Fisioterapia. 2016;38(5):219-223



Fisioterapia

www.elsevier.es/ft



EDITORIAL

Conclusions and recommendations from the 6th International Conference of Physiotherapy in Psychiatry and Mental Health (ICPPMH), Spain 2016



Conclusiones y recomendaciones del 6° Congreso Internacional de Fisioterapia en Psiquiatría y Salud Mental (ICPPMH), España 2016

The ICPPMH is a research conference and arena for the exchange and discussion of clinical practice, research, education and professional issues in the fields of psychiatry and mental health. The conference provides new developments in physiotherapeutic methods and applications, as well as innovative and effective strategies to address today's complex health challenges in long-lasting musculoskeletal disorders, chronic pain and psychosomatics.

The 6th ICPPMH was held from 9 to 11 March 2016, in Madrid, Spain. The Conference was organized by the University Carlos III of Madrid in collaboration with the International Organization of Physical Therapy in Mental Health (WCPT official subgroup) with the support of the Spanish Association of Physiotherapists and the Spanish Association of Physiotherapists in Mental Health. The Conference venue was located in the historical building Hotel Tryp Atocha.

The conference was attended by more than 200 registered participants coming together from 36 countries (Europe 21, Asia 6, America 5, Africa 3 and Australia). These numbers show how rapidly this field is growing internationally since there are about 12 countries that joined the Conference for the first time. Moreover, representatives from the World Health Organization and the Ministry of Health in Spain were present in order to explore the added value of physiotherapy in mental healthcare services and promote international collaboration.

The Conference featured seven keynote lectures, six round tables, six parallel sessions and fifteen workshops. In total, the Scientific Committee approved 133 posters (81 oral presentations and 52 posters). The Scientific Committee was composed by 17 members from 13 nationalities around the World, who were supported by the Organisation Committee composed by 5 members.

Following the trend of the last 10 years, the conference focuses more and more on the effects of exercise,

body and movement awareness and psychomotor physiotherapy interventions aiming to improve mental health and increase wellbeing, individually as well as group therapeutic approaches. The Conference showcased the latest scientific research on the effect of physiotherapy in mental health disorders such as depression, anxiety, schizophrenia, eating disorders, bipolar disorders, dementia, etc. Other topics such as theory development, key phenomena and communication strategies were also presented. Moreover, newly introduced topics were included in the Conference program such as the role of physiotherapy in people suffering from torture and violence with especial attention to the refugee's crises that Europe is facing nowadays. These topics show how mental health physiotherapy meets the needs of our current society.

At the end of each scientific session, Chairs were asked to provide the key outcomes from the presentations, but also from the debate between participants and the audience. In total, chairs provided 76 key outcomes resulted from the sessions. After the analyses, and duplicates delete, the outcomes were categorized in the following themes: clinical practice, research & education, and professional issues. Additionally, Chairs were asked to provide key messages for the society that would have been raised from the scientific sessions. As a result, a list of 21 key messages is also provided.

Outcomes on clinical practice

The theme "clinical practice" was the most popular among the outcomes. It reflects that the Conference's main focus is based on clinical work, professional practice and skills including standards on how clinical interventions should be conducted. Since the theme collected a high number of

Table 1 Key outcomes according to theme "Clinical practice", subtheme "Strategies for clinical effectiveness".

- Guiding without complicated explanations through simple movements
- Motivating patients through building creative therapeutic sessions
- Increasing body perceptions through new movement strategies
- Including new perspectives when looking at specific health problems
- Interventions can be performed individually or in groups
- Observation and the clinical eye from the therapist are key
- For adjusting the treatment to the patients reaction, a turning between the patient and the therapist is needed
- Person centered interventions
- Body language provides hints during the therapy for the physiotherapist to understand patient's progress
- Breathing is a very useful tool in many therapeutic approaches
- Breathing exercise is for different reasons important for mental health disorders such as eating disorders
- The use of the voice helps in breathing exercises

Table 2 Key outcomes according to theme "Clinical practice", subtheme "Exercise".

