

International Journal of Clinical Research and Reports

Onur ORAL*

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Research Article

The Effect of Physiotherapy and Past Experiences on Mental Health and Physical Recovery

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Received Date: June 28, 2025 | Accepted Date: July 07, 2025 | Published Date: July 17, 2025

Citation: Asmita SUNAR, Onur ORAL, Naima BADID, Iyanuloluwa OJO, (2025), The Effect of Physiotherapy and Past Experiences on Mental Health and Physical Recovery, *International Journal of Clinical Research and Reports*. 4(4); **DOI:**10.31579/2835-785X/093

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Abstract

Background: This review article aims to explore the effect of physiotherapy to the impact of past experiences on mental health and physical recovery and will undertake a review of the extant literature to elucidate the subtle effects of past experiences on mental health and physical recovery, emphasizing the necessity for an integrated approach to physical therapy that encompasses both the mind and the body.

Materials and Methods: A comprehensive search of the literature was conducted using various databases and a range of keywords, including ''mental health'', ''past experiences'', ''physical therapy'', and "physical recovery ". It was intended to ensure that the search was as inclusive as possible, and therefore several different terms have been included. The review included a variety of study types, such as randomized controlled trials, cohort studies, and systematic reviews, to ensure a comprehensive and diverse range of evidence, in line with the best practice for such a review. To ensure a comprehensive and diverse range of evidence, the inclusion criteria for this review were established to filter studies that assess the relationship among mental health, past experiences, physical therapy, and physical recovery. After careful consideration, a total of 25 studies were selected for inclusion in this review. This review aims to shed light on the relationship among mental health, past experiences, physical therapy, and physical recovery. To ensure the quality and relevance of the selected studies, we limited the search to peer-reviewed articles published in English between 1977 and 2025.

Results: It is observed that it becomes important to take a holistic approach that addresses both aspects of health simultaneously. By integrating mental health practices into physical therapy, we can create a comprehensive healing process that nourishes the mind and body alike. Such practices not only promote mental clarity, but also improve physical outcomes by reducing tension and promoting relaxation during physical therapy sessions

Conclusion: It is anticipated that incorporating mental health screenings and trauma-sensitive care into standard physical therapy protocols may help identify underlying emotional barriers that may impede progress. This holistic model will not only increase patient satisfaction, but will also lead to individuals achieving sustainable recovery and resilience by promoting long-term well-being.

Keywords: mental health; past experiences; physical therapy and physical recovery

Introduction:

The intricate interplay between past experiences, mental well-being, and physical rehabilitation has recently garnered heightened interest within the realms of psychology and physical therapy. Past experiences, whether

distressing or innocuous, can leave an enduring imprint on an individual's mental and physical well-being. Numerous studies have illuminated this subject, particularly from the standpoint of physical therapy, which seeks to

unravel the subtle interrelationships between experiences, mental health, and physical rehabilitation. The biopsychosocial model of health posits that biological, psychological, and social factors play a significant role in an individual's health outcomes (Engel, 1977; Hatala, 2012). As a biopsychosocial model of health, this model underscores the importance of understanding how past experiences can affect both mental and physical health, thus offering valuable insights into therapeutic practice.

Physiotherapy practices will also integrate a wider range of treatment options to support holistic mental and physical health, recognizing that physical ailments often coexist with psychological difficulties and that addressing both aspects is crucial for effective rehabilitation. By focusing on the mind-body connection, physiotherapy can improve patient outcomes and provide a more satisfying therapeutic experience, with research indicating that when mental health is prioritized alongside physical rehabilitation, patients are more likely to adhere to their treatment plans and achieve better overall health outcomes (Craft & Perna, 2004).

