

Minding Our Bodies: Mental Health and Physical Activity Roundtable

Feedback Summary

The Minding Our Bodies: Mental Health and Physical Activity Roundtable, held at the Metro Central YMCA in Toronto on May 5, 2011, was the project's first large-scale public event designed to share lessons learned from the pilot phase and to build capacity for partnerships and professional networking. Feedback from participants was gathered through a paper and online survey. The findings are summarized below. Lessons from the day will help the Minding Our Bodies project team plan future knowledge exchange events that bring a cross-sector audience.

Background

Minding Our Bodies (www.mindingourbodies.ca) is a mental health promotion initiative of the Canadian Mental Health Association, Ontario in partnership with YMCA Ontario, York University Faculty of Health, Mood Disorders Association of Ontario and the Nutrition Resource Centre. Financial support for Minding Our Bodies is provided by the Ministry of Health Promotion and Sport through the Communities in Action Fund. The Mental Health and Physical Activity Roundtable was sponsored by a private donation.

The Minding Our Bodies project has two main objectives:

- To build capacity within the community mental health system in Ontario to promote physical activity and healthy eating for people with serious mental illness to support recovery, and
- To help mental health service providers, together with community partners, develop and deliver evidence-based programs, improve access to local resources, and promote social inclusion.

Part of the work to achieve these goals is to build effective cross-sectoral partnerships and to raise awareness about the connections between the mental health and physical activity. Since the project began in 2008, it has gained knowledge through a literature review, environmental scan, pilot programs in various settings and an emerging community of practice. The idea to have a roundtable to exchange knowledge between the mental health and physical activity sectors emerged from this community of practice and was designed to showcase the lessons learned and the best and most promising practices for successful, sustainable physical activity programs for people with serious mental illness.

The Mental Health and Physical Activity Roundtable was held on May 5, 2011 at the Metro Central YMCA in Toronto. Approximately 100 participants from the community mental health sector and the physical activity sector were in attendance. The specific learning objectives included:

1. Demonstrate the connection between mental health and physical activity.
2. Raise awareness of the important role that people with lived experience of mental illness can play in planning and delivering physical activity programs and the benefits of engagement.
3. Empower community mental health staff with tools and approaches to encourage movement along the physical activity continuum.

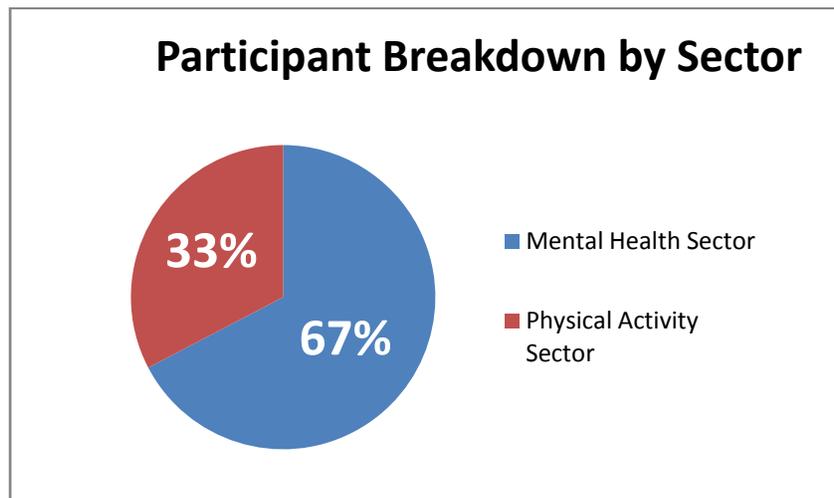
4. Share lessons learned from the Minding Our Bodies physical activity phase.
5. Showcase successful models that build bridges between the mental health and physical activity sectors.
6. Raise awareness of services and start to weave connections for greater partnerships to be built between physical activity and mental health groups (e.g., internships for students, facilities)

The roundtable was organized with the support of a cross-sector planning committee, including: Tom Allen (Physical Activities for Consumer Survivors), Kelly Arbour-Nicitopoulos (University of Toronto), Chris Arden (York University), LJ Bartle (Parks and Recreation Ontario), Samantha Casmeay (YMCA), Louise Daw (Physical Activity Resource Centre), Kelly Delaney (CMHA Durham), Natasha Golding (Centre for Addictions and Mental Health), Paul Gorczynski (University of Toronto), Fotini Iriotakis (PRO), Roni Jamnik (York University / Ontario Society for Health and Fitness), Bahar Tajrobehkar (York University student), Lynn Tougas (Kinesiologist), and Tia Wintre (PRO).