- Motivational interviewing is useful to facilitate patients' adherence to exercise
- Physiotherapists should motivate people with schizophrenia to an active lifestyle from the first episode on
- Physiotherapists should assess the cardiorespiratory fitness of people with schizophrenia
- Exercise programs supervised by physical therapist's improve patients' compliance
- Exercise programmes in elderly people help to improve their physical and mental health
- The effects of aerobic exercise in improving mental health is largely evidence based

outcomes, the following subthemes were identified: strategies for clinical effectiveness, exercise, body awareness and other clinical practice outcomes.

Strategies for clinical effectiveness

During the scientific sessions, participants reflected on strategies for better clinical effectiveness, defined as: "the application of the best knowledge, derived from research, clinical experience and patient preferences to achieve optimum processes and outcomes of care for patients. The process involves a framework of informing, changing and monitoring practice". The following strategies for clinical effectiveness resulted from the Conference (Table 1):

Exercise

Many presentations and debates during the 6th ICPPMH focused on the importance of exercise as a physiotherapeutic tool for people suffering from mental health problems. With these regards, it is important to mention the following definitions and the differences among some key terms:

- Physical activity: any bodily movement produced by skeletal muscles that requires energy expenditure including 4 dimensions: frequency, duration, intensity and type.^{2,3}
- Physical fitness: the ability to execute daily tasks with ease, without tiredness and with enough energy left to engage in leisure time activities and to meet emergency cases.²
- Exercise: a subcategory of physical activity that is planned, structured, repetitive, and purposeful in the sense that the improvement or maintenance of one or more components of physical fitness is the objective.

Physical activity includes exercise as well as other activities which involve bodily movement and are done as part of playing, working, active transportation, house chores and recreational activities.²

The key outcomes with regards to exercise can be found in Table 2.

Body awareness

The theory and practice of body awareness therapies have been developed over more than 100 years in the Western culture. Body awareness therapies refer to a group of interventions sharing a common perspective that focuses on the internal subjective experience of the body to promote physical, mental and emotional well-being. Physiotherapy should differentiate between the broad term *body awareness*, and the term *movement awareness* which is specifically used in the Physiotherapy field. According to the World Confederation for Physical Therapy, human movement and function are key concepts in physiotherapy.

During the conference, latest research from the therapeutic methodology Basic Body Awareness Therapy (BBAT) and the Norwegian Psychomotor Physiotherapy was largely presented (Table 3).

Other clinical practice outcomes

Besides of the above outcomes, participants at the 6th ICPPMH also reflected upon other key aspects in clinical practice such as massage, chronic pain as well as how quality of life can be improved through mental health physiotherapy (Table 4).

Table 3 Key outcomes according to theme "Clinical practice", subtheme "Body awareness".

- Body awareness is essential in dealing with people suffering from mental problems
- Patients can learn how to take contact with balance through multiple ways, such as in walking or when sitting and up from a chair
- Therapeutic strategies to increase the perception of posture and stability should be promoted
- Movement and body awareness therapies are to a large extent used in Mental Health Physiotherapy
- Health professionals should be aware that most people have misperceptions about their own body, while they have accurate perceptions about others
- It is important to explore and discover the change in the energy that every patient experience with each movement
- There should be a more understanding about how to promote bodily perceptions, emotions and experiences
- BBAT offers a structured approach to be adaptable in different clinical situations and diagnosis
- BBAT is a way of understanding your body and increasing movements without pain
- BBAT it is used for mental disorders, chronic pain and others mental health problems
- BBAT sets harmonic movements and during the treatment, patients are consciously involved
- Tai Chi can be used as a therapeutic intervention for the elderly population
- Tai Chi is useful for people with balance problems especially for those with fear from falling and anxiety

Table 4 Key outcomes according to theme "Clinical practice", subtheme "Other clinical practice outcomes".

- Massage is a useful technique in mental health physiotherapy improving clinical symptoms in people suffering from mental health problems
- Physiotherapists should take a key role in assessing and treating pain in the multidisciplinary treatment of schizophrenia
- Suppressing pain produces a paradoxical effect
- When people become more aware of their self and body, they often need less painkillers
- Mental health physiotherapy helps to develop working protocols to assess the needs and promote life style changes for patients suffering from chronic conditions (cardiovascular and neurological diseases, chronic pain, etc.)
- It is very important to involve and make a person learn how to take care of her/himself

Outcomes on research & education

Research and education are two sides of the same coin and they are considered as the key for the future development in mental health physiotherapy. Research and education are the cornerstones of the best clinical practice, where publishing evidence-based and innovative approaches, as well as stimulating skilled and well-informed professionals are key objectives.