Incorporating mental health screenings and trauma-sensitive care into standard physical therapy protocols is a vital step toward identifying underlying emotional barriers that may be impeding progress. A proactive approach where physical therapists can tailor their interventions to directly address these challenges by screening for mental health issues such as anxiety, depression, or post-traumatic stress disorder (PTSD) is critical (Eide, 2010; Wiseman, Foster & Curtis, 2013). Such an approach will not only facilitate more effective treatment, but will also help build the trust and rapport between patients and therapists that are essential for successful rehabilitation. Mental health screenings and trauma-sensitive care emphasize the need for sensitivity and understanding in treatment, recognizing that trauma is prevalent in patients' lives (Harris & Fallot, 2001).

Physiotherapy plays a crucial role in improving both mental health and physical recovery in individuals with past experiences. By addressing both the physical and psychological aspects of a person's well-being, physiotherapy can have a significant impact on overall health outcomes. This essay will explore the theoretical frameworks, such as Fredrickson's broaden-and-build theory of positive emotions, the biopsychosocial approach to chronic pain advocated by Gatchel et al., and the use of mindfulness-based yoga as studied by Khalsa et al., to understand how physiotherapy interventions can positively influence individuals with past experiences.

Materials and Methods:

A comprehensive search of the literature was conducted using a range of databases, including the US National Library of Medicine (PubMed), Scopus, EBSCO, MEDLINE, DRJI (Directory of Research Journal Indexing), Embase, Web of Science, Google Scholar, and SportDiscus. To gain a comprehensive understanding of the subject matter, some key search terms were selected for the search, including "mental health", "past experiences", "physical therapy", and "physical recovery ". In addition, further relevant literature was identified through the examination of reference lists derived from the data searches. To focus on the most relevant results, the search was limited to peer-reviewed articles published in English between 1977 and 2025. To gain a comprehensive understanding of the relationship among mental health, past experiences, physical therapy, and physical recovery. Firstly, the relationship among mental health, past experiences, physical therapy and physical recovery had to be examined. Secondly, the studies had to be published in a peer-reviewed journal. Thirdly, the studies had to be in English. Following a rigorous selection process, 25 studies were chosen to be included in this review.

Results and Discussion:

A growing body of research has begun to elucidate the intricate relationship between past experiences, mental health, and physical recovery. A mounting body of evidence suggests that emotional and psychological factors may have a significant impact on physical health outcomes (Boemo et al., 2022; Kabat-Zinn, 1990; Levine et al., 2021). For instance, studies have indicated that chronic pain conditions may be influenced by psychological elements such as anxiety and depression (Gatchel et al., 2007; Turk & Okifuji, 2002). Additionally, there has been discourse surrounding the role of worry in generalized anxiety disorder, underscoring how chronic worry can give rise to physical symptoms and impede recovery. The findings indicate that addressing cognitive patterns in therapy can enhance both mental and physical health outcomes. (Borkovec, 1994; Borkovec et al., 1999; Hirsch et al., 2013).

However, the intricate relationship between mental health and physical recovery suggests a potential need for a shift in the way physical therapy is currently practiced (Haraldson, Sjöberg & Berglund, 2025). As Damasio (1994) underscored the significant impact of emotions on cognition and decision-making, it becomes evident that neglecting emotional well-being may hinder the effectiveness of physical rehabilitation efforts. This study, in addition to the seminal findings on adverse childhood experiences (ACEs) by Felitti et al. (1998), underscores the significant value of healthcare providers adopting a more integrated approach to patient care. The proposed integrated approach underscores a pivotal intervention that prioritizes not only the physical aspects of recovery, but also the emotional and psychological dimensions that can profoundly affect patient outcomes. It is imperative to recognized that by fostering an environment that acknowledges the interconnection between mind and body, healthcare providers can more effectively address the underlying causes of delayed recovery, thereby further enhancing the overall effectiveness of treatment (Felitti et al., 1998; Marchand, 2010; Wideman et al., 2012).

Furthermore, a commitment to integrating mental health considerations into physiotherapy practice will encourage practitioners to adopt a satisfying and appropriate approach to their performance, an integration that will not only enhance the therapeutic alliance between patient and physiotherapist, but will also enable patients to take an active role in their recovery (Miciak et al., 2018). By providing education about the interaction between physical and mental health, practitioners can help patients understand how their emotional state can impact their physical recovery, thereby improving their ability to have agency and a sense of responsibility in their own recovery journey (Bandura, 1997; Butler, 1998; Kwasnicka et al., 2016).