Who Participated in the Roundtable?

Total attendance at the roundtable was 101 participants, including 72 registrants and 29 non-registrants (volunteers, coordinators, speakers, and advisory committee members). One-third of participants came from the physical activity sector; two-thirds came from the mental health sector.

Figure 1



Survey Response Rate

Of the 101 participants, 57 responded to the feedback survey.

Appendices

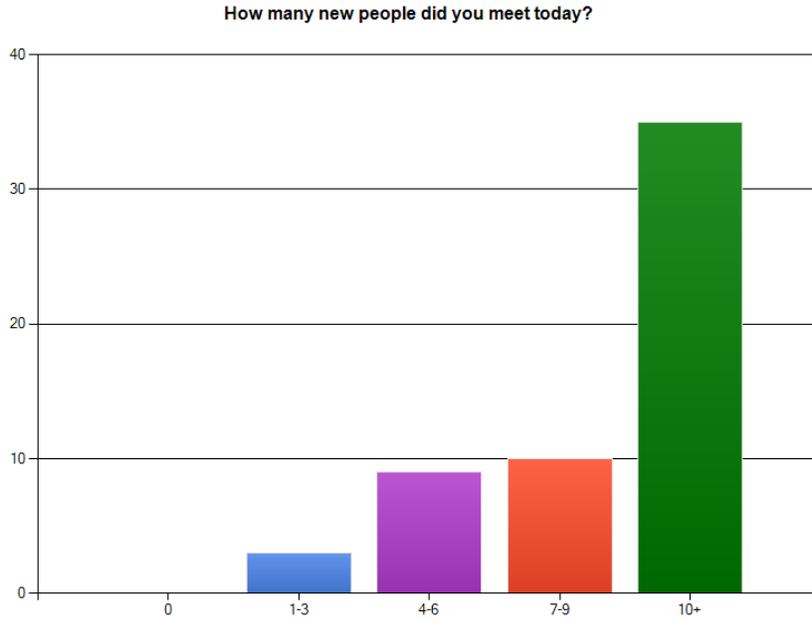
- Sample feedback form distributed at the roundtable
- Roundtable Agenda

PART 1: NEW CONNECTIONS

1) How many new people did you meet today?

The majority of participants met 10 or more people at the roundtable event.

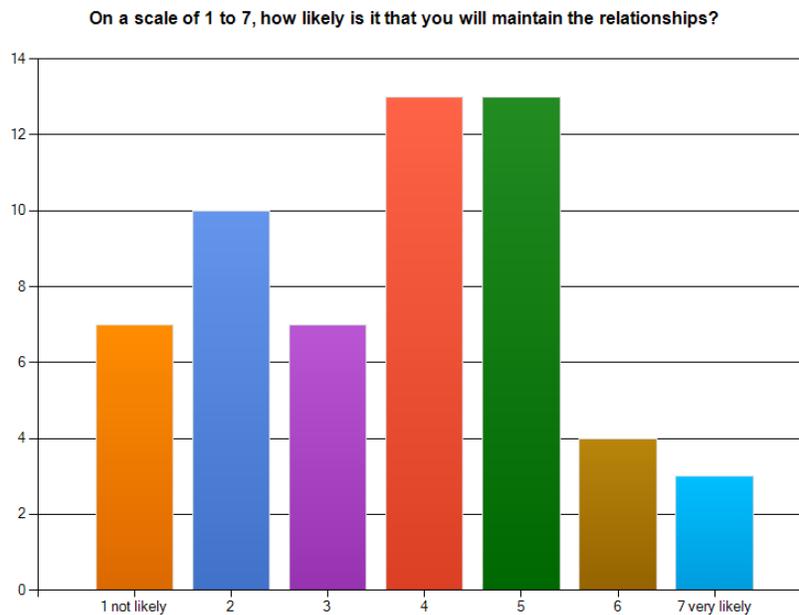
Figure 2



2) How likely is it that you will maintain the relationships?

Most people stated that on a scale of 1 out of 7, the rank was a 4 or 5 chance that they would maintain the relationships.

