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## Lifestyle interventions in patients with a severe mental illness

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## Propositions accompanying the thesis

### LIFESTYLE INTERVENTIONS IN PATIENTS WITH A SEVERE MENTAL ILLNESS

Addressing self-management and living environment to improve health

1. A healthy living environment is a prerequisite for improving lifestyle behaviors (*Chapter 3*).
2. Implementers of lifestyle coaching in mental healthcare need specific knowledge, coaching skills, dedicated time, perceived responsibility and support from management (*this thesis*).
3. A web tool should be seen as a means to achieve certain goals, not as a goal in itself (*Chapter 7*).
4. Investment in lifestyle interventions in patients with a severe mental illness cannot be based on short-term outcomes (*this thesis*).
5. Nurses who experience too much empathy for the vulnerability of patients with a severe mental illness, withhold them from the care they need (*this thesis*).
6. Millions could be spend to treat the chronic diseases of prosperity, but many more lives would be saved and prolonged when only a part of this would be spend on prevention and lifestyle medicine.
7. Routine outcome monitoring of physical or mental health requires interventions based on the results of this screening (*this thesis*).
8. “Docendo discitur” - one learns by teaching - *Lucius Annaeus Seneca*.
9. “It doesn’t make sense to hire smart people and then tell them what to do; we hire smart people so they can tell us what to do.” *Steve Jobs*.
10. Planning is alles, maar werkt het best in combinatie met een zeer flexibele houding.

Anne Looijmans  
Groningen, 14 november 2018