



# International Organization of Physical Therapy in Mental Health

**Educational standards: describing minimal requirements of mental health courses in  
physiotherapy education**

Preparation of the 2020 ER-WCPT Education Conference, in Leuven (Belgium)

Work in progress (Version December 2020)

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## Introduction

This paper is the result of several rounds of discussion within the Executive Committee of the IOPTMH during the last ten years.

There is worldwide a need to integrate mental health components in the physiotherapy curricula, to uplift standards of practice.

The aim of this statement is to provide guiding principles in order to integrate “mental health” into physiotherapy education (entry level and specialized training).

With this document, the IOPTMH hopes to establish a dialogue within the organizations about the importance of integrating a mental health curriculum into physiotherapy training programs in their respective countries.

Of note, the IOPTMH advises physiotherapy training programs to provide physiotherapy students with a general overview of the different methodologies and techniques that can be applied and which are mentioned in the IOPTMH policy statement and consequently not to focus on one method or on one technique.

The document is work in progress. Therefore, the IOPTMH hopes to receive comments to update this document in the future.

Please, consult regularly our website: [www.ioptmh.org](http://www.ioptmh.org)

Enjoy reading,

On behalf of the EC of the IOPTMH,

Prof. dr. Michel Probst

President of the IOPTMH

Table 1: Approval, Review and Collaboration

Date adopted:	This document was discussed at EC-meetings in 2017, 2018, 2019. The document will be presented at the next General Meeting of IOPTMH.
Date for review:	This document will be reviewed in the period between 2022 -2024.
Collaboration:	The following people contributed to this document: Michel Probst, Liv Skjaerven, Jo Connaughton, Emanuel Brunner, Merja Sallinen, Rutger Ijntema, An Parker, Amanda Gyllensten

## Acknowledgements

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## 1. Background

On 11/12 September 2020, the European Region of the World Confederation for Physical Therapy (ER-WCPT) held an Education Conference in Leuven (Belgium). The conference was an opportunity for the International Organisation of Physical Therapy in Mental Health (IOPTMH) to prepare a document on standards for physiotherapy education in the field of mental health care. This document aimed to:

- Describe the different roles of general and specialized physiotherapists within mental health care.
- Describe specific competencies related with mental health care, which need to be acquired by general and specialized physiotherapists.

The «IOPTMH Educational Standards» is a guideline document. Its' intention was to provide a general framework for a mental health curriculum in physiotherapy training programs, and this at two different levels (entry-level and specialized training). These guidelines are developed for physiotherapy schools and national and local physiotherapy associations interested in preparing physiotherapists for the mental health challenges they face in clinical practice.

The integration of mental health care is important for all physiotherapists, not only for mental health care professionals. Specialized physiotherapist working in psychiatric care require however specific competencies (knowledge, skills and attitudes) for managing patients with mental disorders. Mental health care is, however, not limited to psychiatric care. All physiotherapists are consulted by patients with (co-morbid) psychological problems. Therefore, the integration of mental health care is important for all physiotherapists, and all physiotherapy education programs.

Finally, it is important to notice that the IOPTMH acknowledges differences in teaching methods and delivery of education in various countries and therefore recommends to adopt the general guidelines within a local context.

## 2. Physiotherapy in mental health care

Mental health problems are the leading cause of years lived with disability worldwide, and without more intensified prevention and management the burden of mental problems is estimated to increase even further (1). The consequences of mental health problems are devastating for the person and the society as a whole and is compounded by physical health co-morbidities most people with mental health problems are confronted with (2, 3). Physical health co-morbidities are the major cause of the 15 to 20 years reduced life expectancy in this population (4). There is rigorous evidence now that physiotherapy improves the mental and physical health in people with mental illnesses (5).

The benefits of physiotherapy interventions often do not reach mental health service users who need them most (6). One reason is the lack of competences of physiotherapists working with people with mental health problems due to inappropriate training integrating the complexity of barriers people with mental health problems are confronted with. To date, few funds are set aside for training health care professionals to deliver evidence-based interventions for patients with mental disorders or comorbidity between mental disorders and somatic diseases (7). These recommendations aim to fill this gap by providing a framework for physiotherapy education programs in the field of mental health care.