Today research and education are increasingly global with international collaboration working in every field of research. With these regards, the Conference provided a perfect forum to promote this international collaboration since participants from all over the World attended and shared their latest research and clinical experiences.

During the conference, this theme was actively pursued in diverse areas that are represented in the following key outcomes resulted from the sessions (Table 5).

Outcomes on professional issues

The Conference also highlighted professional issues within the field of mental health physiotherapy. It is recognized that although the field is well developed and visible in many countries especially in Western and Northern Europe as well as Australia, the field is rapidly emerging in some other areas of the Globe such as Southern and Eastern Europe, America, Asia and Africa. With these regards, international collaboration is essential in order to spread out the field across the World. Below, the sessions' outcomes have been grouped (Table 6).

Communication and key messages

The field of Mental Health Physiotherapy is growing rapidly and there is a need for developing communication strategies including key messages for the society addressing the benefits of physiotherapy to improve mental health. Following this demand, the theme for the 6th ICPPMH was "Communication in a Connected World" resulting in different communication strategies developed before, during and after the Conference.

Social networks were promoted during the Conference. Through the hashtags #ICPPMH and #IOPTMH, participants shared their experiences during the Conference. Furthermore, a You-Tube channel and a Linkedin group on Physiotherapy in Psychiatry and Mental Health are stimulating the field in the digital media.

Furthermore, during the Conference, a new magazine titled "Mental Health & Physiotherapy" was presented for the first time. The magazine includes news, latest developments and interviews to specialists in Mental Health Physiotherapy around the World, showing that in the field of Mental Health Physiotherapy there are different perspectives, different approaches and different methodologies sharing the same goal: improving the person's quality of life, wellbeing and mental health through physiotherapy. These communication materials can be found at http://www.fisioterapiasm.es/icppmh2016_publications.htm.

In Table 7, the *key messages for the society* that were provided from the scientific sessions are presented.

Table 5 Key outcomes according to theme "Research and Education".

- Structured educational programs are important for providing quality clinical practice
- Better knowledge and understanding of mental health is needed in physiotherapy
- There is good evidence for exercise programs to improve both physical and mental health
- Basic Body Awareness Therapy (BBAT) includes both qualitative and quantitative assessment methods
- Aerobic exercise for depression is well evidence based
- Although, mental health physiotherapy includes some good evidence, there is a need for more evidence based studies on each of the treatment methods to provide solid recommendations for clinical practice
- Evidence based clinical practice should be largely developed
- Health professionals should be aware that there is a high association between self-esteem and body image
- Self-efficacy improves through physiotherapy and patients can handle better their daily life
- BBAT provides good outcomes in depression
- The indications of who most benefit from different physiotherapeutic methods in mental health (i.e. exercise, BBAT, etc.) are an object for future research

Table 6 Key outcomes according to theme "Professional issues".

- Physiotherapists have an important role for patients with severe mental illness
- Each country organizes mental health physiotherapy (i.e. exercise programs) in different ways depending on the healthcare systems
- Physiotherapists should be well skilled in motivating patients
- Team work is a crucial element in mental health physiotherapy
- Working alliance is essential for clinical practice
- The presence of physiotherapists in mental health services is low in some countries, while in other countries the profession is highly represented in mental health teams
- It is important to have regular debriefs when working with people suffering from mental health problems such as victims of violence

Table 7 Key messages.

