

GLOBAL OBSERVATORY OF ACTIVE LIVING FOR MENTAL HEALTH: A personal testimony on the development of the ALMH movement

Preamble

The contribution and incorporation of Sports, Physical Activity and Exercise in the wider context of Mental Health (prevention, treatment and addressing stigma) has been the subject of research processes and individual specific initiatives in recent decades. Although undeniable scientific evidence of the therapeutic value of the above factors is now available, it is easy to see that the integration of these parameters into the mainstream perceptions regarding Mental Health (health systems, therapeutic schemes, or social practices) lags far behind. This lag and its causes are the reasons why the Active Living for Mental Health movement is created.

A. A SHORT REVIEW

2015 was a pivotal year for the development of Active Living for Mental Health initiatives. For the first time, a specific framework of principles was created to clear a more or less confusing connection of Mental Health issues to the overall disability context applied without the necessary distinctions. The following principles were part of the core concept of a project aiming to explore and promote the idea of ALMH:

1. *«A mental disorder is not by definition a disability, as a mental patient may be fully functional in the broader context of social life.*
2. *A mental disorder may be often temporary.*
3. *Prevention plays a significant role in the field of Mental Health, though it doesn't apply in physical impairment or mental retardation.*
4. *The mentally ill are often victims of stigma and discrimination, whose nature usually leads away from the acceptance of the problem.*
5. *According to one of the most powerful trends of community psychiatry, social constructs are often involved in the treatment of mental health problems, adopting both an institutional or informal role and responsibilities that go beyond the frameworks of humanitarian awareness and solidarity.»*

These principles have enabled the initiatives that led to a dynamic independent development disengaged from the hither-existing restrictive relationship to disability. These initiatives were implemented within two European projects funded by ERASMUS+/Sport, of which the first one (M.E.N.S.) provided the policy framework and the institutional tool for the ALMH movement, while the second (E.V.E.N.T.S.) presented in the field a practical application of the parameters of ALMH with the participation of MH services' users, MH professionals and the general public. In this process, more than 50 MH organisations, universities and networks from more than 16 countries took an active part in researches, a European awareness campaign, scientific publications, establishment of a European network (www.enalmh.eu) and the first European Sport Event dedicated to MH was organized. More info on the mentioned projects and the entities involved at <https://mentalworld.site/projects/> or at the specific WEB sites.

This two years' rapid deployment of the movement (2017 -2018) made it necessary to deepen and expand its self-consciousness. While independent academic research was progressing worldwide, two of the main steps in this direction stand out:

- The first was to draw up the **ALMH definition** in accordance with «Active Living for Mental Health is the **multidimensional complex of policies, therapeutic approaches, actions and personal behaviours** that promote and enable the exploitation of the **benefits arising from sport, physical exercise and physical activity in general** in order to **maintain** good mental health and to **address** mental health problems.» <https://www.almh-platform.eu/> (If this definition seems a bit “neutral”, then the Prof. P.Ekkekakis’s scientific presentation at MENS project Final Conference is quite enlightening for both context and momentum).
http://eventsproject.eu/images/Exercise_as_antidepressant_Oct24_2018_Athens_Ekkekakis.pdf
- The definition led to the need, and also the possibility, for a better outline of the overall ALMH context mainly focused on its **multidimensionality** and **interconnectivity** between fields, target groups and pillars of actions. Without the contribution of colleagues as Prof. K. Karteroliotis, Sport & PA/E expert, or A. Zannikos, programmer / graphic designer, this intelligent interactive material would never come to life.
(http://enalmh.eu/images/pdf/almh_movement_context_interactive_presentation2-min.pdf)

As a result, ALMH movement was able to add its own specific approach for the value of Sport on addressing youth suicides within the WMHD 2019 campaign (<http://enalmh.eu/index.php/en/publications-campaigns/campaigns/world-mental-health-day-2019-full>). Then it attracted interest and found itself for the first time in the heart of international sport events as communication sponsor of HANDBALL EURO CUP 2019 <http://enalmh.eu/index.php/en/192-press-release-enalmh-official-sponsor-of-the-ehf-euros-2020> represented by Jan Drobny, Sport / MH specialist.

Through this course it became obvious that there was a need:

1. to document and develop the policy intervention of the movement’s vision so that it can be promoted as a social request and eventually result in a policy officially applied
2. the transition of this background in practice either as treatment regimens or as a wider methodology.