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3. Vancampfort D, Correll CU, Galling B, Probst M, De Hert M, Ward PB, et al. Diabetes mellitus in people with schizophrenia, bipolar disorder and major depressive disorder: a systematic review and large scale meta-analysis *World Psychiatry*. 2016.
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7. Stumbo SP, Yarborough BJH, Yarborough MT, Janoff SL, Stevens VJ, Lewinsohn M, et al. Costs of implementing a behavioral weight-loss and lifestyle-change program for individuals with serious mental illnesses in community settings. *Translational behavioral medicine*. 2015;5(3):269-76.

### **3. The scope of physiotherapy in mental health care**

According to the definition of the IOPTMH on physiotherapy in mental health (Ref.), physiotherapy in mental health can be defined as a specialty within physiotherapy. It is implemented in different health and mental health settings, psychiatry and psychosomatic medicine.

Physiotherapy in mental health is person-centered and aims at children, adolescents, adults and elderly persons with mild, moderate and severe, acute and chronic mental health problems, in primary and community care, inpatients and outpatients. Physiotherapists in mental health provide health promotion, treatment and rehabilitation for individuals and groups.

Physiotherapists in mental health create a therapeutic relationship to provide assessment and services specifically related to the complexity of mental health within a supportive environment applying a bio-psycho-social model.

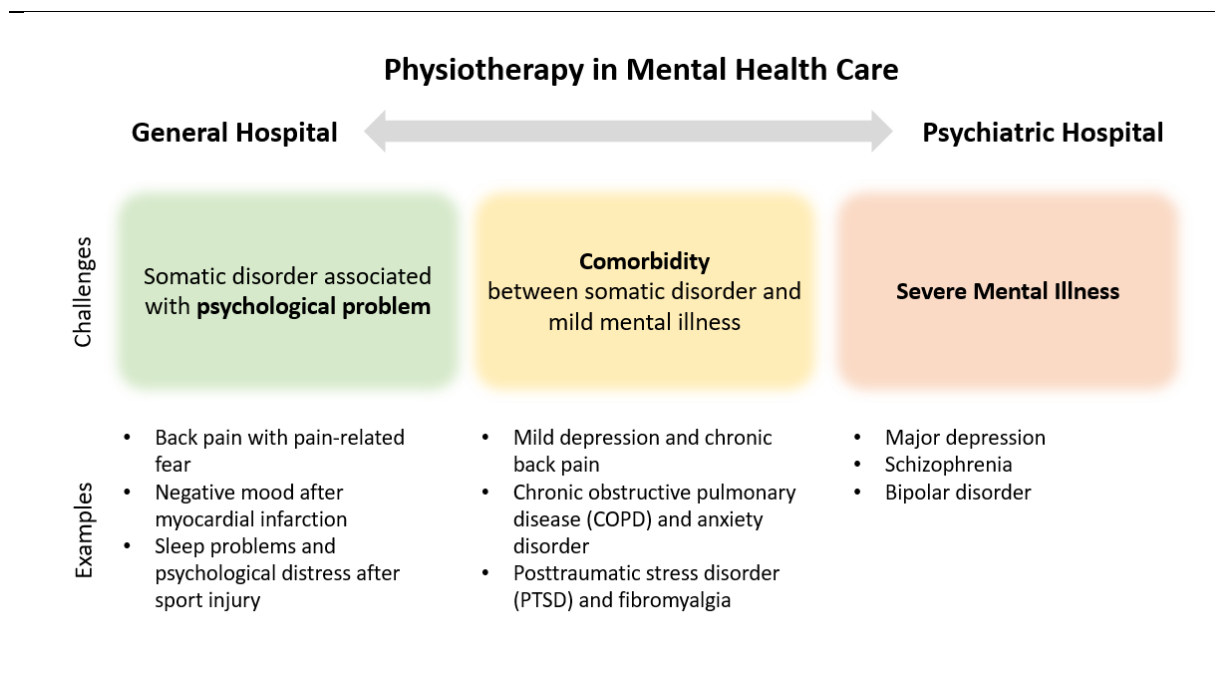
The core of physiotherapy in mental health is to optimize wellbeing and empowering the individual by promoting functional movement, movement awareness, physical activity and exercises, in individual and group therapeutic settings, bringing together physical and mental aspects. Physiotherapists in mental health play a key in the integrated multidisciplinary team/inter-professional care. Physiotherapy in mental health is based on the available scientific and best clinical evidence.

