



Deep Dive Into



About YourCoach.Health

At <u>YourCoach.Health</u> we stand up, scale and operate best-in-class health coaching services via our easily and seamlessly embedded technology, powered by the largest army of validated health and wellness coaches. If you are an organization looking to integrate or scale health coaching for your population or around your product or service, we are here for you!

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Executive Summary

America's population is aging and living longer. Latest studies reveal that by 2040, the number of older adults is expected to reach <u>80.8 million</u>. By 2060, older adults will make up nearly 25% of the US population, reaching more than <u>94 million</u>.

The aging population faces mounting challenges, including chronic health conditions, reduced mobility, and mental health concerns. Especially as this subset of the population continues to increase, now more than ever it's important to support healthy, active aging among U.S. adults.

For example, according to the CDC, more than 7 in 10 adult Americans 55 years and older <u>are suffering</u> from at least one chronic condition, and almost half (47%) have two or more. What's more, <u>one in four</u> adults ages 65 and older are living with a mental health condition, and are disproportionately at risk for suicide.

Health coaching plays an important role in encouraging active, healthy aging and enhancing the overall health and wellbeing of those ages 65 and older. Health coaches empower this population to adopt healthier habits, manage chronic conditions, seek out social connection, and navigate the complexities of aging.

Studies have shown that health coaching is an effective approach for chronic disease prevention and management, such as diabetes or heart disease, symptoms and pain reduction, lifestyle changes, mental health, and even cognitive improvements. In today's Deep Dive, we take a look at the many important and impressive ways health coaches can and do help individuals embrace getting older and age more healthfully.

Active Aging and Health Coaching
Executive Summary

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What Is Healthy Aging?

Healthy aging refers to the process of growing older while maintaining or even improving one's physical, mental, and social well-being.

The World Health Organization <u>defines</u> healthy aging as, "the process of developing and maintaining the functional ability that enables well-being in older age." This "functional ability" refers to the capabilities that enable all people to be and do what they value and enjoy.



Diversity

The aging population is not homogenous, and the needs and challenges faced by older adults can be profoundly influenced by factors such as race, ethnicity, culture, gender, sexual orientation, religion, and more.

A diverse approach to healthy aging involves tailoring healthcare, social services, and support to account for the unique perspectives and requirements of different individuals.

Inequality

Economic inequalities, healthcare disparities, and variations in housing security are just a few examples of how inequality can shape the aging experience. Financial insecurity, for instance, can lead to stress and challenges in affording healthcare, nutritious food, and suitable housing.

Addressing inequality in the context of healthy aging requires a concerted effort to reduce disparities, ensuring that older individuals have equitable access to essential services and resources.

Active Aging and Health Coaching What Is Healthy Aging?



What Are Key Components of Healthy Aging?

Healthy and Optimal Diet

A healthy diet has been found to have a significant effect on overall life expectancy. In a recent study, published in the Public Library of <u>Science</u>, researchers found that a 60-year-old who made the switch from a typical Western diet focused on red meat and processed foods to an optimal Mediterranean-style diet (and stuck with it) boosted their life expectancy by up to 8 years, and an 80-year-old could gain about 3.4 years.

Physical Well-Being

Regular physical activity is essential for maintaining strength, flexibility, and cardiovascular health. <u>A study</u> of adults ages 40 and older found that taking 8,000 steps or more per day, compared to just 4,000 steps, was associated with <u>a 51% lower risk of death</u> from all causes.

Mental Well-Being

A sharp and engaged mind is vital for healthy aging. Activities like reading, puzzles, lifelong learning, and mindfulness practices can enhance cognitive functioning and emotional well-being. Managing stress and seeking mental health support when needed are also markedly important.

Social Engagement

<u>Studies show</u> that social participation reduces loneliness, depression, and stress among aging populations, while improving self-care skills. Staying connected with friends, family, and the community can provide emotional support, combat loneliness, and contribute to mental and emotional well-being.

Preventative Healthcare

Regular check-ups, screenings, and vaccinations are essential for early detection and management of health issues. Following prescribed treatment plans and managing risk factors for chronic diseases are an essential part of preventive healthcare among the aging population.

Healthy Lifestyle Choices

Avoiding harmful habits such as smoking and excessive alcohol consumption is critical. Additionally, managing stress, getting adequate sleep, and maintaining a positive outlook on life are all elements of a healthy lifestyle that can support aging well.

Active Aging and Health Coaching What Is Healthy Aging?



Risk Factors



Sedentary Lifestyle

According to results from a 2019 study, moderate to vigorous physical activity is strongly associated with muscle function, regardless of age. A lack of physical activity can contribute to health issues such as obesity, cardiovascular disease, and mobility limitations.



Unhealthy Diet

A 2021 study analyzing the eating patterns of more than 21,000 participants found that people closely following the Mediterranean-style diet, focused on grains, fruits, vegetables, seafood, beans, and nuts, had a significantly <u>lower risk of sudden cardiac death</u>. Poor dietary habits, such as consuming a highcalorie, low-nutrient diet with excessive sugar, salt, and saturated fats, can lead to obesity, malnutrition, and various chronic diseases.



Smoking and Substance Abuse

One study found that among men and women 60 years or older, smokers were three times more likely to die within the six-year follow-up period than those who had never smoked. Smoking and the misuse of alcohol or other substances can have severe negative consequences for aging individuals.



Chronic Health Conditions

The presence of chronic diseases such as diabetes, hypertension, and arthritis can impact one's ability to remain active and healthy, especially if someone is afflicted with more than one condition. Managing and controlling chronic disease is crucial for maintaining optimal quality of life over the years.



