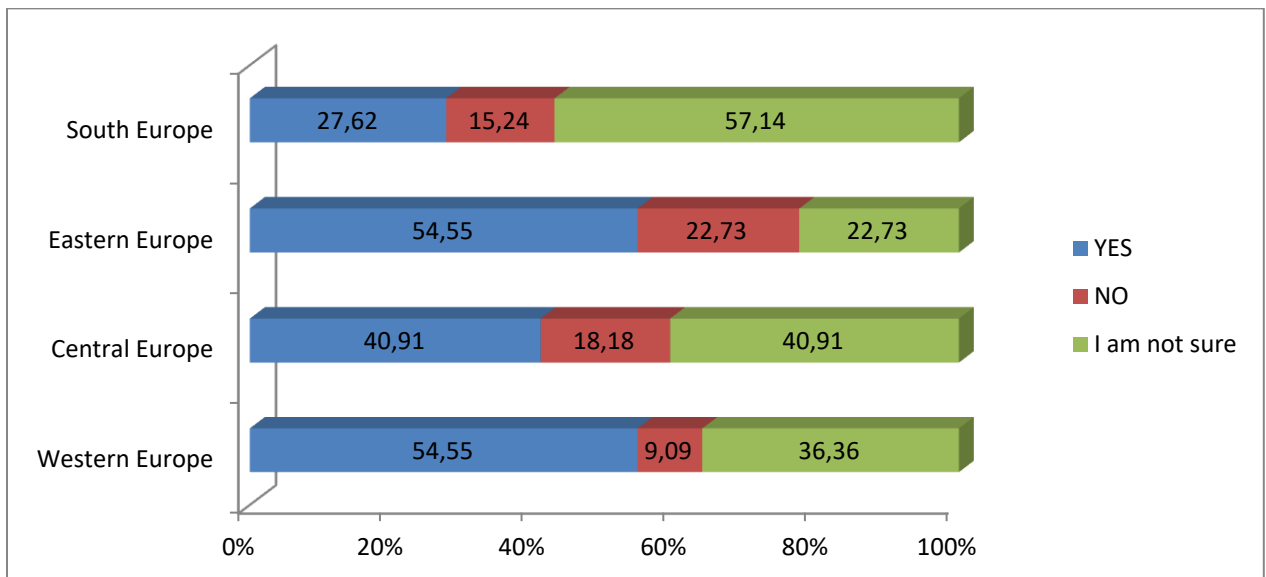
90% of the sample declares positive to include exercise in the treatment process. Western Europe countries had significantly lower percentage (77%).



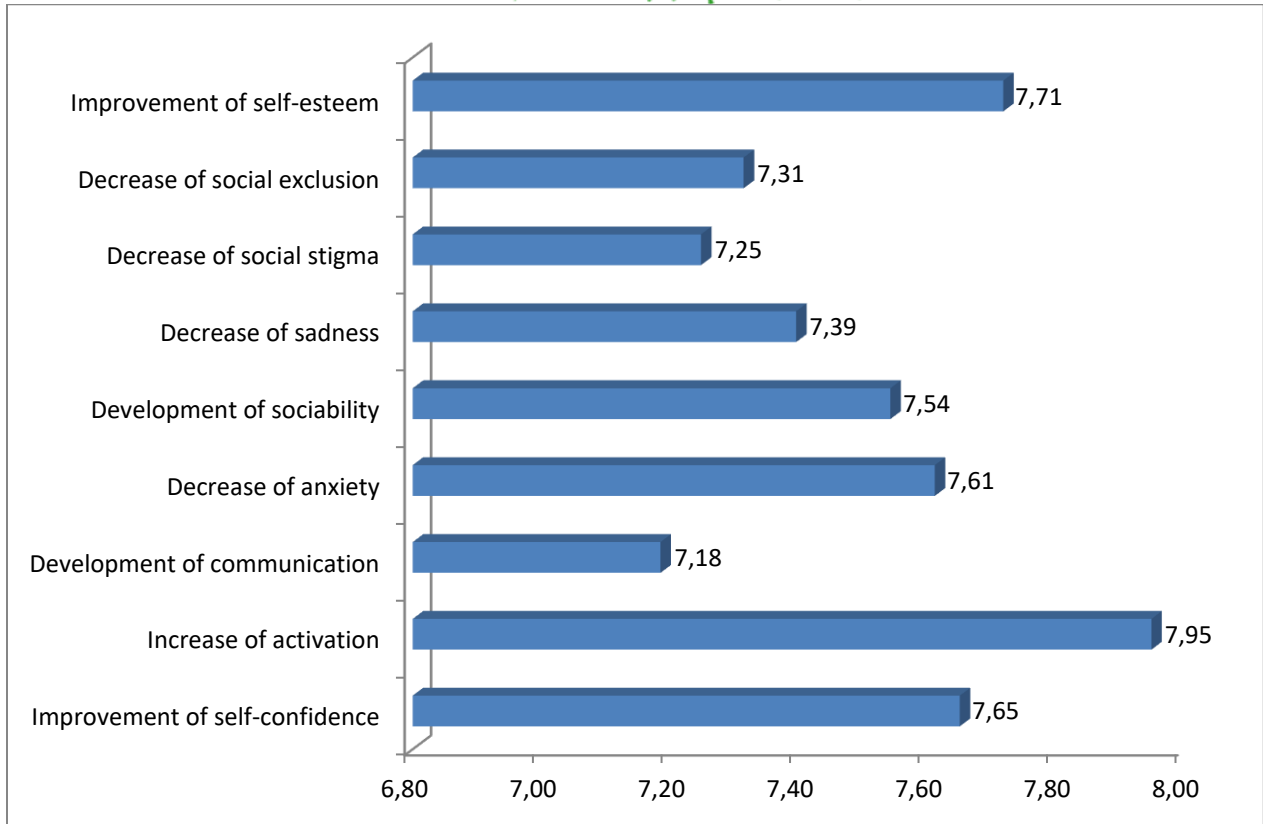
A major problem that emerged through research is the fact that only 31.5% of the sample has infrastructure and staff to support such an intervention.



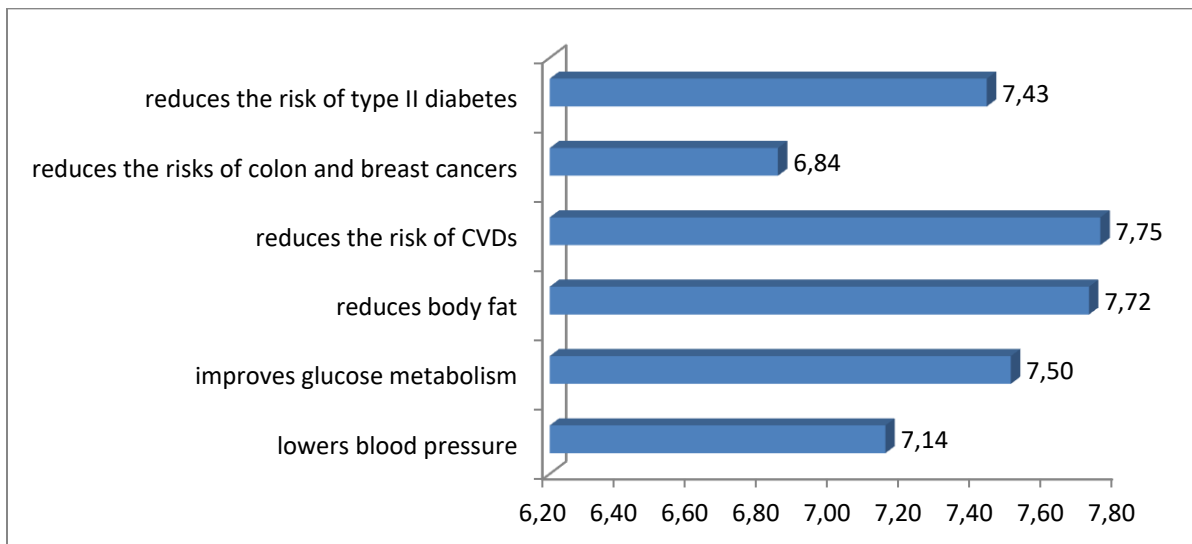
Significant infrastructure shortfalls are observed in South European countries.



Regarding the effect of physical exercise, experts estimate it contributes in increasing of activation, improvement of self-esteem, improvement of self-confidence and decreasing of anxiety.



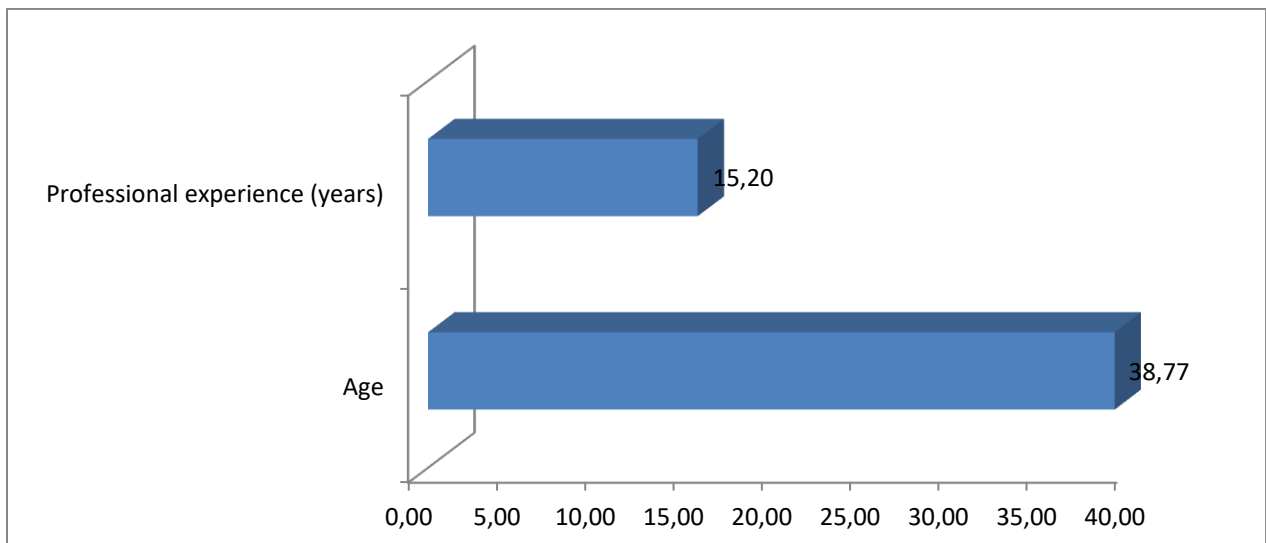
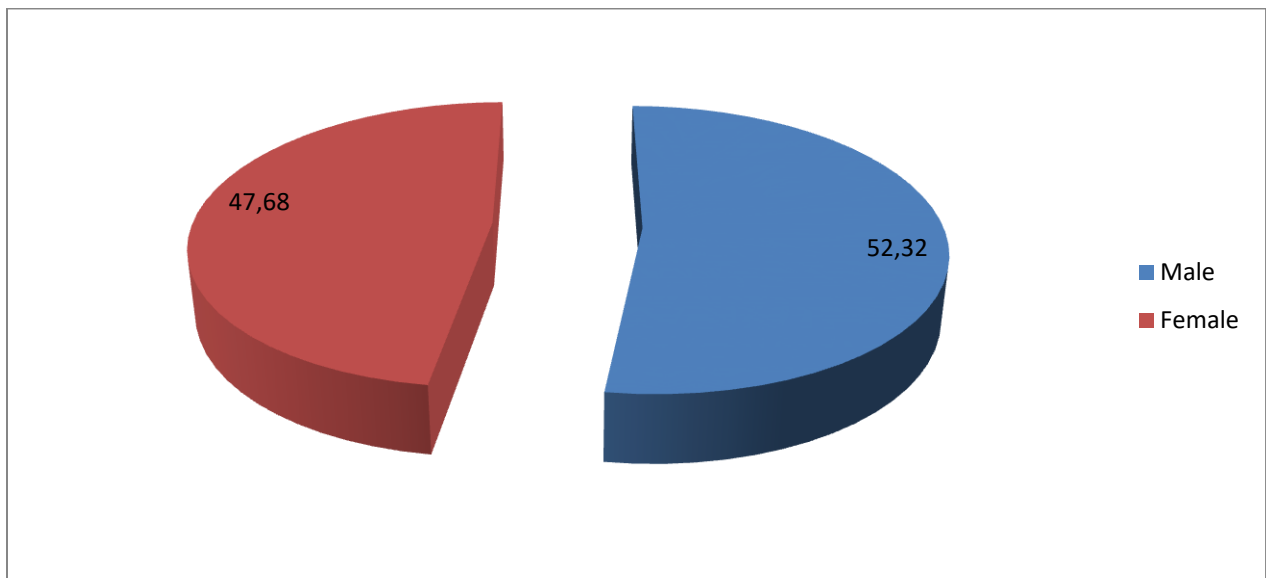
At the same time they recognize the contribution to reducing the risk of CVDs and body fat.



Sport Organizations

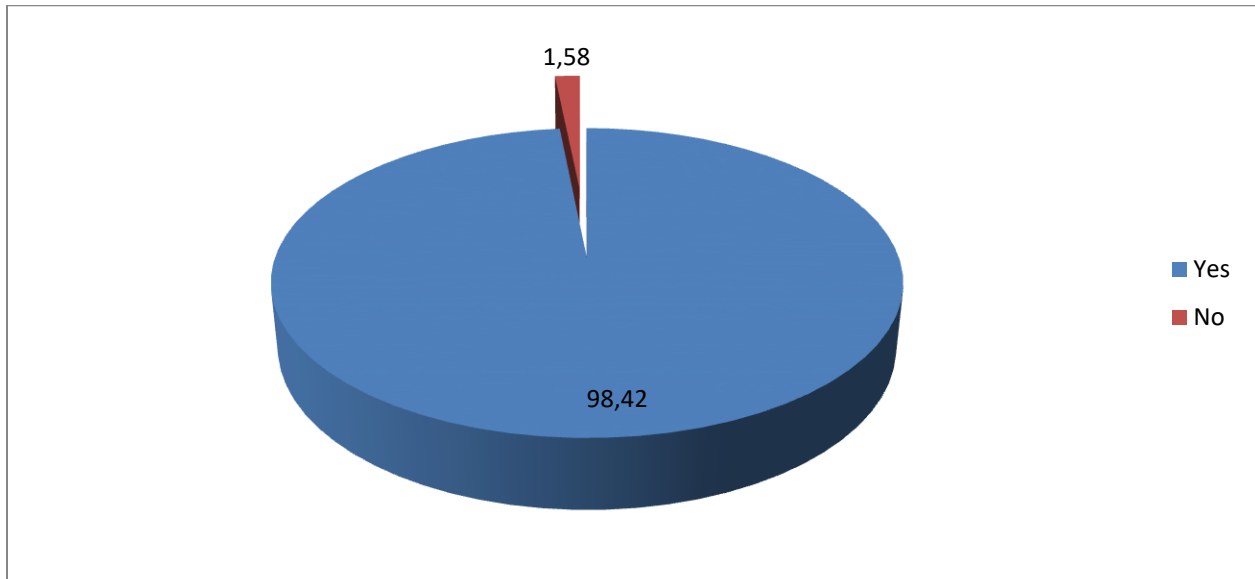
Demographics

The survey involved a total of 257 sports organization representatives, of which 52% were men and 48% women. The average age was 38 years and the average work experience was 15.2 years.

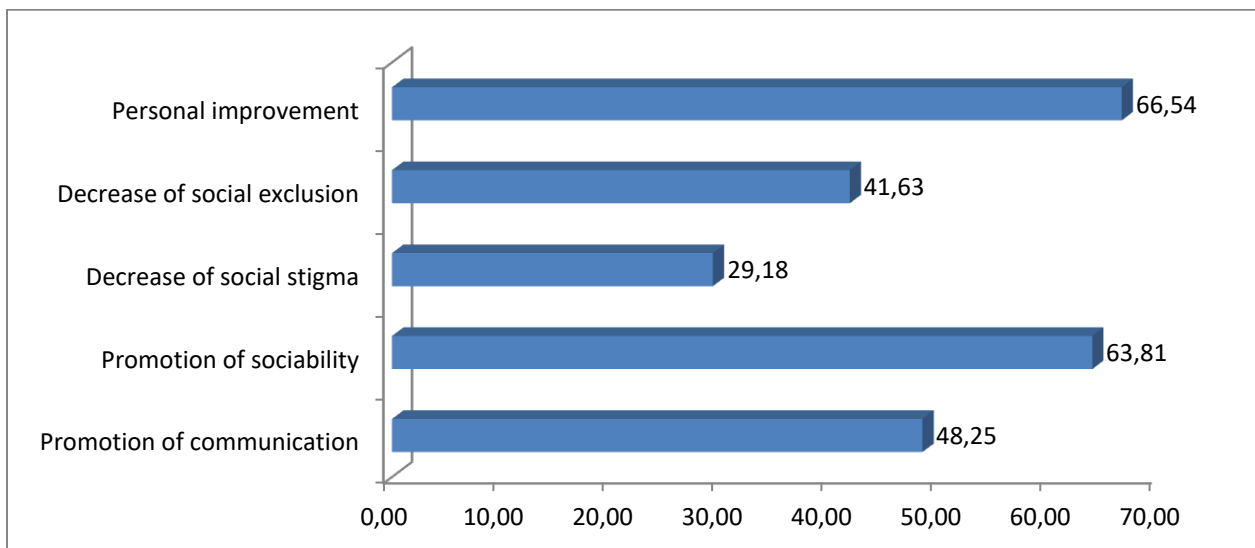


Exercise as Supplementary Therapy

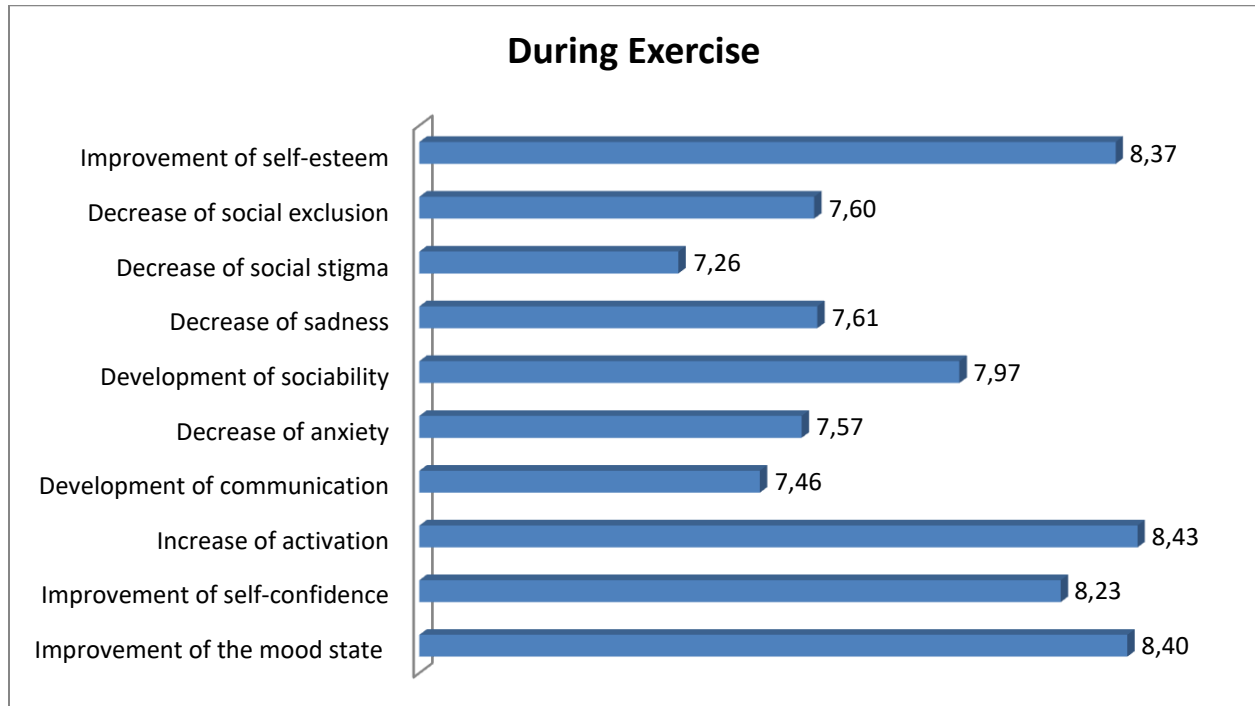
98% agree that participation in sports and exercise activities is beneficial to mental health.

