Analysis of the Health Coaching concept

Higuera-Sainz, José Luis^{1*}; Álvarez-Aguirre, Alicia²; Cisneros-Ruiz, Bertha¹; Acosta-Valencia, Yaneth Guadalupe³; Pimentel-Jaimes, José Alfredo¹

ABSTRACT

Introduction: Health coaching is a new field that has emerged as a basic need in health care; however, there is little information about its meaning, attributes, and usefulness. **Objective:** Analyze the Health Coaching concept through a revision of information to be able to develop an applicative and useful proposal for health professionals and health coaches.

Methodology: For the revision of information and literature, the following databases were consulted: LILACS, COCHRANE, EBSCO, and PUB MED, the electronic library Scielo and Google Scholar through key words such as coaching and health, in English, Spanish, and Portuguese. **Results:** For the analysis, 6 systematic reviews, 3 electronic books, and 2 consultations in Internet pages were included, which showed the meaning of the concept. **Conclusion:** Searching and analyzing the information and literature allowed us to identify the concept as a methodological process, where a health professional with coaching training accompanies other people through an empathetic and collaborative relationship, to set and comply with objectives specifically related to health.

Palabras clave: Behavioral Medicine; Training; Patients. (DeCS).

¹Full-time professor, Nursing School (Mexicali Campus). Universidad Autónoma de Baja California, Baja California, Mexico. ORCID-iD: https://orcid.org/0000-0003-1824-8963. E-Mail: higueraj99@uabc.edu.mx

² Profesor de Tiempo Completo, Escuela de Enfermería y Obstetricia (Campus Celaya-Salvatierra). Universidad Autónoma de Guanajuato, Guanajuato, México
³Estudiante de Maestría en Ciencias de Enfermería, Escuela de Enfermería y Obstetricia (Campus Celaya-Salvatierra). Universidad Autónoma de Guanajuato, G

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*Corresponding author

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INTRODUCTION

Before starting the analysis of the Health Coaching concept, it is extremely important to know its origin, since, according to the literature, there are at least three versions about the origins of Coaching. The first one goes back to the XV and XVI centuries, when Hungarians from Kocs implemented the use of the carriage of kocs, a term adopted by Germans as "kutsche", by the Italians as "cocchio", and by the Spanish as "coche"; this was the term used to refer to the transportation of people from one location to another, thus protecting them from the conditions of the regional weather when transporting them⁽¹⁾. The second version indicates that the term coaching comes from the verb to coach used by British university students during the XIX century to refer to training or carrying out activities under the indications of a coach⁽²⁾. Finally, the third version comes from the English verb coax, which means persuade, induce, train, teach, instruct, and prepare⁽³⁾.

Currently, a Coach is a qualified professional who carries out the coaching process. The Coach is the person in charge of directing, instructing, and training an individual or a group of individuals in order to achieve a goal, develop specific abilities, and maximize his performance. Additionally, the individual who undertakes the coaching process is known as Coachee; and his person is considered the client and protagonist of this coaching process⁽⁴⁾.

The Escuela Europea de Coaching [EEC]⁽⁵⁾ (Coaching European School), one of the most recognized institutions in Europe due to its excellence in training offered to these professionals, mentions that the main tasks of a Coach is to accompany the client during his personal and professional development through listening, observation, and continuous planning of questions in order to make that the client sees himself from another angle so he can be able to broaden his vision and discover new possibilities of action, a process that in Coaching is known as change of observant.

In the health area, Coaching is being promoted as a key factor to achieve objectives, which should improve both the attention and health of the user and the competences of the health personnel; hence the importance and need that health professionals master this type of tools and implement them in health institutions⁽⁶⁾.

By the same token, having a more detailed description of the Health Coaching concept could facilitate that in the near future health care can be strengthened through the use of this methodology, thus, positively influencing reduction of problems associated to prevention and treatment of different diseases.

Therefore, the objective of this study is to analyze the Health Coaching concept through review of literature in order to make a useful and applicative proposal for health coaches and professionals.