Social Isolation

A lack of social engagement and meaningful connection can lead to loneliness and social isolation, negatively affecting mental and emotional well-being. A 2017 study of more than 8,000 adults older than 65 found that loneliness was linked to faster cognitive decline and symptoms of depression.



Limited Access to Healthcare

A 2021 study found that getting regular check-ups helps doctors catch chronic diseases early and can help patients reduce risk factors for disease, such as high blood pressure and cholesterol levels. Inadequate access to healthcare services, including medical check-ups, preventive care, and necessary treatments, can result in undiagnosed or untreated health issues, leading to a decline in overall health.

Active Aging and Health Coaching What Is Healthy Aging?



Risk Factors



Unsafe Living Environment

Hazards in one's living environment, such as slippery floors, poor lighting, and lack of handrails, can increase the risk of falls and injuries, which can have a significant impact on an older adult's physical well-being.



Financial Insecurity

Economic challenges, including inadequate retirement savings or social support, can cause stress and limit access to healthcare and other essential resources needed for healthy aging.



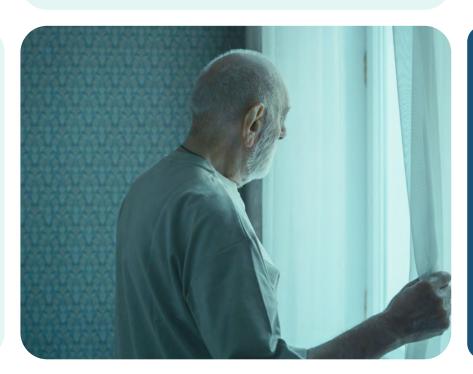
Stress & Mental Health

A 2020 study has found that cortisol levels in a person's body increase steadily after middle-age, and reach the maximum level after one's 50s. Such constant stress can change the brain, affect memory, and increase the risk of developing Alzheimer's or related dementias.



Lack of Purpose and Engagement

A lack of activities and a sense of purpose can result in boredom and diminished mental and emotional well-being. One study showed that older adults who spent at least 1 hour reading or engaged in other hobbies had a decreased risk of dementia compared to those who spent less than 30 minutes a day on hobbies.



Insight:

A <u>2023 study</u> suggests that spending 1–2 hours per day online may help adults lower their risk of dementia.

In more than 18,000 adults, regular internet usage was associated with approximately half the risk of dementia compared to non-regular usage group.

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Chronic Diseases Among Older Adults

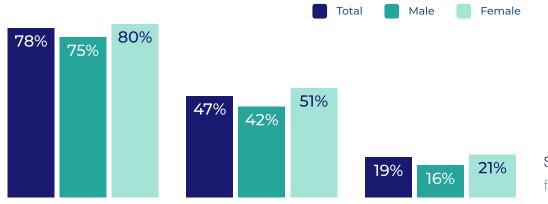
Data:



More than 7 in 10 adult Americans ages 55 and older are suffering from at least one chronic condition.

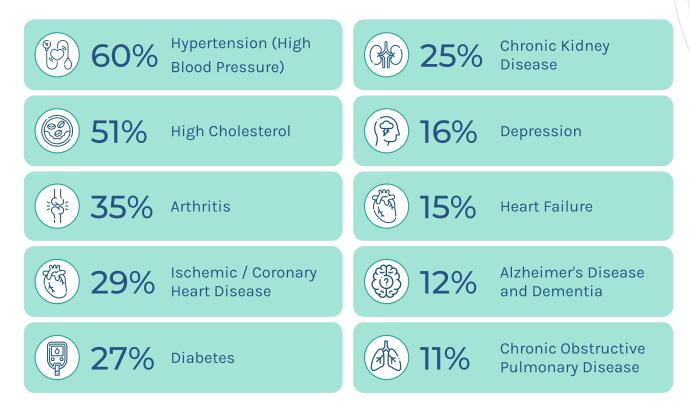
Chronic conditions are highly prevalent among the older population—over 70 percent of individuals have at least one chronic condition and almost half (47%) have at least two. Data also shows that chronic conditions are more prevalent in females than males.

Percentage of Adults age 55+ with one or more, two or more, or three or more of a possible six chronic conditions: United States, 2008



1+ chronic conditions 2+ chronic conditions 3+ chronic conditions

10 Most Common Chronic Conditions for Adults 65+



Source: Centers for Medicare & Medicaid Services, Chronic Conditions Prevalence State/County Table: All Fee-for-Service Beneficiaries.

Source: CDC/National Center for Health Statistics: National Health Interview Survey.



Prevalence of Mental Health Conditions

Data:



One in four American adults 65 and older is living with a mental health condition such as depression or anxiety.

Depression, anxiety, and cognitive disorders are common mental health conditions in older age, often associated with factors like the loss of loved ones, physical limitations, chronic health conditions, and social isolation.

Evidence shows that <u>one in four</u> adults ages 65 and older suffers from at least one mental health condition and almost half of them reported experiencing fair or poor health days during the last month. In addition, a larger share of older women than men reported anxiety or depression-28% versus 20%.

Prevalence of Reported Depression or Anxiety by Adults 65 and older

Overall, 65 and older	24%	Hispanic	33%
Live Alone	27%	Income under \$25,000	37%
Women	28%	Fair or Poor Health	48%

Notes: Analysis is among adults age 65 and older. Self-reported health status. Adults of Hispanic origin may be of any race, but are categorized as Hispanic for this analysis; All other groups are non-Hispanic.