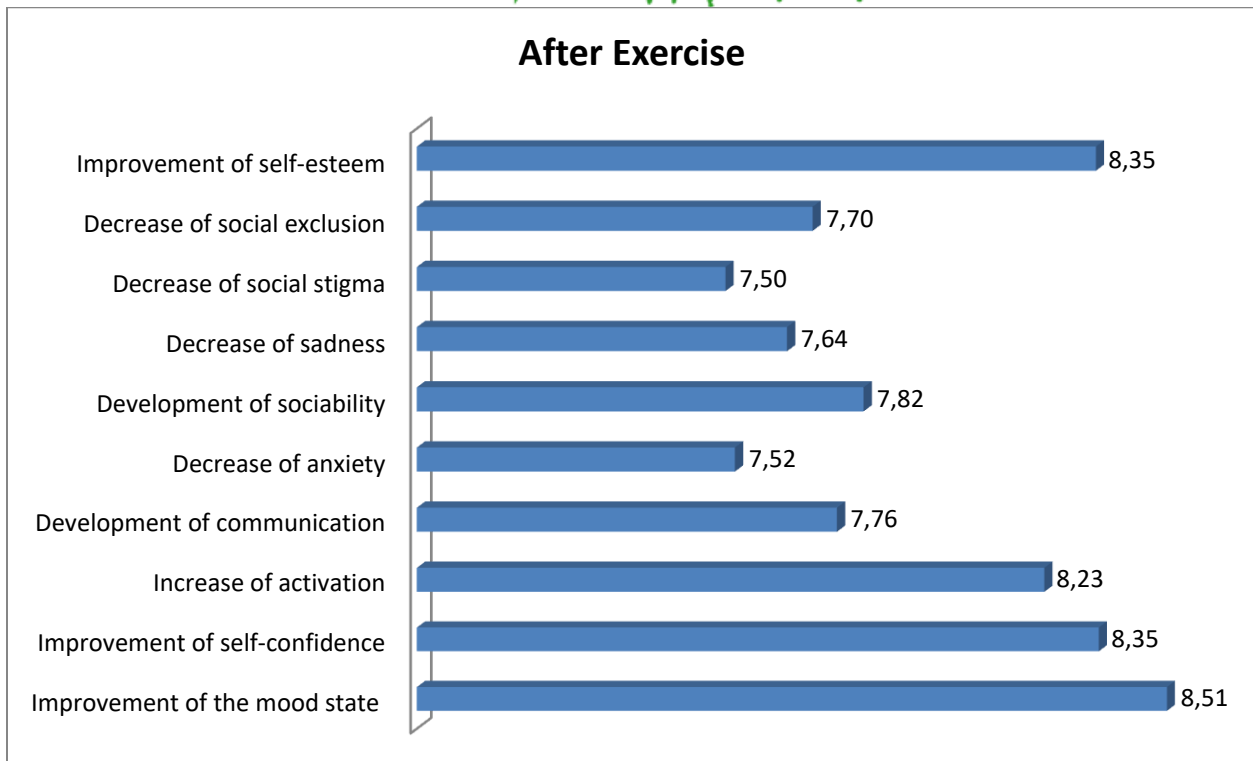


The main benefits include personal improvement (66%), promotion of sociability (63.8%), promotion of communication (48) and decrease of social exclusion (41%).

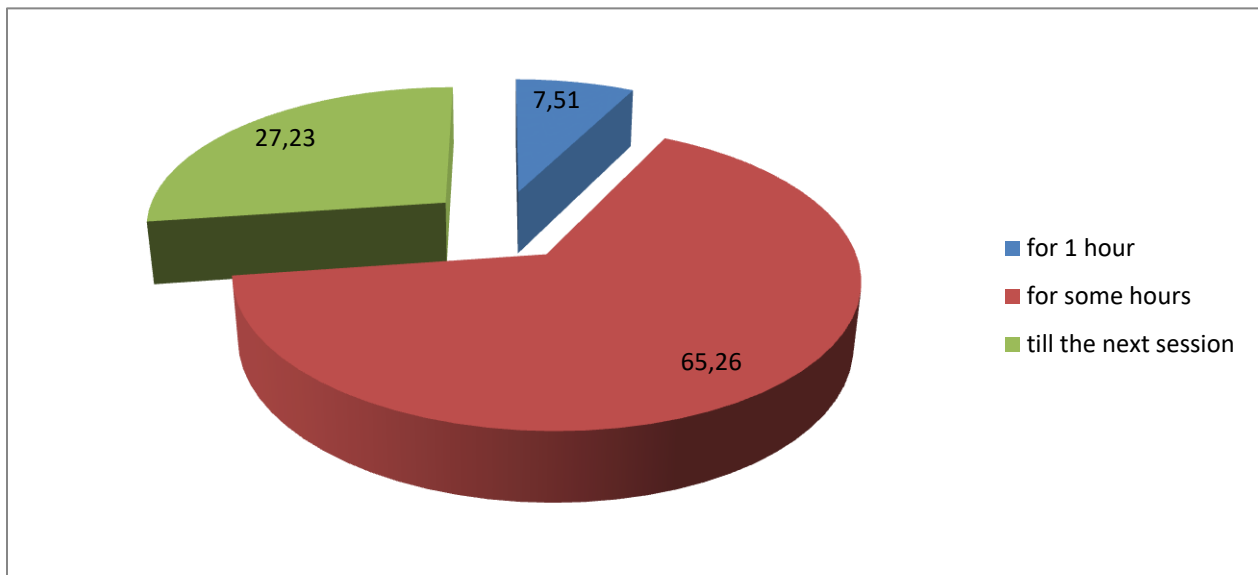


Representatives of sports organizations notice major changes in the psychological condition either during or after exercise regarding the mood state, self-confidence, activation, self-esteem and sociability.

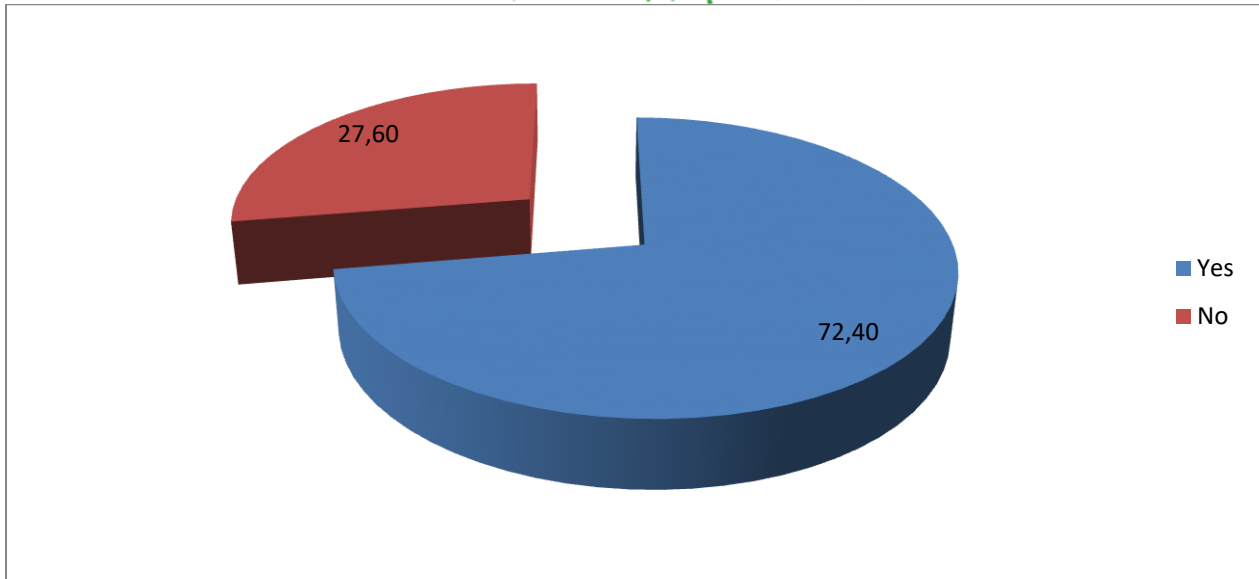




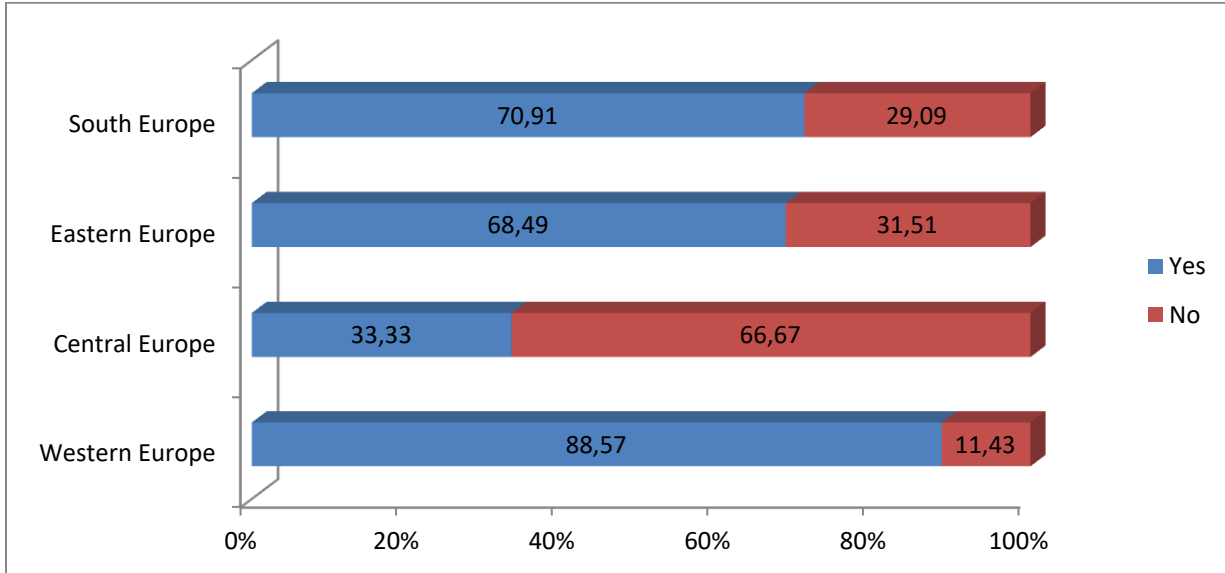
The positive effect of physical exercise lasts some hours according to 65% of the sample. On the contrary, according to 7%, it lasts only one hour.



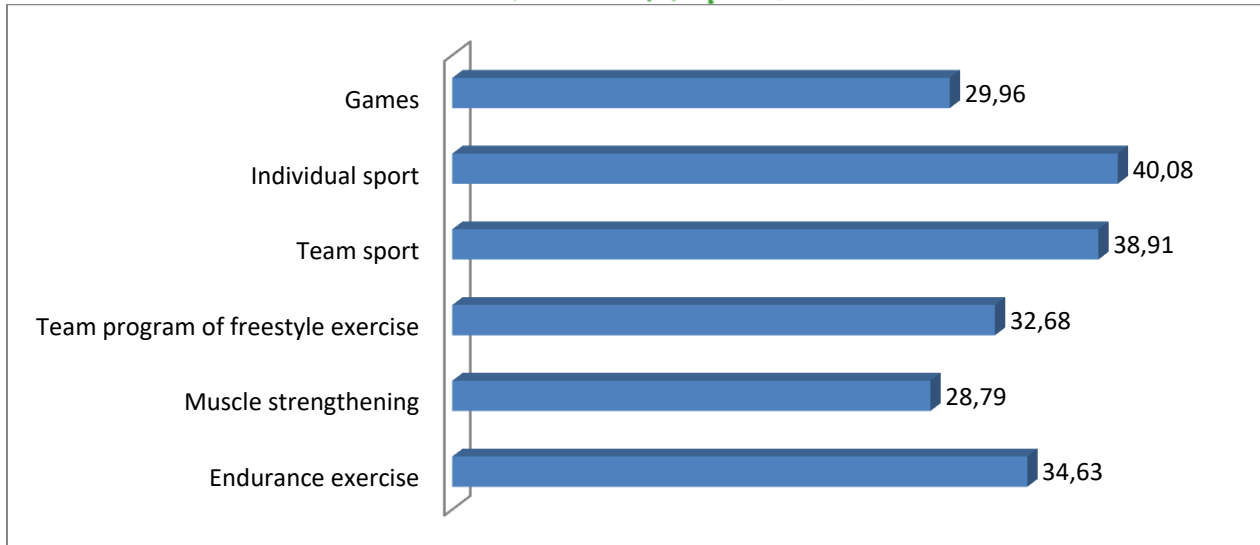
72% of the sport organizations provide activities to the general population linking mental health and physical activity.



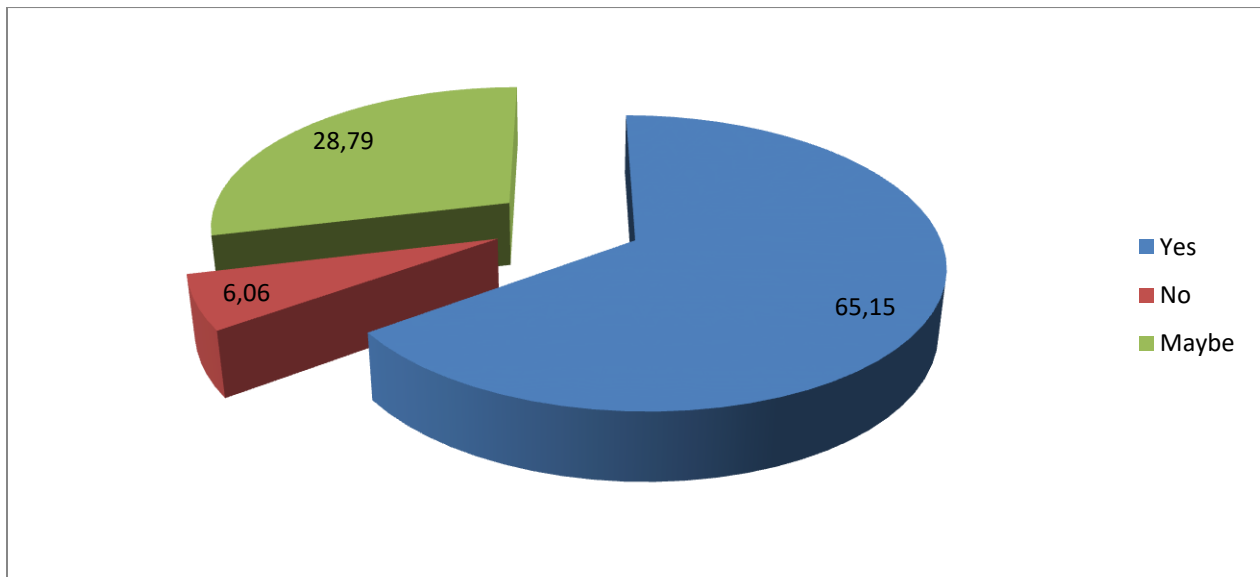
However, there are significant differences between the four regions. The lowest rates are observed in the Central European countries.



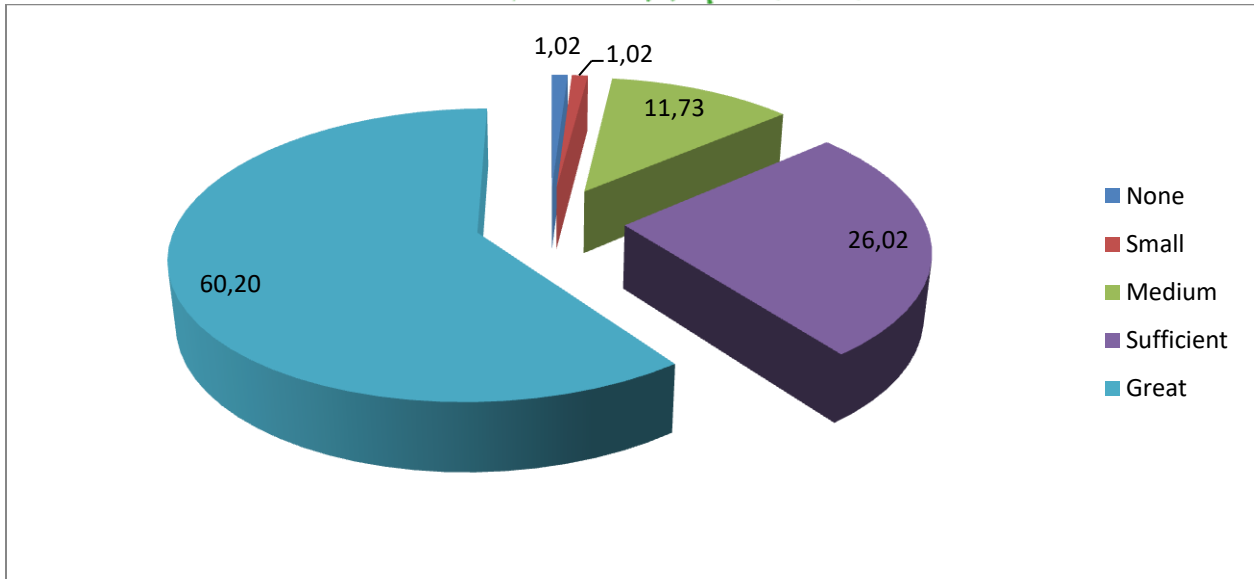
Where activities are offered to the public linking exercise to mental health, these include primarily individual sports (40%), team sports (38%) and Endurance exercise (34%).



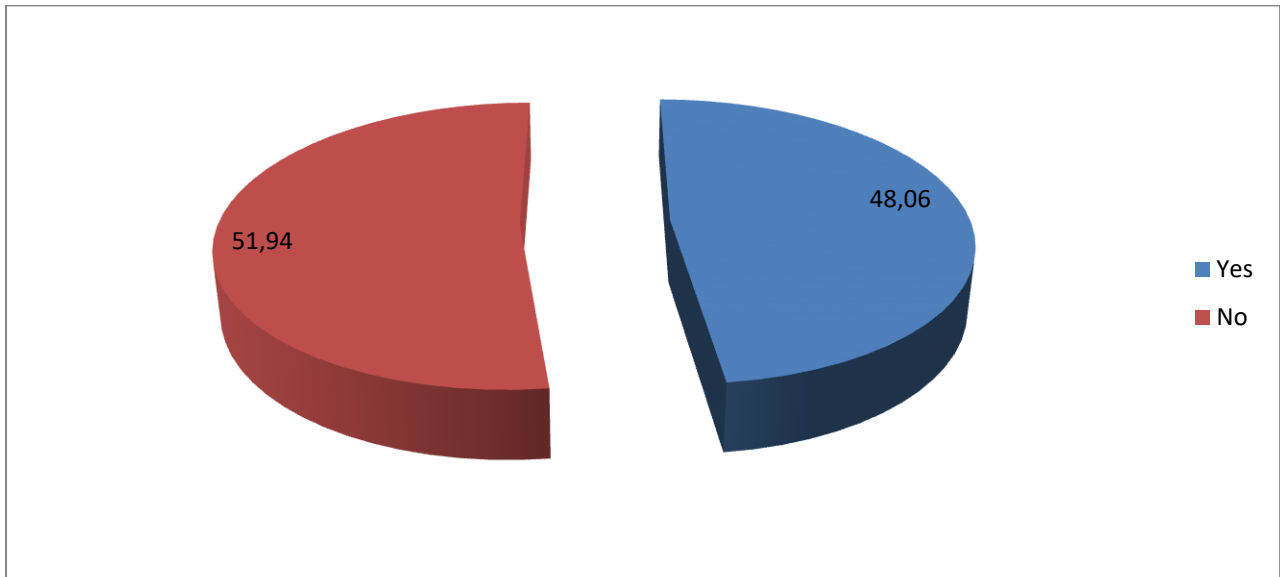
Where this is not the case, 65% declare willing to do so in the future.



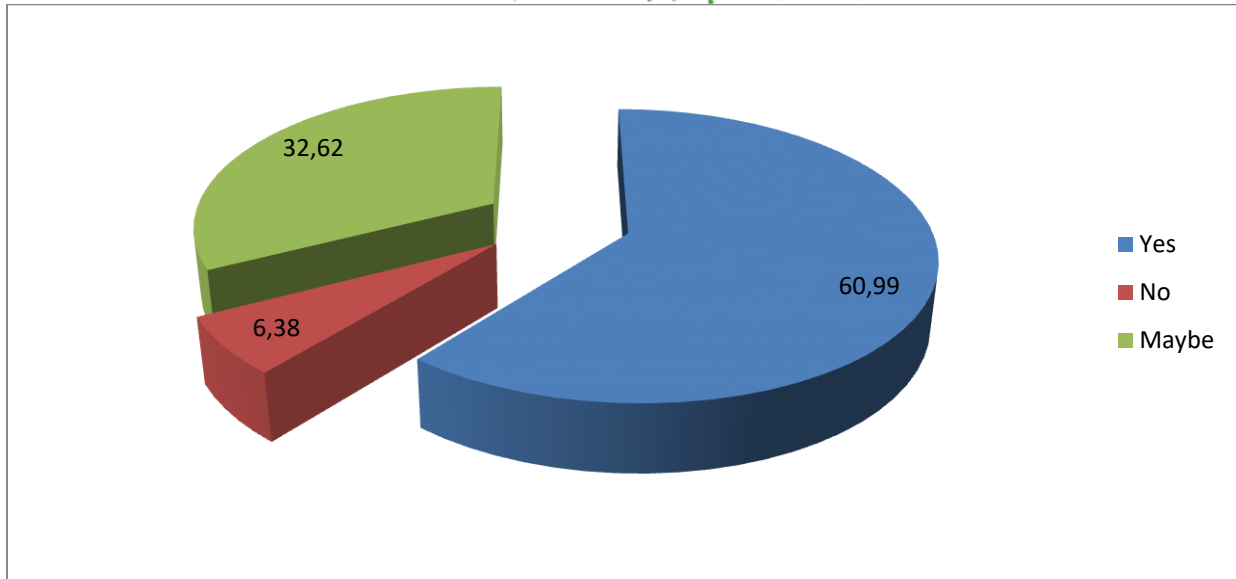
At the same time, 86% consider that physical activity contributes sufficiently or greatly to psychological condition.