Figure 3

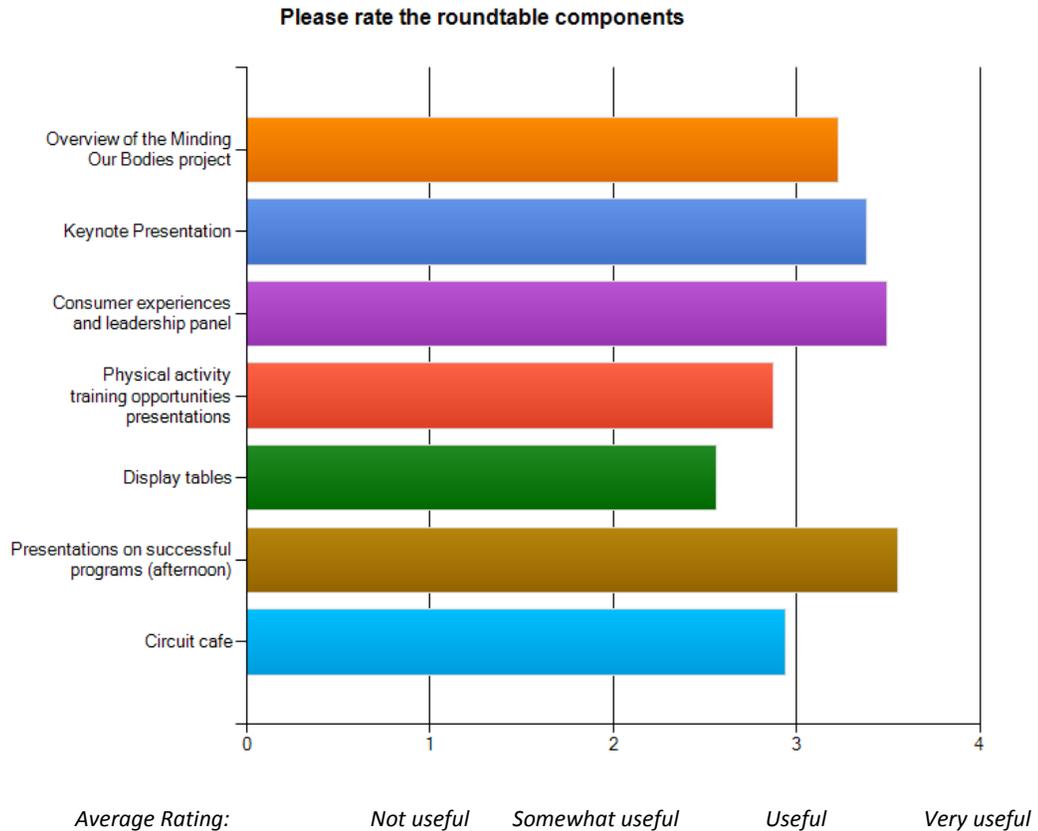


PART 2: LEARNING AND RESOURCES

3) Evaluation of the roundtable components

All components of the roundtable were rated by the majority of participants as useful or very useful. The presentations on successful programs and the panel on consumer experiences and leadership were the most highly rated elements. The display tables received the lowest score, with the majority of participants rating them as either “somewhat useful” or “useful.”

Figure 4



4) Take-home messages from the day

a. What were the most useful key messages from the roundtable?

The leading response for key message of the day was the recognition of the value of consumer/survivor peer input and leadership on this topic and at every stage of program delivery. Comments ranged from “Nothing about us without us” to “Peer support is instrumental to physical activity promotion.”

Another theme was understanding the link between physical activity and mental health: “there is growing support for connection between mental health and physical activity and that people have energy to develop ideas around this.”

Respondents expressed appreciation for learning about the breadth of programs and groups in place, and the range of creative ideas to overcome barriers and to motivate people: “Many successful and innovative programs to learn from.” “...knowing other groups are out there without having a physical expert/trainer on staff.”

Interdisciplinary collaboration was identified as a key factor to move forward: “We need to work together as a community to raise awareness and create relationships to decrease stigma and remove barriers to involvement.”

There were responses that reflected the physical activity lessons around the difference between a physical activity focus and a “fitness” or “exercise” focus, changes to the PAR-Q and the research around the efficacy of physical activity for mental health.

b. Do you intend to share what you have learned with others? With whom?