The framework to address these needs was InALMH project <https://www.almh-platform.eu/> (2019). Within this process the first goal is achieved after the conduction of the «**Recommendations on EU Guidelines for the use of Physical Activity on Mental Health**» by the responsible Scientific Team consisted of Yiannis Theodorakis, Marios Goudas, Mary Hassandra, Ioannis Morres, Christos Mouzakidis, Magdalini Tsolaki, members of the Greek academic community supported by the project partnership.

The second goal takes the form of an Interactive Platform that intends to operate as an international ALMH Hub that

- will host all information related to ALMH in a Digital Library (Scientific evidence, policies, events & activities)
- will organize and support the ALMH Online Forum
- will develop a Consultative Inventory on ALMH practices to

As the project is currently underway, albeit belatedly, we can here highlight a key feature of the initiative: it was based on the cooperation of a number of partners including four European networks from the fields of Mental Health and Sport, expanding for the first time to such an extent the basis of the ALMH movement. Thus, we could talk about a pan-European coverage with strong global extensions (due to the members of the participating networks that extend beyond the EU) and the meeting in the field of MH and Sport, which always was a significant part of the vision of the movement.

B. PARENTHESIS: IS “MOVEMENT” THE RIGHT TERM TO USE?

To give an answer, let's start from the basic: what movement means and how / if it applies in our case. Into this point we get help from the following selected definitions on “movement” and try to identify elements that fit to ALMH process and overall context:

- *A change of position or location*
- *A series of actions and events taking place over a period of time and working to foster a principle or policy*
- *A campaign to create some change or achieve a goal*
- *A group of people with a common ideology who try together to achieve certain general goals*
- *A mechanism that produces or transmits motion*

In order to be able to proceed on the identification needed we must describe ALMH's vision and mission in a more detailed way:

- Official and definitive integration of physical activity / exercise in the National Health Systems either independently or in combination with other therapeutic interventions through the prescription of exercise.
- Reduction of the use of psychiatric medicine or substitution of drug therapy by others where they prove to be equivalent
- Strengthening community psychiatry: "Open doors" wider context acquires a tangible substance when part of the services, among many others, is provided physically in the open air or in public places in interaction to the general population.
- Enhancing individuals' active participation in their personal treatment – from the right to information or the right to choose among options a therapeutic scheme and finally become the active subject instead of passive object of the therapeutic process.
- Improvement of therapeutic procedures through the protection and enhancement of physical health and well-being of MH services' users.
- Addressing the stigma of the mentally ill by opening up treatment to the community, strengthening online therapeutic communities and promoting inclusion.
- Reduction of the cost of treatment as ALMH does not require consumables, equipment or other costs.
- Addressing root causes of mental problems such as workplace conditions through active contact with nature.
- Intervention and highlighting the consequences of the negative characteristics of social conditions, such as the urban built environment, transportations and other.
- Enhancing the effectiveness of the prevention of mental disorders by utilizing ALMH. This parameter, like any prevention process, has negative effects for those who expect profit from the maintenance and spread of mental disorders.

- Direct intervention and contribution to the treatment of extreme MH situations such as youth suicides
- Upgrading of MH professionals with the introduction of ALMH in educational curricula.
- Setting aside the biomedical model for MH.
- Improvement of the scientific profile of MH professionals and upgrading their reliability. Psychiatry has documented terrible failures: chemical convulsion, electroconvulsive therapy, mental surgery, development and descending of psychiatric hospitals. It also stands often defenseless by the intense intervention of pharmaceutical companies in the formation of therapeutic perceptions despite the scientific disrepute of many formulations and marketing methods. In the midst of the growing questioning of the methods of describing and classifying mental disorders, ALMH emerges as the great challenge and opportunity for the discipline of Psychiatry.(Egas Moniz may have received the Nobel Prize for lobotomy (!), but the real professional recognition/satisfaction comes only from the services' users within the daily medical practice.) This is the time to choose between Vienna, Paris and Trieste or New York, Indianapolis and Basel.
- Active citizenship: Contributing to the ability of MH services' users to defend their rights and broadening the support of the general population in their claims
- Strengthening prevention by establishing the balance of mind and body from early childhood within primary education.
- Improving the quality of life for the elders
- Strategic synergies of MH with the Sport and Wellbeing sectors
- Fighting for evaluation of the applied MH policies and accountability of MH services' providers
And finally, if we want to go a little deeper....
- Reduction of political control through biopower / bioethics
- Reflection on the foundations of modern western civilization as they were developed on the basis of the Cartesian "cogito" and the separation of spirit and body.