A significant percentage of the sample (48%) had previously collaborated with mental health organizations.

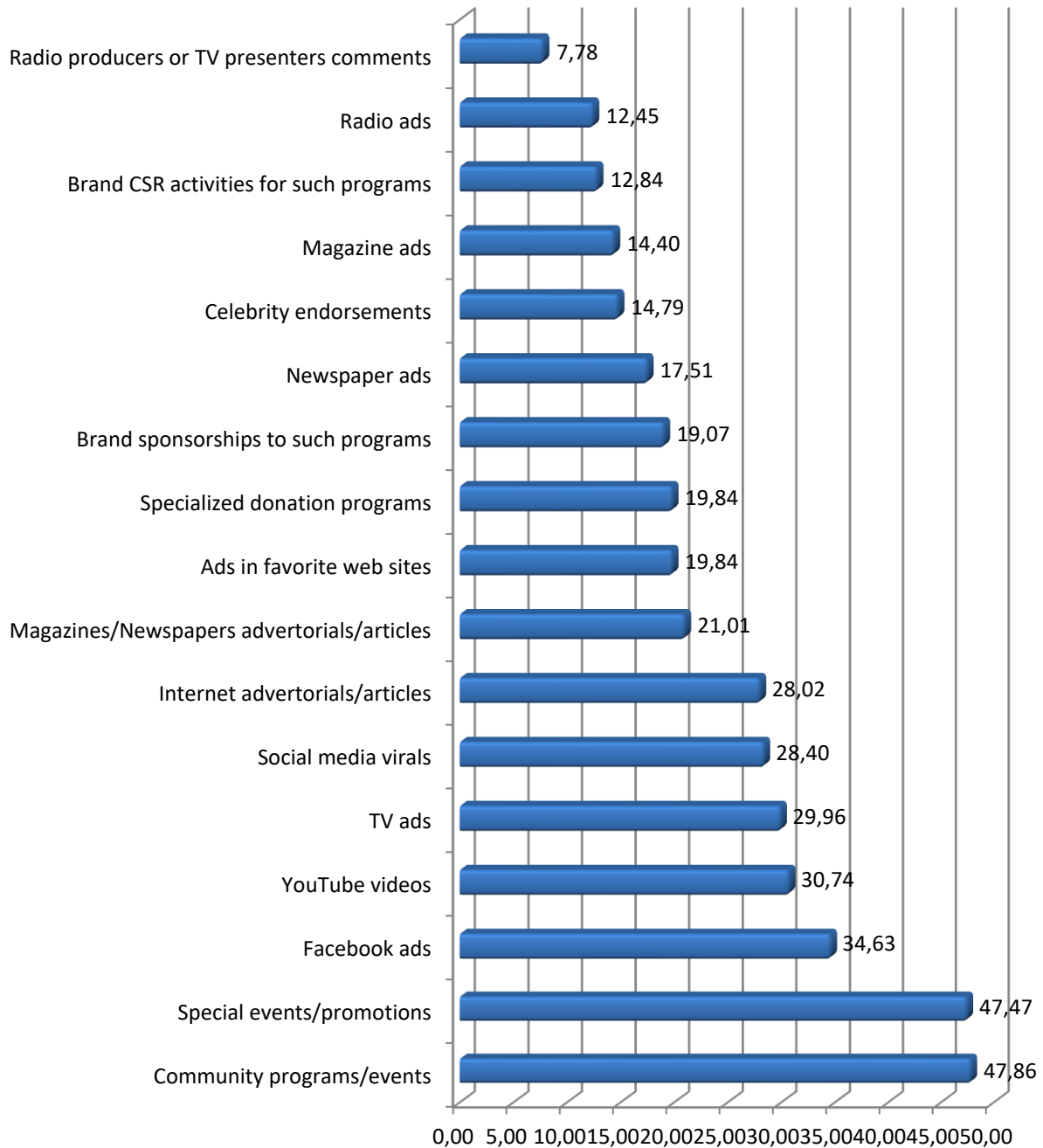


60% of non-cooperated organizations state their willingness to cooperate in the future.

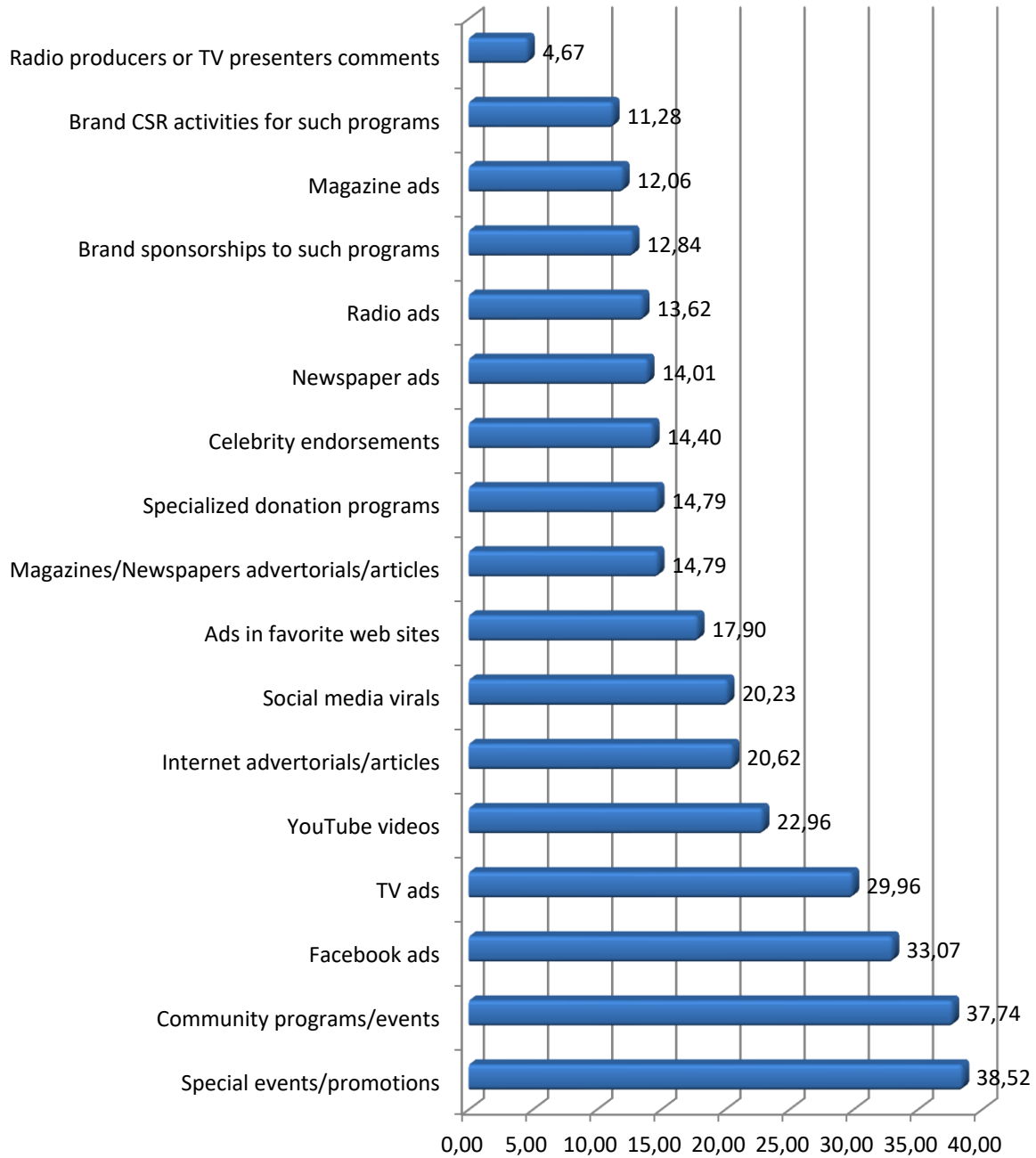


According to the sport organization's view, community programs / events and Special events / promotions are the most effective ways to inform and motivate the public regarding the positive effect of exercise to mental health.

Which of the following will help you learn more info about sports-exercise programs for mental health



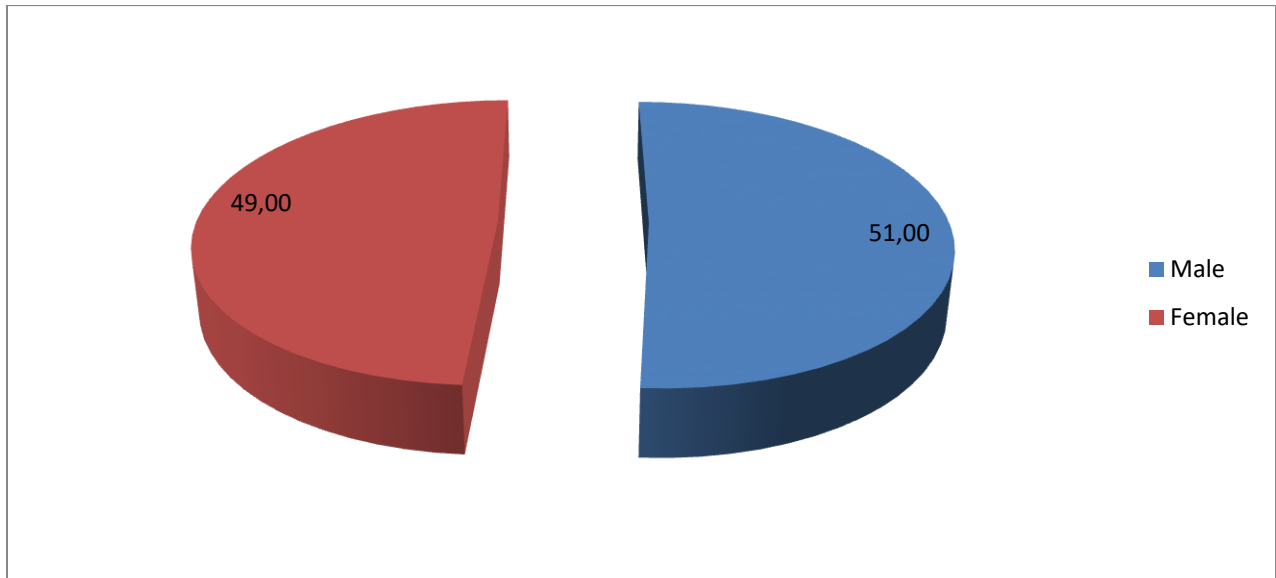
Which of the following will influence you more to participate more actively in sports-exercise programs for mental health



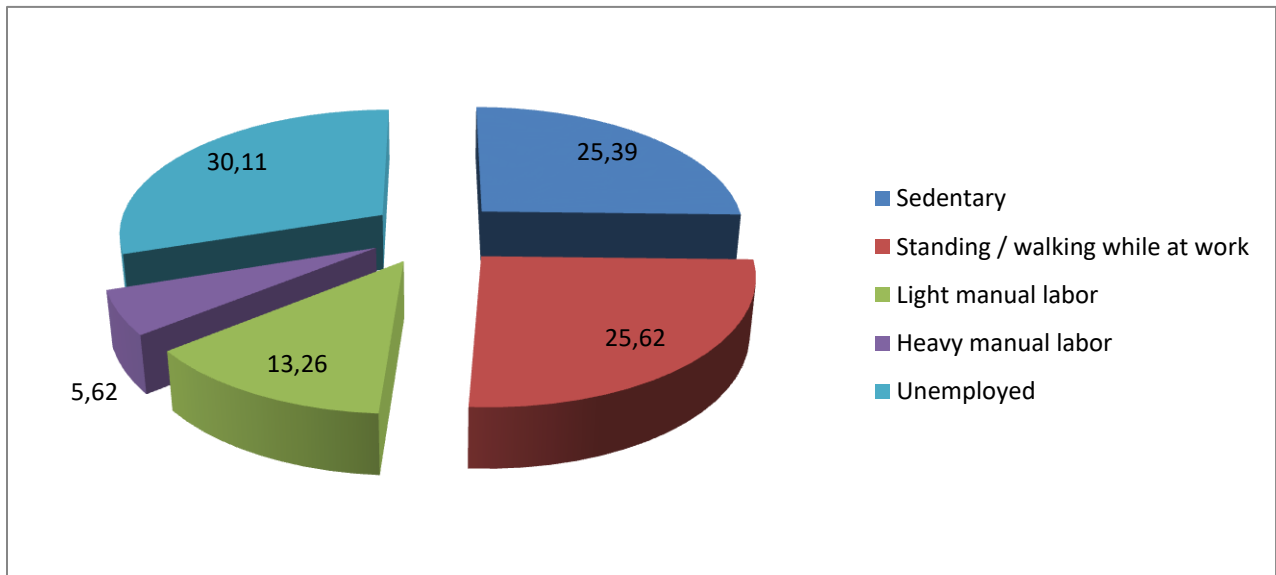
Mental Health Users

Demographics

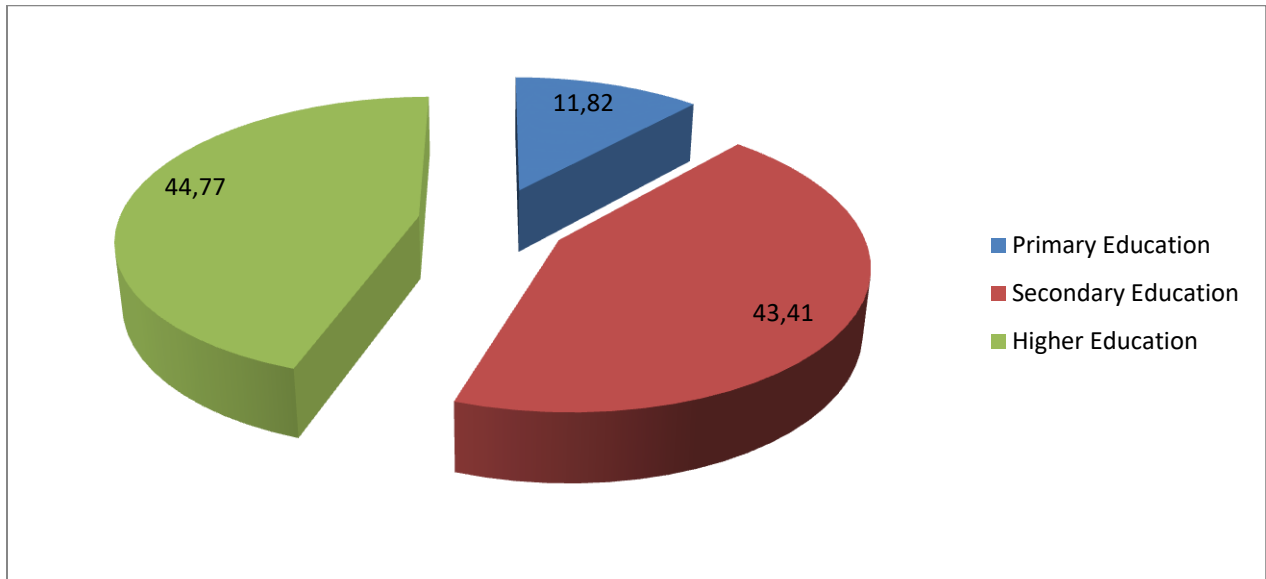
The survey involved 468 mental health users, of whom 51% were men and 49% women. The average age was 37 years.



In terms of working conditions, 30% of the sample was unemployed.

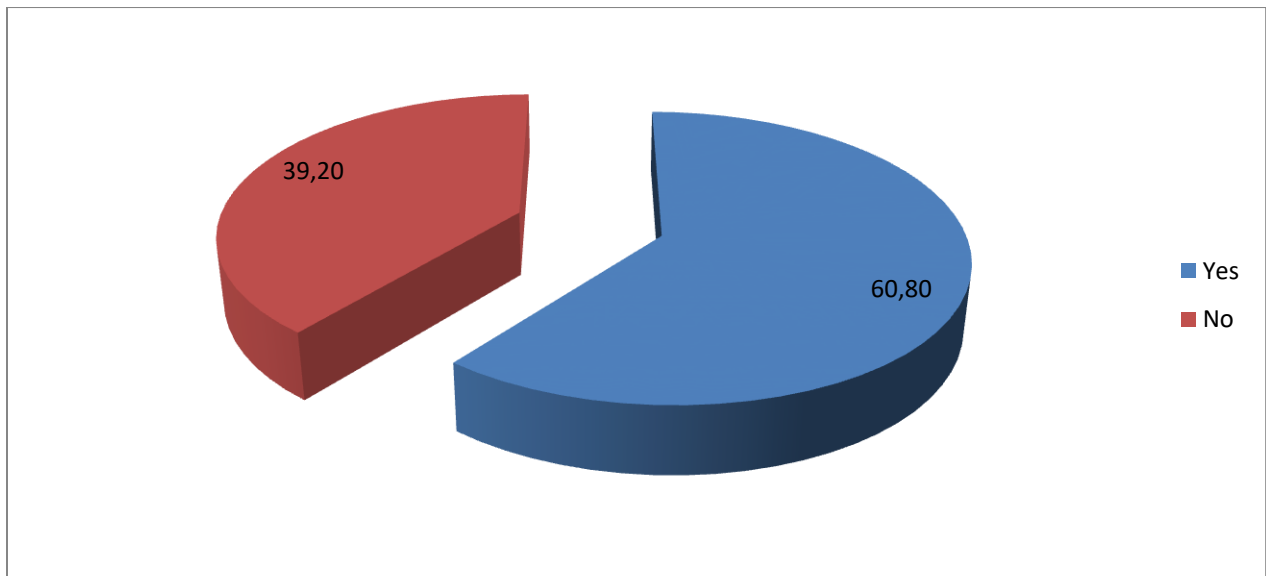


The educational profile of the respondents is presented in the following graph. 11.8% were primary school graduates and 43.4% secondary school graduates. 44.7% were graduates of higher education.

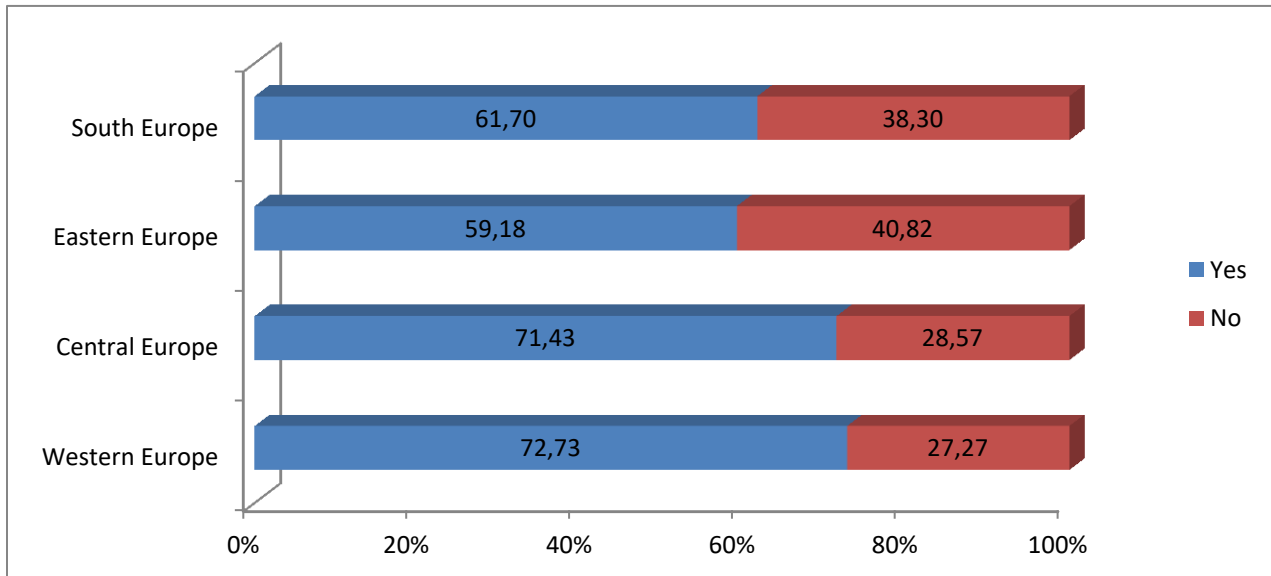


Exercise

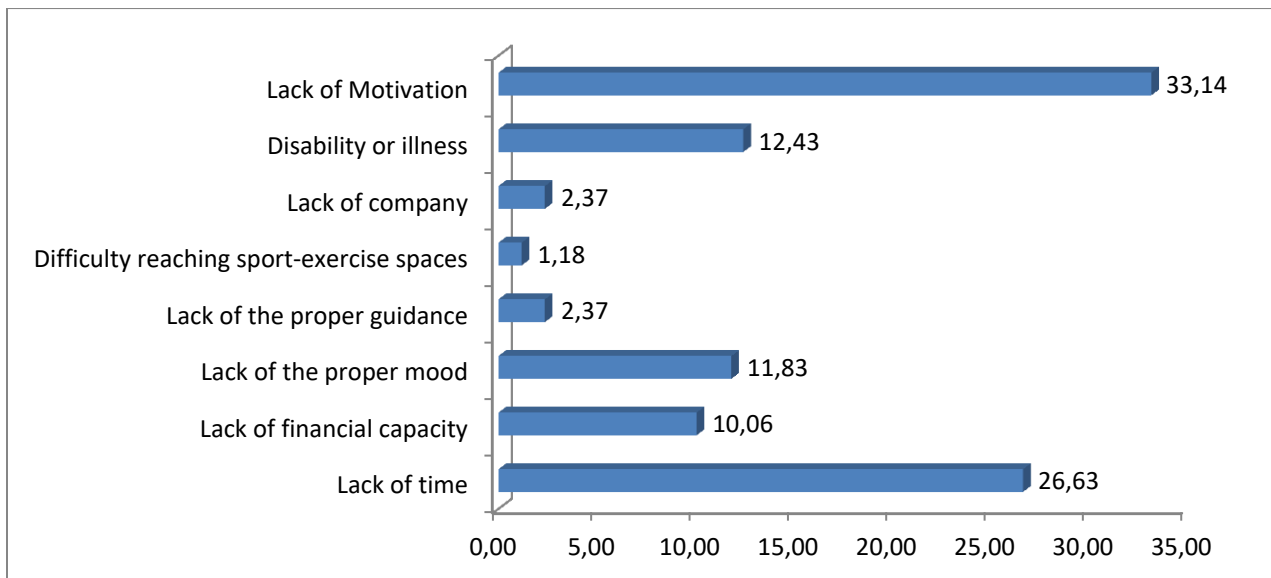
60.8% of the sample participates in sport activities.