METHODOLOGY

An analysis of the Health Coaching concept was performed using the methodology proposed by Walker & Avant⁽⁷⁾ consisting of eight steps: 1.- Select the concept, 2.- Determine the objectives or purpose of the analysis, 3.- Identify the uses of the concept, 4.- Determine and define the attributes, 5.- Identify a model case, 6.- Identify additional, borderline, related, opposite, and made up and illegitimate cases, 7.-Identify antecedents/consequences, and 8.- Define empirical references.

For steps 3, 4, 7, and 8, a literature search in some databases such as LILACS, COCHRANE, EBSCO, and PUB MED took place at first, the electronic library Scielo, and Google Scholar through key words: Coaching and Salud in English, Spanish, and Portuguese; also Boolean operators AND (coaching AND salud) and OR (coaching OR coaching de salud). Finally, some pages referred to in the information reviewed about institutions recognized in the area of coaching training were visited. For the analysis, any type of study or information published preferably during the period of time ranging from 2009 to 2019, through free access, which described the meaning of the concept of Coaching, or Health Coaching, and available in the aforementioned languages (Figure 1), was included.

RESULTS

The information recovered included 6 systematic revisions, 6 research studies, 3 electronic books, and 2 consultations in web pages from institutions recognized in Coaching training. This information was evaluated by the researchers taking as main criterion that it would provide a description of the Health Coaching concept or its different fields and that would allow a better understanding of the concept.

Information about Coaching

Before analyzing the Health Coaching concept, it is important to start discussing its predecessor, that is, Coaching defined as a process to direct people to move from their current status to a desired and attainable status; in this process, the trainer who applies it uses a method to accompany his client, where the client defines the objectives, the actions necessary to achieve his goals, and the status he wants to reach⁽⁸⁾. Regarding the Coach, his role is to challenge the client through his method and different tools such as questioning through an in-depth interview and the followup of the actions proposed by the client. The Coach can provide assistance either personally, by telephone, or virtually though the use of Internet, whether through individual or group sessions⁽⁸⁾.

Additionally, Coaching can be defined as a relationship or collaborative association between the Coach (Professional) and the Coachee (Client), where the Coach is committed to support and help the client so the client can reach a desired and reachable status; this process is based on a relationship that strengthens the talent and skills of the Coachee⁽⁹⁾.

Other authors define Coaching as a methodological process that includes introspection and training, either one-to-one or in groups, which should be planned, structured, confidential, and directed to the development of competencies of growth or the inhibition of behaviors that limit the performance of the people, guaranteeing in turn the utilization of all the potentiality of the client in the development of new forms of thinking, acting, feeling, and relating in a more efficient and fulfilling way⁽¹⁰⁾.

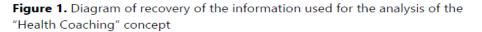
On the same lines, Coaching is also defined as a methodology that helps to rediscover something that we often forget, this is a way of doing that does not provide solutions from outside, but it helps in a way that each person finds the solution by himself, it consists more in helping to learn than to teach, it is confidential, it is mainly based on planned interaction and communication, explores and defines the image of the person who demands it, jointly define the objectives of the tasks to reach, determines the sequence of professional experiences that must be carried out to reach them, and accompanies the person in his process, helping him to identify successes and errors, and providing support during the difficulties found by the clients⁽¹¹⁾.

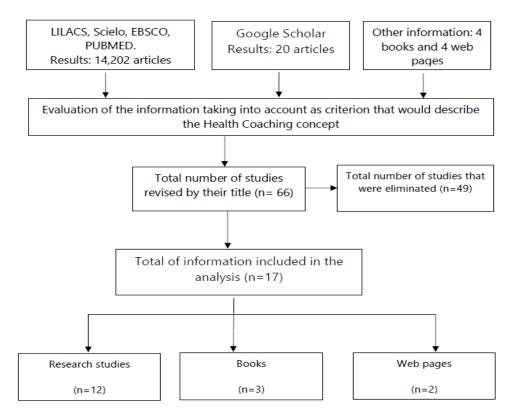
The training of the client usually centers on teaching and planning «how»; moreover, Coaching is committed during the achieving process, focuses on the possibilities of the future not in the errors of the past, or in his current performance, the Coachee does not learn from the Coach, but from himself with the help of the Coach⁽¹²⁾.