Source: KFF analysis of U.S. Census Bureau's Household Pulse Survey, August 19-31, 2020.





Suicide in the Elderly

Data:



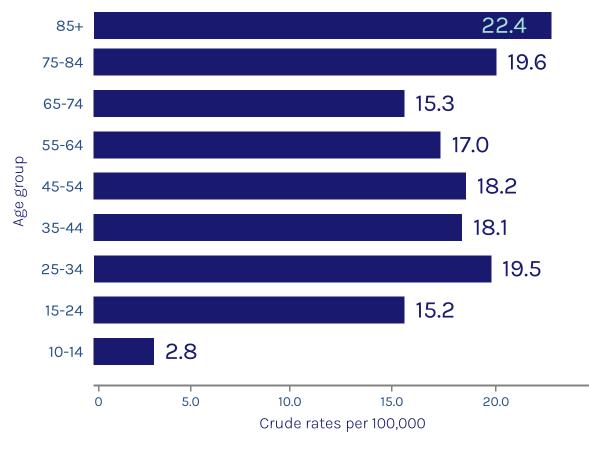
Nearly one in five suicide deaths occur among adults ages 65 and older.

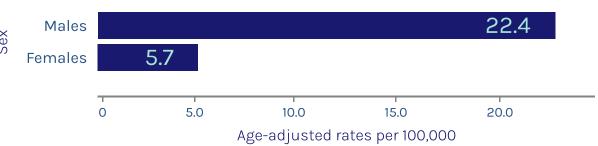
Mental health conditions are often implicated as a factor in cases of suicide. Older adults make up 12% of the U.S. population but account for 18% of all suicides, more than any other age group. Moreover, suicide attempts by older adults are much more likely to result in death than among younger persons.

CDC data <u>shows</u> that people ages 85 and older have the highest rates of suicide when considering count per 100,000.

Suicide rates are particularly high among older men, with men ages 85 and older having the highest rate of any group in the country. In 2021, the suicide rate among males was approximately four times higher than the rate among females. Males make up 50% of the population but <u>nearly 80% of suicides</u>.

Suicide Rates by Age Groups, US, 2021





Source: CDC Vital Statistics



Social Isolation and Loneliness

Data:



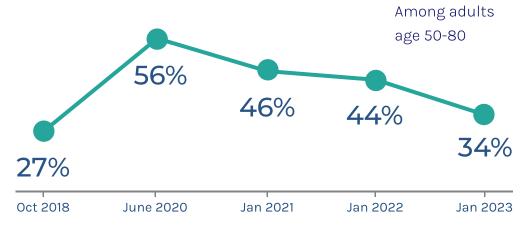
One in three adults aged 50–80 <u>reported</u> feeling isolated from others in the past year.

Maintaining social relationships can become more challenging as people age due to factors like memory loss, disability, difficulty moving around, and losing family members and friends. This increases the likelihood of social isolation and loneliness in elderly adults.

Though often used interchangeably, social isolation and loneliness are quite different. <u>Loneliness</u> is the distressing feeling of being alone or separated, while <u>social isolation</u> is the lack of social contacts and having few people to interact with regularly.

According to National Poll on Healthy Aging (NPHA) <u>survey results</u>, 34% of older adults admitted feeling isolated and 37% reported feeling a lack of companionship in 2022.

Changes in feelings of social isolation, 2018-2023



Percentage who felt isolated from others some of the time or often

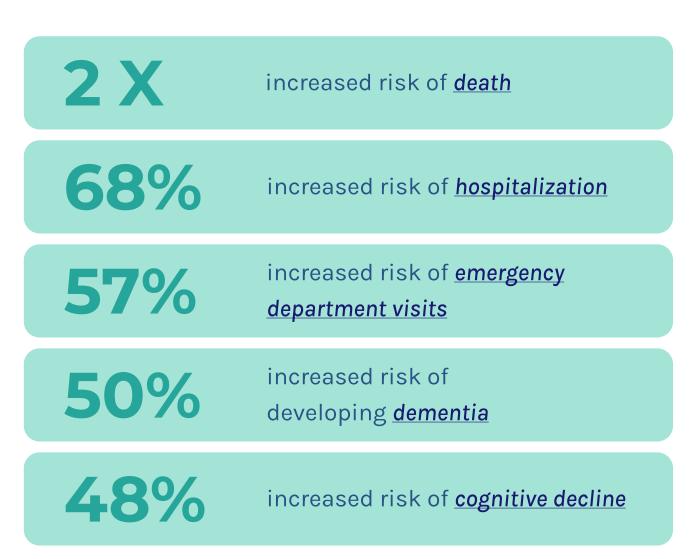
Source: Malani P, Singer D, Kirch M, Solway E, Roberts S, Smith E, Hutchens L, Kullgren J. Trends in Loneliness Among Older Adults from 2018–2023. University of Michigan National Poll on Healthy Aging. March 2023.





Social Isolation and Loneliness

Feeling loneliness and lacking social contact with others can have negative effects on an individual's physical or mental health. <u>Recent studies</u> show that older adults who are socially isolated or feel lonely experience:





Research also shows that being socially active and engaged can benefit older adults. <u>A 2023</u> study found that making new social contacts was associated with improved psychological well-being and higher among older adults.

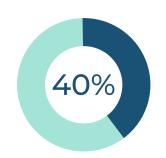
Being socially active could also lead to additional positive lifestyle habits. A 2019 study found that older adults who had regular contact with friends and family were more physically active than those who did not.