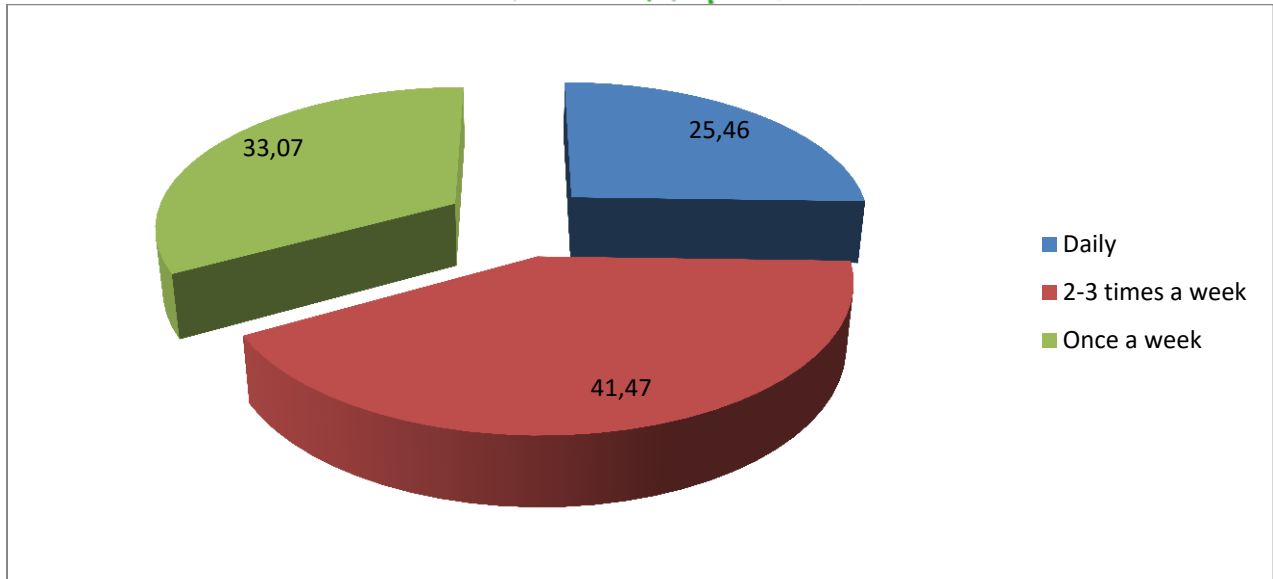
Small differences are observed among the four regions with the lowest rate of exercise being observed in the countries of eastern Europe.



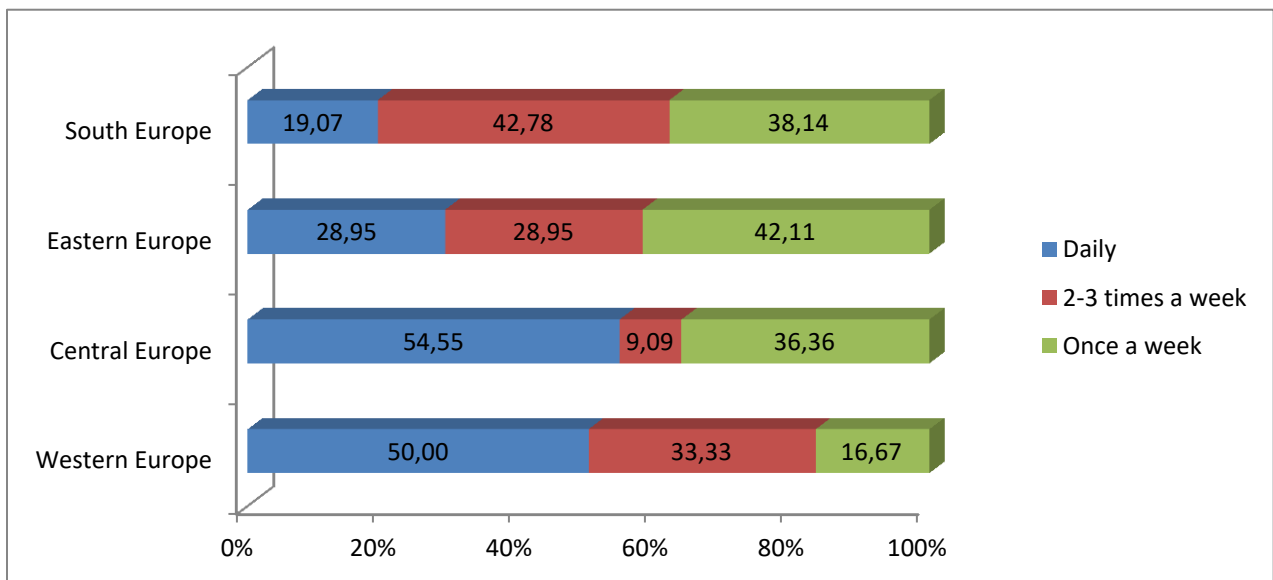
In the case of non-participation, the lack of motivation and time are the most important factors.



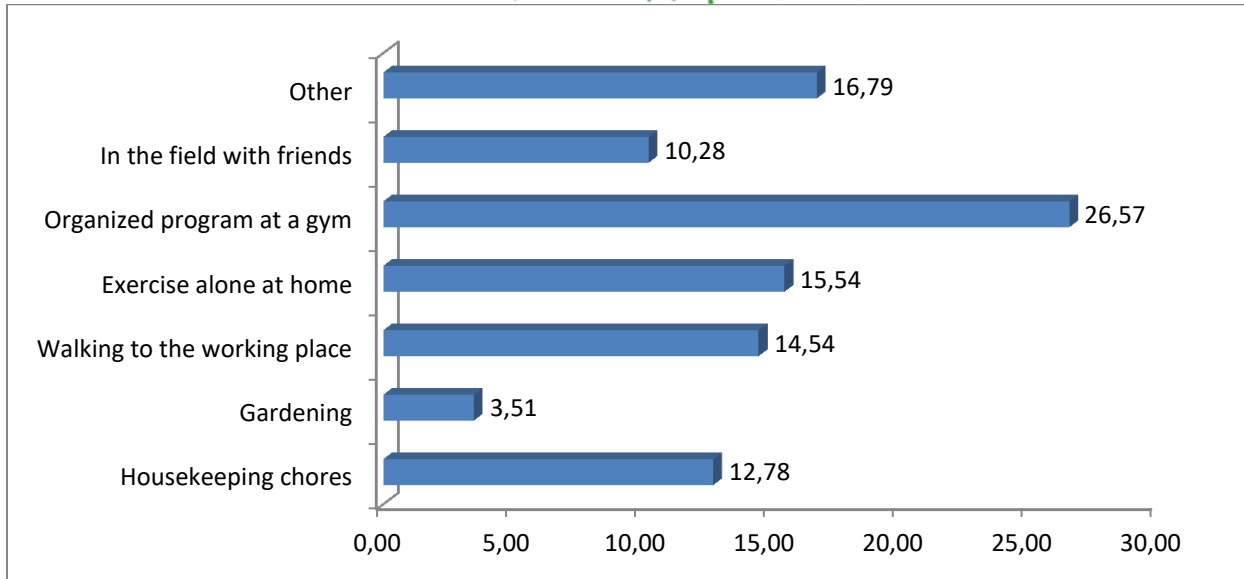
Regarding the frequency of physical exercise, on a daily basis exercises the 25.4% while 41% exercises 2-3 times a week.



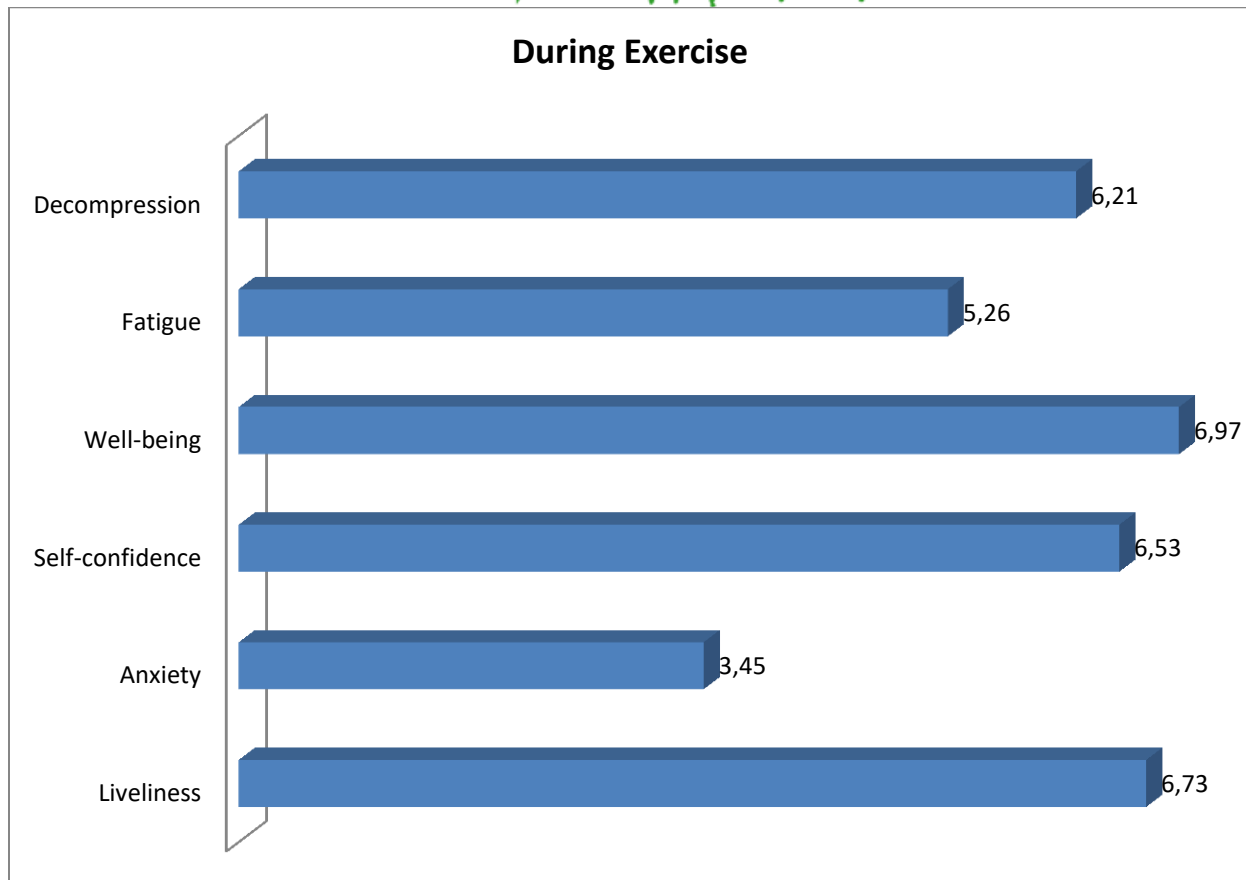
Significant differences are observed between different regions. In central and western Europe, the exercise takes place on a daily basis for 50% of the sample, while only 19% of southern Europeans exercise on a daily basis.

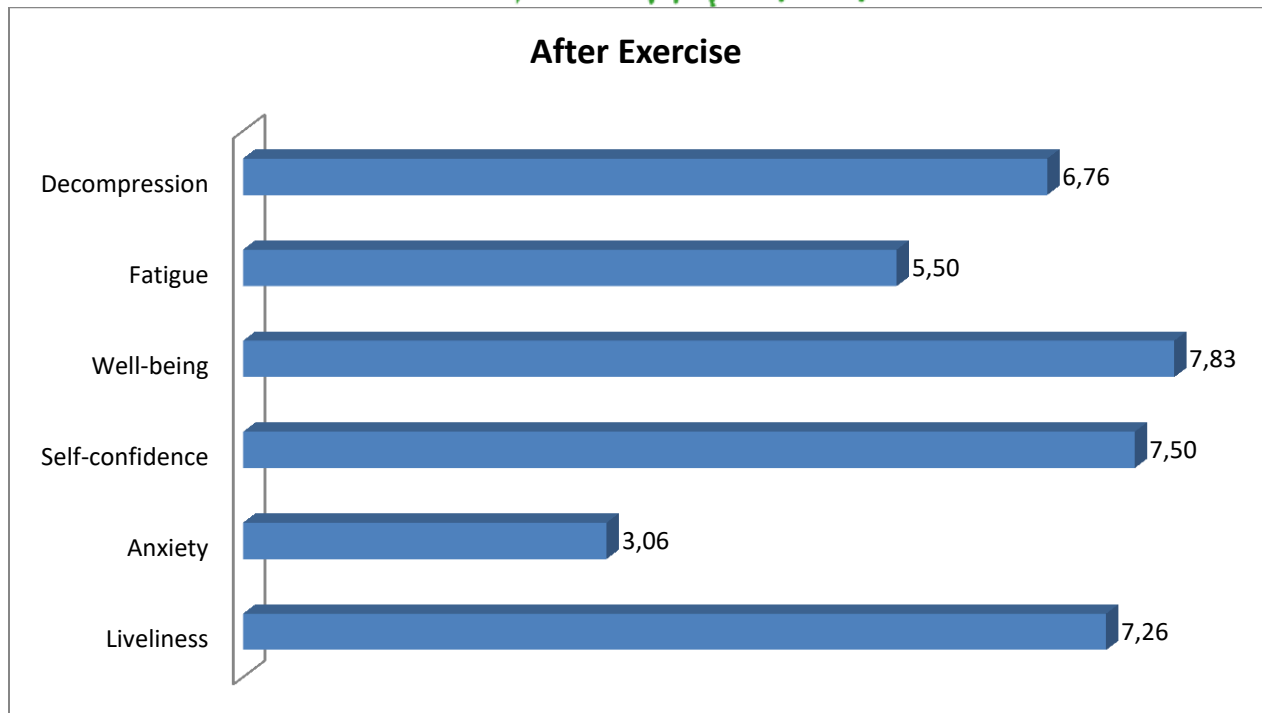


Organized program in the gym selects 26.5% of the sample followed by the individual exercise at home 15.5%. The average duration of exercise is one hour while the intensity in a scale 1-10 reaches about 5.

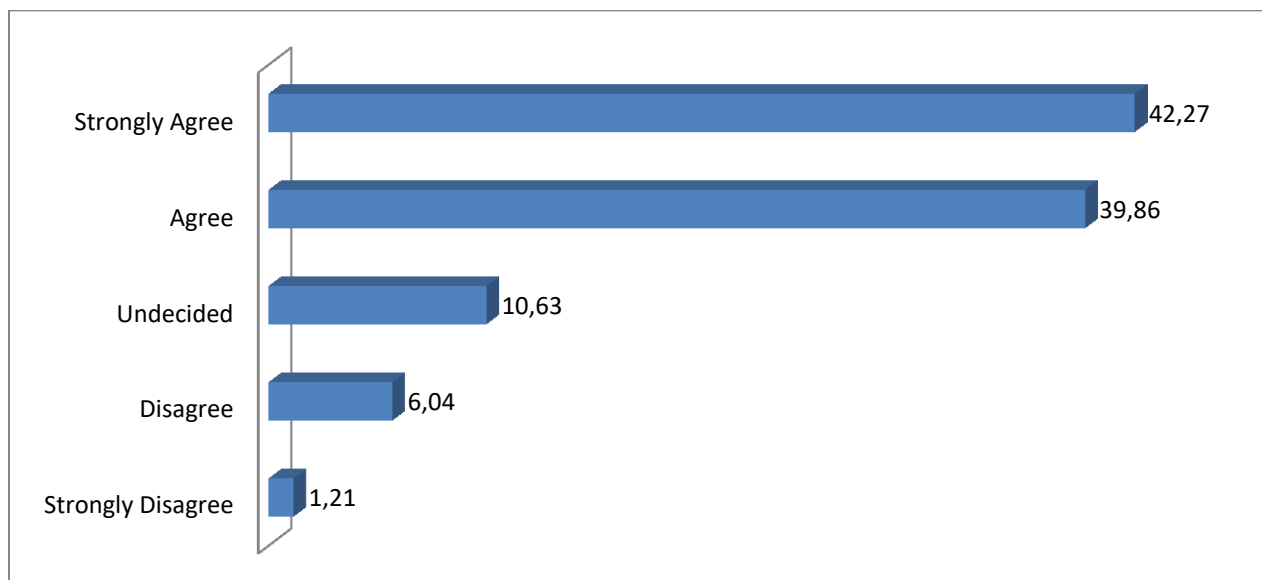


Significant improvement in liveliness, well-being and self-confidence notice the respondents either during or after physical activity. It is noteworthy however, that respondents notice a small effect of exercise on anxiety.

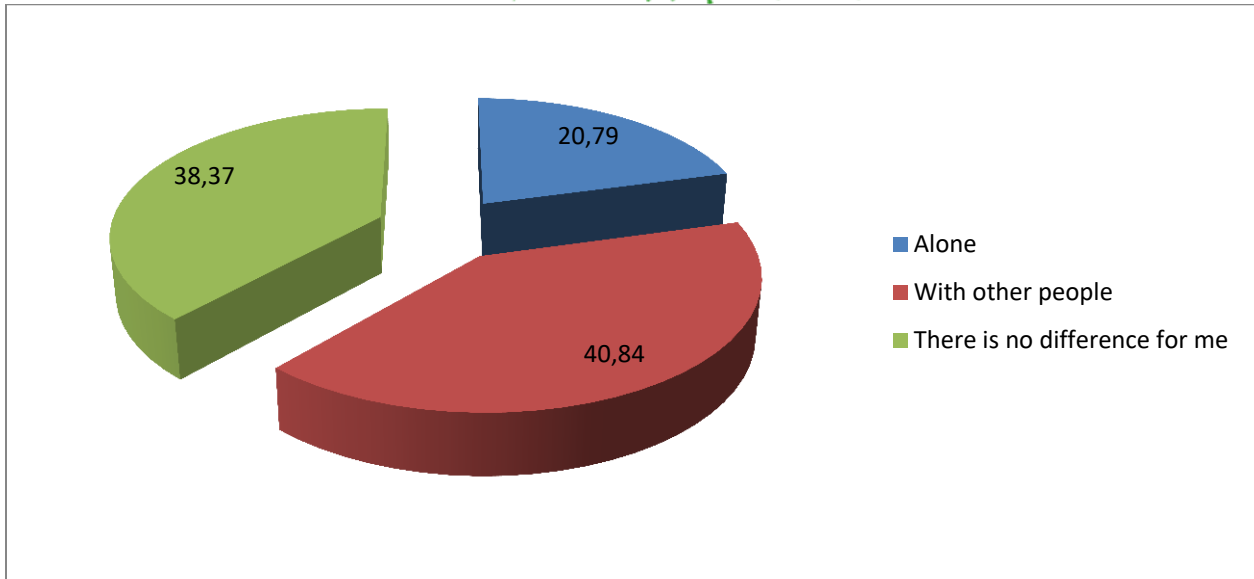




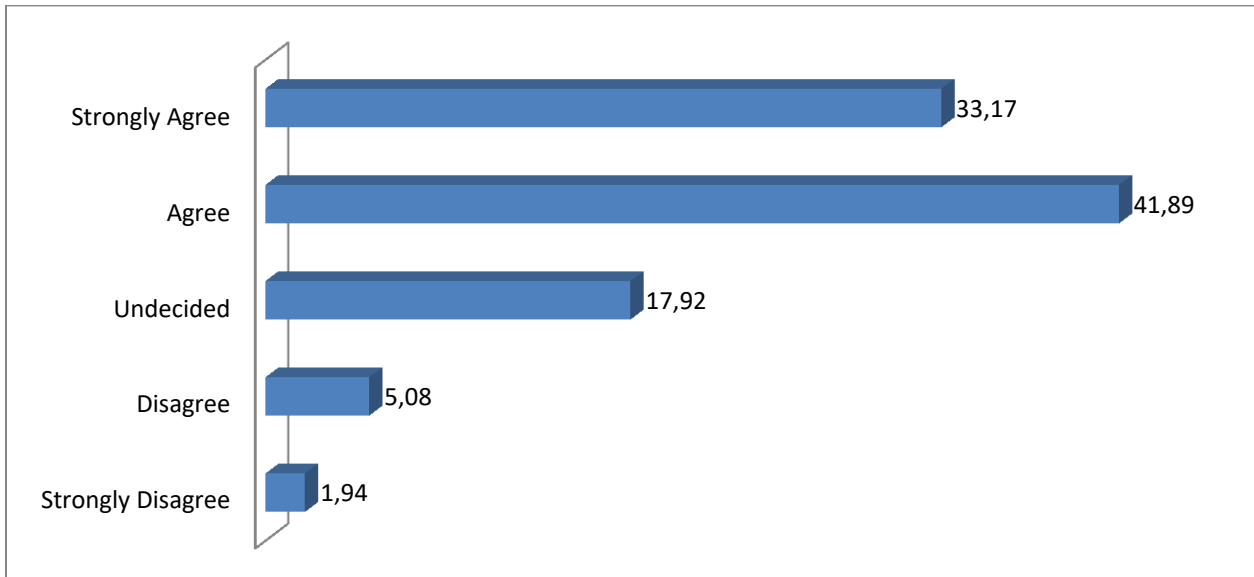
The overwhelming majority of the sample agrees that exercise has a positive effect on their psychological condition.