82% of respondents anticipated sharing what they learned with others such as their peers, clients, other staff, or friends.

c. Are there other follow-up actions that you hope to take?

63% of respondents provided examples of follow-up actions stemming from the roundtable. Most are interested in continuing to network with specific individuals or organizations from the event or taking the information out to others. For example:

- “get in touch with organizations to discuss opportunities to collaborate in the future”
- “by sharing information with members/agency, I am looking forward to using the new information in future planning/sustainability”
- “Talk to general members of the public. Will pass the info to the Aboriginal population of Toronto”
- “contacting people who might want the services of a boxing coach”

Many also expressed an interest in creating new programs or building on existing ones:

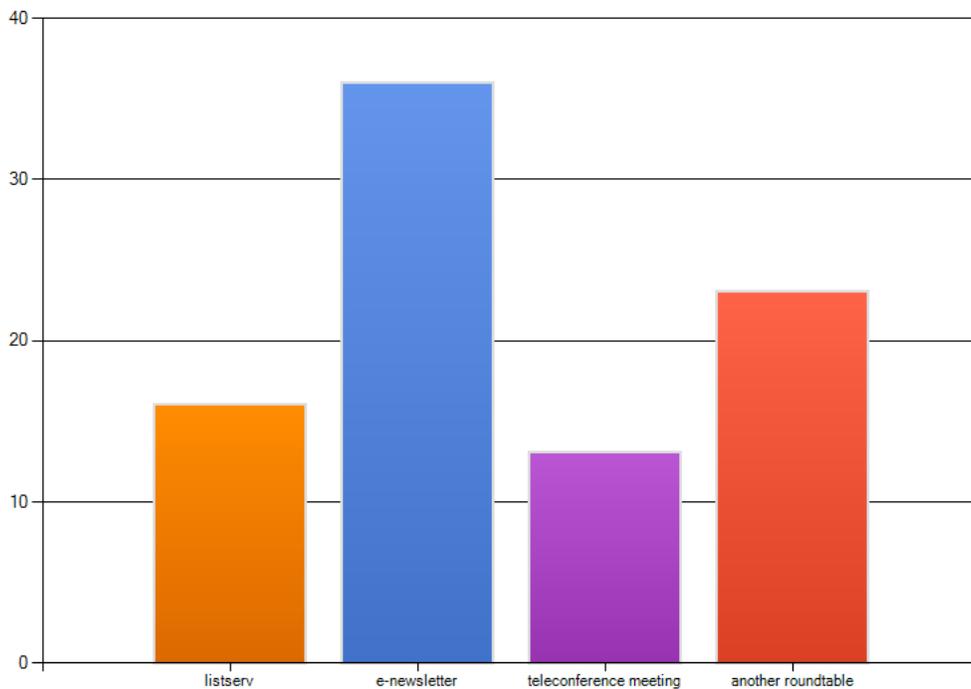
- “I joined WRAP, and may become a Buddy with someone.”

- “[I will] implement a more formal plan for physical wellness at my agency”
- “I hope to follow up with some of the programs and research presented today to further educate myself on the links between physical activity and mental. From there, I'd like to use that info to enhance the programs my organization offers.”
- “To implement women only programming and connect with dietician and maybe facilitate women's program highlighted in keynote.”
- “Would like to develop a fitness starter kit for participants- including running shoes, towel, water bottle, gym lock”
- “...better understanding of challenges faced by clients with mental health issues. Study more nutrition so as to be better at advising on issues of diet and its effect on health”

d. What would be useful to support your follow-up actions?

Participants indicated that an e-newsletter and another face-to-face roundtable would be the most useful tools to support their follow-up actions.