Active Aging and Health Coaching Mental Health Among Older Adults



Cognitive Health Among Older Adults

Data:



Approximately 40% of people over the age of 65 experience some form of memory loss.

As we age, some of our cognitive capabilities start to decline; but for most people, it doesn't happen rapidly or noticeably. Even if an individual experiences memory loss, it's still unlikely that a person has or will have dementia.

Data:



One in five of U.S. adults ages 65 and older have mild cognitive impairment.

Some people start to experience cognitive decline as they age, which refers to the concern or difficulty with a person's thinking, memory, concentration, and other brain functions beyond what is typically expected due to aging.

Data:



One in 10 older Americans have dementia.

Also known as cognitive impairment, it can come on suddenly or gradually, and it can be permanent or temporary. Individuals with cognitive impairment are at a higher risk of developing Alzheimer's disease or dementia.

Data:

The economic impact of dementia, alone, including unpaid family caregiving, is estimated to be

57 billion >

per year in the United States.

Insight: The risks of developing dementia and cognitive impairment increase with age: 3% of people between 65 and 69 have dementia, rising to 35% for people ages 90 and over.



Symptoms of Cognitive Decline in Older Adults

Memory

As an example, forgetting recent events or repeating the same question

Reasoning, planning or problem-solving

> As an example, struggling with thinking things through, making decisions, or planning tasks

Attention

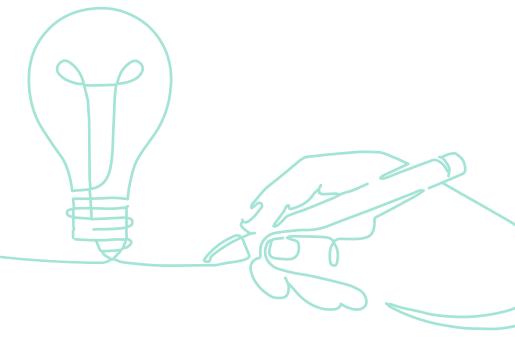
As an example, being very easily distracted, getting lost in familiar places or becoming disoriented about the date, time, or location

Language

As an example, taking much longer than usual to find the right word for something, difficulty learning new words and languages

Visual depth perception

As an example, struggling to interpret an object in three dimensions, judge distances or navigate stairs





Barriers for Help-Seeking

Stigma and Pride

A 2015 study on 478 older adults found that stigma was the main factor influencing one's decision to seek out help, and 40% of participants reported embarrassment and worry about what others would think as a barrier. Pride can also play a role, as some may feel they should handle problems independently, without seeking out support.

Fear of Treatment

Some older adults might fear the implications of treatment, such as side effects of medication, invasive procedures, or the perceived loss of independence. According to the survey, 40% of study participants 65 old or older, indicated a fear of being prescribed medication as the barrier for seeking psychological therapy.

Prior Experiences

A 2021 study found that prior experience of seeking professional help was associated with seeking professional help for depression in the future among elderly patients. Negative past experiences with healthcare providers or the mental health system could discourage older adults from seeking help due to fear, mistrust, or dissatisfaction with prior care.

Financial barriers to treatment

Financial limitations can prevent older adults from seeking mental health support, particularly if services are not covered by insurance or are too expensive. In a <u>recent survey</u> conducted by <u>Mental Health</u> America (MHA), 42% of adults with mental illness reported they were unable to receive necessary care because they could not afford it.

Active Aging and Health Coaching Barriers for Help-Seeking



Barriers for Help-Seeking

Limited health education and awareness

Many older adults might not recognize the symptoms of health issues or may attribute them to normal aging. Limited education and awareness around health conditions, <u>availability of treatments</u>, and the importance of seeking help <u>can prevent</u> individuals from recognizing their own symptoms and understanding the benefits of professional support.

Lack of representation within healthcare

According to 2015 data <u>from the APA</u>, 84% of psychologists, 67% of social workers, and 88% of mental health counselors are white. Some individuals might be less likely to seek help if they think their health practitioner or professional can't understand or empathize with their background; culture or experiences.

Lack of mental health care professionals and services

Inadequate access to mental health services, particularly in rural or underserved areas, can pose a significant barrier for a large portion of the population. This could include a shortage of mental health professionals, long wait times for appointments, and limited mental health facilities or resources. According to data from the <u>Department of Health and Human Services</u>, 163 million Americans (half of the U.S. population) live in federally-designated Mental Health Professional Shortage Areas.

Insight:

There are an estimated 350 individuals for every one mental health provider in the U.S., according to a <u>report by Mental Health America</u>.

