We are fortunate to live in an era of emerging consumer-directed health, an era kicked off by leading thinker and professor Regina Herzlinger of the Harvard Business School, whose three books on consumer-driven health care published over the past eight years have challenged us to innovate within the system (resulting, perhaps, in the incarnation of a new system) and enable the consumer to become the boss of health and well-being.

Consumer-driven health is a call to action — the next major awakening of personal responsibility, following the widespread cultural awareness of smoking cessation 20 years ago and, before that, the practicality of using seatbelts. Becoming the boss of one’s own health and well-being is a complex matter, more so than quitting smoking or wearing a seatbelt.

Especially in these challenging times, when the complex health care system is tough to navigate, the demands of everyday life have never been greater. We face a bewildering array of health and wellness guidelines, products and services, making it difficult to create a personal formula. Change is challenged by roadblocks, including innate resistance and ambivalence.

Many of us have histories of repeated failure. Most of us do not believe that we can master our health and well-being.

By Margaret Moore, BS, MBA

We are also important role models, while struggling to walk the walk on our own journeys of personal growth.

Case Manager to Professional Coach
A new direction

Mastering health and well-being is a journey of personal growth. Yet as healthcare providers, we have been taught to focus on getting patients to comply with our expert advice, rather than foster their personal growth. We are also important role models, while struggling to walk the walk on our own journeys of personal growth.

Carl Rogers, a leader in humanistic psychology, taught us that human beings are innately designed to grow and develop. But there are certain preconditions. Self-determination theory teaches that people are most successful at growth and change when they have a passion for the outcomes of change (intrinsic motivation), and they are free to choose it (autonomy). Relational cultural theory teaches that people grow best through relationships — growth-promoting relationships that energize and inspire, while preserving autonomy and choice.

Today, patient interactions in the medical model primarily focus on numbers and deficits — blood pressure, LDL, etc., etc. — with little time spent building a relational dynamic that promotes self-efficacy and growth. Thanks mainly to Dr. James Prochaska, Ph.D., and the Transtheoretical Model, we’ve started to think hard about what it takes to make lasting behavior change. William Miller, Ph.D., and Stephen Rollnick, M.D., designed the invaluable Motivational Interviewing (MI) paradigm to resolve ambivalence, which is improving the relational dynamic used by healthcare practitioners. MI trainer Robert Rhodes, Ph.D., encourages us to “get out of sales and get into fishing.” Instead of selling the benefits of healthy behaviors, it is better to fish for our patients’ perspectives on the benefits to them. People are better persuaded by their own words than ours, innately designed to grow and develop. But what does that mean for our client interactions? Don’t start with problems, pathology, risks, deficits, numbers — that is, none of the bad stuff. Explore plenty of positive things first to generate positive emotion and energy. What was the best thing that happened today/last week/since we last met? What strengths have you used in areas where you are successful? What lessons have you learned? What are areas of your life that are going well? What strengths have you used in areas where you are successful? What lessons have you learned? The second lesson centers around happiness — defined here as a positive state of mind and appreciation of one’s life — which has a similar impact on preventing disease and improving longevity as not smoking. It is important to encourage and support clients in pursuing pleasant, engaging lives infused with meaning, purpose and accomplishment. Two shortcuts to happiness in the moment, elucidated by positive psychology researchers, are to be grateful and to do good. 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Defining an industry

The coaching relationship is the growth-promoting relationship critical for the future success of consumer-directed health. The emerging industry of professional coaching, which began nearly 20 years ago, has until recently focused on life, corporate and executive coaching. Dozens of life, corporate and executive coach-training programs have emerged, while companies have built coaching models that integrate a wide range of theories and domains, the coaching industry is at an early stage in the pursuit of outcomes research, an important focus for the coming years.

The vibrant 10-year-old field of positive psychology has brought coaches some important lessons in helping people thrive. What follows are three lessons you can apply immediately.