#### 4. Integration of mental health care into general physiotherapy

Physiotherapists working in general hospitals, private physiotherapy practices or community care centers should be aware of the strong associations between mental disorders and major non-communicable diseases, including cardiovascular diseases, diabetes, cancer and respiratory disorders (WHO, 2017). Furthermore, physiotherapists are often confronted with psychological problems (e.g. sleep problems, psychological distress or pain-related fear), which are often associated with somatic disorders. Physiotherapists are confronted with mental health care at different levels (see Figure 1). Therefore, physiotherapists should be prepared for these mental health challenges.

Not every mental problem is a mental illness or disorder. Psychological problems are negative experience that affects emotional and/or social abilities. A psychological disorder describes a condition that is associated with a disease-related limitation in relevant areas of life such as work and social interactions. Severe mental illnesses are usually treated in the context of psychiatric care.

**Figure 1:** Scope of physiotherapy in mental health care, illustrated by the example of a continuum between general and psychiatric hospitals.



Ideally, most (mental) health conditions are expected to be dealt with in general physiotherapy. The clinical work in psychiatric units for patients with severe mental illnesses may be the task of specialized physiotherapists. Mental health care must be provided also outside psychiatry (WHO, 2017). Therefore, all physiotherapists should be able to identify mental problems or disorders and manage mental health aspects appropriately.

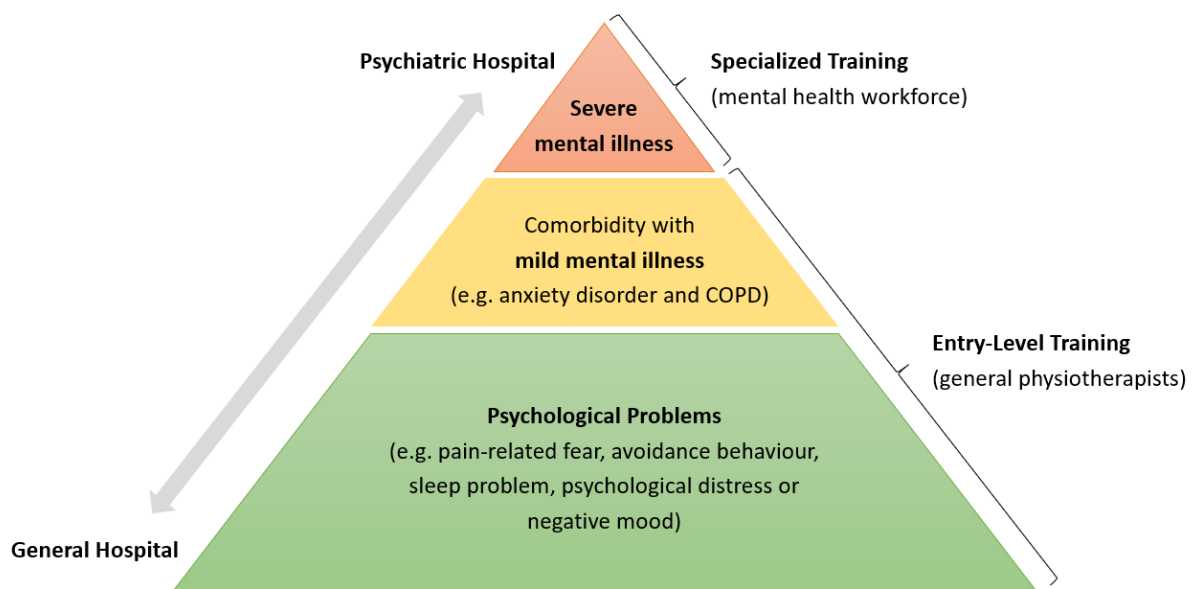
The private practices are on the level of general hospital and are focused depending their competence on the more mild and moderate disorders and on the pre-hospital and the after-hospital care.

## 5. Education levels

The education of physiotherapists varies worldwide. In most countries, entry to the profession of physiotherapy is granted by the completion of a bachelor's program in physiotherapy (undergraduate degree). In some countries (e.g. Belgium), however, admission as physiotherapists is granted by completion of a master's program (postgraduate degree).