Conclusion

It has been demonstrated that experiences have the capacity to exert a substantial influence on both mental and physical health. Each challenge confronted, each victory attained, and each interaction experienced has the capacity to contribute to the complex tapestry of overall well-being. Recognizing this interconnectedness may be advantageous, as it could underscore the necessity for a holistic approach that addresses both mental and physical health in a unified manner. The integration of mental health practices into physical therapy has the potential to facilitate a more comprehensive healing process that nurtures both the mind and body. These practices have the potential to enhance mental clarity and improve physical outcomes by reducing tension and encouraging relaxation during therapy sessions. The psychological benefits gained through such integration can help patients remain present, manage pain more effectively, and cultivate a sense of inner peace. For instance, mindfulness practices have been shown to promote mental healing and enhance physical recovery by improving focus and reducing stress-induced inflammation in the body. The integration of mental health screenings and trauma-sensitive care into standard physical therapy protocols can facilitate the identification of emotional barriers that may impede progress, offering a comprehensive approach to patient care. This holistic strategy has the potential to enhance patient satisfaction, promote sustainable recovery and resilience, and foster long-term wellbeing.

Physiotherapy goes far beyond physical healing; it also plays an important role in promoting mental well-being. Guided exercises, breathing techniques, dancing, singing and other physical activities have been proven to reduce stress, improve mood and increase resilience. Research has shown that combining traditional physiotherapy with creative therapies such as dance and music offers holistic care and helps individuals reconnect with joy and self-expression. Incorporating elements such as rhythmic exercise, singing and dancing into physiotherapy routines has been shown to have significant benefits for both mental and physical health. Practices such as mindful breathing, relaxation techniques and setting gradual goals can help reduce stress and increase focus, while spending time in natural environments such as parks has been linked to increased mental clarity. It is also essential to have healthy eating habits, for example, a balanced diet rich in fruit, vegetables, and nuts also plays an important role in overall wellbeing. By integrating physical activity, creative expression, proper nutrition, and the restorative power of nature, this comprehensive approach to healing can pave the way for improved holistic health and vitality.

Acknowledgment:

We would like to express our special thanks to Dr. George N. NOMIKOS for his very successful contribution to the literature research process and unique academic support in the publication during the process of this review article.

Conflict of interest:

The author certifies that there is no conflict of interest with any financial organization regarding the material discussed in the manuscript.

Funding:

The author certifies that there is no funding from any financial organization regarding the material discussed in the manuscript or contributions:

Author contributions:

All the authors read and approved the final version of the manuscript.

References

- Bandura, A. (1997). Self-efficacy: The exercise of control. W.H. Freeman and Company.
- Boemo, T., Nieto, I., Vazquez, C., & Sanchez-Lopez, A. (2022). Relations between emotion regulation strategies and affect in daily life: A systematic review and meta-analysis of studies using ecological momentary assessments. Neuroscience & Biobehavioral Reviews, 139, 104747.
- Borkovec, T. D. (1994). The role of worry in generalized anxiety disorder. Journal of Abnormal Psychology, 103(1), 1-10. https://doi.org/10.1037/0021-843X.103.1.1
- Borkovec, T. D., Hazlett-Stevens, H., & Diaz, M. L. (1999). The role of positive beliefs about worry in generalized anxiety disorder and its treatment. Clinical Psychology & Psychotherapy: An International Journal of Theory & Practice, 6(2), 126-138.
- 5. Butler, G. (1998). Self-efficacy: the exercise of control. The British Journal of Clinical Psychology, 37(4), 470.
- 6. Craft, L. L., & Perna, F. M. (2004). The benefits of exercise for the clinically depressed. Primary Care Companion to The Journal of Clinical Psychiatry, 6(3), 104-111.