First, we’ve learned from Barbara Fredrickson, Ph.D., that positive emotions broaden thinking — we’re more creative and open-minded — and build resources — our memory works better, our medical symptoms wane, we’re more resilient, and we connect better with others. The optimal ratio of positive to negative emotions is three to five positive emotions (which, like butterflies, are fleeting) to each negative emotion (which sticks like velcro). It’s good to feel good.

What does that mean for our client interactions? Don’t start with problems, pathology, risks, deficits, numbers — that is, none of the bad stuff. Explore plenty of positive things first to generate positive emotion and energy. What was the best thing that happened today/last week/since we last met? What strengths have you used in areas where you are successful? What lessons have you learned? The second lesson centers around happiness — defined here as a positive state of mind and appreciation of one’s life — which has a similar impact on preventing disease and improving longevity as not smoking. It is important to encourage and support clients in pursuing pleasant, engaging lives infused with meaning, purpose and accomplishment. Two shortcuts to happiness in the moment, elucidated by positive psychology researchers, are to be grateful and to do good. What does that mean for our client interactions? Don’t start with problems, pathology, risks, deficits, numbers — that is, none of the bad stuff. Explore plenty of positive things first to generate positive emotion and energy. What was the best thing that happened today/last week/since we last met? What strengths have you used in areas where you are successful? What lessons have you learned? The second lesson centers around happiness — defined here as a positive state of mind and appreciation of one’s life — which has a similar impact on preventing disease and improving longevity as not smoking. It is important to encourage and support clients in pursuing pleasant, engaging lives infused with meaning, purpose and accomplishment. Two shortcuts to happiness in the moment, elucidated by positive psychology researchers, are to be grateful and to do good. What does that mean for our client interactions? Don’t start with problems, pathology, risks, deficits, numbers — that is, none of the bad stuff. Explore plenty of positive things first to generate positive emotion and energy. What was the best thing that happened today/last week/since we last met? What strengths have you used in areas where you are successful? What lessons have you learned? The second lesson centers around happiness — defined here as a positive state of mind and appreciation of one’s life — which has a similar impact on preventing disease and improving longevity as not smoking. It is important to encourage and support clients in pursuing pleasant, engaging lives infused with meaning, purpose and accomplishment. Two shortcuts to happiness in the moment, elucidated by positive psychology researchers, are to be grateful and to do good.

Second, we’ve learned from Fred Luthans, Ph.D., that the most successful at growth and change when they have a passion for the outcomes of change (intrinsic motivation), and they are free to choose it (autonomy). Relational cultural theory teaches that people grow best through relationships — growth-promoting relationships that energize and inspire, while preserving autonomy and choice.

Third, we’ve learned from Robin Bhine, M.D., that positive emotions enable clients to feel good. What does that mean for our client interactions? Don’t start with problems, pathology, risks, deficits, numbers — that is, none of the bad stuff. Explore plenty of positive things first to generate positive emotion and energy. What was the best thing that happened today/last week/since we last met? What strengths have you used in areas where you are successful? What lessons have you learned? The second lesson centers around happiness — defined here as a positive state of mind and appreciation of one’s life — which has a similar impact on preventing disease and improving longevity as not smoking. It is important to encourage and support clients in pursuing pleasant, engaging lives infused with meaning, purpose and accomplishment. Two shortcuts to happiness in the moment, elucidated by positive psychology researchers, are to be grateful and to do good.

WHAT IS COACHING PSYCHOLOGY?

The science of relationships designed to optimize health and well-being, founded upon evidence-based theories and fields.

Coaching relationships enable:

• Personal responsibility
• Self-awareness
• Self-efficacy
• Peak performance
• Lasting change
• Personal growth

Evidence-based theories and domains that contribute to the foundation for coaching psychology include:

1. Humanistic psychology
2. Hope psychology
3. Self-determination theory
4. Self-efficacy
5. Transtheoretical model
6. Appreciative inquiry
7. Motivational interviewing
8. Solution-focused therapy/reality therapy
9. Relational cultural theory
10. Emotional intelligence
11. Nonviolent communication
12. Flow and relational flow
MOUNT LASTING CHANGE

A mountain of fulfillment
While clients define and decide where they want to go and what they want to work on, their coaches direct the process to get there. Several years ago, my colleague Gabe Highstein, RN, whose doctoral degree and research focus on the application of the Transtheoretical Model and I developed Mount Lasting Change to depict coaching processes that lead to lasting change and growth.