Figure 5 What would be useful to support your follow-up actions? (check all that apply)



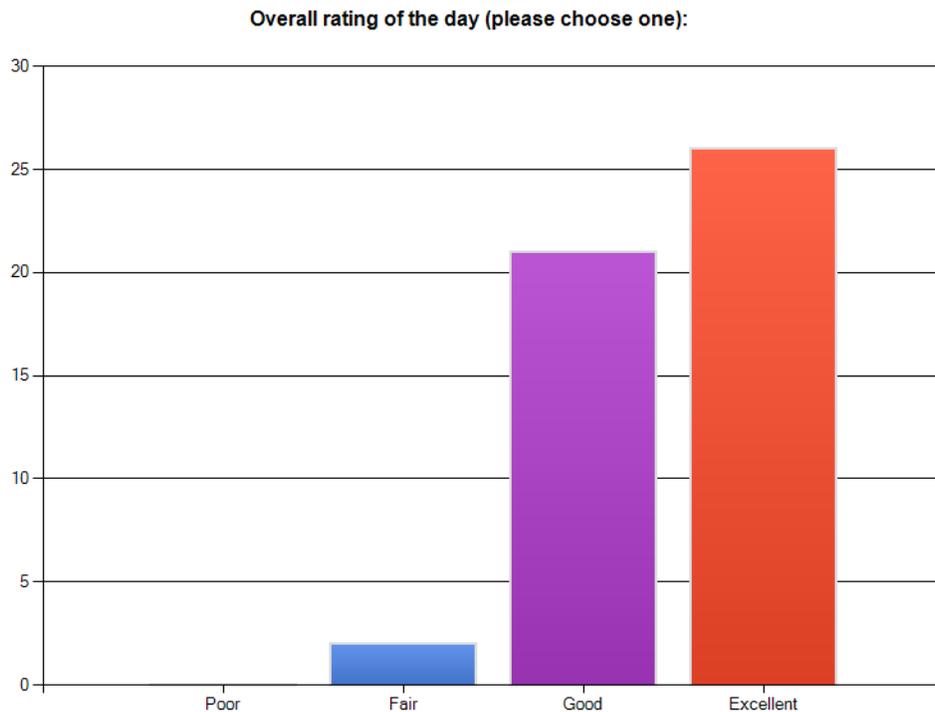
Other suggestions included the use of social media, “being surrounded by active people,” a “full conference” on the topic, “keep the network developing and to learn more about resources/new research/best practices,” and a “provincial thrust to fund physical activity into mental health programming.”

PART 3: OVERALL RATING AND FORUM FEEDBACK

5) Overall rating of the day

The majority (96%) of respondents rated the day as good (42.9%) or excellent (53.1%).

Figure 6



5) How could we improve this roundtable?

Scheduling and format were common themes among the suggested improvements. Several respondents noted the day could have kept more to schedule. Suggestions for achieving this included allowing more time for the information, focussing the presentations more tightly, or having a two-day workshop.

The format could have been more interactive and solution-focused:

- “Ask the audience what issues they are facing at their home sites and then problem solve (in small group discussion?)”
- “More action focused (ie. developing practical, actionable steps everyone can take when they return to their organizations. Attendees could return with an action plan).”
- “more opportunity for shared dialogue on mutual issues of concern”

The length of time seated and passive was a concern. The day could have included more breaks and active movement.

Several people commented on the peer leadership panel:

- “The panel discussion had so much more potential. The questions to the panelists could have been clearer.”
- “Panel mediation was distracting, wandering around the room at times interrupting the panel, not familiar with ??’s actually detracted from panel”
- “Panel discussion was too long and some of the questions to panel seemed to provoke similar answers; however it seemed to be the presentation that elicited the most questions from the audience.”

Other suggestions:

- Provide handouts of the presentation slides
- Mental Health Week is not an ideal time since it is very busy

7) What future workshops would be useful? For what audience?

There were some innovative workshop suggestions, including:

- Bringing in companies from the private sector that are interested, or are already partnered with non-profit organizations
- Consumer success stories and how consumer survivors can navigate available resources within the community
- Smoking management/cessation and mental illness
- Have consumer/survivor fitness instructor/personal trainer courses
- Discuss the relationship between mental health and chronic disease
- Role of nutrition
- Discuss multicultural needs.

See the appendix for the complete list of suggestions.

8) Other Comments

- “Loved the variety of members in professions, the numerous locations, and services, along with the invitation to consumers as the professionals.”
- “It is all good. We can never be too educated. The speakers were all great, well-informed and brave.”
- “Thank you. Please keep up the website and have yearly meetings like this.”
- “Great day. It’s amazing that we have a day dedicated to this.”
- “Thanks for the opportunity to be part of this event.”