- Physiotherapists with a special education and knowledge are important for providing appropriate treatment for mental health patients
- Basic Body Awareness Therapy (BBAT) can be adapted to different diagnosis and situations
- Current society can benefit from mental health physiotherapy
- Try Tai Chi! An interesting way from using the body and improving both mental and physical health
- Policy makers should promote the key role of physiotherapists in the treatment of schizophrenia
- Keep on moving with attention to the body accepting one's limits
- Stimulating acceptance of pain via body (movement) experience through a physiotherapy intervention
- Massage and touch are key to improve health outcomes
- Most people believe that they are bigger and wider than they actually are
- Movement is medicine
- Physiotherapy can help improve your mental health
- BBAT is a good method for teaching movement quality and body awareness
- Physiotherapy can help to people suffering from bipolar disease
- Physiotherapists often treatments to improve mobility in health mental problems
- The role of PT in eating disorders and severe mental illness is underestimated in society
- The Norwegian Psychomotor Physiotherapy can be an important contribution to all parts of health services
- Be open to the needs of the patient and prepare to adapt yourself accordingly
- The efficacy of exercise programs for improving both physical and mental health in people with mental illness is well evidence based
- The physiotherapist should be the preferred health professional for engaging patients with mental illness in exercise
- Mental wellbeing is the key for good health
- During therapy, you should get in contact with breathing

Final remarks

On behalf of the Scientific and Organizing Committees, we are honoured to present the above conclusions and recommendations resulted from the 6th ICPPMH. These may help clinicians, researchers and policy makers to strengthen the field of mental health and physiotherapy and improving quality of life of people suffering from mental health problems. We believe that this Conference, together with all of the previous editions (Belgium 2006, Norway 2008, Sweden 2010, United Kingdom 2012 and The Netherlands 2014) are milestones in the development of the field of mental health physiotherapy. It has been possible thanks to all the participants, members of the committees and everybody who helped in the organization. We are looking forward to hearing about further progress during 7th ICPPMH in Iceland 2018, which for sure will be another big success.

Acknowledgments

Great appreciation is expressed to all 6th ICCPPMH participants, especially to the chairs for their contributions to build these Conference conclusions: Amanda Lundvik Gyllensten (Sweden) Ann Rebeka Szczegielniak (Poland) Anne Parker (United Kingdom) Brendon Stubbs (United Kingdom) Caroline Griffiths (United Kingdom) Cristina Bravo (Spain) Davy Vancampfort (Belgium) Ellen Zambo Anderson (United States) Graciela Rovner (Sweden) Gro Marit Helleso (Norway) Hamiyet Yuce (Turkey) Hans Stryger (Denmark) Janette Canales (Brazil) Joanne Connaughton (Australia) Lene Nyboe (Denmark)

Liv Helvik Skjaerven (Norway)
Maite Cenoz Huarte (Spain)
Matthijs Rumke (The Netherlands)
Michel Probst (Belgium)
Miguel Muñoz-Cruzado y Barba (Spain)
Mikko Patovirta (Finland)
Noaman Ali Elkosayer (Egypt)
Norma Elisa Gálvez Olvera (Mexico)
Patricia Serranos de Andrés (Spain)
Rebekka S. Guðjónsdóttir (Iceland)
Rutger IJntema (The Netherlands)
Taisei Yamamoto (Japan)

References

- National Health Service Lanarkshire. Clinical effectiveness strategy 2009-2012. Available on 2 July 2016 from: http:// www.nhslanarkshire.org.uk/boards/Archive/2009BoardPapers/ Documents/June%202009/Clinical%20Effectiveness%20Strategy% 202009-2012%20-%20June%202009%20Board.pdf.
- World Health Organization. Global strategy on diet, physical activity and health. Geneva, Switzerland: WHO; 2010.
- Caspersen CJ, Powell KE, Christensen GM. Physical activity, exercise, and physical fitness: definitions and distinctions for health-related research. Public Health Rep. 1985;100:126–31.
- Daubenmier J. The relationship of yoga, body awareness, body responsiveness to self-objectification and disordered eating. Psychol Women Q. 2005;29:207–19.
- World Confederation of Physiotherapy. WCPT glossary. London, UK: WCPT; 2015.

D. Catalan-Matamoros ^{a.*}, A. Gomez-Conesa ^b ^a President of the 6th ICPPMH Organising Committee, Carlos III University, Madrid, Spain ^b President of the 6th ICPPMH Scientific Committee, Murcia University, Murcia, Spain

* Corresponding author.

E-mail address: dcatalan@ual.es (D. Catalan-Matamoros).