At the base of the 15 building blocks are the thinking processes that lead to a vision of our best selves and our best lives. The next level is the intensive planning stage, and the third is the active part of the process, experimenting and brainstorming along the way. What’s interesting is that 13 of the 15 building blocks are thinking, not doing, processes. Coaching conversations are workouts for our clients’ brains.

Most of us are stuck in chronic contemplation, often for decades, in at least one area of our health and well-being. We tend to jump directly to the third level when we start a new diet or commit to a New Year’s resolution. If the preparatory thinking work does not get done, we find ourselves standing on a shaky foundation. At the center of the foundation of Mount Lasting Change are our heartfelt values, or higher purpose. This higher purpose is why we get out of bed in the morning with zest. The reason we want to get to the top of the mountain is because something we care about in our lives is not going to be at its best, or not going to work, if we don’t have optimal health and well-being. It’s critical to get people to connect emotionally with what they want in the deepest way we can elicit. Helping them determine why they care about getting to the top of the mountain is the most important work we can do in the beginning. Then it is critical to keep that inspirational flame burning all the way up the mountain.

The top block is “my best self” — energetic, confident, resilient and in charge. Reducing health care costs, lowering health risks, and changing behaviors to improve health or manage disease isn’t truly all that people are yearning for. They long to be their best selves, whatever that means to them. As coaches, even
when we’re focused on health risks and numbers, we need to view our coaching work as helping people be their best selves. That is what they want most and what they will celebrate. That’s the best possible outcome to ensure lasting change and get beyond the struggle.

Prospering together

Last, but most important, in the coach’s toolbox are our relational skills that create the nonjudgmental and inspiring space for people to do their best thinking and be their best selves. We describe what these skills look and feel like in a recent white paper, “The obesity epidemic: a confidence crisis calling for professional coaches”:

Perhaps the most wonderful aspect of becoming a masterful coach is that we grow along with our clients. Coaching conversations call us to be our best — calm, confident, warm and affirmative, full of zest and play, and courageous. To be the partner in someone’s small or large transformation is rewarding beyond compare. Growth-promoting relationships are missing in medicine today. That’s why you answered the call to be a case manager, and that’s why coaching is our future.

PROFESSIONAL COACHING DOMAINS IN HEALTH CARE

Combining coaching competencies with expert credentials

WELLNESS COACH — The wellness coach has the broadest mandate, helping people master wellness or well-being and addressing both physical and mental health. The timely advent of positive psychology, the science of happiness and well-being, is delivering behavioral guidelines for optimal mental well-being, readily applicable by coaches.

HEALTH COACH — The health coach is a transformed case manager, the skilled nurse who helps people master their lifestyles and manage complex medical issues and conditions.

FITNESS COACH — The fitness coach is an experienced fitness professional focused on enabling a fit lifestyle. In November 2007, the American College of Sports Medicine and the American Medical Association launched an ”exercise as medicine” initiative, with a goal of getting physicians exercising, as well as promoting and prescribing exercise. The fitness coach is well-placed to work with people to establish regular exercise that they can enjoy and sustain.

wellcoaches

Coaching the Adventure of Change

Becoming a certified health coach or wellness coach is a journey of transformation.

Both for you and your clients. And to be the partner in someone’s small or large transformation is rewarding beyond compare. That’s why you answered the call to be a case manager and that’s why coaching is our future.

Wellcoaches is the industry leader of coach training and certification in healthcare. Visit our training school at www.wellcoach.com to learn about our ACSM-endorsed programs.