

Complementary Medicine in American Healthcare

JONES AND BARTLETT

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Chapter 25

Health Coaching

Debra Harris, RN, BSN, and Rebecca McLean

Debra Harris and Rebecca McLean are among the initial developers of the health coaching concept in the United States.

Debra Harris, RN, has 20 years of experience in clinical nursing in the care of cancer and dialysis patients. For the past decade, Ms. Harris has served as a hospital administrator, as program coordinator for patient care projects at St. Charles Medical Center, and as program director of the Center for Health and Learning, developing hospital-based educational programs for physicians, staff, and the community. She also has extensive experience as a health coach and facilitator and currently works in coaching and consulting.

Rebecca McLean is national director of the Circle of Life Facilitator Training, which prepares health coaches for one-on-one coaching and facilitators for wellness support groups in hospitals, clinics, parishes, agencies, and businesses. In 1983, she co-founded Health Action Clinic and Consulting, an interdisciplinary healthcare organization. Over the past two decades, Ms. McLean has facilitated thousands of people in both group sessions and individual coaching with heart disease, cancer, diabetes, HIV, and other chronic disorders.

Courtesy of Debra Harris, RN, Bend, OR, and Rebecca McLean, Santa Barbara, CA.

<A>Overview

Health coaching is one of the more effective advances today in preventive medicine and disease management. Analogous to the personal trainer or life coach, the health coach supports clients in achieving specific health goals. Health coaching may also include life coaching, health education, risk management, or support for the management of chronic illness.

Coaching occurs initially in weekly sessions that provide a behavioral framework for lifestyle change or medical compliance. The process involves one-on-one coaching or group support, to assist clients in setting goals and working toward them. Change is defined in achievable steps taken by the client, tracked and reinforced through weekly meetings in person or by phone.

<D>• Role of the health coach. The health coach can serve as a mentor to the client, in situations in which behavioral change is important. Physicians do not usually have the time to see their patients on a weekly basis for the behavioral support and structure often necessary for medical compliance. Patients often realize they need a new approach, but may not know where to begin.

Coaching provides support for:

- Behavioral lifestyle change
- Risk reduction (for example, diet and exercise programs, and smoking cessation)
- Addressing addictive behaviors
- Medical management or compliance
- Behavioral management of disease and chronic conditions

The health coach provider fills a unique niche within health care that can be complementary to both case management and counseling. The function of case management, historically, has been to coordinate referrals made by the physician and to follow up on care. However, case managers do not typically intervene in terms of lifestyle changes. In a counseling model, the goal is to help the client gain greater understanding and insight. In contrast to both these approaches, the health coach works within a structured format to support behavioral change.

Interfacing with Practitioners

<D>• Referrals from physicians. In the context of hospital-based work, a health coach's caseload may be as much as 90% physician referred. For a private health coach, 80% to 100% of clients may be self-referred. Orders from the physician may be in the form of a prescription, written orders, or a verbal request. Typically, the referral is broadly worded within the context of a particular health issue; for example, "needs exercise and diet" or "needs stress reduction."

The role of the coach will vary depending on his or her training and the setting. Coaches with broad training and experience in group work may facilitate support groups. Coaches trained as nurses are qualified to provide medical and case management. Sessions focus on the client's most critical health risk factor (for example, exercise to prevent diabetes).

<D>• Readiness for change. The initial assessment process involves identifying the client's level of motivation and readiness for change. Frequently, clients believe they are ready to change until they begin to fully understand what is required. The challenges include breaking old habits, trying new behaviors, fear of the unknown, and taking risks. The most effective coaches are

those who begin the process by helping clients discover their own strengths. The most effective clients are those who want to take an active role in their own life and are willing to put effort into improving their health.

<D>• **Contraindications.** Patients who are not proactive on their own behalf tend to have the least success in a coaching program. On the other hand, it is always important to create the opportunity for success. In some cases, clients may have been in a particular circumstance for so long they no longer remember that there is another way. These people are most likely to benefit from a process in which they gain a vision of the potential for change and how their situation could be different. Ultimately, successful coaching requires that the client be both motivated to make changes and supported in creating appropriate action steps.