According to the $EEC^{(13)}$, this method is also a discipline where a supportive relationship is built, which considers that the client keeps all the answers inside him, it is, in essence, a self-learning process that allows the clients to strengthen their capacities and competencies to bring out their best.

Coaching allows encouraging creativity and innovation and helps to find new possibilities through an interaction with reality, from different angles, which helps to reveal new behavior forms; this method is also based on formulating questions with the capacity to identify blind points that we all have, and that tend to limit our capacity for action^(13,14).

This methodology is based on respect for the other as legitimate being, leaving a space to enable him to be himself, and its has a defined duration that is set before the process begins and the duration of which is a function of





Source: Own development

the challenge to achieve, but it usually involves from 6 to 10 sessions over a six-month period approximatelly⁽¹³⁾.

Health Coaching is a new field and it has emerged as a basic need in health care. Up to this date, there is still no concise definition of Health Coaching. However, some authors have proposed some definitions. Molins⁽¹⁵⁾ refers to it as a method very similar to professional coaching, where it is sought that the Coachee acquires a beneficial change, clarifying that in this case the changes that are sought will be related to the health area. In other words, the Health Coach facilitates that the person reaches his health objectives in a significant and effective way⁽¹⁶⁾.

That said, Coaches who dedicate to this area are known as Health Coaches and are professionals in this area with a valid certification in Coaching; their purpose is to provide a good advice as experts in diseases and the change of behavior related to health improvement, medical care, and treatment of different diseases⁽¹⁷⁾. A Health Coach utilizes a specific type of conversation with the patient that is known as "change enabling"; its objective is to change the behavior in such a way as to improve his life style^(18,19), prevent illnesses, or improve adherence to treatments.

Giménez, Fleta and Meya⁽²⁰⁾ note that during Health Coaching the patient must be helped to set realistic objectives, through assessment of his willingness to change, or motivation, identify obstacles, and search for solutions, focusing on the strengths of the patient, identifying his beliefs and values to connect them with intrinsic motivation, determine the plan of action, and use the communication skills of the Coach such as feed-back and active listening expressing empathy and trust.

For their part, the patients who have received Health Coaching mentioned that this method has helped them to discover both personal and health situations, which has caused improvements in their health status⁽¹⁹⁾.

Related Concepts

Although we have not found concepts related to Health Coaching, there is a concept that is often confused with Coaching. This concept is known as Mentoring, which refers to a natural form in the transmission of knowledge, techniques, and experiences from people who are usually older, more intellectual, or scholars with very broad knowledge and great experience in life. These individuals could be the professional companions who knows the subject in depth, thus they can advise, encourage, or guide ⁽²¹⁾.

Main differences between both concepts emerge since through Mentoring a future based on the experience and wisdom of the advisor is created, while Coaching takes as its starting point the interests and possibilities of the Coachee. Additionally, advisors are dedicated mainly to labor issues while the Coach has presence in other areas, even in the health area.

Health Coaching Attributes

The following are the elements that define Health Coaching: It uses a method, communication skills, tools such as introspection and questioning, looks for a relationship or collaborative association through trust and empathy; it is based on a specific conversation that enables change, helps to set realistic objectives to attain a better health, makes it easy that the person achieves his objectives without telling him what to do or how to do it; it is focused on the strengths of the patient, identifies his beliefs and values to connect them to intrinsic motivation; it is centered on a change of attitude with respect to the disease and his assistance can be personalized or virtual, through individual or group sessions.

Health Coaching Concept Proposal

Health Coaching is a methodological process where a health professional with training in Coaching accompanies other persons through an empathic and collaborative relationship to set objectives related to health and also the follow-up of a plan of action, without telling the patient what to do or how to do it, while ensuring the success of the results through the use of tools such as interviews, introspection, motivation, inhibition of limitations, use of strengths of the patient, and self-monitoring. This process can be carried out on a personal-attendance basis (face to face) or virtual, utilizing as main foundation the respect for the other as legitimate being, focusing on a change of attitude regarding the disease and the possibilities of the future, not in the errors of the past or the present.