- Damasio, A. R. (1994). Descartes' error: Emotion, reason, and the human brain. G.P. Putnam's Sons.
- 8. Eide, P. (2010). Generalized Anxiety and Panic Disorder Intervention of Physiotherapy.
- Engel, G. L. (1977). The need for a new medical model: A challenge for biomedicine. Psychosomatic Medicine, 39(6), 377-388. https://doi.org/10.1097/00006842-197711000-00002
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., ... & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. American Journal of Preventive Medicine, 14(4), 245-258. https://doi.org/10.1016/S0749-3797(98)00017-8
- Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. American Psychologist, 56(3), 218-226. https://doi.org/10.1037/0003-066X.56.3.218
- Gatchel, R. J., Peng, Y. B., Peters, M. L., Fuchs, P. N., & Turk, D. C. (2007). The biopsychosocial approach to chronic pain: Theory and practice. Psychological Bulletin, 133(4), 581-624. https://doi.org/10.1037/0033-2909.133.4.581
- Haraldson, C., Sjöberg, P., & Berglund, L. (2025). Exploring the therapeutic potential of powerlifting exercises: a scoping review on their application and safety in addressing physical and mental health problems. Physical Therapy Reviews, 1-13.
- 14. Harris, M., & Fallot, R. D. (2001). Using trauma theory to design service systems. New Directions for Mental Health Services, 2001(89), 1-12.
- 15. Hatala, A. R. (2012). The status of the "biopsychosocial" model in health psychology: Towards an integrated approach and a critique of cultural conceptions.
- Hirsch, C. R., Mathews, A., Lequertier, B., Perman, G., & Hayes, S. (2013). Characteristics of worry in generalized anxiety disorder. Journal of Behavior Therapy and Experimental Psychiatry, 44(4), 388-395.
- 17. Kabat-Zinn, J. (1990). Full catastrophe living: Using the wisdom of your body and mind to face stress, pain, and illness. Delacorte Press.
- 18. Khalsa, S. B. S., Cohen, H., McCall, T., & McHugh, M. (2015). The effects of mindfulness-based yoga on mental and physical health in chronic pain populations: A systematic review. Pain Physician, 18(1), E57-E67.
- Kwasnicka, D., Dombrowski, S. U., White, M., & Sniehotta, F. (2016). Theoretical explanations for maintenance of behaviour change: a systematic review of behaviour theories. Health psychology review, 10(3), 277-296.
- 20. Levine, G. N., Cohen, B. E., Commodore-Mensah, Y., Fleury, J., Huffman, J. C., Khalid, U., ... & American Heart Association Council on Clinical Cardiology; Council on Arteriosclerosis, Thrombosis and Vascular Biology; Council on Cardiovascular and Stroke Nursing; and Council on Lifestyle and Cardiometabolic Health. (2021). Psychological health, wellbeing, and the mind-heart-body connection: a scientific statement from the American Heart Association. Circulation, 143(10), e763-e783.
- 21. Marchand, T. H. (2010). Making knowledge: explorations of the indissoluble relation between minds, bodies, and environment. Journal of the Royal Anthropological Institute, 16, S1-S21.

- Miciak, M., Mayan, M., Brown, C., Joyce, A. S., & Gross, D.
 P. (2018). The necessary conditions of engagement for the therapeutic relationship in physiotherapy: an interpretive description study. Archives of physiotherapy, 8, 1-12.
- 23. Turk, D. C., & Okifuji, A. (2002). Psychological factors in chronic pain: evolution and revolution. Journal of consulting and clinical psychology, 70(3), 678.
- Wideman, T. H., Scott, W., Martel, M. O., & Sullivan, M. J. (2012). Recovery from depressive symptoms over the course of
- physical therapy: a prospective cohort study of individuals with work-related orthopaedic injuries and symptoms of depression. journal of orthopaedic & sports physical therapy, 42(11), 957-967.
- 25. Wiseman, T., Foster, K., & Curtis, K. (2013). Mental health following traumatic physical injury: an integrative literature review. Injury, 44(11), 1383-1390.

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