Now that we know what ALMH means, we can attempt to investigate whether the current elements that characterize it correspond to the definitions for the movement that we have mentioned above:

DEFINITIONS	FEUTURES
A change of position or location	We can talk about a change of point of view: from individual perceptions we have moved to a structured complex of views. In a relatively literal approach, we could recognize a strategic move from the periphery (independent surveys and national actions) to the center (with the establishment of the European Network of Active Living for Mental Health – ENALMH) in Brussels, Belgium).
A series of actions and events taking place over a period of time and working to foster a principle or policy	We can define the years since 2017 up to now as a short period of time but plenty of actions. Regarding the “fostering a principle or policy” part we could say that this is an ongoing process.
A campaign to create some change or achieve a goal	In practical terms two campaigns have been launched: “Life is like a bike” campaign within MENS project and “Sport helps” within the World MH Day 2019. In general terms the promotion of the overall ALMH context is characterized by interesting campaigns but with a poor final reach and impact.

<p>A group of people with a common ideology who try together to achieve certain general goals</p>	<p>The creation of a movement is by principal a from bottom to top process. So, it is reasonable that if a group of individuals is not the source of a movement, then these groups should/will be created during the development process of the movement as long as a similar dynamic is expressed.</p> <p>A careful study of the evolution process since 2016 does not provide such a result.</p> <p>The activities developed so far have taken a variety of forms: independent academic research and individual or collaborative actions of bodies. Mass independent individual activation that would arise from the diffusion of common principles and objectives was always a question of a common ideology in the sense of principles and objectives. Examples:</p> <ul style="list-style-type: none"> - the individuals involved so far do not represent themselves, but the entities involved in collaborative initiatives acting as partners of European projects and it is not always certain that an internal collective treatment of the body is expressed on a case-by-case basis. - The active and independent participation of mentally ill people has not yet been registered, while the response of other social collectives is extremely low. - The institutional approach of the presumptively most relevant entity, the ENALMH Network, is typical, where there is no provision for the participation of individuals but only entities without open public processes of any kind (committees, groups etc).
<p>A mechanism that produces or transmits motion</p>	<p>?????</p>

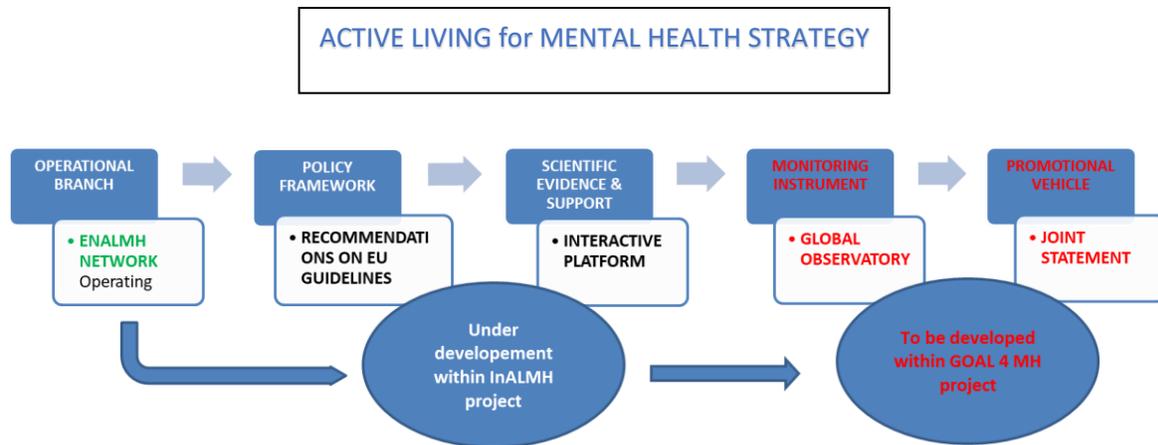
According to the above elaboration, it is obvious that we cannot yet speak of the existence of an ALMH movement but of a process of genesis and development, which is why the term "movement" appears hesitantly and only in the later relevant documents, trying gradually to replace terms such as initiative or framework.