<A>The Coaching Process

The Initial Session

The first meeting is typically for an hour and a half and involves a process of assessment and goal setting. Meetings are initially held in person because personal contact can establish greater rapport between coach and client and tends to be more supportive. In the first or second session, the client identifies one to three goals on which they want to begin work. Subsequent meetings typically occur weekly, in person or on the phone, either one-on-one or in a group setting, depending on the needs and desires of the client. After the initial assessment, sessions are usually 30 to 60 minutes long and involve check-ins on the goals of the preceding week and goal setting for the coming week. Typically, the coaching process includes:

1. Assessment to affirm strengths and resources and identify challenges

2. Development of a realistic action plan
3. Implementation of the plan
4. Assessment of progress and modification of the plan
5. Acknowledgment of the client's learning and successes

<A>1. Assessment

<D>• Affirming the client's strengths. Coaching typically begins by identifying the clients' strengths in order to build their confidence and empower them, supporting their efforts toward change. Clients who have experienced a life crisis or chronic illness tend to forget their strengths. Over time, they may come to identify with their problems and lose their sense of self. One of the most important aspects of this work is to reconnect the individual with their inner strength and motivation. The encouragement of the coach provides an additional source of support that enables the client to make positive changes. Drawing on this sustainment, clients frequently expand their own personal support systems.

Coaching also involves asking good questions—the better the question, the better the response. That process places the coach in a more neutral position, lessening the degree to which they are directive. It enables them to refer the process and the decision-making back to the client. The goal of these questions is to open up new paradigms of thinking and to provide a subtle form of feedback.

<D>• Identifying challenges. Once the assessment is complete, and the client has gained a better sense of their strengths, the next step is to identify habits or other barriers that may be impeding their progress. The core work of coaching helps the client gain increased understanding of the

emotional drivers of his or her behavior. Although lifestyle is certainly an issue, there is often an emotional component that contributes to lifestyle choices.

The process of identifying the challenges or barriers to change is usually where the most important health coaching work occurs. Progressing toward the goal is relatively easy once this step has been taken. A variety of personal awareness exercises are used to help the client identify barriers and how they get in the way of making healthy choices. For example, the Event Perception Model, can be used to expand the client's awareness of how often they overreact to stress out of habit. Those negative reactions lead to habits of behavior that can remain long after the initial trigger event. One of the coach's primary roles is to help the client recognize obsolete perceptions which tend to get in the way of more positive behavior.

Coaching or group support always involves a greater understanding of day-to-day habits and thought patterns—and the impact of these habits on health. Most of us tend to run on automatic a surprising amount of the time. While this provides a certain degree of efficiency, it can also be a major deterrent to making healthy choices. Once a client gains a clearer understanding of how and why their situation has developed, they realize that they can do something about it.

Behaviors that are maintained simply by force of habit *can* be modified. This focus on role of habits tends to relieve a great deal of guilt and provides clients with a greater sense of control and confidence. At that point, coach and client can begin mapping out incremental steps for change, enabling the client to create healthier new patterns of positive thinking, new habits, and self-enhancing behaviors.

<A>2. Developing a Realistic Action Plan

<D>• Clarifying goals. The first step in goal setting is to help the client identify what he or she wishes to accomplish. Clients who are referred by a physician or health care practitioner work within goals that may already be predefined to some degree. Even within this framework, the client always has the opportunity to choose how they want to approach the goal.

The health coach asks defining questions. The task is to define or refine the goals more specifically and individualize them to the client. What do they want or need to do differently? What part of their life calls for attention? Restoring balance may involve not only physical health, but also mental, emotional, and spiritual aspects of life. Although the focus is on health, the process could involve anything from changing eating or working habits to changing relationships.

<D>• Creating an action plan. Once goals have been identified, the client and health coach develop a personal action plan consisting of the steps the client will take to achieve their goal. Based on insights gained in the assessment process, the client then develops short-term objectives, working with the coach to create a practical, realistic plan. These objectives focus on incremental achievable action steps to move the client toward his goal and to build confidence. By defining the goal in achievable steps, the chance of failure is minimized and success is more accessible.

<A>3. Implementing Change

<D>• Implementing the plan. Once clients begin the program, the coaching process involves tracking progress and rethinking strategies that did not work. At these sessions, the coach asks questions such as:

- Was there an opportunity to take the action step?
- If the step was taken, what was successful?
- What worked and why?
- What did the client learn?
- At this point, the coach reinforces those successes—both the achievements and the learning.
- The next question is, What does the client want to do now—what is the next step?