For simplicity, only two education levels are distinguished in this document. The "Entry-Level training" refers to the training for general physiotherapy. This education level usually refers to bachelor's programs. "Specialized training" describes the level of training for specialized physiotherapists, who belong to the mental health work force together with psychiatrists, psychologists, psychiatric nurses and other professionals.

**Figure 2:** Levels of education and the scope of physiotherapy in mental health care.



### General Aims of Entry-Level Training in Mental Health Care

Physiotherapists are competent to manage patients with psychological problems or comorbidity between somatic disorder and mild mental problem within primary care settings, including general hospitals, physiotherapy practice, rehabilitation centres or community care centres. Qualified management includes the identification but not the diagnosis of psychological problems and illnesses, and the application of treatment strategies to reduce psychological symptoms.

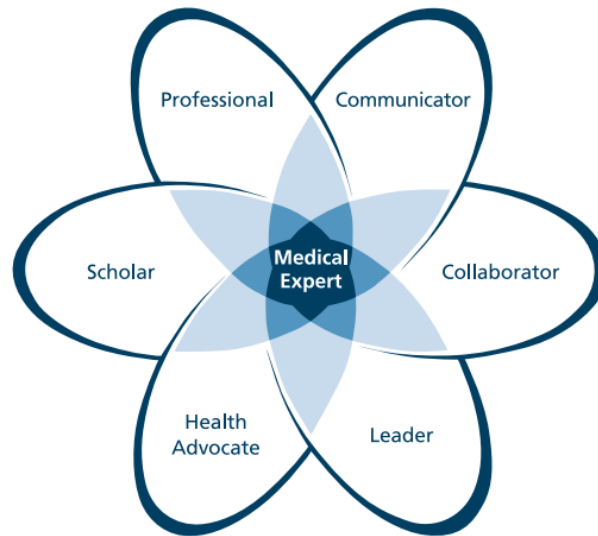
### General Aims of Specialized Training in Mental Health Care

Physiotherapists are competent to treat patients with psychological problems and illnesses at all levels of mental health care, including psychiatric care for patients with severe mental disorders. Specialized physiotherapists are prepared for specific roles within the mental health workforce, together with psychiatrists, psychologists, psychiatric nurses and other professionals.

## 6. Professional roles of the physiotherapist in mental health care

Physiotherapists in mental health care integrate the different roles (Professional, Communicator, Collaborator, Leader, Health Advocate and Scholar), applying physiotherapy knowledge, skills and professional attributes in their provision of high-quality and safe patient-centered care for patients with mental problems or disorders.

**Figure 2:** CanMEDS-roles of healthcare professionals, including physiotherapists in mental health care (Frank et al., 2015).



### Detailed description of the roles of the physiotherapist working in mental health

**Note:** This text section is adapted on the specific area of mental health but based on “Clinical Roles of the International Federation of Orthopedic Manipulative Physiotherapist Incorporated” see <https://www.ifompt.org> and Frank JR, Snell L, Sherbino J, editors. Can Meds 2015 Physician Competency Framework. Ottawa: Royal College of Physicians and Surgeons of Canada; 2015.

The physiotherapist expert/ working in mental health as a PROFESSIONAL

The physiotherapist working in mental health has a societal role as professionals with a distinct body of knowledge, skills and attributes dedicated to improving the health and well-being of individual patients and society. They are committed to the highest of excellence in clinical care and ethical conduct, and to the continued development of mastery of their discipline, through continuing personal and professional development. The role of a Professional includes clinical competence, a commitment to ongoing professional development, promotion of the public good, adherence to ethical standards, and values such as integrity, honesty, altruism, humility, respect for diversity, and transparency with respect to potential conflicts of interest.



### The Physiotherapist working in mental health as a COMMUNICATOR

Excellent verbal and non-verbal communication skills are required for building an effective therapeutic alliance and establishing rapport with patients, caregivers, health professionals and other sectors and stakeholders. Physiotherapists working in mental health enable patient centred therapeutic communication by actively listening to the patient's experiences and exploring the patient's perspective, including his or her fears, ideas about the health condition and its impact and expectations of health care professionals.

### The Physiotherapist working in mental health as a COLLABORATOR

Collaboration is essential for safe, high-quality patient centred care, and involves patients and their families, other health care professionals, community partners and health system stakeholders. The physiotherapist working in mental health care collaborates effectively to build sustainable and equitable relationships with patients and multi-disciplinary teams to facilitate the attainment of meaningful outcomes and health gains.

