

# Exercise for Mental Wellbeing

*Movement is one of the most powerful tools for your mind.*

NHS Aligned HSE Ireland Evidence-Based



## YOUR PERSONALISED EXERCISE PRESCRIPTION · FITT FRAMEWORK · NHS / HSE ALIGNED

<b>F</b>	Frequency	3–5 days per week. Consistency matters more than intensity — regular gentle activity is powerful
<b>I</b>	Intensity	Moderate aerobic is ideal. Even gentle walking counts. Avoid very high intensity if you feel anxious
<b>T</b>	Time	30 minutes per session. Short 10-minute bouts work too. Start from wherever you are today
<b>T</b>	Type	Any enjoyable activity: walking, yoga, cycling, swimming, gardening, group sports, dancing

### How Exercise Helps Your Mind

- › Releases natural mood-lifting chemicals (endorphins)
- › Reduces cortisol (the stress hormone)
- › Improves sleep quality significantly
- › Builds confidence and self-esteem
- › Proven as effective as antidepressants in mild-to-moderate depression (NICE)
- › Reduces anxiety sensitivity over time

### Starting When It Feels Hard

- › Start with just 5–10 minutes — it's enough
- › Go outside: fresh air and nature amplify benefits
- › Try parkrun.ie — free, friendly, no pressure
- › Exercise with someone — social connection helps
- › A short walk after meals is a great daily habit
- › Log your mood before and after — you'll notice!

★ Exercise is recommended by NICE as a first-line treatment for mild to moderate depression and anxiety. It's not about fitness — it's about how you feel. Even a short daily walk makes a real difference. Be patient with yourself and start small.

Pieta House — [pieta.ie](http://pieta.ie)

Samaritans — 116 123

Aware — [aware.ie](http://aware.ie)

HSE Mental Health

### ⚠ WHEN TO CONTACT YOUR GP OR SEEK URGENT HELP

- You are feeling unsafe, having thoughts of self-harm, or feeling in crisis — please reach out now
- Your mood is significantly low for more than 2 weeks and not improving
- You are finding it very hard to manage daily activities or work
- You would like support or talking therapy alongside exercise

## EXERCISE PRESCRIPTION For completion by prescribing clinician

Date	Patient Name / Addressograph	
Prescriber Signature	IMC / GMC No.	