Construction of Cases

Model Case

Pedro, who is 51 years old, has not had control on his blood sugar for two years; hence, his last HbA 1c showed an average of 10% (blood sugar level: 250mg/dL), after visiting the doctor for his monthly appointment, he received the normal drug treatment, and he was referred to carry out his follow-up with the help of a Health Coach. In his first visit, the Coach conducted an interview in a set of trust and empathy, where Pedro expressed his points of view regarding his disease, limitations, and family problems caused by his condition. The Coach asked him to visualize how he would like to live his life in the near future, integrating his disease, limitations, and problems; after that, he asked Pedro to think about the goals he would like to fulfill in order to reach an optimal health status.

Later on, the Coach assisted Pedro to develop a plan of action including activities that would allow him to improve his lifestyle, adherence to the treatment, and prevent future complications. Subsequently, the Coach carries out a weekly follow-up where he evaluates the activities performed and help the patient to find reasons that motivate him to continue his efforts to reach the objectives pursued. After 5 months, a glycocylated hemoglobin test was performed to Pedro, which indicated parameters of 6.0%, which means a better control of his food, more exercise, and improvement of his adherence to the drugs treatment. Nowadays, Pedro looks happy and motivated, and he wants to improve through his own efforts and through the support of the Health Coach.

Opposite Case

Javier, who is 45 years old, was diagnosed with type 2 diabetes mellitus after visiting the doctor in his family practice appointment showing an HbA 1c of 11.0% (blood sugar level: 280mg/dL). The medical doctor gave him a drug treatment and indicated him that he had to join the clinic's mutual-help group to be able to keep a follow-up of his disease. Javier has been attending the mutual-help group for three years where he has received information about care and specific diets, and he also gets weight and size measurements as well as capillary glucometry once a month. However, his glycosylated hemoglobin levels are kept above 7.5%. Anyway, he wants to keep up his efforts because he is concerned about his health and he thinks what would happen to his family in case his disease complicates for some reason.

Basis that precede Health Coaching

Despite that there is a great variety of programs that benefit health, there are inconsistencies between the desired and actual health status, sometimes attributed to the gap between health personnel and patients^(22,23). Through its construction and development, Coaching has strengthened from a number of disciplines, including cognitive, positive, and behavioral psychology, social sciences, and the change in the organization and development⁽²⁴⁾ that provides solid basis to this process to form a comprehensive, empathic, and more knowledgeable Coach. Currently, Health Coaching is a type of innovative education and new approach that reinforces self-management in the patient, improves the guality of his results, and reduces costs⁽²⁵⁾.

Health Coaching Consequences or Results

The studies about the effects of Coaching on the health sector have described positive effects in body weight⁽²⁰⁾, blood pressure, quality of life, physical activity, depression, and emotional stress⁽²⁶⁾, improvement in the behavior, health self-perception, self-confidence perception, as well as his determination to bring about and take responsibility for his treatment. Even those people who do not show advances in their objectives and goals, have reported benefits in other aspects of their life as a result of the relationship between the Coach and the patient⁽²⁷⁾.

Theoretical References and Experience-Based Indicators

The term Health Coaching has emerged from the motivational interviewing (MI) concept described by Miller and Rollnick⁽²⁸⁾. Other authors point out that Coaching is based on the Transtheoretical Model of Behavior Change proposed by Prochaska and DiClemente⁽²⁹⁾, since the search of a change in behavior requires awareness and knowledge about the relevance of the problem, as necessary prior requirements, which are aspects addressed by said theory. However, with respect to validated experience-based indicators there is very little information, since several authors have created their own questionnaire to assess the effects of Coaching on the behavior and the changes in some biomarkers^(29,30).

CONCLUSION

The methodology proposed by Walker and Avant⁽⁷⁾ has made it possible to carry out an assessment of the existing information about Health Coaching and propose the Health Coaching as a methodological process where a health professional with a background in Coaching accompanies other persons through an empathic and collaborative relationship, in order to set and comply with objectives related to health. The Health Coach does not indicate the patient what to do or how to do it, however, he guarantees the success in the results through the use of tools such as interviews, introspection, motivation, inhibition of limitations, use of the patient's strengths, and self-monitoring, and this process can be carried out on the basis of personalattendance (face to face) or virtual, utilizing as main foundation the respect for the other as legitimate being, focusing on a change of attitude regarding the disease and the possibilities of the future, not in the errors of the past or the present.

