"In the Sport I Am Here": Therapeutic Processes and Health Effects of Sport and Exercise on PTSD

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Introduction:
- Posttraumatic stress disorder (PTSD) is a mental disorder resulting from an imbalance between major stressors and available resources [1].
- Refugees from conflict regions are particularly vulnerable to developing PTSD due to experiences of pre- and post-migration traumatic events [2].
- The diverse symptoms experienced by refugees living with PTSD (i.e. lack of motivation, fatigue, negative mood, intrusive memories, pain sensations, social isolation) suggests it is necessary that treatment for PTSD must consider the psychological, the social, and the physical [2, 3, 4].
- In this regard, physical activity has emerged as a valuable and holistic therapeutic remedy yielding beneficial effects to traumatized refugees, torture and war survivors.

Knowledge gap:
- A variety of physical activity therapies have shown to be effective in reducing symptoms of PTSD, highlighting evidence for potential processes involved (e.g. enhanced body awareness) [5, 6].
- Recently, it has been suggested there may be other processes involved indicating that one specific process cannot explain the psychological effects of sport and exercise [7, 8].
- AIM: Construct a more holistic awareness of the complex phenomena of diverse processes of sport and exercise to increase our understanding about HOW benefits may be gained in people with PTSD.

Design:
- Case-study of a single war- and torture survivor (Rashid, 20 years) diagnosed with PTSD and Depression Disorder (ICD-10 Classification).

Intervention:
- 3 month sport and exercise therapy program ("Movi Tune").
- 2 weekly sessions (90 mins).
- Focusing on sport, exercise and movement therapy to facilitate training, learning and experience.
- Semi-structured interviews conducted at beginning and end of program with participant and psychotherapist separately;
- Participant observation conducted within activity sessions.

Data collection:
- High physical skills and automatically were demonstrated during playing situations suggesting the individual’s attentional focus was completely on the present task performance;
- Engagement while playing helped minimize pain sensations and negative thoughts, facilitating positive affective states, motivation and more mastery experiences.
- Practicing sport provided a temporary suspension from the individual’s recurring thoughts, flashbacks of traumatic events, and invasive memories, turning attention towards present moment, and experiencing positive affective states.

Findings

Top Psychological Effects

Exposure

Motivational -Restorative

Distraction

Performance focus

Mastery experiences

Being present

Task focus

Group experiences

Mastery experiences

Positive effect

Activation & motivation

Body sensation focus

Body- and self-experiences

Knowledge acquisition

Coping with pain

Conclusions:
- A holistic set of diverse processes pointed towards a distraction, motivational-restorative, and exposure effect that can take place in sport and exercise therapy with war and torture survivors.
- The top psychological effects contributed to an improved sense of well-being of the participant (i.e. enjoying life more, less depressive moods, motivated for living), a respite from PTSD symptoms, positive body- and self-experiences, and exercise adherence.
- The findings go beyond the existing literature by endorsing the assumption that one process or mechanisms cannot explain the effects of sport and exercise on mental health, Specifically, the occurrence of two different attentional foci provided important therapeutic opportunities: one on bodily sensations and one on present task performance during playing.

Significance:
- Support for the application of sport and exercise in the rehabilitation and recovery process of war and torture survivors and people living with PTSD.
- An in-depth account of a single participant adds to the existing literature providing implications for practitioners on how to effectively and adequately plan and implement sport and exercise programs in the PTSD population, which precautions need to be considered, and which effects and processes may be targeted.

References:

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Avoiding the “My Way” Syndrome

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