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Abstract

There is a growing recognition of the importance of encouraging patients with mental health problems to become more active as an efficacious strategy to reduce the disability-associated burden. The aim of the current study was to investigate if there are differences in quality of life (QoL) outcomes between people with mental health problems that do and do not meet the recommendations of 150 minutes per week of physical activity. 109 (36♀) Ugandan in- and outpatients (mean age=34.2±10.2 years) (depression=7, bipolar disorder=31, schizophrenia=21, alcohol use disorder=50) completed the Physical Activity Vital Sign (PAVS) method and World Health Organization Quality of Life Assessment brief version. Those who did not achieve the minimum physical activity recommendations as assessed by the PAVS (n=63) had a lower physical, psychological, social and environmental QoL. The current data offer further evidence that the PAVS method might be an important risk identification tool in people with mental health problems. The feasibility and acceptability of the PAVS may help promote

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