However, we have left out of comments the last definition according to which "movement is a **mechanism that produces or transmits motion**".

This definition will lead us to the last part of the article, which is the main point of our interest.

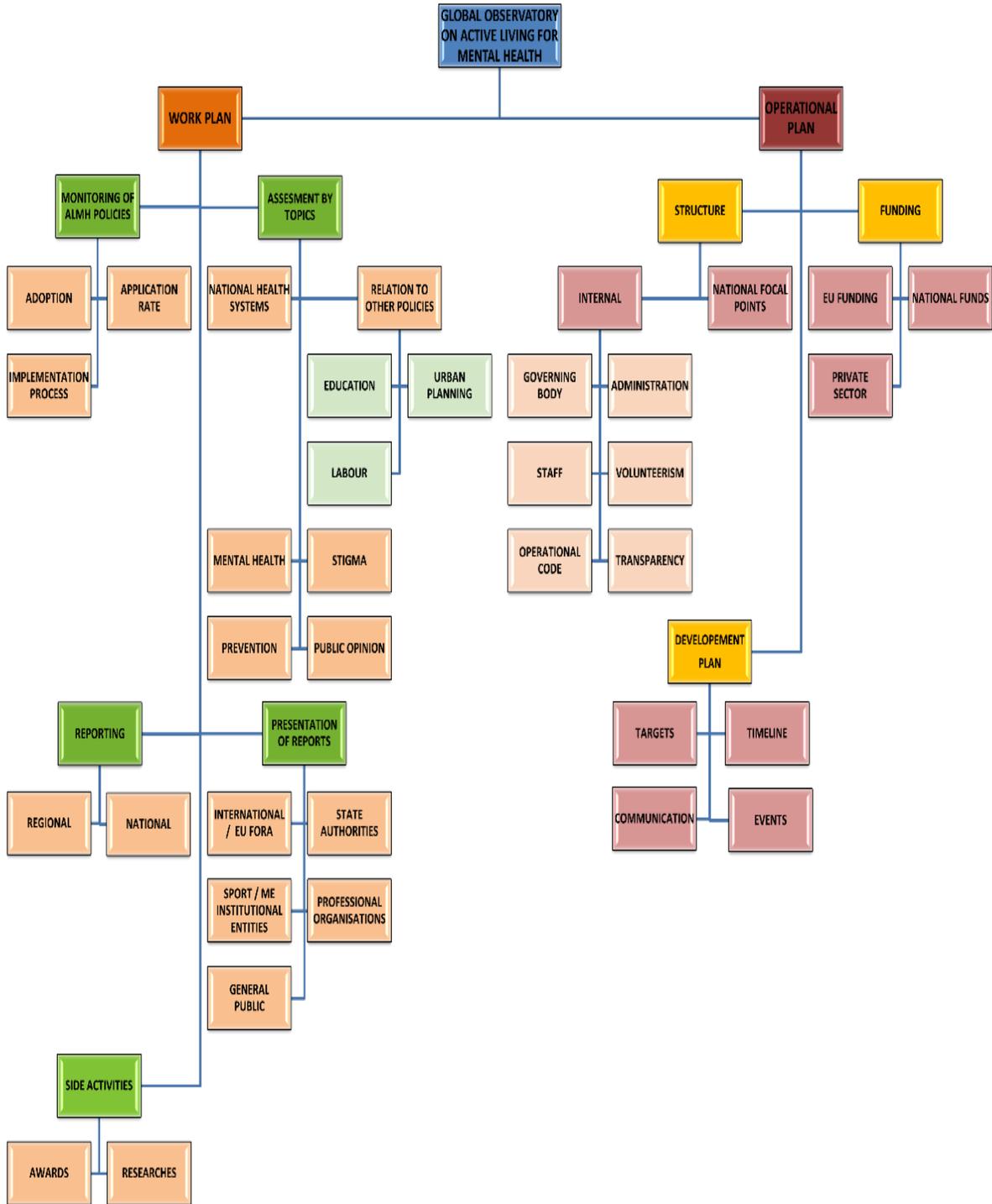
C. GLOBAL OBSERVATORY ON ACTIVE LIVING FOR MENTAL HEALTH