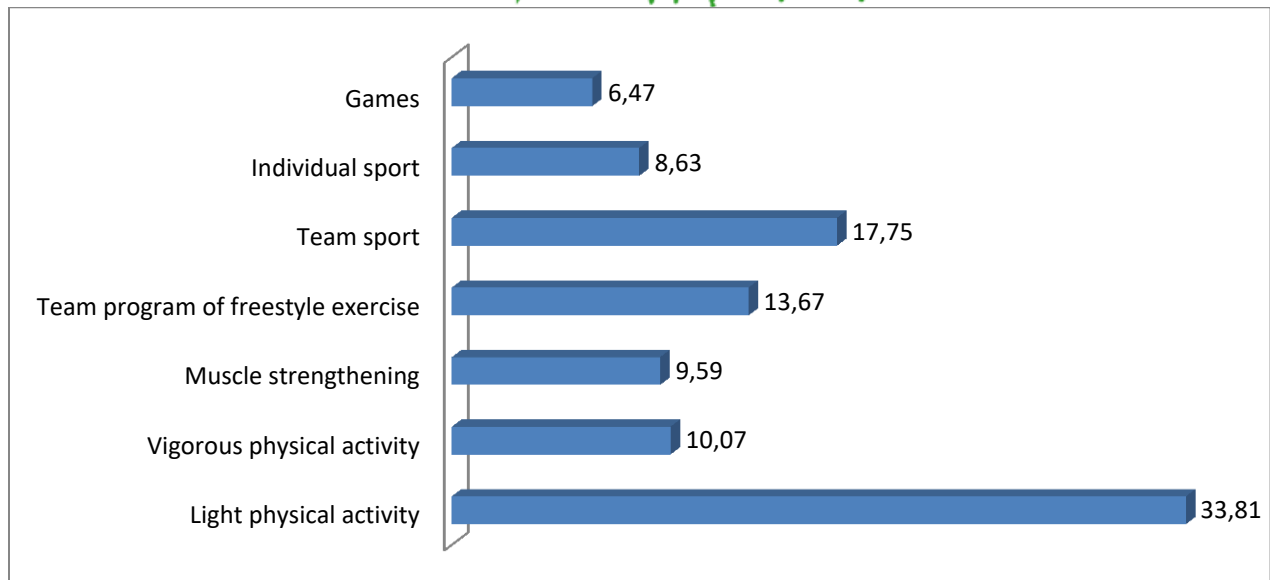
40% of the sample prefers to exercise with others while 20.7% alone. 38% stated that there is no difference.



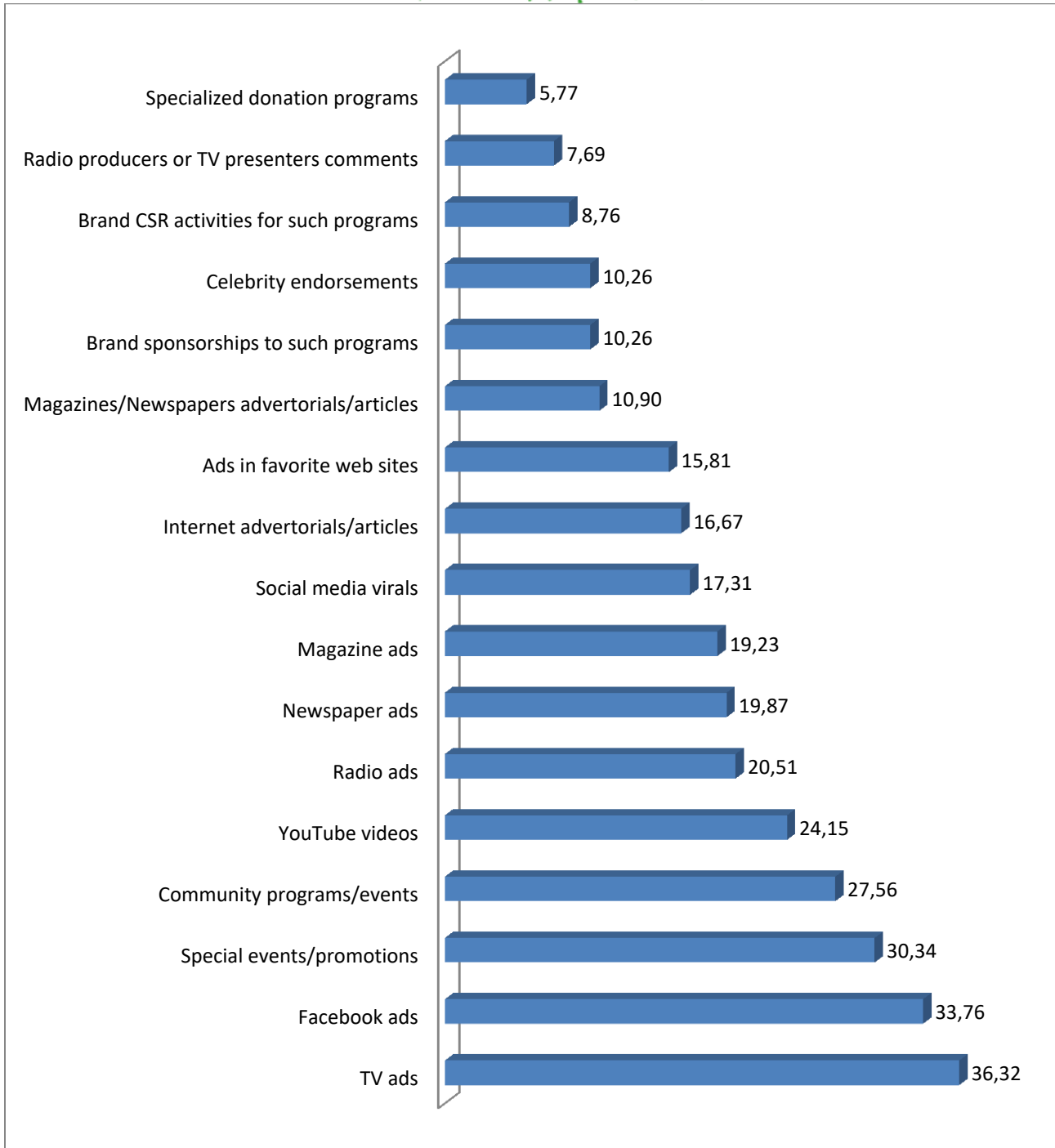
At the same time, 75% would like to include physical activity as part of their therapeutic program.

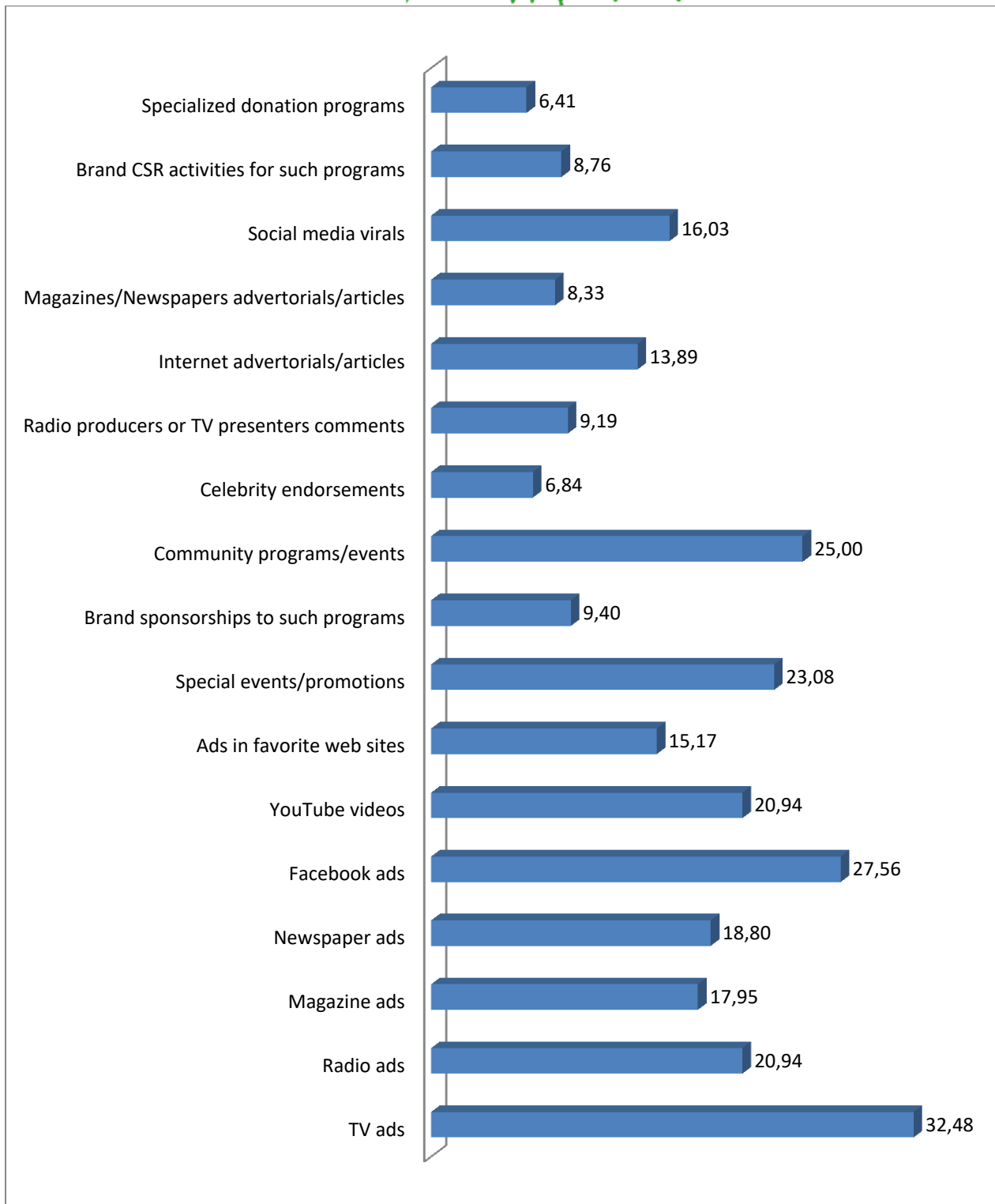


According to the participants, light physical activity would be the best addition to their therapeutic program



Facebook ads and TV ads are the most effective ways to inform and motivate the public according to the participants.

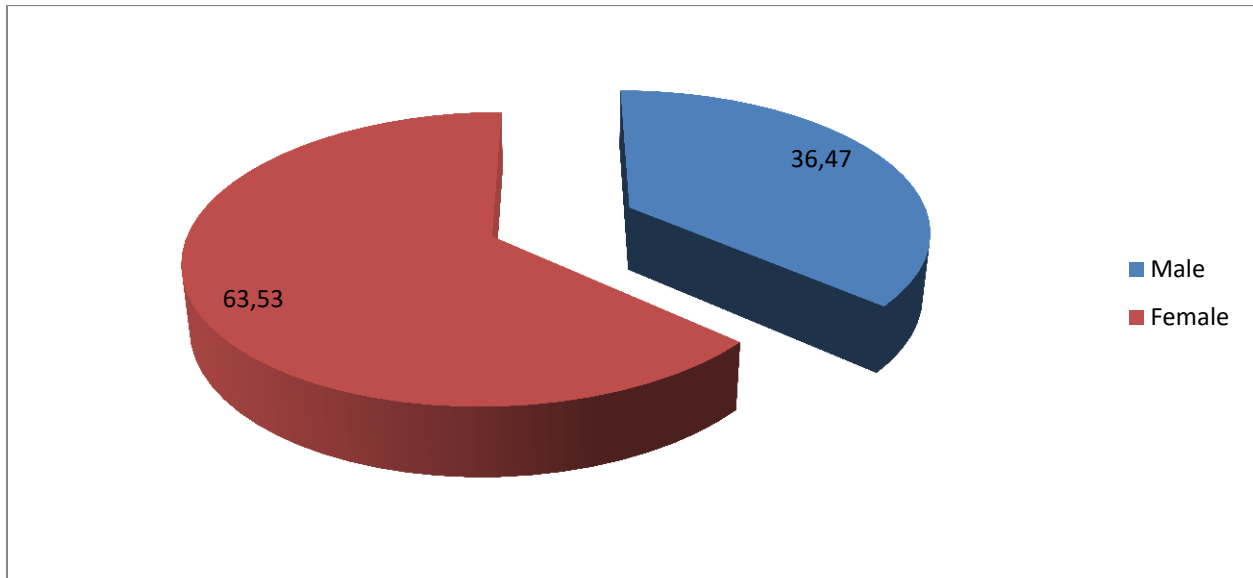




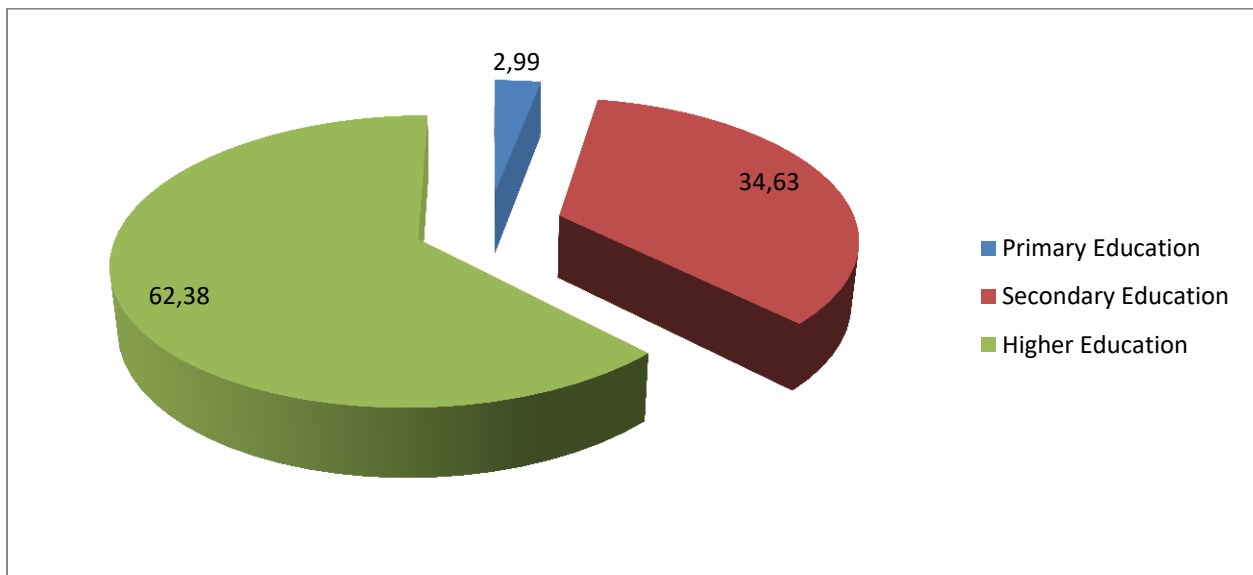
General Public.

Demographic data

The survey involved a total of 1473 people, of whom 63.5% were women and 36.4% were men. The mean age of the sample was 35.7 years.

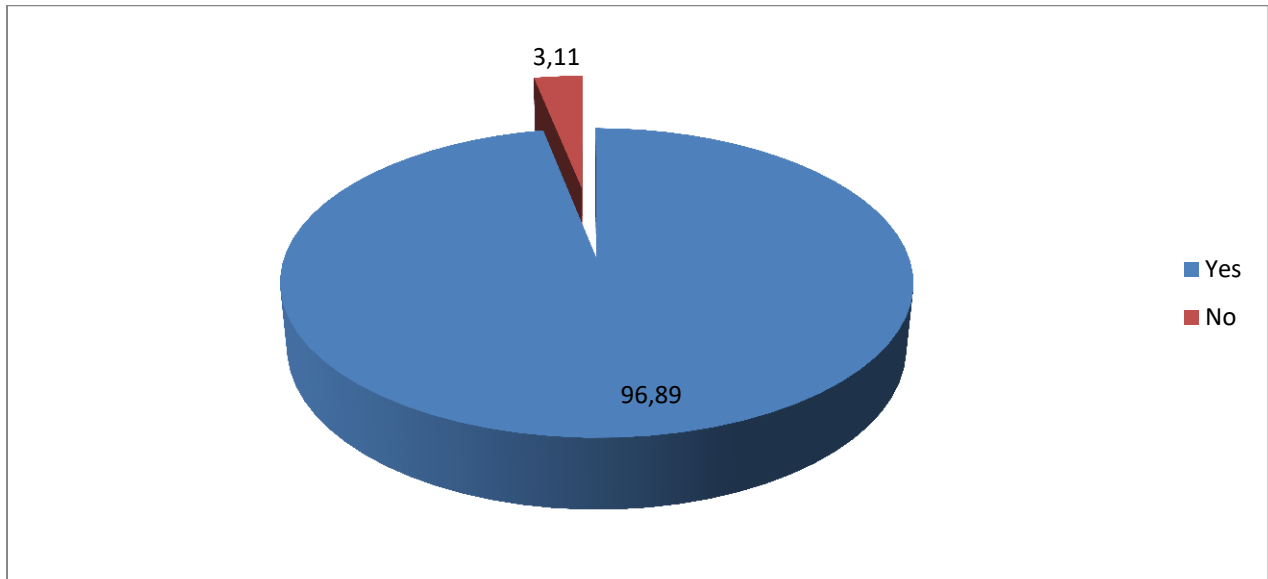


The educational profile of respondents is presented in the following graph. 62.3% of the sample are graduates of higher education and 34.6% are graduates of secondary education.

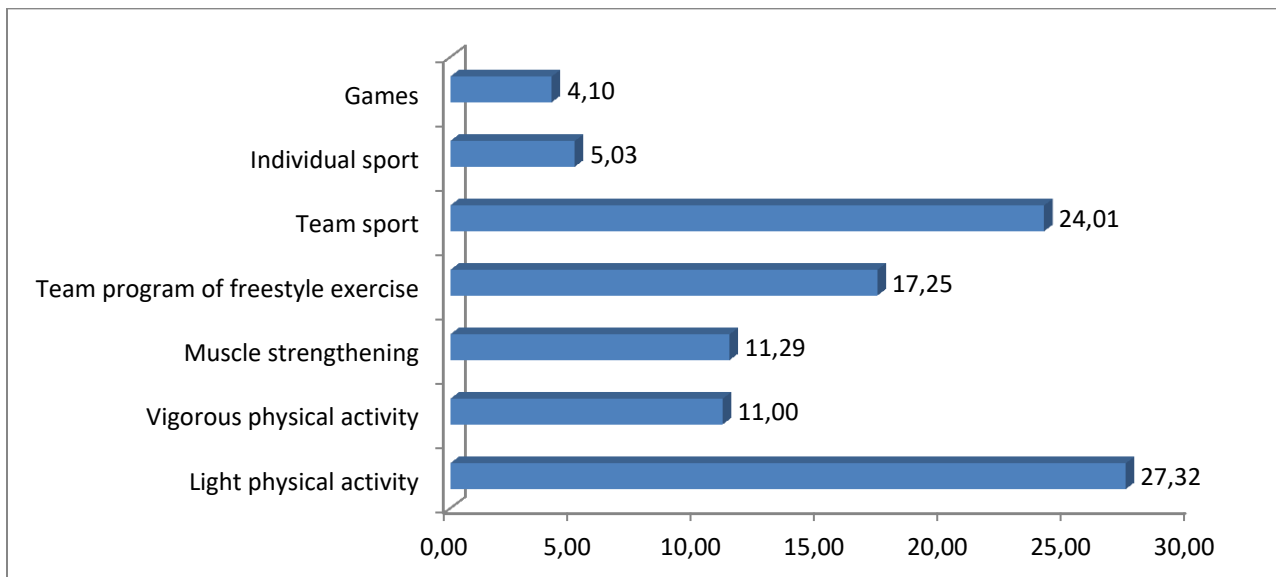


Opinions on physical activity

The overwhelming majority of the sample (96.8%) agrees that participation in sport - exercise programs is beneficial for mental health.