### The Physiotherapist working in mental health as a LEADER

Physiotherapist working in mental health engage with others to contribute to a vision of a high-quality health care system and take responsibility for the delivery of excellent patient care through their activities as clinicians, administrators, scholars and teachers. Physiotherapist working in mental health function as manager, engaging in shared decision-making involving resources, co-workers, tasks, policies and contribute to the development and delivery of continuously improving health care. They do this in the settings of hospitals, private clinics, community health centres, health promotion units, and in the broader context of the health care system.

### The Physiotherapist working in mental health as a (mental) HEALTH ADVOCATE

Physiotherapist working in mental health contribute their expertise as they work with communities or patient populations to improve physical and mental health. They recognize the importance of advocacy activities in responding to the challenges represented by those social, environmental, psychological and biological factors that determine the health of patients and society. They recognize advocacy as an essential and fundamental component of health promotion that occurs at the level of the individual patient, the practice population, the health care team, the broader community, and the media and at all levels of government. The physiotherapist working in mental health supports patients in navigating the (mental) health care system; seeks to improve the quality of their clinical practice; contributes their knowledge to influence positively the health of patients, communities or population and increases awareness about important health issues.

### The Physiotherapist working in mental health as a SCHOLAR

The physiotherapist working in mental health demonstrates a lifelong commitment to excellence in practice through continuous learning and by teaching others, evaluating evidence and contributing to the application, dissemination and translation of knowledge.

## Roles of general physiotherapists (entry-level training) and specialized physiotherapists (specialized training)

The roles of general physiotherapists differ from those of specialised in mental health care. General physiotherapists play an important role for integrating mental health care into primary care. Specialised physiotherapists are part of the mental health workforce and primarily fulfil their roles within psychiatric care. Specific differences in physiotherapists’ role between general and specialized physiotherapists are described in Table 1.

Table 1: Specific difference in roles between general physiotherapists (Entry-Level Training) and specialized physiotherapists (Specialized Training).

Role	Entry-Level Training	Specialized Training
Professional	Committed to the highest standards of excellence in primary care for patients with mental problems and mild mental disorders.	Committed to the highest standards of excellence in all areas of mental health care, and particularly in psychiatric.
Communicator	Enables patient-centred communication by actively listening to the patient’s experiences and exploring the patient’s perspective.	Skilled for building strong therapeutic alliances with patients suffering with mental illnesses.
Collaborator	Collaborate with mental health professionals and, if necessary, refer patients to clinicians who are skilled to manage complex mental conditions.	Performs an active role as part of the “interdisciplinary” mental health workforce.
Leader	Contributes to shared decision-making within interdisciplinary settings.	Contributes to the vision of high-quality physiotherapy services within psychiatric care.
Health Advocate	Supports patients in navigating the (mental) health system.	Promote health promotion at all levels, especially the importance of physical activity in relation to mental health.
Scholar	Demonstrates a lifelong commitment to excellence in practice.	Committed to excellence in practice, particularly through evaluating evidence in the field of physiotherapy and mental health care.

## 7. Competencies of physiotherapists in mental health care/ mental health specific learn outcomes

### General description (vocabulary) of attitudes, knowledge and skills

Competence is generally defined as multidimensional construct consisting of integrated pieces of attitudes, knowledge and skills (Lizzio & Wilson, 2004). The therapeutic work with mentally ill patients requires specific attitudes, knowledge and skills. Specific competencies are necessary for providing high quality care, but also for the safety of patients and physiotherapists.

#### Knowledge:

- Knowledge is a familiarity, awareness, or understanding of something, which is acquired through education by learning.
- Knowledge can refer to a theoretical or practical understanding of a subject.
- Knowledge acquisition involves complex cognitive processes: perception, communication, and reasoning

#### Skills:

- A skill is the ability to carry out a task with determined results:
- Domain-general skills
- Domain-specific skills

#### Attributes:

- Quality, character, or characteristics ascribed to someone
- The proposed and adapted classification is based on the international well-accepted guidelines of the EMPE.

