



Adults With Severe Mental Illness Get In SHAPE

Improving the health of adults with severe mental illness through involvement in community wellness programs

SUMMARY

In SHAPE is a wellness program to improve the physical health and quality of life, reduce the risk of preventable diseases and enhance the life expectancy of people with severe mental illness. Monadnock Family Services, a community mental health agency located in Keene, N.H., in the rural, southwestern part of the state, launched the program in 2003.

The Robert Wood Johnson Foundation (RWJF) funded In SHAPE from 2004 to 2008, as part of its *RWJF Local Funding Partnerships* program. For more information, go to the program [Web site](#). Also see the [Grant Results](#) on the program.

Context

Studies show that individuals with severe and persistent mental illness such as schizophrenia and bipolar disorder are at increased risk for chronic diseases, including diabetes, hypertension, cardiovascular disease and nicotine dependence. And they have a life span that is 10 to 25 years shorter than that of the general population.

“People with severe mental illness are the most socially excluded, marginalized members of society,” says Ken Jue, senior executive of Monadnock Family Services. By encouraging participants to become involved in physical fitness activities, In SHAPE works to integrate individuals who were previously isolated into a community where they feel valued, welcomed and accepted.

The Project

In SHAPE participants work with trained health mentors to create a “**S**elf **H**ealth **A**ction **P**lan for **E**mpowerment” that includes:

- Access to fitness activities provided by program partners (see [Appendix](#))
- Nutrition counseling and education

- Smoking cessation support
- Access to primary health care through the Cheshire Medical Center–Dartmouth Hitchcock Clinic
- Motivational celebrations every 12 weeks at which participants receive incentive items and verbal recognition for their efforts

Evaluation

Dartmouth Medical School (Department of Community and Family Medicine, Dartmouth Psychiatric Research Center, Center for Aging and the Dartmouth Institute for Health Policy and Clinical Practice) researchers conducted an evaluation of In SHAPE from August 2004 to August 2006. The Endowment for Health and the National Institutes of Mental Health (NIMH) supported the evaluation. The evaluators looked at whether participants demonstrated improvements in:

- Physical activity and dietary behaviors
- Health indicators
- Psychological functioning and symptoms

The federal Centers for Disease Control and Prevention (CDC) and the NIMH awarded grants for the Dartmouth researchers to conduct a randomized controlled study of the program at mental health agencies in Concord, N.H., from 2006 to 2008 and in Boston, Mass., from 2007 to 2012.

Key Results

Project staff at Monadnock reported these results to RWJF:

- In SHAPE served 435 individuals with mental illness in rural, southwestern New Hampshire and provided services to 41 of their family members. The involvement of family members in lifestyle changes improves the chance of success for the program participant, Jue says.
- As of August 2008, In SHAPE had more than 150 active participants, with an attrition rate of 20 percent, compared to the 25 percent to 33 percent average dropout rate for healthy adults enrolled in formal exercise programs.
- The average length of stay in the program is 9.69 months. As of August 2008, of the 157 active program participants:
 - Fifty-four were in the program for less than one year.
 - Twenty-nine were in the program for one to two years.

- Twenty-four were involved for two to three years.
- Fifty were in the program for three to four years.
- Staff promoted In SHAPE through presentations made to:
 - Substance Abuse and Mental Health Services Administration
 - National Council on Community and Behavioral Health
 - University of Pittsburg Medical Center
 - Georgia Consumer Network Annual Conference 2006
 - Allegheny Health Choices Inc., Tri County Annual Conference 2007
- National, local and trade publications and media ran stories on In SHAPE:
 - *New York Times*
 - *Los Angeles Times*
 - *Mental Health Weekly*
 - *New Hampshire Public Television*
- Staff disseminated the In SHAPE model to more than 80 mental health centers around the country that might be good candidates to implement the model.

Key Findings

The Dartmouth researchers reported their findings in the article “A Pilot Evaluation of the In SHAPE Individualized Health Promotion Intervention for Adults with Mental Illness” in the December 2010 issue of the *Community Mental Health Journal*. (Abstract available [online](#).)

- Some 76 In SHAPE clients participated in the evaluation and reported:
 - Increased number of hours exercising per week
 - Increased overall activity and participation in vigorous activities
 - Feeling more satisfied with their physical fitness
 - Increased readiness to limit caloric intake
 - Having greater confidence in social situations
 - Reduction in waist circumference, blood pressure and depressive symptoms

The researchers conducted a small qualitative evaluation, interviewing eight In SHAPE participants who lost at least 10 pounds or reduced their waist size by at least 10 centimeters. They reported the findings in “Learning What Matters for Patients: Qualitative Evaluation of a Health Promotion Program for Those With Serious Mental Illness,” published in *Health Promotion International*. (Article available [online](#).)

- Participants reported three areas in which the program was most helpful in promoting physical health improvement:
 - *Individualized interventions promoting engagement in the program.* The In SHAPE program helped capitalize on clients’ interest in healthier lifestyles by providing support to negotiate barriers.
 - *Relationships with health-promotion program employees.* Participants remarked that the kindness of staff, the support of health mentors and the relationships formed with other participants seemed to facilitate program success.

“The participants talked as much about the relationships they formed as they did about diet and exercise changes that they made,” the paper noted.
 - *Self-confidence resulting from program participation.* Participants reported that by gaining control of their health through diet and exercise, they gained self-confidence as they developed new social skills and healthy behaviors and an enhanced sense of self-worth.