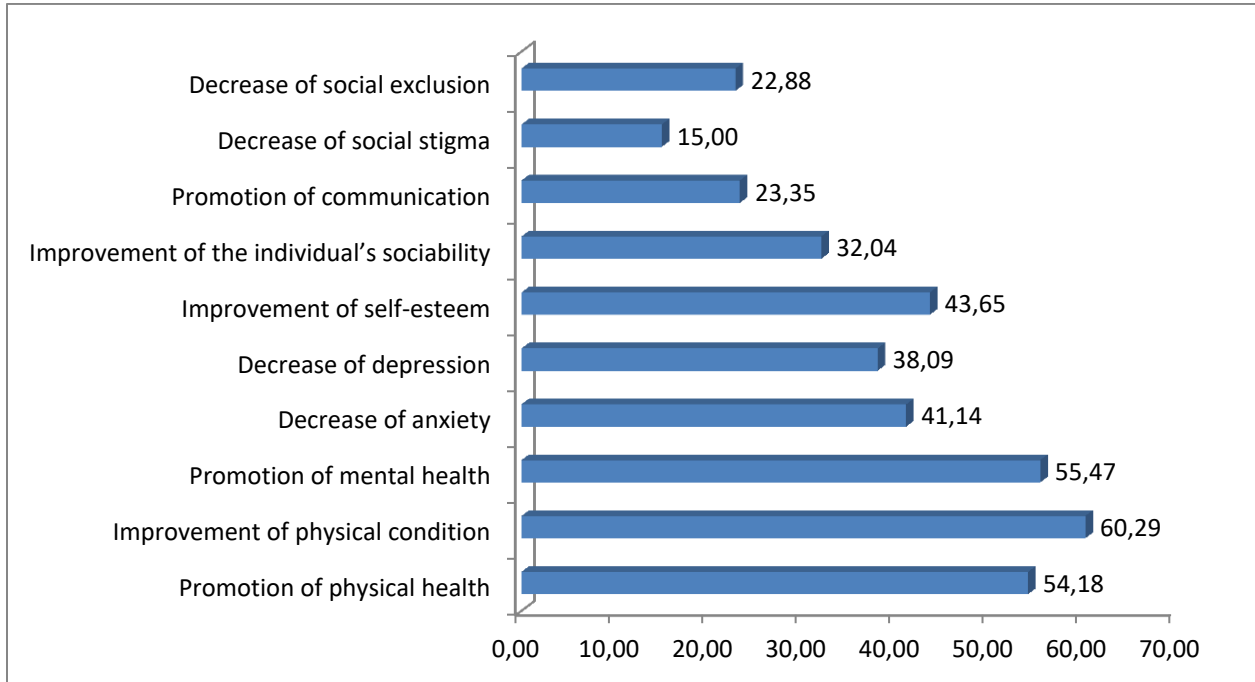


Light physical activity (27,3%) and team sport (24%) are the most beneficial types of exercise according to the majority's opinion.

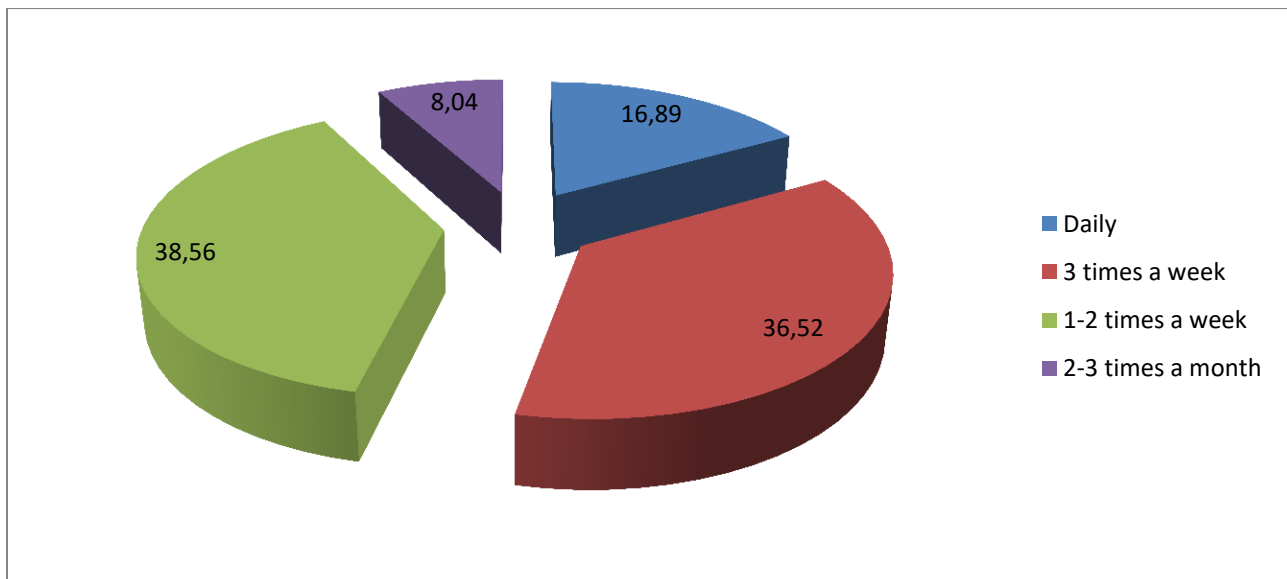


At the same time, they acknowledge that physical exercise primarily affects the Improvement of physical condition and the promotion of physical health

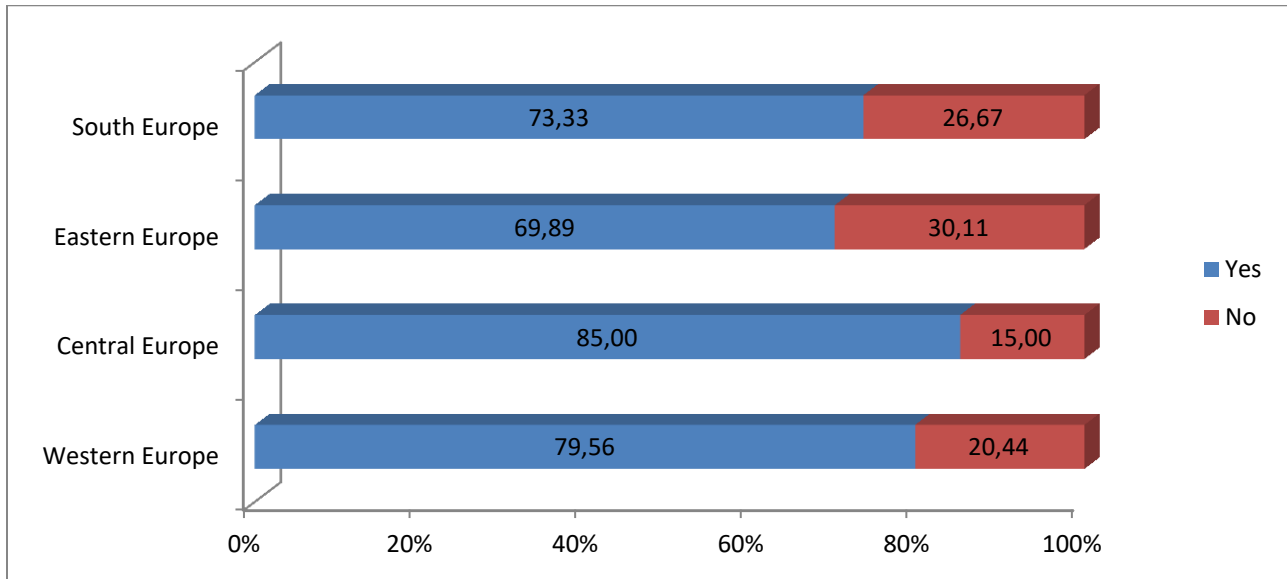
and mental health. On the contrary they identify lower contribution in decreasing social stigma and social exclusion.



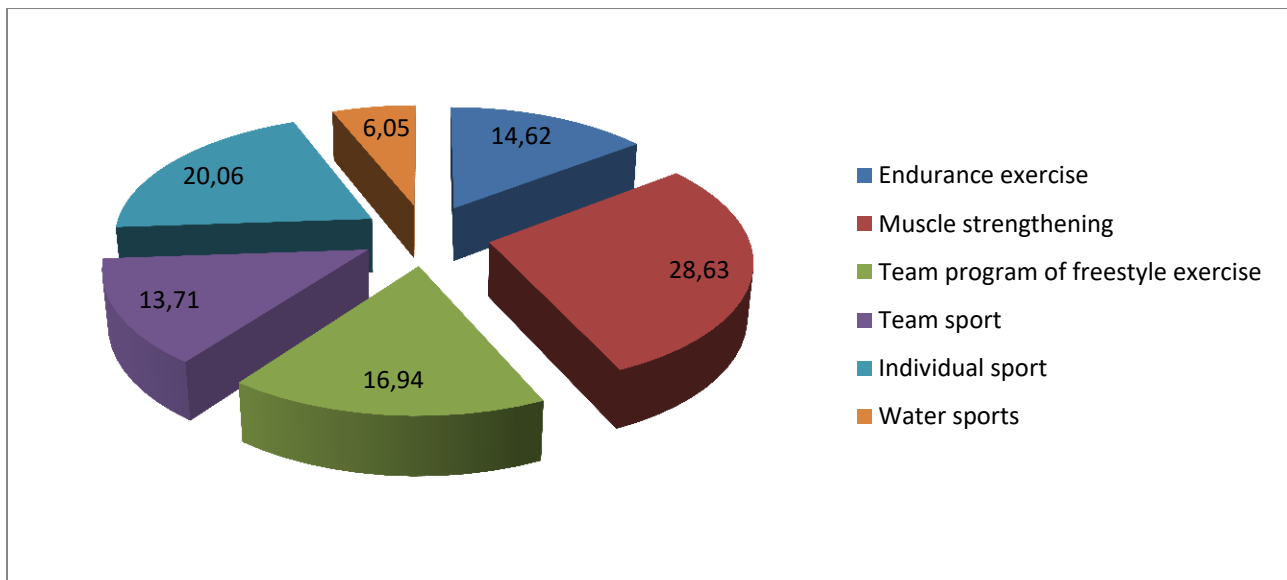
73.7% of the sample stated they exercise. On a daily basis exercise 16.8% of the sample while 46% exercises are 1 to 3 times a week.



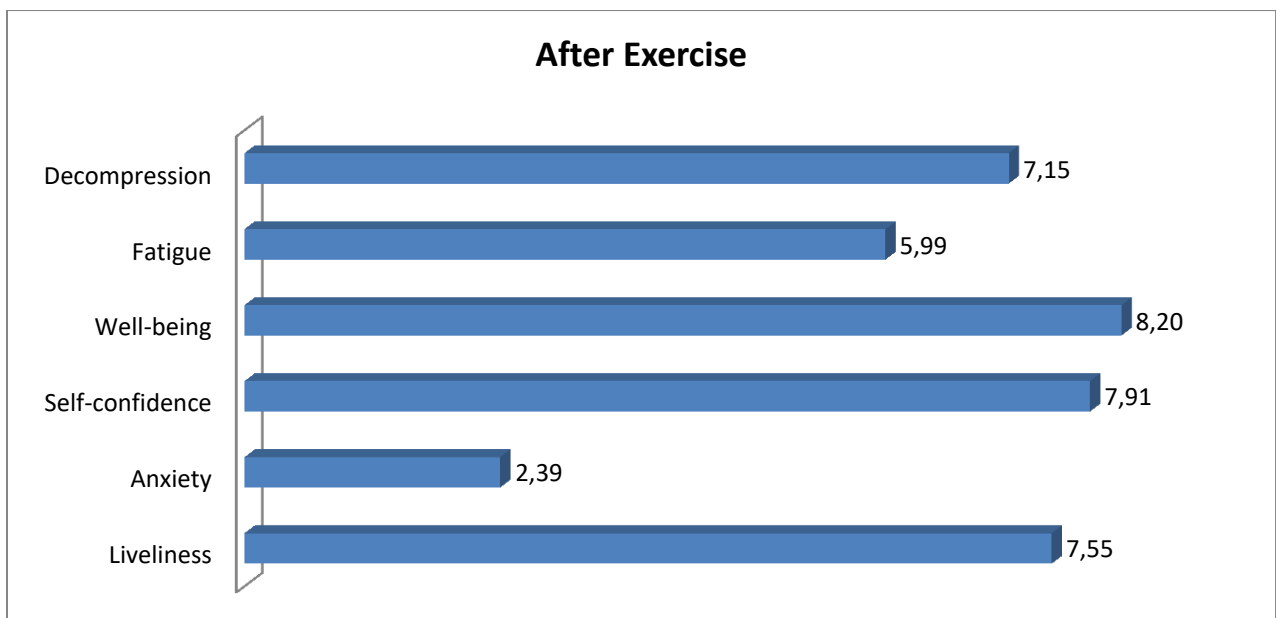
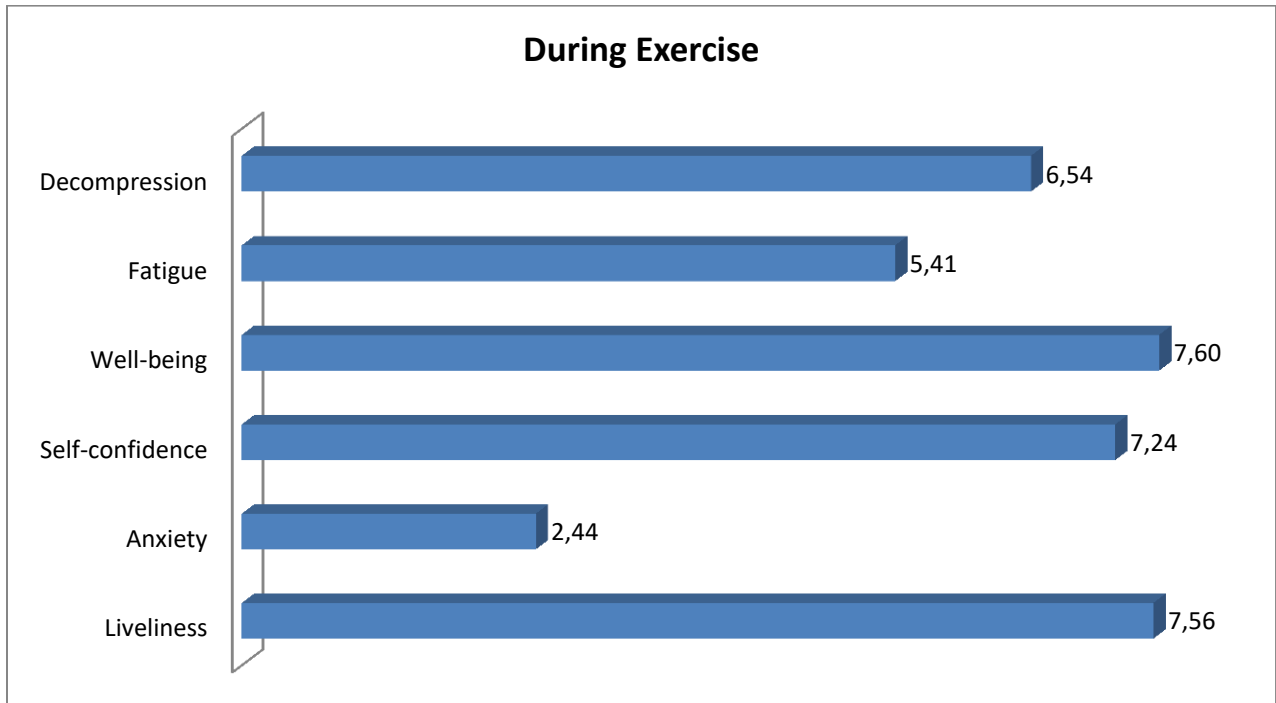
There are slight differences between the four regions with Central Europe showing the highest rates of exercise. On the contrary, the lowest rates are observed in Eastern Europe.



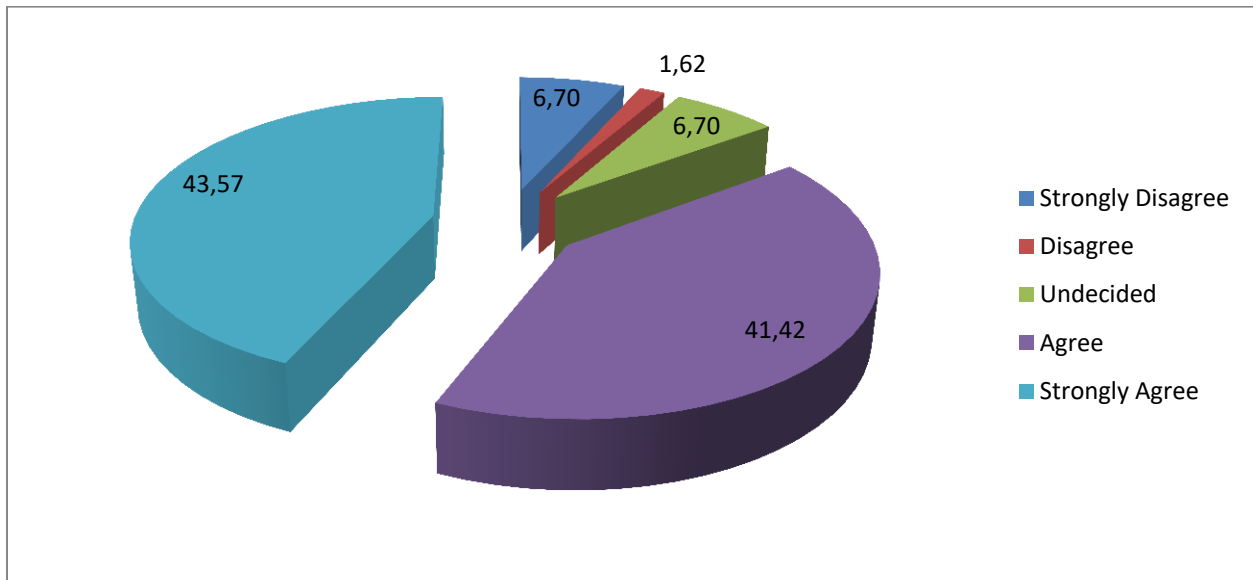
Regarding the type of exercise, muscle strengthening is the most popular type (28.6%) according to the respondents, followed by group exercise (16.9%).



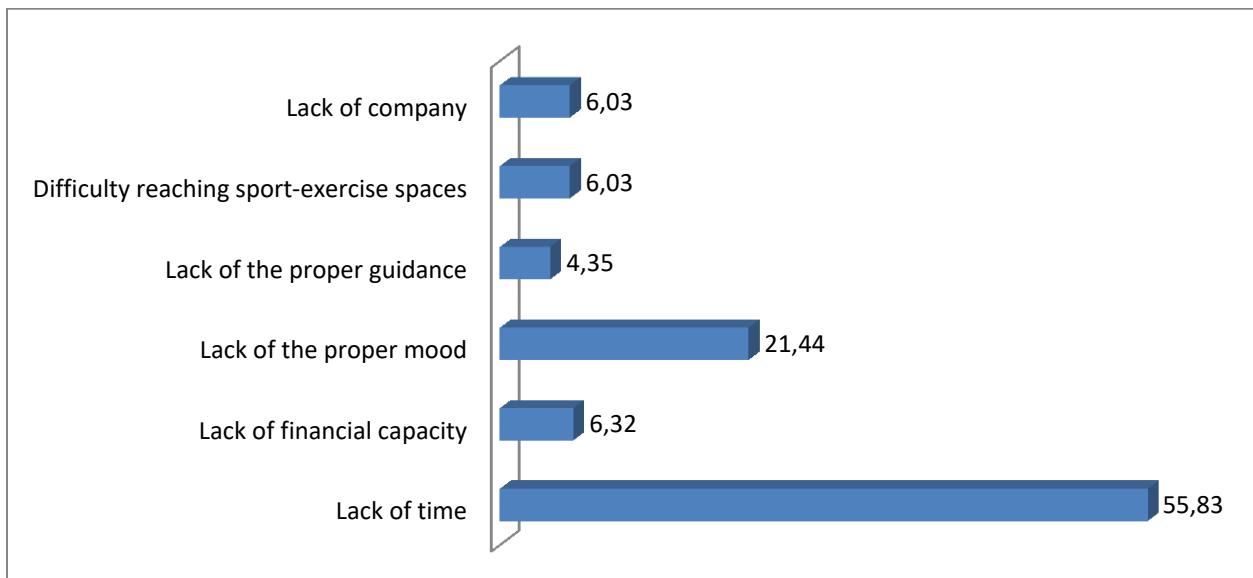
Exercise contributes greatly to liveliness, well-being and self-confidence according to participant’s opinion, either during or after the exercise. Like in mental health user’s survey, general public identifies smaller contribution to anxiety relief.