<D>• Identifying critical success factors. This review process focuses on what was effective:

- What enabled the client to accomplish the goal?
- What creates success for that particular client? This information begins to clarify critical success factors for the client.
- What challenges did the client overcome?
- Were there frustrations or disappointments and how were they handled?
- What were the key factors that supported success: for example, structure, support, energy, resources, or mindset?
- How can that knowledge be applied to the next step?

<A>4. Assessing Progress and Modifying the Plan

When a specific objective is not met, the coach and client work collaboratively to identify key issues and develop new strategies for success:

- If the client did not take the next step, what got in the way? This phase involves exploring what was learned and acknowledging that as a form of progress.

- Should the action steps be smaller?

- Is there the need for additional resources?

- Should the goal be changed?

- If the client took the step and it did not work, why?

- What did the client learn?

- In either case, what was learned? Again, the increased understanding is acknowledged as a form of progress.

- Should the goal be redefined or, is this the wrong goal?

- What types of support would have been helpful and what does the client want for the coming week?

Through this process, the client can continue to move toward the goal. One step at a time, a track record of success is built and confidence is gained. Coaching provides a continuous improvement process: the system is designed to be fail-safe.

<D>5. Reinforcing Successes

From very the first session, we focus on strengths to reinforce clients' belief in themselves, so they will be more motivated to continue the process of change.

- We affirm strengths at every opportunity, naming the qualities that enabled the client to take the next step; for example, the courage to break an old habit or implement a new behavior.

- We note and affirm all victories, even the small ones. This also teaches clients to reinforce their *own* successes.
- We acknowledge all learning as progress.

Positive self-talk is another important component of this work. An exploration of self-talk and inner dialogue provides an opportunity for clients to get in touch with the kind of messages they are giving themselves. Is there inner support for positive change? What can the client do to move forward to the next step? An evaluation of self-talk provides an opportunity to minimize negativity and self-defeating messages.

<A>The Basis for Long-Term Change

The coaching process also extends beyond immediate change—it not only addresses how one creates change, but also how to sustain it. Coaching supports people in achieving clarity about what they value and how to live a life that is in greater alignment with those values. Clients also gain insight into the effects of various habits and behaviors on their health. This increased awareness frequently evolves into a commitment to greater quality of life and health, which might involve exercising, managing stress, or improving their relationships.

<Sidebar>

Maintaining a New Lifestyle

When the client is ready to transition into the next phase, coach and client develop a long-term plan for maintaining the changes that have been made and continuing the process of change. The coach provides support and structure for change, using behavioral approaches confirmed in the

research literature and through clinical experience. A long-term program may also include periodic use of the health coach, other health professionals, group work, a personal trainer, or peer counseling.

Ongoing progress and change are supported by:

- Continued use of the tools and resources from coaching
- Utilizing a personal tracking system
- Rewarding and reinforcing accomplishments
- Identifying the need for support and knowing how to enlist it
- Sharing the process with an accountability partner
- Participating in a support group
- Understanding relapse and how to manage it
- Engaging other support as needed or desired

<End of sidebar>

<A>Resources

<D>• Self-care. Coaches frequently encourage clients to use support groups because they are an inexpensive venue for support, community, and access to resources. Many clients also opt to remain in one-on-one coaching. The combination of group work and coaching means that clients can have individual support and the opportunity to participate in a group. For many, this enables them to stay in the process longer because there is less expense. In one model of group work, developed at Stanford University, clients participate in a facilitated group that transitions into a peer-support group without a leader. Participants continue to draw on support in the group in lieu

of individual coaching sessions. Some clients also choose to use a one-on-one peer-facilitated model, working on an ongoing basis with one other person as a source of accountability and ongoing support.

<D>• Training and licensure. Instruction on health coaching is currently available through private training venues (see resources). Life coaching is offered through a number of private training institutes. There is currently no national association for health coaching.

<D>• Skill Set. It is vital that the coach encourage participants to make the personal improvement process their own. The goal is always empowerment. Facilitators who see themselves as catalysts of change rather than as experts are likely to be more effective in enabling people to grow and heal.

<D>• Insurance coverage and reimbursement. In the hospital environment, services may be covered by insurance when they are associated with a specific clinical service such as a symptom-reduction program. However, when a coach is not working under the direct supervision of a physician or a health care facility, their services are not typically reimbursed by insurance. Clients who are self-referred pay out-of-pocket. Private-pay services limit access based on income. However, the positive aspect of private-pay is that clients are highly motivated.

