

Climbing to Promote Positive Mental Health Outcomes

By: Logan Sherrer, Doctor of Occupational Therapy Student

Psychomotor: Participants can demonstrate ways in which the physical act of climbing impacts feelings of anxiety/depression

Cognitive: Participants able to recall evidence to support climbing's benefit to mental health

Affective: Participants can reframe climbing as not only exercise but also an activity to support mental health

- Both bouldering and sports climbing have been attributed to a reduction in symptoms of depression (Luttenberger et al., 2015)
- Physical exercise alone has long shown a reduction in symptoms of depression and anxiety, but when utilizing bouldering as a form of psychomotor therapy, researchers saw even more significant reduction of symptoms (Karg et al., 2020)
- Community engagement, adrenaline, and problem-solving, all common in climbing, show a reduction in symptoms of depression and anxiety (Lindsay-Smith et al., 2019)

What does impaired mental health look like?

Mental health disorders:

- Depression
- Generalized anxiety disorder
- OCD
- ADHD
- Panic disorders
- Bipolar disorder

Daily impairments:

- Stress
- Grief
- Relationships
- Lack of rest
- Lifestyle changes

Mental health challenges may result in impaired participation in daily occupations such as climbing

What are activities you do to support your mental health?

- Mindfulness exercises
- Routine
- Rest
- Healthy life choices
- Community engagement
- Reframe the situation
- Seek help
- Physical exercise
- Being outside
- Engaging in meaningful occupations

What traits in those activities
are similar to climbing?

- Social engagement
- Problem solving
- Physical exercise
- Mindfulness practice
 - Clearing the mind
 - Aware breathing
- Routine
- Enjoyable hobby
- Outdoors

Community engagement

- Top-rope climbing and bouldering both revolve around community or team work
 - Any form of rope climbing involves trusting your belayer
 - Simply discussing beta with friends or strangers while bouldering
- Engaging in a community for shared problem solving alone can reduce symptoms of anxiety and depression (Lamb et al., 2015)

Adrenaline

- Adrenaline seeking behaviors causes a chemical response in the brain that reduces symptoms of anxiety (Karg et. al., 2020)
- A clear mind on the climbing wall leaves less room for thoughts of life stressors

Thank you for your interest in The Spot's mindfulness series! If you want to learn more consider using the links below to sign up for one or more mental health groups led by Logan Sherrer, a Doctorate of Occupational therapy student.

[Denver](#)

[Golden](#)

[Louisville](#)

[Thornton](#)



- Christensen, J. (2023). *Countdown to take control of anxiety*. Mayo Clinic Health System. <https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/tips-to-help-ease-anxiety>
- Karg, N., Dorscht, L., Kornhuber, J., & Luttenberger, K. (2020). Boulderling psychotherapy is more effective in the treatment of depression than physical exercise alone: Results of a multicentre randomised controlled intervention study. *BMC Psychiatry*, 20(116), 1–13. <https://doi.org/10.1186/s12888-020-02518-y>
- Lamb, Dowrick, C., Burroughs, H., Beatty, S., Edwards, S., Bristow, K., Clarke, P., Hammond, J., Waheed, W., Gabbay, M., & Gask, L. (2015). Community Engagement in a complex intervention to improve access to primary mental health care for hard-to-reach groups. *Health Expectations : an International Journal of Public Participation in Health Care and Health Policy*, 18(6), 2865–2879. <https://doi.org/10.1111/hex.12272>
- Munir, S., & Takov, V. (2022). Generalized Anxiety Disorder. In *StatPearls*. StatPearls Publishing. <https://www.ncbi.nlm.nih.gov/books/NBK441870/>
- Nagy, G. A., LeMaire, K. L., Miller, M. L., Bhatt-Mackin, S., & Railey, K. (2022). Training and education to advance multicultural mental health-care delivery (the “TEAM mental health-care delivery model”): A pilot evaluation of outcomes, acceptability, and feasibility. *Training and Education in Professional Psychology*, 16(1), 67-77. <https://doi.org/10.1037/tep0000347>