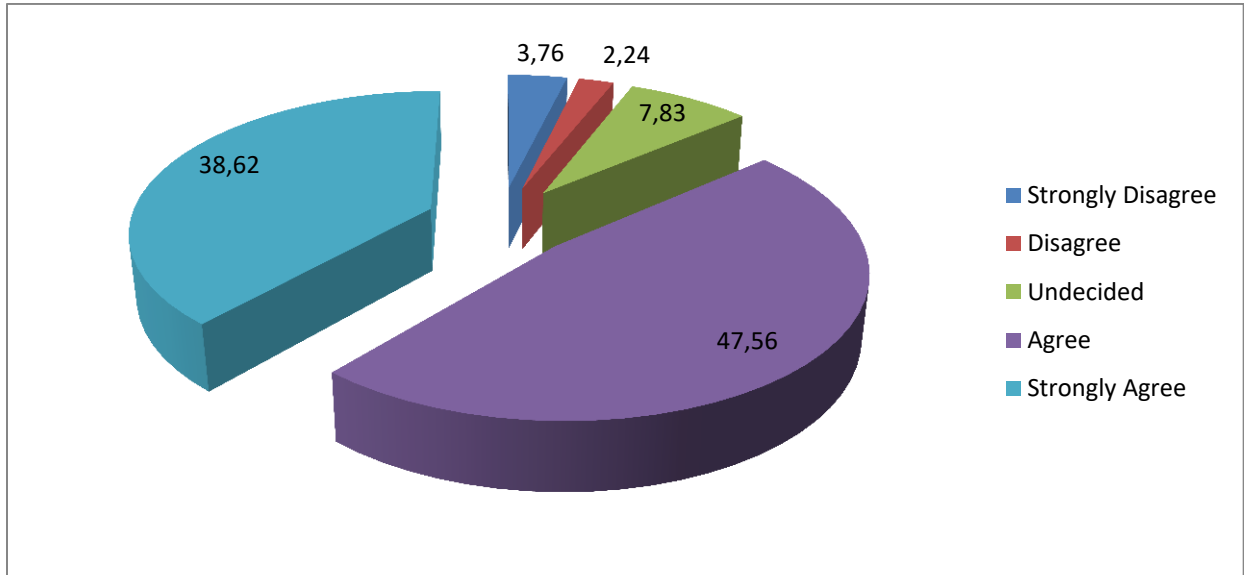
At the same time, respondents estimate that physical activity has a positive effect on their psychological condition. Specifically, 41% agree and 43% strongly agree.



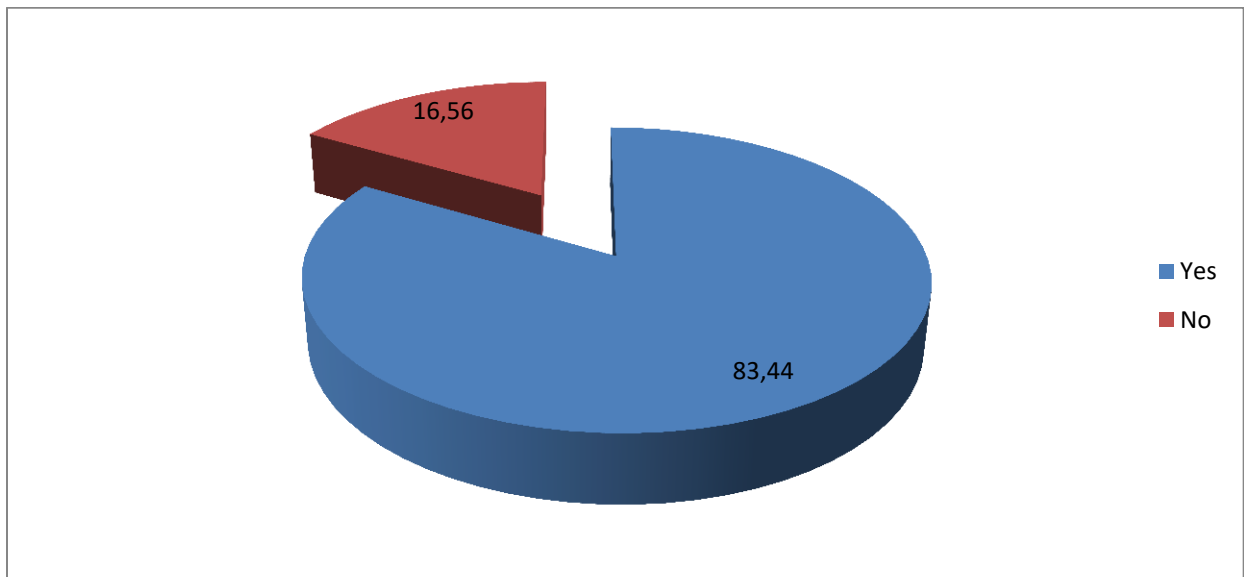
In the case of respondents who do not exercise, the shortage of time is the most important factor (55%) followed by the lack of mood (21.4%).



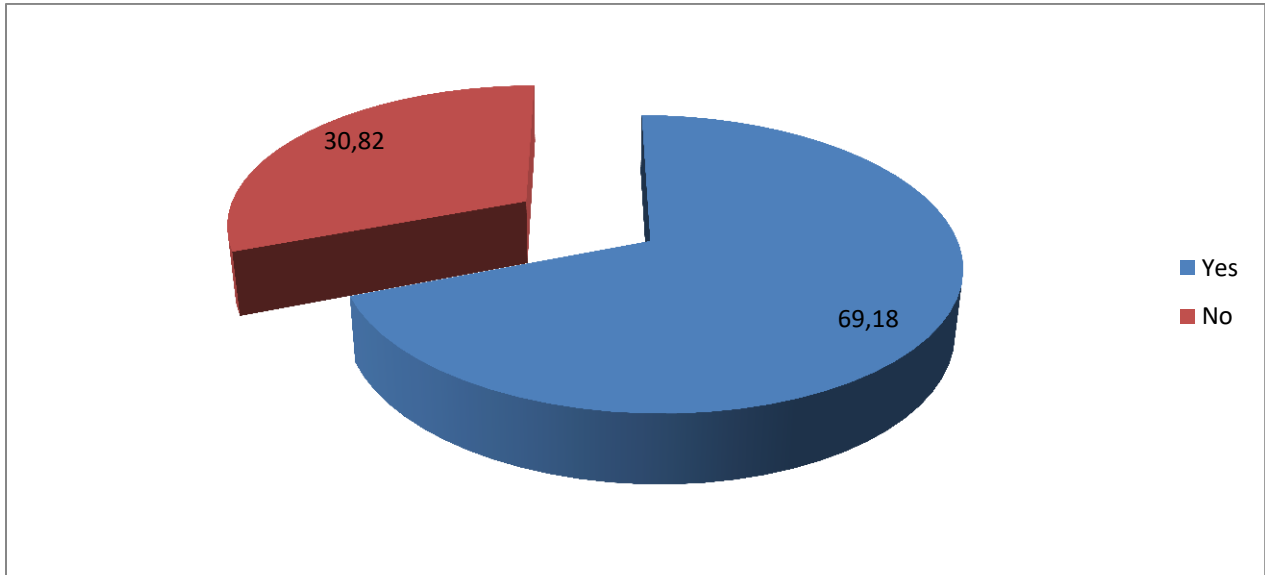
However, in this case, 85% of those who do not exercise agree that the exercise would be positive to their psychological condition.



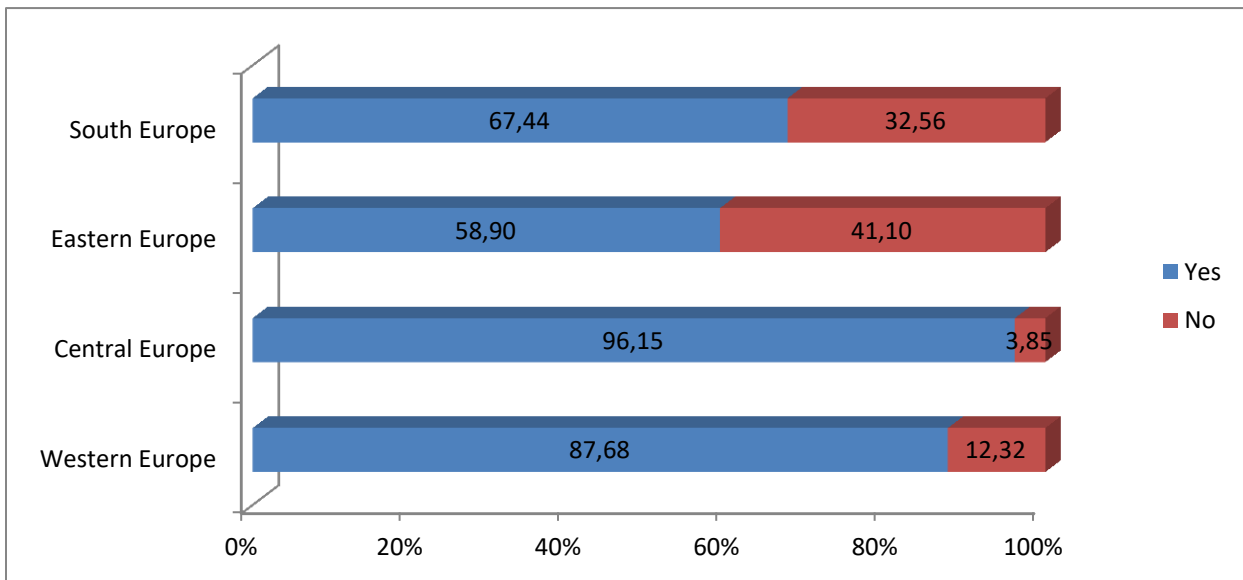
However, 83.4% of the sample states that they are willing to engage in activities involving physical activity.



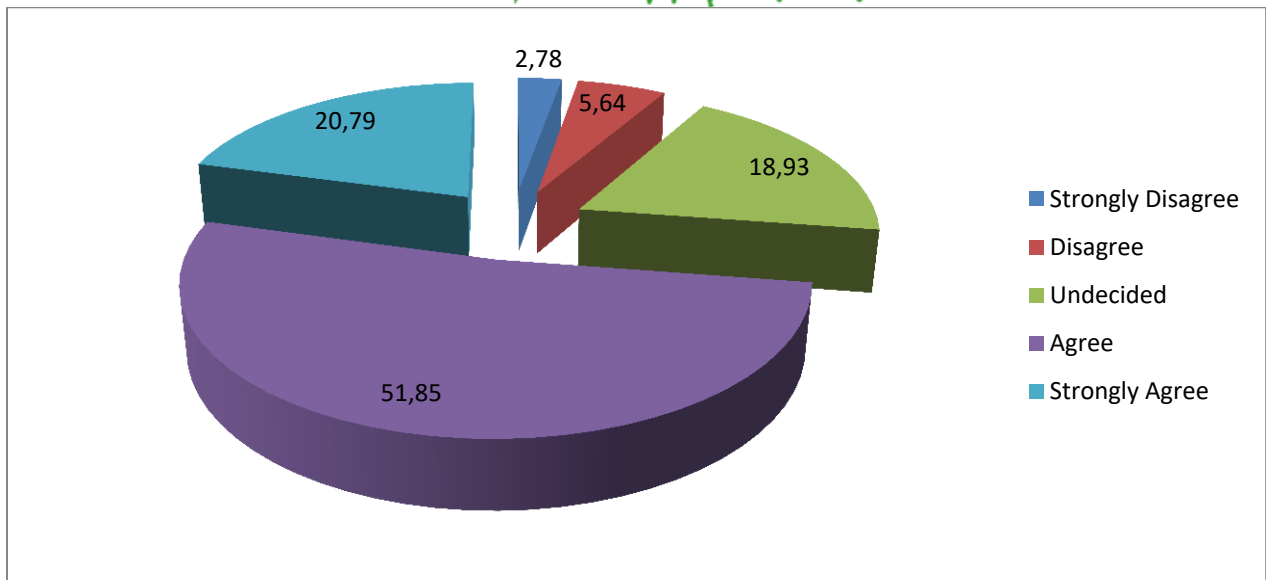
An important finding is that only 69% said there were programs / events that included physical activity in their own country.



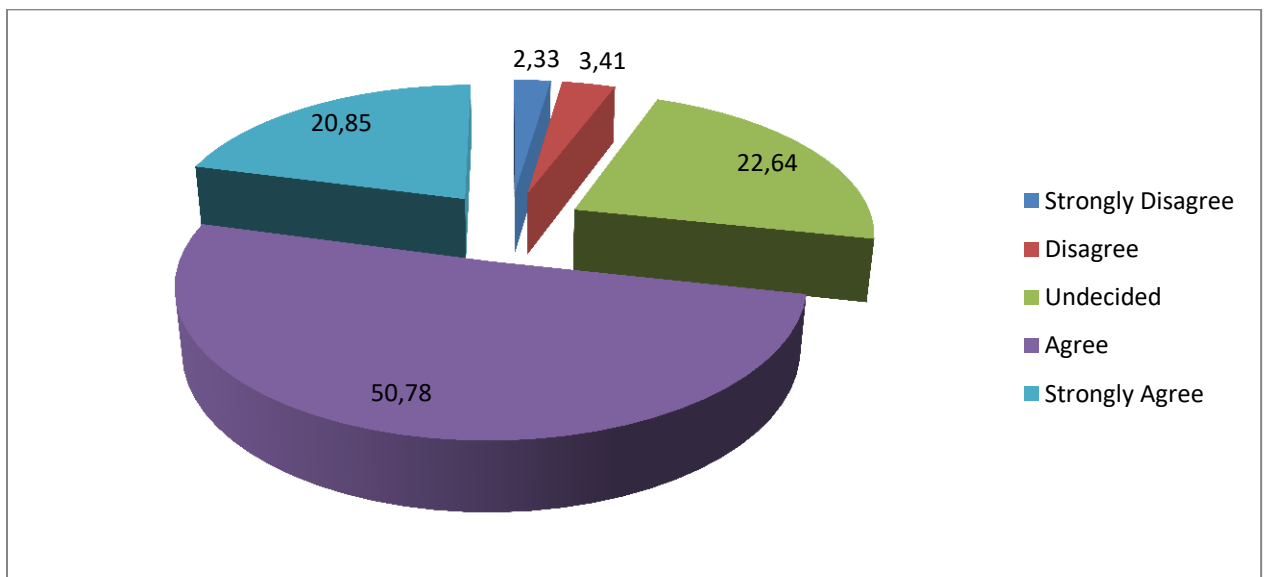
Significant differences are observed among the four regions with eastern and southern Europe lagging considerably against Central and Western Europe.



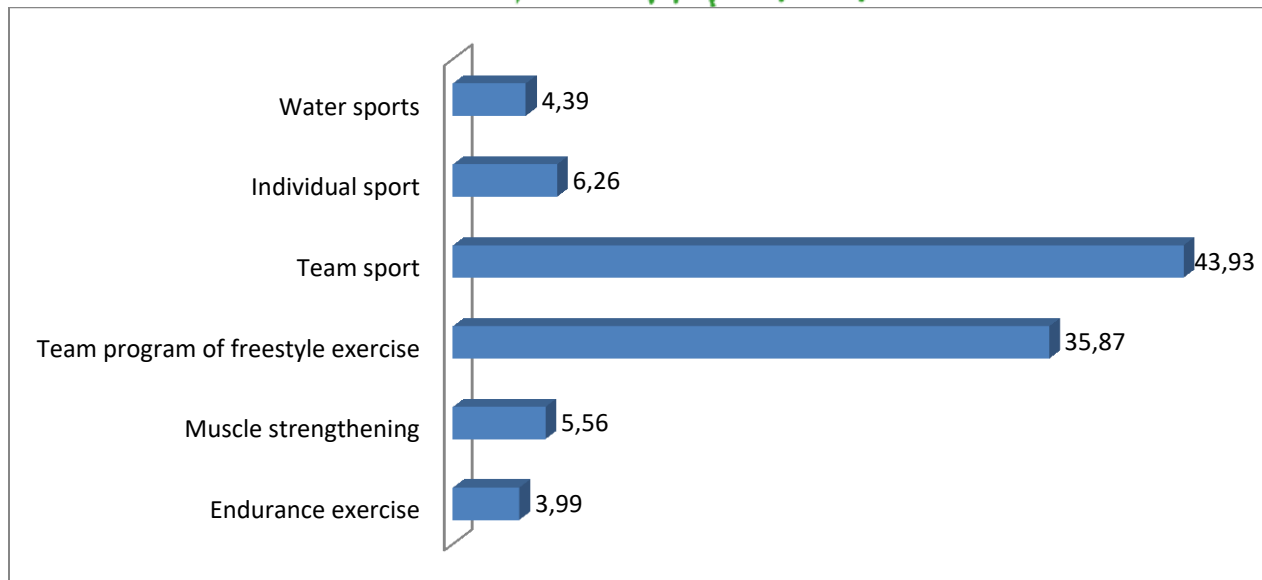
71% of the sample considers that mental patients are stigmatized.



At the same time they consider that participation in sports events could address the social stigma problem.

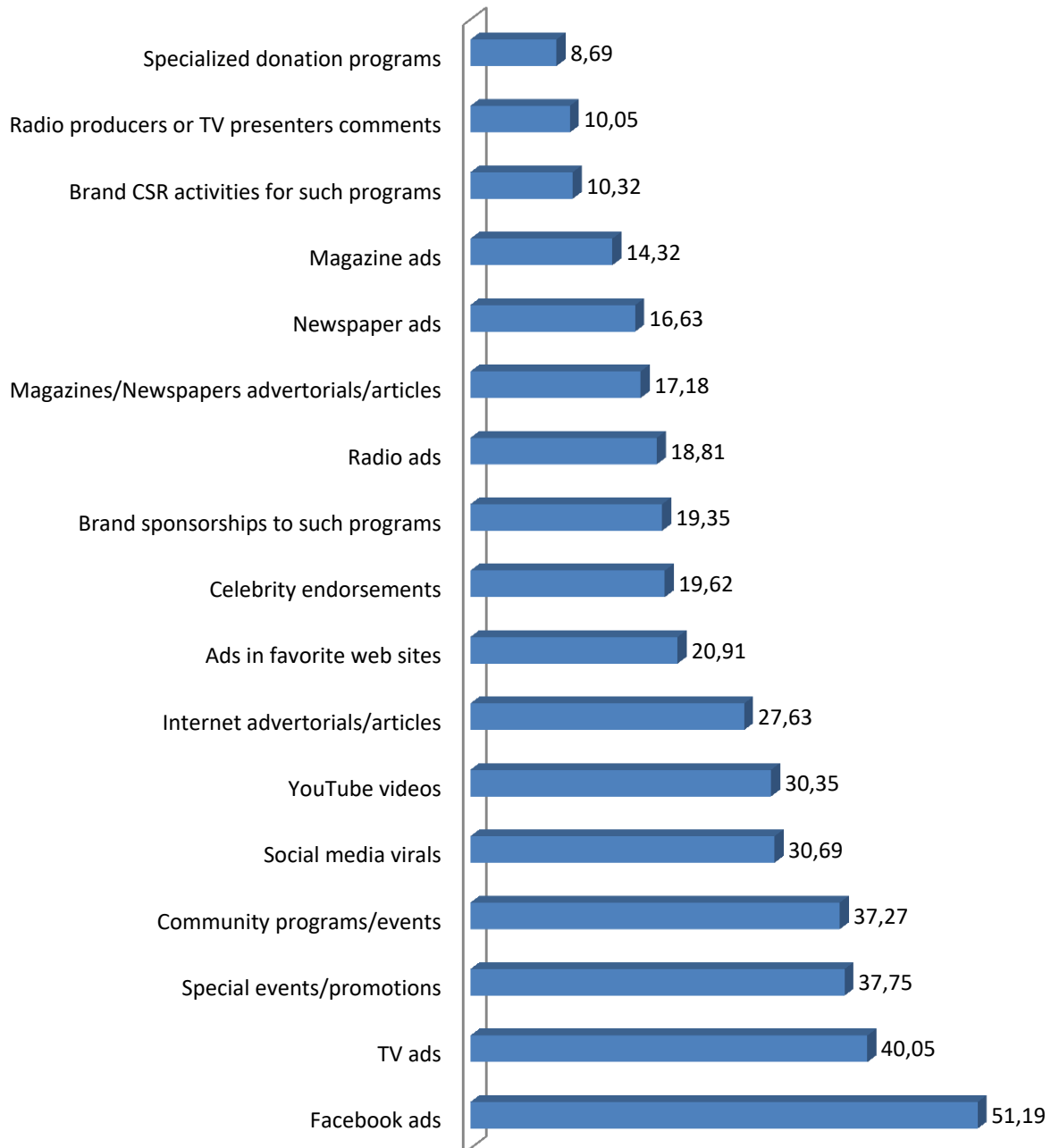


Team program, freestyle exercise and team sport would be the most appropriate way according to their opinion.