*“The following subject-specific competences, clustered into units, reflect the core of physiotherapy education in Europe (ENPHE):*

*Unit 1: Assessment and interpretation*

- 1. Collect, analyse and critically interpret relevant information related to the client’s needs*
- 2. Plan, implement and adjust a relevant physiotherapy assessment in a goal-oriented way*
- 3. Make a physiotherapy diagnosis based on the analysis and critical interpretation of collected information and the related physiotherapy assessment*

*Unit 2: Planning and implementation*

- 4. Construct a physiotherapy intervention plan based on the physiotherapy diagnosis*
- 5. Systematically implement a physiotherapy intervention*

*Unit 3: Evaluation*

- 6. Critically evaluate a physiotherapy intervention, make adjustments and discontinue if required*

*Unit 4: Health care*

- 7. Collaborate as a physiotherapist in a multidisciplinary or interdisciplinary setting*

*Unit 5: Professional behaviour*

- 8. Communicate with clients and relevant others*
- 9. Educate clients to become responsible for a health promoting lifestyle*
- 10. Act professionally within an ethical, deontological and legal context*
- 11. Act professionally based on a critical scientific attitude and lifelong learning*

*Unit 6: Management*

- 12. Set up and manage a physiotherapy practice within a health care system*

*Unit 7: Scientific research*

- 13. Develop, execute and report physiotherapeutic relevant scientific research”*

The IOPTMH refers to the **policy statement** more specific to the key elements [See [www.ioptmh.org/committee](http://www.ioptmh.org/committee)]

- Physical activity, exercise and physical fitness
- Sensory, body and movement awareness
- Stress and tension regulation including relaxation
- Closeness/Touch/Massage ‘
- Physio- Education (include lifestyle, pain)
- Paediatric psychiatry specific elements
- Old age psychiatric specific elements.

The IOPTMH believes that every organization or school needs to decide what level (entry level versus specialized level) they want to organize and which content (learning outcome) is integrated within that level of physiotherapy education in their setting. Therefore, section 7 is a structured inventory of possible learning outcomes.

## **Specific attitudes, skills and knowledge for physiotherapists mental health care**

Besides the expected acquired competencies as physiotherapist, specific mental health competencies are needed to effectively manage patients with mental problem or illnesses at different areas of mental health care. The following section describes different domains of competencies and specific learning outcomes, which need to be acquired by graduates from entry-level and specialized education programs.

### **7.1 Health care professional**

#### **7.1.1 Section one: mental health and knowledge and insight**

Have (specialized) knowledge of and (advanced) insight into the natural sciences related to mental health

- Neurophysiology of stress and sleep / stress mechanisms
- Neurophysiology of exercise
- Neurosciences and emotions: autonomic nervous system
- Movement sciences: interventions knowledge
- Motor control
- Pathophysiology

Have (specialized) knowledge of and (advanced) insight into biomedical sciences and human sciences related to mental health

- Understand the biomedical and bio psychosocial model, / the context / the holistic approach
- Understand the basic concept of psychological development,
- Abnormal psychology and the complexity of human being/ psychological aspects of chronic pain disorders
- Psychological development concepts
- Theory of body image

Demonstrate a knowledge and understanding the field of mental health,

- Elaboration of different terms, mental health models and concepts: Health, mental Health and mental problems/disorders, psychiatry, risk and protective factors for mental health disorders, social environmental and economic determinants of mental health (risk and protective factors) stigma.

Have insight into the causes, and clinical symptoms and discuss the complex nature of mental disorders including intellectual disability

- Different diagnostic tools: DSM 5; ICD 10, ICF;.
- Psychopathology
  - o Common illnesses: depression, anxiety, autism, ADHD, Stress, eating disorders, addiction
  - o Severe illnesses: PTSD, Bipolar disorder, psychotic disorder,
- The ability to relate the patient's pathology to the limitations the patient encounters in his/her environment (at home, at school, professional activities, spare time).

Have insight into the prevention and treatment principles of mental health problems /disorders including the role of physiotherapy

- Basic concept of body and mind connection, and mind body theories: intercultural differences
- Models of psychological interventions in chronic pain (e.g. fear-avoidance model)
- Associations between mental health, physical activity and physical exercises;

Have a basic theoretical understand of psychotherapy methods (e.g. behaviour therapy, holistic therapy)

### **7.1.2 Section two: principles of assessment and measurement**

Perform a screening and physiotherapeutic investigation in patients with common or complex and/or specific mental health disorders, taking into account international frameworks and the concept of evidence-based practice.