Active Aging and Health Coaching Barriers for Help-Seeking

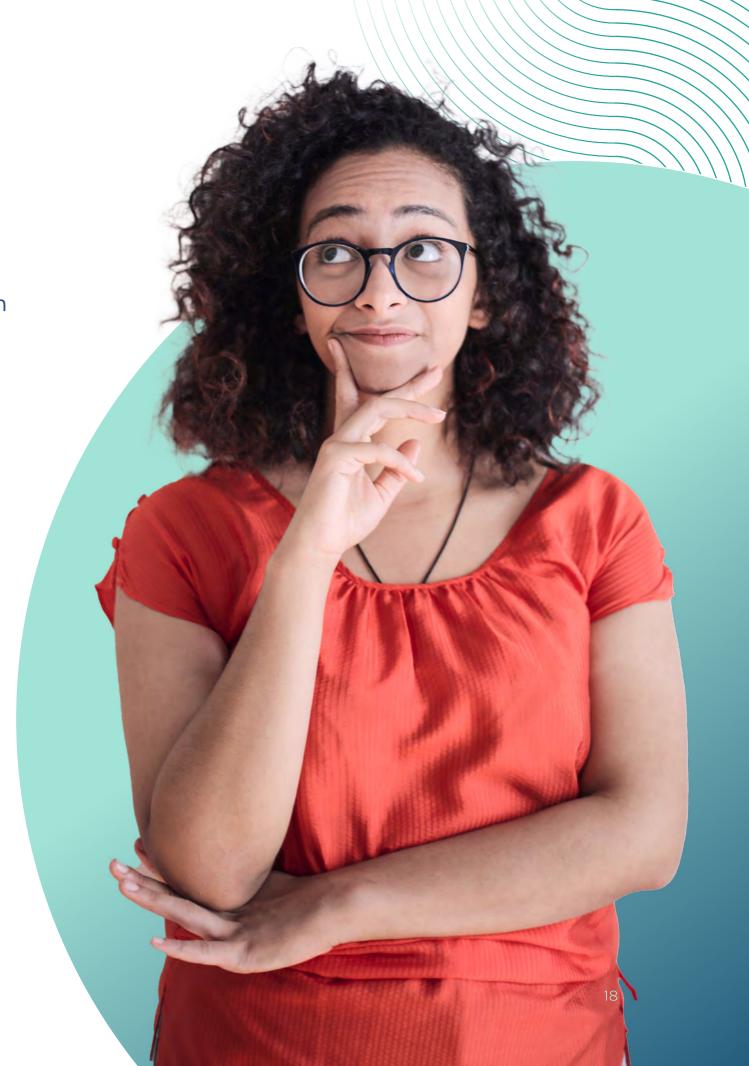


How Health Coaches Can and Do Help

Health coaching can be a keystone to ensuring important behavior changes become incorporated into daily routines, which is essential when protecting and promoting healthy aging. Coaches leverage an <u>evidence-based approach</u> to help with managing disease catalyzing changes in nutrition, behavior, physical activity levels, self-acceptance, mental health improvements, enhanced quality of life, and more.

At the heart of health coaching is a holistic approach, which considers the person as a whole, rather than focusing on an individual illness or health concern.

Health coaches maintain a client-centered approach, wherein the client is the expert in choosing their goals, engaging in self-discovery or active learning processes, and self-monitoring behaviors to increase accountability, all with the support and help of a health coach, until the desired outcomes are achieved. Instead of telling clients what they should or shouldn't do, coaches help clients to discover their own power and path to change.





A Health Coach is ...

- A highly skilled and certified professional
- Knowledgeable in human behavior, motivational techniques and health outcomes
- A change agent helping clients set and achieve health goals and build new habits
- Trained in helping a client maintain a positive and healthy mindset while working towards health and wellness goals by focusing on their strengths





A Health Coach is NOT

Although health coaches can and do work alongside patient care teams or in collaboration with other health care professionals to help clients enact health change day-to-day, it's important to understand their scope of practice.



A health coach is NOT a Doctor

Health coaches can not diagnose or prescribe. Health coaches are integral members of the health and care team and work with patients in helping them reach their health & wellness goals and adhere to a plan prescribed by their doctor.



A health coach is NOT a Personal Trainer

While coaches encourage physical activity, they focus on many other aspects of a person's wellbeing including emotional and mental wellness. They do not typically create fitness regimens in the same way that personal trainers do. However, some health coaches do hold fitness certifications and can help those who are seeking both a health coach and a personal trainer.

Insight: <u>Demystifying Health Coaching: Unpacking the Differences</u> Between Dieticians, Nutritionists & Health Coaches



A health coach is **NOT** a Therapist

Health coaches don't need to be therapists or psychologists, and great coaches don't try to mimic what a mental healthcare professional does. These professionals can complement one another and often work together.



A health coach is NOT a **Nutritionist or Dietitian**

Health coaches can help clients establish action plans for generalized healthy eating behaviors, whereas nutritionists and dietitians can prescribe meal plans and give specific nutritional advice to clients according to their medical needs or goals.



How Health Coaches Can & Do Help Achieve and Maintain Healthy Aging

Goal Setting and Action Planning

Health coaches can work with clients to set realistic and achievable goals related to specific needs and abilities of older individuals. These goals may include improving self-care habits, managing symptoms, enhancing coping strategies, and adopting healthier lifestyle behaviors. Coaches can help clients break down these goals into actionable steps and provide guidance on how to implement and sustain positive changes.

Lifestyle Modification

Health coaches can assist clients in making lifestyle modifications that promote mental and physical well-being. They can offer guidance on nutrition and exercise specifically tailored to aging bodies, focusing on maintaining muscle strength, flexibility, and balance. This may include resources for low-impact exercises and dietary recommendations that cater to age-related changes.

Behavioral Change Support

Health coaches can help clients identify and address any barriers or challenges they may face along their health journeys. Regular check-ins, progress tracking, and feedback from coaches can motivate clients and encourage them to stay committed to their well-being goals.

Chronic Disease Management

More than 7 in 10 adult Americans are suffering from at least one chronic condition, and almost half (47%) have at least two. Coaches can educate and assist in managing chronic conditions commonly associated with aging, such as diabetes, hypertension, or arthritis. They can help clients incorporate lifestyle changes that positively impact these conditions.