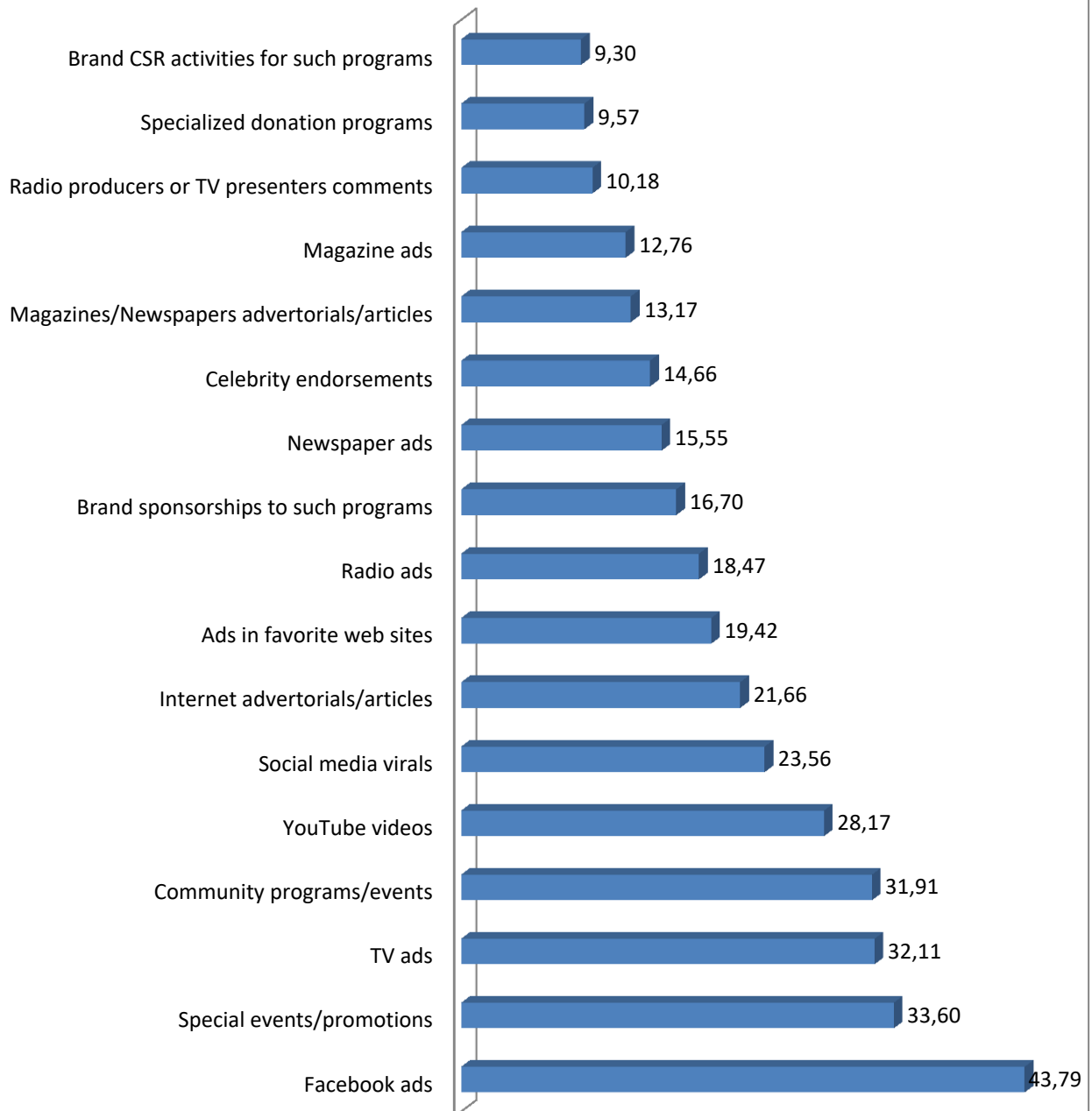


Facebook ads and TV ads are the most effective ways to inform and motivate the public according to the participant's opinion.

Which of the following will help you learn more info about sports-exercise programs for mental health?



Which of the following will influence you more to participate more actively in sports-exercise programs for mental health?





Chapter 3. Interviews

Croatia

Interview #1

27/12/2017

Methodology: Phone Interview

Interviewer: Tatjana Udovic, for SSOI Rijeka Organization

Answerer(s): Vera Begić- head of City of Rijeka Sport Department

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Croatia1.pdf>

Interview #2

28/12/2017

Methodology: Phone Interview

Interviewer: Tatjana Udovic, for SSOI Rijeka Organization

Answerer(s): Ratko Kovačić- President of Croatian Paralympic Committee

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Croatia2.pdf>

Interview #3

28/12/2017

Methodology: Phone Interview

Interviewer: Tatjana Udovic, for SSOI Rijeka Organization

Answerer(s): Miljenko Mišljenović- President of Rijeka sports association for persons with disabilities

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Croatia3.pdf>



Interview #4

28/12/2017

Methodology: Phone Interview

Interviewer: Tatjana Udovic, for SSOI Rijeka Organization

Answerer(s): Zvonimir Brozić- President of Primorje-Gorski kotar sports association for persons with disabilities

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Croatia4.pdf>

Interview #5

27/12/2017 and 28/12/2017

Methodology: Phone Interview

Interviewer: Tatjana Udovic, for SSOI Rijeka Organization

Answerer(s): Samir Barać - President of Rijeka sports association

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Croatia5.pdf>



Portugal

Interview #1

Methodology: Phone Interview

Answerer(s): Carla Margarida Madeira de Almeida, Head of Sports Medicine Center Division of IPDJ, I.P.

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Portugal1.pdf>

Interview #2

Methodology: Phone Interview

Answerer(s): Eleonora Gonçalves – General Secretary of FNERDM

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Portugal2.pdf>

Interview #3

Methodology: Phone Interview

Answerer(s): Natália Costa, on behalf of Filipa Palha, director of RARP-AMP and President of Encontrar-se

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Portugal3.pdf>



Lithuania

Interview #1

Methodology: Phone Interview

Interviewer: Simona Litvinienė

Answerer(s): Deividas Petrolevičius, Siauliai City Municipality Health Department

Link: <http://mensproject.eu/wp-content/uploads/2018/06/lithuania.pdf>

Italy

Interview #1

20-1-2018

Methodology: Phone Interview

Interviewer: Manfredi Treggiari

Answerer(s): Beatrice Bartolini, Regional Government of Umbria

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Italy1.pdf>

Interview #2

11/12/2017

Methodology: Phone Interview

Interviewer: F. Cesaroni, M. Morici

Answerer(s): Andrea Guidotti, Municipality of Ancona

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Italy2.pdf>



Interview #3

11/12/2017

Methodology: Phone Interview

Interviewer: F. Cesaroni, M. Morici

Answerer(s): Fabio Sturani, Regional Government of Marche Region – Presidency

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Italy3.pdf>

UK

Interview #1

9/1/2018

Methodology: Phone Interview

Answerer(s): Caroline Thorpe – Mersey Care Foundation NHS Trust

Link: <http://mensproject.eu/wp-content/uploads/2018/06/UK1.pdf>

Interview #2

9/1/2018

Methodology: Face to face Interview

Answerer(s): Joe Hemington - Director, The Joseph Lappin Centre

Link: <http://mensproject.eu/wp-content/uploads/2018/06/UK2.pdf>



Greece

Interview #1

18/1/2018

Methodology: Face to face Interview

Interviewer: Pantelis Sarakiniotis

Answerer(s): Xenia Kazantzi, Head of Mental Health Unit in the Ministry of Health

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Greece.pdf>

Turkey

Interview #1

Methodology: Phone Interview

Answerer(s): Harun Raşit Güzelimdağ, Ankara Province Youth Services and Sports Directorate

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Turkey1.pdf>

Interview #2

Methodology: Phone Interview

Answerer(s): Hayati Çal, Ank Gölbaşı Municipality Sports Club

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Turkey2.pdf>



Interview #3

Methodology: Phone Interview

Answerer(s): Hüdaverdi Çelik, Ankara Province Youth Services and Sports Directorate, Registration License Branch Manager

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Turkey3.pdf>

Interview #4

Methodology: Phone Interview

Answerer(s): Yusuf Kılıç, Ankara Youth Services and Sports Directorship, Youth Services Manager

Link: <http://mensproject.eu/wp-content/uploads/2018/06/Turkey4.pdf>

Chapter 4. Key Points

Mental Health Organizations

- 85% recommend / make use of exercise as a means of improvement of the patients mental health.
- Considering the region, there are great differences. The percentage is clearly lower in central Europe; south Europe has the highest.
- In cases where exercise is not recommended / applied, the main reason is the patients lack of willingness (50%).
- The responses are equally shared in relation to the type of exercise (endurance, muscle strength).
- The majority of the organizations recommend exercise 1-2 times per week. In east Europe daily exercise is recommended.
- The most beneficial duration of exercise is 30 – 60 minutes, according to the 54% of the sample.
- Improvement of the psychological condition is noticed both during and after exercise (7.1 out of 10).
- This effect of exercise lasts some hours.
- The mental health professionals strongly believe that exercise contributes in the treatment of mental diseases.
- The great majority (90%) is willing to include exercise programs in the therapeutic process.
- This percentage is clearly lower in west Europe (77%).



- Only 30% of the organizations have exercise facilities. The percentage is clearly lower in south Europe.

General Public

- The vast majority of the sample (96%) believes that exercise has a positive effect on mental health.
- Light exercise and teams sports have the greater effect according to the 60% of the sample.
- Exercise has a positive effect on physical condition, anxiety, and mental health.
- 73% state that they exercise.
- East Europe has the lower percentage, while central Europe has the highest.
- 85% state that exercise has a positive effect on their psychological condition.
- The percentage is clearly lower in east Europe.
- Lack of time is the main reason that prevents people from exercising.
- For those who do not exercise, the 85% believe that exercise would have a positive effect on their psychological condition.
- 83% are willing to participate in exercise programs.
- 70% believe that the mental patient is stigmatized.
- There are significant differences between the regions. The percentage is clearly lower in east Europe.



- 71% believe that sport/exercise participation would decrease the stigmatization of the mental patients, while team sports are considered the best way towards this direction.
- Facebook, TV, specific events, and social media are the most effective means of information and influence for greater participation in sport/exercise programs.

Sport Organizations

- 96% of the organizations believe that exercise has a positive effect on mental health.
- The considered principal benefits are sociability and personal improvement.
- The organizations notice major effect in all the criteria both during and after the exercise.
- The effect of exercise lasts some hours.
- 72% provide activities for the improvement of the public's mental health.
- The percentage is clearly lower in central Europe.
- 48% of the sample have cooperated with mental health organizations.
- Central Europe has the highest percentage (64%).
- For those who have not cooperated, 60% is willing to do so in the future.



- Programs and events are considered the main ways for information and promotion of exercise/sport participation.

Mental Health Users

- 60% participate in sport/exercise activities.
- The percentage is clearly lower in east and south Europe.
- Lack of mood and time are the main preventive factors for the rest 40%.
- 50% of the sample exercise 2-3 times weekly.
- The participants state improvements in the most of the criteria (liveliness, self-confidence etc.), but NOT in anxiety. Neither during nor after the exercise.
- Nevertheless, 85% believes that sport/exercise participation would positively effect their psychological condition.
- Opinions are shared equally in relation to individual and team participation.
- The majority believe that exercise should be incorporated to the therapeutic process.
- 33% of the sample choose light exercise.
- TV, Facebook, events, and Youtube are the considered the most effective means of information.



ANNEX 1

Quantitative Research Questionnaire Models

GENERAL PUBLIC

Please check (✓) the box representing your choice

A. DEMOGRAPHIC DATA

Gender: Male Female Age:

Occupation:
.....

Income (monthly):

B. OPINIONS ON PHYSICAL EXERCISE

Do you believe that participation in sport – exercise programs is beneficial for mental health?

NAI YES OXI NO

1. If **NO**, which is the main reason you do not participate in exercise programs?

- Lack of time
- Lack of financial capacity
- Lack of the proper mood
- Lack of the proper guidance
- Difficulty reaching sport-exercise spaces
- Lack of company
- Other (mention):

2. If YES, what kind of exercise is more beneficial according to your opinion?

- Endurance exercise
- Muscle strengthening
- Team program of freestyle exercise
- Team sport
- Individual sport
- Games
- Other (mention):

3. Which do you believe are the main benefits?

- Promotion of physical health
- Improvement of physical condition
- Promotion of mental health
- Decrease of anxiety
- Decrease of depression
- Personal improvement
- Improvement of the individual's sociability
- Promotion of communication
- Decrease of social stigma
- Decrease of social exclusion
- Other (mention):

4. Do you exercise? Do you participate in exercise programs?

- YES NO

5. If yes, how often?

- daily 3 times a week
- 1-2 times a week 2-3 times a month
- Other (mention):

6. What kind of exercise do you usually choose?



10. **If you do not exercise**, do you believe that participating in sport – exercise programs would be beneficial for your psychological condition?

YES

NO

11. Are you willing to get involved in exercise programs?

YES

NO

12. Do such exercise actions, programs / events take place in your community?

YES

NO

13. **If no**, would you like them to exist?

YES

NO

I am not interested

14. Do you believe that the mental patient is socially stigmatized?

YES

NO

15. If yes, would participating in sport activities assist in addressing the social stigma problem?

YES

NO

16. Which would be the most appropriate way? (please, mention 3 options)

-
-
-

MENTAL HEALTH PROFESSIONALS

Please check (✓) the box representing your choice

A. DEMOGRAPHIC DATA

Organization:



Health professional:

- Psychiatrist Psychologist Social worker
- Other (mention) :

Gender: Male Female **Age:**

Professional experience (years):
.....

B. EXERCISE AS SUPPLEMENTARY THERAPY

Do you make use of exercise as a means of improving the mental health of your patients?

- YES** (Continue with questions 2-13) **NO** (Continue with question 1)

1. If NO, what is the main reason you do not recommend exercise as supplementary therapy?

- You do not believe that exercise can help
- Because the patient does not want to exercise
- Because the patient cannot be responsive to this intervention
- Other (mention) :

2. What kind of exercise do you make use of?

- Endurance exercise
- Muscle strengthening
- Team program of freestyle exercise
- Team sport
- Individual sport
- Other (mention):

3. What is the frequency of exercise you recommend to your patients?

- daily
- 1-2 times a week
- 3 times a week
- Other (mention):

4. Intensity of exercise – How intense is the exercise you recommend?

- Intense (It is not easy to talk during the exercise)
- Medium (They can talk, but they cannot sing during the exercise)
- Light (They can even sing loudly during the exercise)

5. Duration of exercise – What is the duration of the exercise you recommend?

- Less than 30 minutes
- 30 minutes
- More than 30 minutes

6. Do you notice any changes in the psychological condition of your patients DURING the exercise?

- YES NO Sometimes

7. Do you notice any changes in the psychological condition of your patients AFTER the exercise?

- YES NO Sometimes

8. If you notice any changes in the psychological condition of the patients AFTER the exercise, for how long do they maintain?

- for 1 hour
- for some hours
- till the next therapeutic session



9. Do you believe that exercise assists in the therapeutic treatment of mental difficulties?

- YES NO In some cases

Define which:

10. If YES, in which degree?

- Greatly A little Moderately I do not know

11. Would you be willing to include exercise programs in the therapeutic schemes you apply?

- YES NO I am not sure

12. Do you have the facilities or the possibility of use of facilities, the time, and the personnel that could implement such an intervention?

- YES NO I am not sure

13. In which degree, according to your opinion, does exercise contribute to mental health regarding the following criteria? Choose the number that represents more accurately the degree in which you believe that exercise contributes to mental health, in a scale from 0=not at all to 10=exceptionally

- | | | | | | | | | | | | |
|--------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------------|
| Improvement of the mood state | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Improvement of self-confidence | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Increase of activation | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Development of communication | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Decrease of anxiety | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Development of sociability | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Decrease of sadness | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Decrease of social stigma | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Decrease of social exclusion | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| Improvement of self-esteem | <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |

MENTAL HEALTH SERVICE USERS

Please check (✓) the box representing your choice

A. DEMOGRAPHIC DATA



Gender: Male Female

Age:

Weight:

Height:

Marital status: Single Married Divorced

Occupation: Sedentary Standing / walking while at work
 Light manual labor Heavy manual labor

B. EXERCISE

Do you participate in physical activities, exercise or sport programs?

YES (Continue with questions 2-11) NO (Continue with question 1)

1. If NO, what is the main reason you do not?

- Lack of time
- Lack of financial capacity
- Lack of the proper mood
- Lack of the proper guidance
- Difficulty reaching sport-exercise spaces
- Lack of company
- Other (mention) :

2. How often do you exercise?

- Daily
- 2-3 times a week
- Once a week



Other (mention) :

3. What kind of exercise do you choose?

- Housekeeping chores
- Gardening
- Walking to the working place
- Exercise alone at home
- Organized program at a gym
- In the field with friends
- Other (mention) :

4. Duration of exercise in minutes – How long does your exercise session usually last?

Average time per session:

5. Intensity of your exercise – How intense is the exercise you usually do?

- Intense (It is not easy to talk during the exercise)
- Medium (You can talk, but you cannot sing during the exercise)
- Light (You can sing loudly during the exercise)

6. How do you feel DURING the exercise? Mark the number that represents better your feeling during the exercise in a scale from 0=not at all to 10=exceptionally

Liveliness.....	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Anxiety.....	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Self-confidence.....	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Well-being.....	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Fatigue.....	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decompression.....	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩

7. How do you feel AFTER the exercise? Mark the number that represents better your feeling after the exercise in a scale from 0=not at all to 10=exceptionally

- | | |
|----------------------|---------------------|
| Liveliness..... | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ |
| Anxiety..... | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ |
| Self-confidence..... | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ |
| Well-being..... | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ |
| Fatigue..... | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ |
| Decompression..... | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ |

8. Do you believe that exercise has a positive effect in your psychological condition?

- YES NO NEUTRAL

9. Do you prefer to exercise alone or together with other people?

- ALONE
- WITH OTHER PEOPLE
- There is no difference for me

10. Would you like exercise to be part of your therapeutic program?

- YES
- NO
- There is no difference for me

11. If you answered YES in question number 10, which physical activities do you think would be the best for you? (please mention three)

-

-

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PROFESSIONALS OF THE SPORT & PHYSICAL EXERCISE SECTORS

Please check (✓) the box representing your choice

A. ΔΗΜΟΓΡΑΦΙΚΑ ΣΤΟΙΧΕΙΑ DEMOGRAPHIC DATA

Organization:

Gender: Male Female Age:

Επαγγελματική εμπειρία (σε έτη) Professional experience (years):

B. EXERCISE AS SUPPLEMENTARY THERAPY

Do you believe that participating in sport and exercise activities is beneficial for mental health?

YES (Continue with the following questions) NO

1. If YES, which are the principal benefits according to your opinion?

- Promotion of communication
- Promotion of sociability
- Decrease of social stigma
- Decrease of social exclusion
- Personal improvement
- Other (mention):

2. Do you notice any changes in the psychological condition of the participants in sport – exercise activities, DURING these activities, regarding the following factors? Choose the number that represents more accurately the degree in which you believe that exercise contributes to each parameter, in a scale from 0=not at all to 10=exceptionally

Improvement of the mood state	① ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩
Improvement of self-confidence	① ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩
Increase of activation	① ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩

Development of communication	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of anxiety	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Development of sociability	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of sadness	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of social stigma	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of social exclusion	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Improvement of self-esteem	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩

3. Do you notice any changes in the psychological condition of the participants in sport – exercise activities, AFTER these activities, regarding the following factors? Choose the number that represents more the degree in which you believe that exercise contributes each parameter, in a scale from 0=not at all to 10=exceptionally

Improvement of the mood state	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Improvement of self-confidence	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Increase of activation	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Communication growth	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of anxiety	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Sociability growth	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of sadness	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of social stigma	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Decrease of social exclusion	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩
Improvement of self-esteem	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩

4. If you notice changes in the psychological condition of the people AFTER the exercise, for how long do they maintain?

- for 1 hour
- for some hours
- till the next session

5. Do you provide activities for the general public that connect exercise and mental health?

- YES (continue with questions 6 & 7)
- NO (continue with question 8)

6. If YES, what kind of activities do you provide?

- Endurance exercise
- Muscle strengthening
- Team program of freestyle exercise
- Team sport
- Individual sport
- Games
- Other (mention) :

7. What is the effect of exercise according to your opinion?

- Zero
- Small
- Medium
- Sufficient
- Great

8. If NO, would you be willing to include in your program actions regarding mental health?

- YES NO Maybe

9. Have you ever co-operated with mental health organizations?

- YES NO

10. If NO, would you be open to such a co-operation?

- YES NO Maybe



ANNEX 2

SEMI- STRUCTURED INTERVIEW GUIDE

There is plenty of research data according to which, physical exercise can contribute decisively in both prevention of mental illness as well as in the therapy and rehabilitation process of users of mental health services

Is your organization/ entity aware of these findings?

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If they say yes, we continue with the following question

Have these findings affected any decisions you have made concerning the prevention of mental illness and the therapy and rehabilitation of users of mental health services at all?

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Regardless of the answer, we continue with the following:

Does any service/ structure which falls under the entity's authority implement any physical exercise programs/activities aimed at people with mental health problems/ users of mental health services? Give us an example.

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If yes, how many of this kind of programs are being implemented?

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If no(a), what are the reasons why you haven't seen to the implementation of such programs yet.



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If no (b) , is there an intention to do so in the future? Are there any specific programs you are working on right now?

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