Two Participant Stories

The stories of Ron and Kathy illustrate the impact of In SHAPE on participants.

Ron’s Story: Scaling Mountains

Ron is a 38-year-old man with schizophrenia living in rural New Hampshire. Despite taking a cocktail of powerful psychotropic medications, his “voices” are still active.

Prior to joining In SHAPE, he was 70 pounds overweight, smoked three packs of cigarettes a day, ate only processed food and consumed at least three liters of soda daily. He had been unemployed for more than a decade, receiving Social Security disability benefits.

One year after joining In SHAPE, Ron’s life had improved dramatically. He lost 70 pounds, no longer smokes and adopted a healthier diet. He no longer drinks soda—only water. Ron has a regular fitness routine, which includes hiking a 3,000-foot-high mountain two to three times per week. For the first time since his 20s, he is holding a steady job in the butcher shop of a local grocery store.

According to Jue, Ron reports feeling better and having more energy and more confidence. All of this helps him control his voices rather than his voices controlling him.

Kathy's Story: No More Hibernating

Kathy, a soft-spoken woman in her early 50s, has long managed a lengthy list of health issues, including fibromyalgia, major depression and dissociative disorder. She has been participating in In SHAPE for 15 months and now sustains an exercise regimen of morning yoga, walking, 30-minute workouts at a women's gym and a yoga routine before bed.

“When I first started this program, I could only walk for five minutes. Now I walk for 90 minutes,” Kathy reports. “Before this program, I vegetated a lot.”

Kathy credits her new routine to her mentor, Pam, who twice a week accompanies her on hourly sessions at the gym and on walks. “I can talk about anything with her, and just being with someone is important. Before, I hibernated. I didn't want to be with anybody.”

For the first time in years, Kathy is pursuing vocational goals. She wants to earn a paraprofessional certificate to work with children in schools. She visits the vocational rehabilitation office by herself and is working with counselors to find the training she needs to accomplish her goals.

*Life isn't perfect. Kathy says she still gets depressed and wants to curl up somewhere. But she tells herself: “You're in this program, you gotta do it. If you don't do it there's no use being in the program.” (from *In SHAPE: Shaping the Future of Mental Health*)*

Lessons Learned

1. Place an emphasis on sustainability from the get-go. “Without long-term planning, any new program or project that takes off will falter,” Jue said. Work each day with long-term sustainability in mind.
2. Funders can provide more than just money. The project engaged one potential funder as a consultant and advocate; that funder helped the project get funding from other sources. Funders must be part of your overall network, Jue said, “The relationship does not need to be narrowly defined.”
3. A board of directors must be willing to take risks and innovate. Many boards are not willing to do this. The CEO has to have a good partnership with board leaders and convince them that taking risks is part of what we do, Jue said. CEOs should work to build a board of directors' culture of acceptance of innovation and risk.

Funding

RWJF provided a \$415,000 grant for the project from July 2004 to June 2008. Other funding for the project came from:

- New Hampshire Endowment for Health (\$257,453)
- Hoffman Family Foundation (\$95,000)
- Cogswell Benevolent Trust (\$75,000)
- Dartmouth College (\$74,080)
- New Hampshire Charitable Foundation (\$20,000)
- Monadnock United Way (\$10,000)
- Monadnock Community Foundation (\$7,500)
- Harvard Pilgrim Health Foundation (\$5,000)

Afterward

The Agency for Healthcare Research and Quality (AHRQ) posted an innovation profile titled “Exercise and Nutrition Program Helps Individuals With Serious Mental Illness Develop Healthier Lifestyles, Improve Fitness and Mental Well-Being” on its [Health Care Innovations exchange Web site](#) on June 8, 2009.

From 2009 to 2014, the National Institute of Mental Health is funding research replications in all 10 New Hampshire Community Mental Health Centers. The grants were awarded to Dartmouth Medical School’s Center for Aging and Healthy Living to study the implementation process and effectiveness of the programs.

The In SHAPE program is being replicated in mental health agencies in Flint and La Peer County, Mich., and in Providence, R.I.

The state Medicaid agencies in Michigan and New Hampshire now provide partial, but significant, reimbursement for aspects of the program.

In April 2010, the In SHAPE program received the first annual Case In Point Platinum Award in the wellness/prevention program category. Presented by Rockville, Md.–based health care publisher Dorland Health, [the awards program](#) recognizes innovative case management programs working to improve health care across the care continuum.

The plan for In SHAPE moving forward is to place greater emphasis on the nutrition, healthy eating and smoking cessation aspects of the program, Jue said.

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RWJF Team: Vulnerable Populations

APPENDIX

In SHAPE Community Partners

Keene Family YMCA

Keene, NH

The Moving Company Dance Center

Keene, NH

Dartmouth Hitchcock Clinic/Cheshire Medical Center

Keene, NH

Dartmouth Psychiatric Research Center

Concord, NH

The Granite State Monarchs

Keene, NH

The Wyman Way Cooperative

Keene, NH

The Community Kitchen

Keene, NH

University of New Hampshire Cooperative Extension

Manchester, NH

Keene State College

Keene, NH

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(As provided by the grantee organization; not verified by RWJF.)

Articles

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Fact Sheet

In SHAPE: Shaping the Future of Mental Health, 2007. Monadnock Family Services.