In April 2020, a proposal of ENALMH with the acronym GOAL4MH was prepared and submitted to ERASMUS+ Program. The goal was none other than the definition we left last: to create a mechanism to "produce and transmit the motion" that the ALMH movement needs. This objective was part of an elaborated development strategy. This strategy was also the main framework for documenting the proposal and was presented with the following graph:



In the context of this strategy, the "Global Observatory on ALMH – GOAL4MH" is not just another European project but the ultimate instrument for the establishment and promotion of ALMH. Its creation and successful operation has two dimensions: the first is **internal** as it refers to the organizational structure and the operational plan that is required and it is easily described. But the second is extroverted and consists of the potential of society that is created or exists, is produced, entrenched, and constantly promotes the development process. It was really moments of enjoyment to develop, cell by cell, the graph that presents GOAL4MH in full operation. But they were also moments of intense concern, not to say fear, because it was increasingly understood that a two-level edifice was designed: under the first layer of the graph that follows as a floor plan of a ground floor, there is a second, invisible one, like a floor plan of a corresponding basement, which refers to the state authorities, related stake holders and community entities and societal processes with which the content of each cell is connected.

For example: in the ground floor room of the small light green cell "**LABOUR**" at the sixth row of the graph that follows, we are greeted by the competent person or group operating in the specific field for GOAL4MH while in the basement a lot of stakeholders must stand there to work with such as trade unions, employees' organizations, EU and national Parliaments, Ministries of Labour, Finance, Health, professional MH organizations, universities, etc. It is perfectly reasonable for the observed field to be infinitely larger than its observer, but in the current phase of propagation of ALMH only a **movement** can ensure to the potential and the effective profile needed for the Observatory.



GOAL4MH is not designed as a bureaucratic mechanism for collecting and processing statistics but as a mechanism for the promotion, push and advocacy for the integration of ALMH. Its most important arguments, for this fairly long first period, will be the very poor performance observed at the level of ALMH policies and their application and the actions to reveal this low level. So, without a movement fighting for the ALMH vision and mission as described in the parenthesis of paragraph B

- the overall endeavour is at risk of a failed attempt to create a bureaucratic mechanism
- the intended grant will not enough even for the half of the work to be produced

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- mentally ill will not be interested in participating and supporting it, and finally
- the ideals of ALMH will be tacitly eroded by the absence of energy for the benefit of the forces that oppose it.

The GOAL4MH proposal for 2020 did not receive a grant decision as it was just 8 points lower the evaluation threshold and was re-submitted last May. Perhaps this first failure was a protection for the movement given the absence of the active team necessary for critical initiatives of such magnitude. The required administrative adequacy and effectiveness is mainly a matter of motivation, inspiration, dedication to the goal and the ability to gather forces together and much less the result of conventional operational capacity.

The problems that appeared within the implementation of the InALMH project confirm this argument. According to the project plan for the first of the two main deliverables of the project, the **"Recommendations on EU Guidelines for the use of Physical Activity on Mental Health"(*)** the following were foreseen:

- the publication of a draft version of the document
- **a three-month public consultation at European level**
- the validation of the results of the consultation at the final conference of the project and the publication of the final document.

The planned three-month public consultation doesn't seem possible finally take place as the time needed no longer seems to be left. However, this action was envisaged as the means of activating forces of the society at large which, although not partnering the project, are absolutely necessary to achieve the goals of the movement. At the basis of this strategic approach lies the conviction that

- Financial instruments do not create movements. Official policies are the results of
- European projects are not an end in themselves but simply tools to achieve goals and transformations for the ultimate benefit of the target groups and not the partners.

Let us hope that, within in the pending re-submitted GOAL4MH proposal, the strong presence of motivation, inspiration, the commitment to the goal and the ability to gather forces together, that is the *sine qua non* components of a movement, have been ensured. The main means to achieve these is the **Joint Statement** mentioned in the development strategy chart as it is stated that *"the Joint Statement will contribute to networking among stakeholders and awareness-raising activities on the added value of sport and physical activity for mental health in relation to the personal, social and professional development of individuals."*

Nicos Andreopoulos

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September 8th, 2021

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(*) At the moment available only at <https://bit.ly/3BSpmGw>