- Assessment and observation tools specific to mental illness
- Assessment of psychological factors associated with musculoskeletal disorders based on questionnaires, clinical observation and patient interview
- General assessments in mental health, psychiatry and psychosomatic medicine and in physiotherapy in mental health
- Psychological screening questionnaires (e.g. 4DSQ (four dimensional symptom questionnaire), SBT (Start Back Screening Tool)(or TSK (Tampa scale of kinesiophobia),...), and knowledge about strengths and limitations of these instruments

### **7.1.3 Section 3: principles of treatment and techniques**

Have insight into prevention and treatment principles of mental health problems /disorders

Clinical reasoning in mental health and evidence-based practice

Have a highly specialized knowledge and skills related to specific physiotherapy interventions (clinical reasoning, advanced assessment and treatment techniques)

Have insight into health-promoting behavior with due attention to specific prevention related to mental health

Making a physiotherapeutic diagnosis based on clinical reasoning and drawing up, implementing and evaluating a treatment plan within a training context and taking into account international frameworks and evidence-based practice

Have the ability to apply advanced techniques to treat and evaluate patients with complex pathologies within the context of a treatment plan, taking into account international frameworks and the concept of evidence-based practice

Develop and implement an individually tailored evidence-based physiotherapy treatment in dialogue with the patient with mental health distress

Critically discuss indications, efficacy, complications management and patient follow up for the treatment modalities related to mental health physiotherapy

Demonstrate a knowledge and skills related to the key elements of physiotherapy interventions in people with mental health problems ,

- Physical activity, exercise and physical fitness

- Sensory, body and movement awareness
- Stress and tension regulation including relaxation therapy
- Closeness/Touch/Massage
- Physio- Education (include lifestyle, pain)
- Paediatric psychiatry specific elements
- Old age psychiatric specific elements.

Have insight in psychological concepts included in psychiatry and mental health and useable in physiotherapy practice

- Cognitive and behavioral therapies
  - Mindfulness based cognitive behavior therapy ; acceptance and commitment therapy, mindfulness-based stress reduction
  - Biofeedback, distraction relaxation techniques such as progressive muscle relaxation and autogenic training
  - Graded exposure to feared movement and or activities, pacing
- Systemic therapy ( couple of family therapy)
- Guided imagery
- Motivational theories (i.e. motivational interviewing, ...)
- Self-determination theory and supportive coaching
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#### **7.1.4 Section four: pathology specific strategies**

Have advanced competence to manage complex, unpredictable contexts and to take responsibility in teams.

Have knowledge of

- Psycho-pharmacology in relation with movement behavior and physical activity
- Advanced psychopathology
- Specific aspects of mental health: suicide, self-injuring behavior, aggression
- Demonstrate ability to develop, implement, and progress tailored multidimensional assessment for different mental health distress and disorders
- Demonstrate clinical reasoning in developing a tailored treatment plan form the patient presentation

Have knowledge in assessment and physiotherapy in infants, children and adolescents with mental health problems and elderly in old age psychiatry

Understand the relationship of mood disorders and early adverse life events including prolonged time in the neonatal intensive care unit or child abuse

#### **7.1.5 Section five: ethics – communication – inter and transdisciplinary work**

Communicate (in written and oral) professionally with patients with mental health disorders and other actors within a multidisciplinary context.

Use professional language when communicating with the patient so that he/she is able to understand the message and/or instructions of the physiotherapist.



Consult and collaborate with colleagues and other healthcare professionals to optimize patient well-being and enhance patient's outcome

Have a knowledge of ethics in mental health

Have a knowledge in research methods in mental health

Demonstrate competences in motivational interviewing

Have a knowledge in the concepts and the role of the alliance and inter-professional alliance

Communicate in interdisciplinary teams, Refer to allied health professional colleague

## **7.2 Health care Manager**

- Knowledge of the structure and the actors relevant to mental health care relevant
- Recognize mental health care organization, system and network in their country
- Describe historical and international perspectives of mental health.

## **7.3 Professional developer and scientific researcher**

- To be able to collect and interpret relevant international scientific information related to mental health
- To be able to integrate knowledge from different fields and to develop new innovative knowledge