Limitations of the Study

This study only considered free information to carry out the analysis of the Health Coaching concept disregarding information whose access had to be pre-paid.

Recommendations

Carrying out revision studies about interventions that have used Health Coaching in comparison with other strategies or techniques used for behavior change are recommended.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interests with respect to the research, authorship, or publication of this paper.

FINANCING

Self-supporting.

BIBLIOGRAPHIC REFERENCES

1. Ravier L. Arte y ciencia del coaching: su historia, filosofía y esencia. 2da Ed. Dunken. Buenos Aires; 2016. 304 p.

2.- Palomo VMT. Liderazgo y motivación de equipos de trabajo. ESIC Editorial. Madrid; 2013. 291 p.

3. Stern LR. Executive Coaching: A Working Definition. Consulting Psychology Journal: Practice and Research. 2004; 56(3):154-162. Available at: https://psycnet.apa.org/ record/2004-18811-003

4. Whitmore J. Coaching para Performance. 1st Edition. Qualitymark. Rio de Janeiro; 2006. 180 p.

5. Escuela Europea de Coaching [Internet]. Madrid, España. [Updated in 2017, quoted on May 15, de 2018]. Available at: http://america.escuelacoaching.com/eec/que-escoaching/53

6. Losch S, Traut-Mattausch E, Mühlberger MD, Jonas E. Comparing the Effectiveness of Individual Coaching, Self-Coaching, and Group Training: How Leadership Makes the Difference. Front Psychol. 2016; 7:629. Available at: https://www.frontiersin.org/articles/10.3389/fpsyg.2016.00629/full

7. Walker WLO, Avant KC. Strategies for theory construction in nursing. 5 th ed. Austin, Texas: Pearson Educations Inc; 2011. 256 p.

8. Muñoz OKF, Aguiar PC, Caron-Lienert RS. Coaching and barriers to weight loss: an integrative review. Diabetes MetabSyndrObes. 2016; 10:1–11. Available at: https://www. ncbi.nlm.nih.gov/pmc/articles/PMC5207339/

9. Ammentorp J, Kofoed PE. Coach training can improve the self-efficacy of neonatal nurses. A pilot study. Patient Educ Couns. 2010; 79 (2): 258-261.Available at: https://www.ncbi. nlm.nih.gov/pubmed/19786336

10. Martinez J. Coaching y liderazgo. Contribuciones a la economía. [Internet] 2011 Jun [quoted on May 12, 2019]. Available at: http://www.eumed.net/ce/2011a/jamg3.htm

11. Salazar G. Coaching en acción. McGraw-Hill Interamericana. México, DF; 2000. 274 p.

12. González S, Clèries X. El coaching en el ámbito sanitario: una aproximación a su viabilidad. Gaceta Sanitaria. 2002; 16:533-535. Available at: http://scielo.isciii.es/scielo. php?script=sci_arttext&pid=S0213-91112002000600013 13. Escuela Europea de Coaching [Internet]. ¿Qué es el coaching? Madrid, España. [Upadote in 2017, quoted on May 15, 2018]. Available at: https://www.escuelacoaching. com/eec/que-es-coaching/26

14. Stieger M, Nißen M, Rüegger D, Kowatsch T, Flückiger C, Allemand M. PEACH, a smartphone- and conversational agent-based coaching intervention for intentional personality change: study protocol of a randomized, wait-list controlled trial. BMC Psychology. 2018; 6 (1): 43. Available at: https://bmcpsychology.biomedcentral.com/articles/10.1186/ s40359-018-0257-9

15. Molins RJ. Coaching y Salud. Cuadernos del Coaching. 2011;(7):6-7. Available at: http://www.cuadernosdecoaching. com/ICF-Espana/cc7/Coaching%20y%20Salud.pdf