How Health Coaches Can & Do Help Achieve and Maintain Healthy Aging

Preventive Approaches

According to the World Health
Organization, at least 80% of heart
disease, stroke, and type 2
diabetes, as well as over a third of
cancers, can be prevented.
Preventive health measures are
important throughout life, but
especially as people age. Promoting
regular check-ups, vaccinations,
and screenings for age-related
health concerns like osteoporosis,
vision and hearing problems, and
cardiovascular health becomes
increasingly important for those
ages 65 and up.

Mental Health Support

An analysis of data from more than 2,000 participants from more than five decades reveals that individuals who were emotionally stable lived on average three years longer than those who had a tendency toward being in a negative or anxious emotional state. Coaches help older adults cope with life transitions, and potential mental health concerns by offering strategies for resilience, stress management, and maintaining cognitive function.

Social Connection

A 2023 study found that making new social contacts was associated with improved psychological well-being and greater happiness among older adults. Coaches can guide older adults in finding local community groups, senior centers, or social clubs where they could engage with peers and participate in activities that interest them. This might involve suggesting book clubs, hobby groups, exercise classes, or volunteer opportunities.

Care Coordination

Health coaches work
collaboratively with healthcare
and medical professionals to
implement a comprehensive
approach for older adults, whether
it's addressing chronic diseases
or specific conditions. By working
together, they can develop
integrated plans that address the
client's specific needs and
enhance the effectiveness of
disease prevention or
management strategies.

The Science of Health Coaching



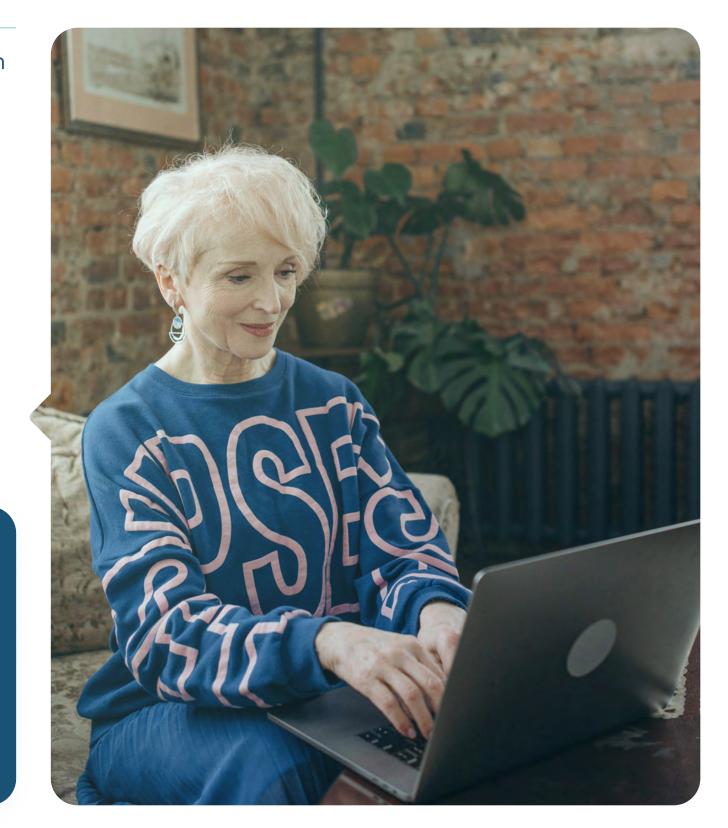
Results from a Comprehensive Review

According to a 2015 review of 10 scientific studies on health coaching effectiveness, coaching supported by telehealth technology was found as an effective intervention for change behavior among older adults.

Positive outcomes included reduction in hospital admissions/re-admissions, mortality, hemoglobin A1c (HbA1c) level, body weight, blood pressure, fatigue, and increase in physical activity level, quality of life, and user acceptance of the coaching program and technology.

Researchers concluded

Health coaching combined with telehealth may be an effective solution for providing health care to older adults





Lifestyle Modifications

Maintaining and sustaining a healthy lifestyle routine is key at any age. According to a <u>2023 study</u>, health coaching proved to be an effective approach for behavior changes among patients 50 years and older with one or more chronic conditions.

Study participants were randomized into two groups: 1) received a personalized health coaching program delivered electronically, including face-to-face videoconferencing and texting, and 2) received instructions from the study coordinator.

After 8 weeks, results showed that health coaching participants **significantly improved their health habits**, modifying the risk of chronic diseases when compared to the control group.

They also demonstrated higher levels of physical activity, healthier eating and drinking patterns, and greater confidence in achieving goals compared to usual care participants.

Comparison of outcome variables after the 8-week intervention, health coaching vs usual care

-	Health Coaching (n = 57)	Usual Care (n = 61)	Difference %
Level of exercise, activity	6.95 (3.43)	4.87 (3.3)	30%
Eating and Drinking	4.09 (3.51)	3.07 (3.57)	25%
Health Habits that modify risk of Chronic Disease	11.03 (5.22)	7.93 (5.17)	30%*
Independent self-care agency	109.71 (19.54)	101.07 (23.3)	8%
Importance of achieving these goals	9.1 (1.57)	8.6 (1.81)	5%
Confidence to achieve these goals	8.68 (1.81)	7.47 (1.69)	14%
Goal setting competency	17.77 (3.15)	16.33 (2.61)	8%
Q74-85 Medication taking self-care efficacy.	22.78 (2.09)	20.87 (4.7)	8%

^{*}statistically significant between groups

Source: Potempa K, Calarco M, Flaherty-Robb M, Butterworth S, Marriott D, Potempa S, Laughlin C, Schmidt P, Struble L, Harden K, Ghosh B, Furspan P, Ellis A. A randomized trial of a theory-driven model of health coaching for older adults: short-term and sustained outcomes. BMC Prim Care. 2023 Oct 5;24(1):205.