<A>Health Coaching Resources

Health Action

Circle of Life Facilitator Certification Training

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Santa Barbara CA 93117

Phone: (805) 685-4670

Fax: (805) 685-4710

Email: rmclean@west.net

Web site: www.circleoflife.net

Health Action provides services for health care institutions and physician practices to expand the continuum of care and improve clinical outcomes, as well as to corporations seeking to accelerate productivity and decrease medical costs. Services include training of one-to-one coaches and group facilitators; providing the Circle of Life experience for conferences and retreats for groups, departments and boards; and consulting to design complementary and integrative medicine programs. Referrals are available at <http://www.circleoflife.net> for nationally certified Circle of Life wellness coaches with their location, specialty, and credentials. See the Health Action Client List at <http://www.HealthAction.net>.

<C>Circle of Life Publications

McLean R, Annich L, Jahnke, R. *The Circle of Life Facilitator Training Manual*. 5th ed. Santa Barbara, CA: Health Action; 2005. The knowledge base and skills training for Circle of Life coaching and group support.

McLean R, Jahnke R. *The Circle of Life, Personal Health Assessment & Self Energizing System, Participants Guide*. 5th ed. Santa Barbara, CA: Health Action; 2005. The participant's tool set and guide book for Circle of Life coaching and group support.

McLean R. *Circle of Life Coaching/Facilitator Training CDs (2 CDs)*. Santa Barbara, CA: Health Action; 2004. Guidance on facilitating and coaching others in the Circle of Life health and life coaching process.

McLean R. *Circle of Life Tools for Health and Wellness CDs (3 CDs)*. Santa Barbara, CA: Health Action; 2004. Five processes and exercises for coaches, facilitators and participants.

Harris 2 Consulting

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Email: mndrharris@bendcable.com

Web site: www.harris2consulting.com

Harris 2 Consulting provides individual health coaching and resources for individuals and businesses. Services include corporate/workplace health presentations, health screening, program development, and executive wellness retreats. Personal health coaching is designed to serve clients with needs that range from performance enhancement to those with chronic illness.

<D>• Book. Harris D. *Be Your Own Health Coach*. Bloomington, IN: Author House; in press.

<A>General Coaching Resources

Training

International Coach Federation

1444 "I" Street NW, Suite 700

Washington, DC 20005

Phone: (888) 423-3131 or (202) 712-9039

Fax: (888) 329-2423 or (202) 216-9646

Web site: www.coachfederation.org

Email: icfoffice@coachfederation.org

The International Coach Federation is the largest non-profit professional association of personal and business coaches worldwide with more than 7000 members and over 132 chapters in 30 countries. The ICF provides credentialing for coaches and referrals to training institutions.

The Coaches Training Institute

1879 Second Street

San Rafael, CA 94901

Phone: (800) 691-6008 or (415) 451-6000

Fax: (415) 460-6878

Email: CTIinfo@thecoaches.com

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Web site: www.thecoaches.com

The Coaches Training Institute is the largest nonprofit educational institution devoted exclusively to the training of coaches. In the United States, CTI currently offers coaches training for personal/life coaching and executive/corporate coaching in 6 major American cities.

International affiliates are located in the United Kingdom, Norway, Japan, Australia, and New Zealand.

Leadership Institute of Seattle

14506 Juanita Drive NE

Kenmore, WA 98028-4966

Phone: (800) 789-LIOS or (425) 939-8100

Fax: (425) 939-8110

Web site: www.lios.org

LIOS provides training in leadership skills and personal growth for leaders, consultants, and counselors. The mission statement of LIOS is to teach people how to lead with integrity, use power ethically, collaborate successfully, and use personal awareness to affect change in others.

This type of training is useful in helping coaches identify their own process and become more effective.

Books

Amazon.com currently lists numerous books on personal/life coaching and professional/business coaching but none on health coaching.

Whitworth L, Sandahl P, Kimsey-House H. *Co-Active Coaching: New Skills for Coaching People Toward Success in Work and Life*. Mountain View, CA: Davies-Black Publishing; 1998.

This best-selling book is written for coaching professionals by the cofounders of the Coaches Training Institute; their co-active model encompasses specific skill sets and key principles of coaching.