16. Bonaln RR., Almenares CHB, Marzán DM. Coaching de salud: un nuevo enfoque en el empoderamiento del paciente con enfermedades crónicas no transmisibles. Medisan. 2012; 16(5), 773-785 Available at: http://scielo.sld.cu/scielo. php?script=sci_arttext&pid=S1029-30192012000500014

17. Tricia LM, Rena RA. A randomized controlled pilot study testing three types of health coaches for obesity treatment: Professional, peer, and mentor. Obesity. 2013; 21(5):928-934. Available at: https://onlinelibrary.wiley.com/doi/full/10.1002/ oby.20271

18. DeJesus RS, Clark MM, Rutten LJF, Hathaway JC, Wilson PM, Link SM, Sauver J. Wellness Coaching to Improve Lifestyle Behaviors Among Adults With Prediabetes: Patients' Experience and Perceptions to Participation. Journal of Patient Experience. 2018; 5 (4): 314-319. Available at: https://journals.sagepub.com/doi/full/10.1177/2374373518769118

19. Howard LM, Hagen BF. Experiences of persons with type II diabetes receiving health coaching: an exploratory qualitative study. EducHealth. 2012; 25(1):66-9.Available at: http://www.educationforhealth.net/article.asp?issn=1357-6283;year=2012;volume=25;issue=1;spage=66;epage=69;a ulast=Howard

20. Giménez-Sánchez J, Fleta-Sánchez Y, Meya-Molina A. Coaching nutricional para la pérdida de peso. Nutrición Hospitalaria. 2016;33(1):135-147. Available at: http://scielo. isciii.es/pdf/nh/v33n1/24_revision1.pdf

21. Mijares L, Baxley SM, Bond ML. Mentoring: A Concept Analysis. Journal of Theory Construction & Testing. 2013;17(1): 23-28. Available at: http://connection.ebscohost.com/c/articles/87818907/mentoring-concept-analysis

22. Chassin MR, Loeb JM. The ongoing quality improvement journey: next stop, high reliability. Health Affairs. 2011; 30(4):

559–568. Available at: https://www.healthaffairs.org/doi/ full/10.1377/hlthaff.2011.0076?url_ver=Z39.88-2003&rfr_ id=ori%3Arid%3Acrossref.org&rfr_dat=cr_pub%3Dpubmed

23. Scott I. What are the most effective strategies for improving quality and safety of health care?. Internal Medicine Journal. 2009; 39(6):389–400. Available at: https://onlinelibrary.wiley. com/doi/full/10.1111/j.1445-5994.2008.01798.x

24. Grant AM, Stober DR. Evidence based coaching handbook: putting best practices to work for your clients. New Jersey, US: John Wiley & Sons Inc; 2006.416 p.

25. Huffman M. Evidence-based health coaching for healthcare providers. 2 th ed. Winchester: National Society of Health Coaches; 2011.

26. Newnham-Kanas C, Gorczynski P, Morrow D, Irwin JD. Annotated bibliography of life coaching and health research. International Journal of Evidence Based Coaching and Mentoring. 2009;7(1):39-103.Available at: http://ijebcm. brookes.ac.uk/documents/vol07issue1-paper-02.pdf

27. Neuner-Jehle S, Schmid, M, Grüninger U. The Health Coaching programme: a new patient-centred and visually supported approach for health behaviour change in primary care. BMC family practice. 2013;14(1):1-8. Available at: https://bmcfampract.biomedcentral.com/articles/10.1186/1471-2296-14-100

28. Miller WR, Rollnick S. Motivational interviewing–preparing people to change addictive behaviour. Guildford Press. New York; 1991. 300 p.

29. Prochaska JO, DiClemente CC. Toward a comprehensive model of change. In Treating addictive behaviors. Nueva York: Springer, Plenum Press Boston, MA; 1986. 464 p.

30. Ammentorp J, Uhrenfeldt L, Angel F, Ehrensvärd M, Carlsen EB., Kofoed, P. E. Can life coaching improve health outcomes? –A systematic review of intervention studies. BMC health services research. 2013;13(1):1-10. Available at: https://bmchealthservres.biomedcentral.com/ articles/10.1186/1472-6963-13-428