Chronic Diseases Prevention and Management

Data:



78% of studies show a positive effect of health coaching on A1C improvement according to a <u>compendium of health & wellness coaching literature</u>.

A 2017 study suggests health coaching affects the reduction of both systolic and diastolic blood pressure and describes coaching as a 'promising approach' in hypertension management.

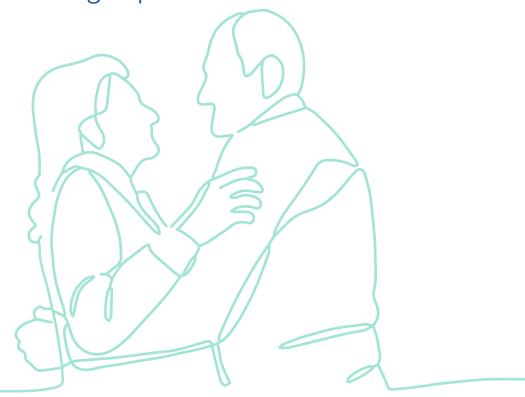
A 2021 study found that for older adults with type 2 diabetes, a 12-month online health coaching intervention on glycemic control reduced A1C levels by an absolute amount of 1.8% while the control group (diabetes education) reduced levels by 1.3%.

Data:



Almost half (49%) of coached patients achieved their hemoglobin A1C goal, according to <u>study results</u>.

A 2021 randomized control trial similarly showed a significant decrease of 0.62% in HbA1C for those patients receiving a health coaching intervention compared to 0.14% in the control group.





Chronic Disease Prevention and Management

A 2015 study aimed to examine the effectiveness of health coaching self-management programs for older adults with two and more chronic conditions in nursing homes reported positive results.

After 8 weeks of health coaching, the intervention group had significantly better outcomes when compared to baseline:

mental stress +46%* management/relaxation

+33%* cognitive symptom management

+33% to reduced illness intrusiveness

+28%* in exercise behaviors

to 6-item chronic disease +10%* self-efficacy score to social/role activities -50%*

limitations

-39% to PHQ-9 (depression

-12% in fatigue

in pain intensity score

*significantly higher when compared to standard care

Source: Park YH, Chang H. Effect of a health coaching self-management program for older adults with multimorbidity in nursing homes. Patient Prefer Adherence. 2014 Jul 4;8:959-70. doi: 10.2147/PPA.S62411.

Active Aging and Health Coaching
The Science of Health Coaching

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Changing Behaviors for Patients with Cognitive Impairment and Dementia

A 2019 pilot study showed statistically significant and clinically meaningful increases in physical activity, adherence to the Mediterranean diet, cognitive/social activity, and quality of life for coaching patients when compared to the standard-of-care control group.

The intervention group participated in the program, which consisted of weekly motivational interviewing phone calls and three visits with a "Brain Health Champion" health coach, who guided participants in achieving personalized goals.

Researchers concluded

Our results demonstrate the feasibility and potential efficacy of a health coaching approach in changing health behaviors in cognitively impaired and at-risk patients

The coaching group demonstrated statistically significant improvements in:

+40% to physical a

to physical activity (IPAQ, International Physical Activity Questionnaire)

+25%

in adherence to Mediterranean Diet (MedScore - Mediterranean Diet Score)

+13%

to cognitive capabilities (FCAS, Florida Cognitive Activities Scale)

+8%

to quality of life (FQOL, Flanagan Quality of Life Scale)

Source: Schwartz HEM, Bay CP, McFeeley BM, Krivanek TJ, Daffner KR, Gale SA. The Brain Health Champion study: Health coaching changes behaviors in patients with cognitive impairment. Alzheimers Dement (N Y). 2019 Nov 12;5:771-779.

while the control group showed declines for all scores on post-assessment.

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Managing Chronic Non-Cancer Pain in Older Adults

A 2022 study testing the efficiency of an "mHealth intervention," which combines symptom, diet, and behavior tracking via a smartphone application with data analytics to detect associations between symptoms and lifestyle factors along with weekly health coaching sessions with a goal to mitigate chronic non-cancer pain (CNCP) in adults 55 years of age and older.

Study results showed that:

- Pain intensity scores decreased by 31% in intervention participants but only by 9% among control arm participants
- Pain self-efficacy scores increased by 29% in the intervention group vs. 16% in the control arm
- Pain-related disability scores decreased by 22% among intervention participants vs. by 9% in the control arm
- Anxiety symptoms decreased by 55% in the intervention arm vs.
 22% among control arm participants
- Finally, the proportion of participants with General Anxiety Disorder (GAD-7) scores at follow-up decreased by 0.35 to 0, whereas control's did not change at all

Examination of the effects of the intervention

	Baseline estimate	Follow-up estimate (SE)	Follow-up-baseline (p-value)
Pain Intensity (0-10)	-	-	-
Control	4.90 (1.08)	4.53 (1.10)	-0.35 (0.605)
Intervention	3.83 (0.92)	2.62 (0.10)	-1.21 (0.136)
Intervention-control	-1.07 (1.18)	-1.93 (1.26)	p=0.412
Pain related disability 24-item (0-24)	-	-	-
Control	13.70 (3.33)	12.42 (3.35)	-1.28 (0.249)
Intervention	11.84 (2.85)	9.02 (2.90)	-2.81 (0.042)
Intervention-control	-1.86 (3.58)	-3.40 (3.64)	p=0.367
Pain self-efficacy (0-60)	-	-	-
Control	31.61 (5.68)	36.67 (5.62)	5.06 (0.284)
Intervention	37.61 (4.66)	48.59 (5.28)	10.98 (0.047)
Intervention-control	6.01 (6.23)	11.92 (6.65)	p=0.400
General anxiety disorder-7 total (0-21)	-	-	-
Control	7.07 (2.71)	5.53 (2.75)	-1.54 (0.350)
Intervention	6.87 (2.31)	3.07 (2.49)	-3.80 (0.057)
Intervention-control	-0.20 (2.96)	-2.46 (3.13)	p=0.372