Appendix A:

Feedback Form — Physical Activity and Mental Health Roundtable, May 5, 2011

Part 1: New Connections

1. How many new people did you meet today? (Please circle one):

- a. 0
- b. 1-3
- c. 4-6
- d. 7-9
- e. 10+

2. How likely is it that you will maintain the relationships?

1	2	3	4	5	6	7
not very likely						very likely

Part 2: Learning and Resources

3. Please circle the number that best describes your evaluation of the roundtable components:

	Not useful	Somewhat useful	Useful	Very useful
a. Overview of the Minding Our Bodies project	1	2	3	4
b. Keynote Presentation	1	2	3	4
c. Consumer experiences and leadership	1	2	3	4
d. Physical activity training opportunities	1	2	3	4
e. Display tables	1	2	3	4
f. Presentation of successful programs	1	2	3	4
g. Circuit cafe	1	2	3	4

4. Take-home messages from the day

a. What were the most useful key messages from the roundtable?

b. Do you intend to share what you have learned with others? With whom?

c. Are there other follow-up actions that you hope to take?

d. What would be useful to support your follow-up actions? (check all that apply)

listserv e-newsletter teleconference meeting another roundtable

other: _____

Part 3: Overall Rating and Forum Feedback

5. Overall rating for the day (please circle one): Poor Fair Good Excellent

6. How could we improve this roundtable?

7. What future workshops would be useful? For what audience?

8. Other comments?

If you prefer to complete your evaluation online, please visit:
<http://www.surveymonkey.com/s/MindingOurBodies>
THANK YOU!



Appendix B:

Mental Health and Physical Activity Roundtable: Agenda

Thursday, May 5, 2011

8:30 am–4:00 pm

Metro Central YMCA, Auditorium

20 Grosvenor Street, Toronto, Ontario

Learning Objectives

The Mental Health and Physical Activity Roundtable will bring together individuals and organizations in the community mental health sector and the physical activity sector to learn about planning and implementing successful, sustainable physical activity programs for people with serious mental illness.

7. Demonstrate the connection between mental health and physical activity.
8. Raise awareness of the important role that people with lived experience of mental illness can play in planning and delivering physical activity programs and the benefits of engagement.
9. Empower community mental health staff with tools and approaches to encourage movement along the physical activity continuum.
10. Share lessons learned from the Minding Our Bodies physical activity phase.
11. Showcase successful models that build bridges between the mental health and physical activity sectors.
12. Raise awareness of services and start to weave connections for greater partnerships to be built between physical activity and mental health groups (e.g., internships for students, facilities)

Registration

Participation fee of \$20 (includes lunch); subsidies available

Register directly at <http://www.eventbrite.com/event/1459656873>

About Minding Our Bodies

MOB is an initiative of the Canadian Mental Health Association, Ontario, in partnership with the Mood Disorders Association of Ontario, Nutrition Resource Centre, YMCA Ontario and York University's Faculty of Health, with support from the Ontario Ministry of Health Promotion and Sport through the Healthy Communities Fund. For more information, visit www.mindingourbodies.ca



Roundtable: Thursday, May 5, 2011

Location: Metro-Central YMCA - 20 Grosvenor Street, Toronto, Ontario

- 8:30–9:00 am Breakfast and networking
- 9:00–9:10 am Mental health and physical activity warm-up
- 9:10–9:25 am Overview of the Minding Our Bodies project (Launch of Minding Our Bodies video)
- 9:30–10:15 am Keynote presentation: U of T (Paul Gorczynski and Kelly Arbour-Nicitopoulos)
- Overview of the connection between physical activity and mental health
 - Barriers and opportunities based on research at CAMH
- 10:15-11:15 am Consumer experiences and leadership
- Haldimand-Norfolk Resource Centre
 - CMHA Thunder Bay
 - Physical Activity for Consumer Survivors
 - “Active Recovery” CMHA Cochrane-Timiskaming
- 11:15–12:15 Physical activity training opportunities
- Parks and Recreation Ontario
 - Ontario Society for Health and Fitness
 - YMCA
- 12:15–1:00 pm *Lunch / Display tables*
- 1:00–1:45 pm Presentation of successful programs
- CMHA Durham
 - “FRESH” Gerstein Centre
 - CMHA Cochrane-Timiskaming
- 1:45 – 1:55 pm Circuit Café introduction and preparation
- 2:00–3:00 pm Circuit Café
- 3:05–3:35 pm Connections reporting
- 3:35–4:00 pm Evaluation form completion / Networking and farewells