Keywords: physical exercise, Running, recovery, empowerment

Introduction
Nowadays, there is a greater focus on the health of patients by mental health services. Mental illness not only affects clients' minds but also their physical health. Physical problems in turn affect their re-integration into community, mood, social life and work. Evidence shows that physical exercise (Running) improves mental health by reducing anxiety, depression, and negative mood; improving self-esteem, cognitive functioning and quality of life as a whole.

Objectives
1. To establish habit of physical exercise or running.  
2. To increase clients’ awareness in physical wellbeing and hence to live a healthy life.  
3. To enhance client's motivation and self-esteem in order to improve mental condition/mood.  
4. To acquire running skills.  
5. To strengthen clients' psychological wellbeing as according to principles of recovery: Self-determination, hope, individualization, peer support, nonlinear development, personal responsibility and strength perspective.

Methodology
A “Pre-test” vs. “Post-test” design was employed. Assessment tools of DASS (Depression Anxiety Stress Scales) and Herth hope index (Recovery Assessment Scale) were used to measure clients' levels of depression, anxiety, stress and recovery. A questionnaire was done for evaluation in last session of program. Subjects were client under community psychiatric service. There were six-sessions in the running therapy group. A pre-group gathering was held in hospital for orientation and introduction of the program. Each session was held once a week. The content of the group included basic running skills, warm-up and cool-down exercises, target heart rate, body mass index, peer support in running, healthy life and dietary, reduced rumination of negative thoughts, management of side effect of gaining weight and setting goals. Sequence of each session was often interweaving of stretching exercise, jogging/walking, teaching and sharing/debriefing.
**Result**
In total, 7 participants joined the group. 6 of them attended at least 5 sessions. Dropout rate was relatively low as compared with other activities of the same clientele. No significant difference was found in levels of depression, anxiety, stress and recovery between pre and post-group. But a slight improvement was reflected from the assessment tools. Activity evaluation reflected participant’s satisfaction to our activity in terms of Relevance of Content, Duration, Venue, and Performance of staff and speaker. Moreover, participant’s feedbacks to the group were positive. In descriptive terms, participants felt better sleep, good appetite, improved energy level and motivation, and were able to make friends in the group. This running therapy group also applied the concepts of recovery throughout the whole program. Aiming to bring about the importance of maintaining a healthy lifestyle through exercise, and to assist participants to build up a positive attitude toward their path of journey in recovery.