Source: Kaul U, Scher C, Henderson CR Jr, Kim P, Dyhrberg M, Rudin V, Lytle M, Bundy N, Reid MC. A mobile health + health coaching application for the management of chronic non-cancer pain in older adults: Results from a pilot randomized controlled study. Front Pain Res (Lausanne). 2022 Jul 25;3:921428.

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Active Aging and Health Coaching

The Science of Health Coaching



Managing Chronic Non-cancer Pain in Older Adults

Analysis of the qualitative data from the exit interviews revealed 2 major themes documenting positive aspects of the experience:

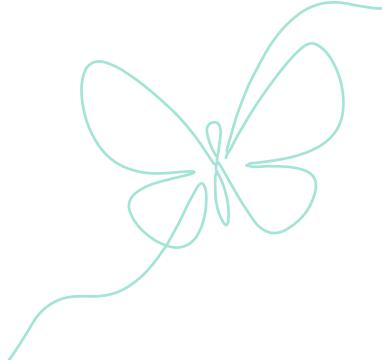
- 1. Participants valued the support/encouragement received by health coaches
- 2. Participants' self-monitoring behaviors were enhanced

Intervention participants described their interactions with health coaches using terms:

Inspired me

I really liked her upbeatness and level of attentiveness

I really liked the encouragement [name of health coach] provided on a weekly basis





Reducing costs and mortality risk

A 6-year study of 512 cardiovascular patients 80 years and older who underwent The Coaching On Achieving Cardiovascular Health (COACH) Program <u>showed</u> an absolute reduction in all-cause mortality of 5.08%, and an average net cost savings to the funder of \$12,115 per person in those who received the COACH Program compared with those who did not.

Reducing the number of hospital admissions

A recent study on the effectiveness of telephone-based health coaching for adult patients with chronic conditions showed a significantly reduced number of hospital admissions for a group of patients with heart disease and a reduced mortality in patients with chronic somatic conditions.





Improving Mental Health Among Premenopausal and Postmenopausal Women

A 2022 randomized controlled study, that included 94 postmenopausal and perimenopausal women aged 45 to 55 years, showed significant improvements in the scores of menopausal symptoms, depression symptoms, and quality of life among perimenopausal and postmenopausal women who participated in health coaching intervention compared to control groups.

Study results from another <u>randomized controlled trial</u> revealed improvements in mental health among women who experienced menopausal transition compared to those who received usual care. Researchers reported a decrease in depressive symptoms and anxiety, improved BMI, greater vegetable consumption, and reduced smoking.

Changes In Measures Of Depression, Anxiety And Quality Of Life Over Time From Baseline To Follow-Up

	Mean difference mean (p-value		
	Control N=121	Intervention N=130		
HADS-D: Hospital Anxiety and Depression Scale, depression subscale (scores 0-21)				
8 weeks	-0.4 (-0.9, 0.0)	-1.5 (-2.2, -0.8)	< 0.001	
26 weeks	-0.6 (-1.1, -0.2)	-1.9 (-2.6, -1.2)	< 0.001	
HADS-A: Hospital Anxiety and Depression Scale, anxiety subscale (scores 0-21)				
8 weeks	-0.4 (-0.9, 0.0)	-1.5 (-2.2, -0.8)	0.002	
26 weeks	-0.6 (-1.1, -0.2)	-1.9 (-2.6, -1.2)	< 0.001	
SF-12: Short-Form 12 Health Survey; MCS: mental component (scores 0-100)				
8 weeks	-0.2 (-1.3, 0.9)	+1.3 (-0.6, 3.1)	0.040	
26 weeks	+0.2 (-0.9, 1.3)	+2.2 (0.4, 4.1)	0.007	

Source: Almeida OP, Marsh K, Murray K, Hickey M, Sim M, Ford A, Flicker L. Reducing depression during the menopausal transition with health coaching: Results from the healthy menopausal transition randomised controlled trial. Maturitas. 2016 Oct;92:41-48.

We are here for you!

We stand up, scale and operate best-in-class health coaching services via our easily and seamlessly embedded technology, powered by the largest army of validated health and wellness coaches. If you are an organization looking to integrate or scale health coaching for your population or around your product or service, we are here for you!



About YourCoach

YourCoach.Health is the only operating system for behavior change, powered by health coaches. Our industry partners entrust us to stand up or augment their health coaching operations utilizing our APIs, widgets and techaugmented army of validated and credentialed health coaches to surround their existing product or service. We're the premier virtual home for health and wellness coaching, an ecosystem built to empower health coaches while expanding access to their services through our industry partnerships. Join us on the Health Coaching Revolution as we strive to deliver the power of health coaching to the 8.5 billion global population by 2030.

Our mission

By the year 2030 our mission is for the projected 8.5 billion people in the world to have access to Health Coaches, creating even more Happy and Healthy Humans.







Health Coaching Industry Report V2.0

