



Deep Dive Into

Women's Cancers and Health Coaching





About YourCoach.Health

At [YourCoach.Health](#) we stand up, scale and operate best-in-class health coaching services for the health and care industry 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

Cancer is the second leading cause of death in the United States and worldwide, and four in ten American women will be diagnosed with cancer at some point during their lifetime.

Women face both different types of cancers, like ovarian, cervical and uterine cancers, and different risks for developing some of the more common types of cancers, like breast, lung and skin cancer. The most common cancer among women might not come as a surprise, but its prognosis is steadily improving. Breast cancer accounts for 1 in 3 of all new cancer diagnoses among women and accounts for 14% of all cancer treatment costs. Lung cancer is the second most common cancer for both sexes and the leading cause of cancer-related mortality, followed by uterine cancer, colorectal cancer, and melanoma (though each account for less than 5% of all new cases among women).

Health coaches play a core role in helping women prevent and combat cancer alongside their health and care teams. They're instrumental in educating women about cancer risks and lifestyle changes that can be both preventative and therapeutic. They're motivational, and help clients implement healthier habits, including balanced nutrition, regular exercise, and stress management, ultimately reducing cancer risks. Health coaches also encourage women to adhere to recommended screenings and treatment protocols, improving overall cancer outcomes.

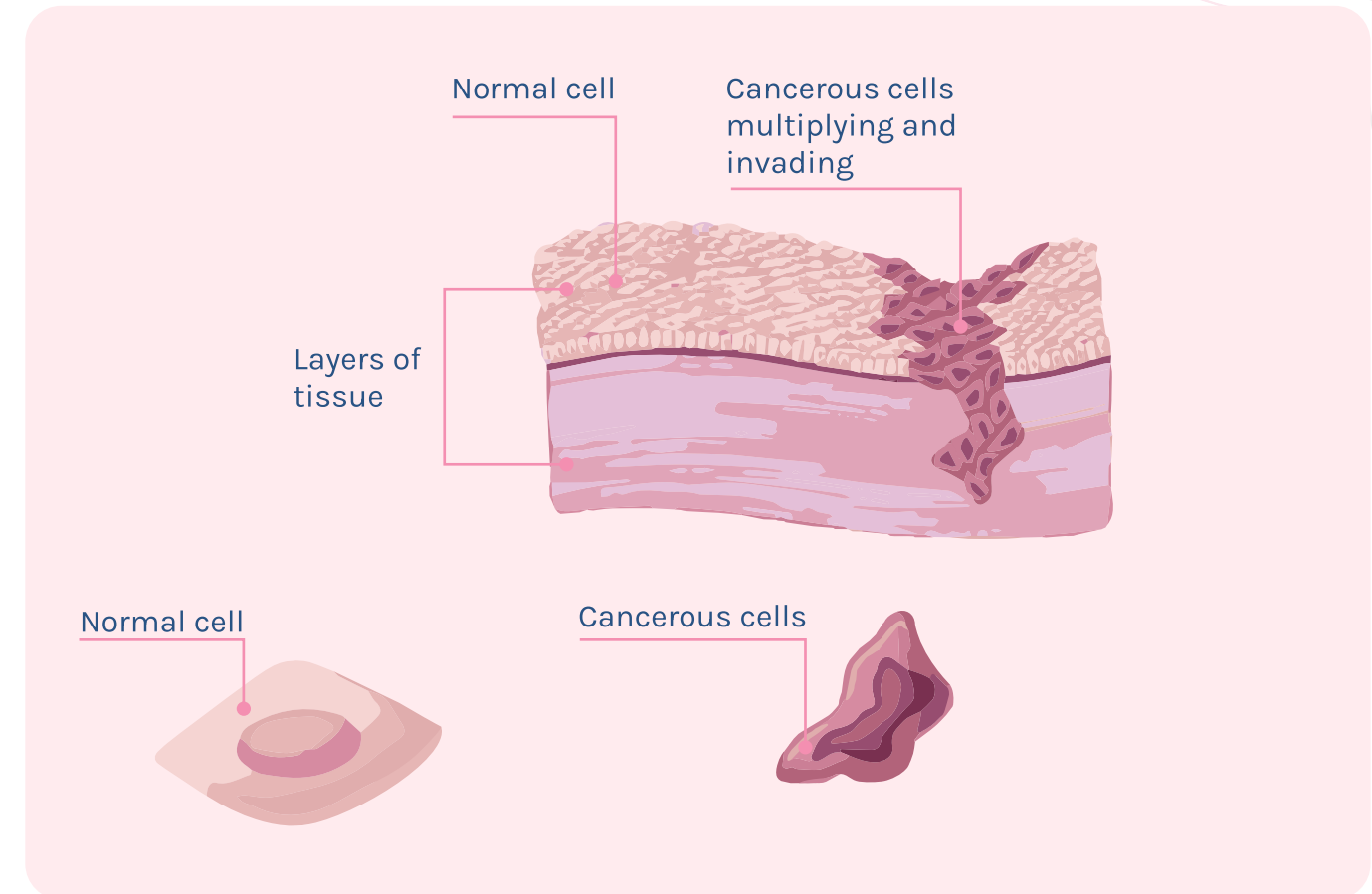
This Deep Dive highlights the value health coaches bring to the healthcare landscape, particularly to women at risk of developing, in recovery from or healing through cancer. By forming strong client-coach relationships and tailoring interventions to individual needs, health coaches empower women to proactively manage their health and make informed decisions regarding their cancer journeys. This collaborative approach ensures women receive the necessary support and resources to navigate the complexities of cancer prevention and management, and lead to improved quality of life.

What is Cancer?

Cancer is a broad term used to describe a group of diseases characterized by the uncontrolled growth and spread of abnormal cells. Normal cells in the body grow, divide, and die in a controlled manner, but cancer disrupts this process.

The human body is made up of trillions of cells, each with a specific function. When **genetic mutations** occur within certain cells, they can disrupt the normal control mechanisms, causing the affected cells to divide and multiply in an unregulated manner. These abnormal cells form a mass of tissue called a tumor.

However, not all tumors are cancerous. **Tumors** can be benign, meaning they don't spread to other parts of the body and are not cancerous, or they can be malignant, meaning they have the potential to invade nearby tissues and spread to other parts of the body through the bloodstream or lymphatic system.



■ Data:

The economic cost of cancer is estimated to exceed

\$25 trillion ↗

over the next 30 years, according to an analysis of 29 cancers across 204 countries, published in **Nature**. Five types of cancer will account for almost half of the burden.

How Does Cancer Develop?

Cancer is a **genetic disease** and is caused by changes to genes that control the way our cells function, especially how they grow and divide.

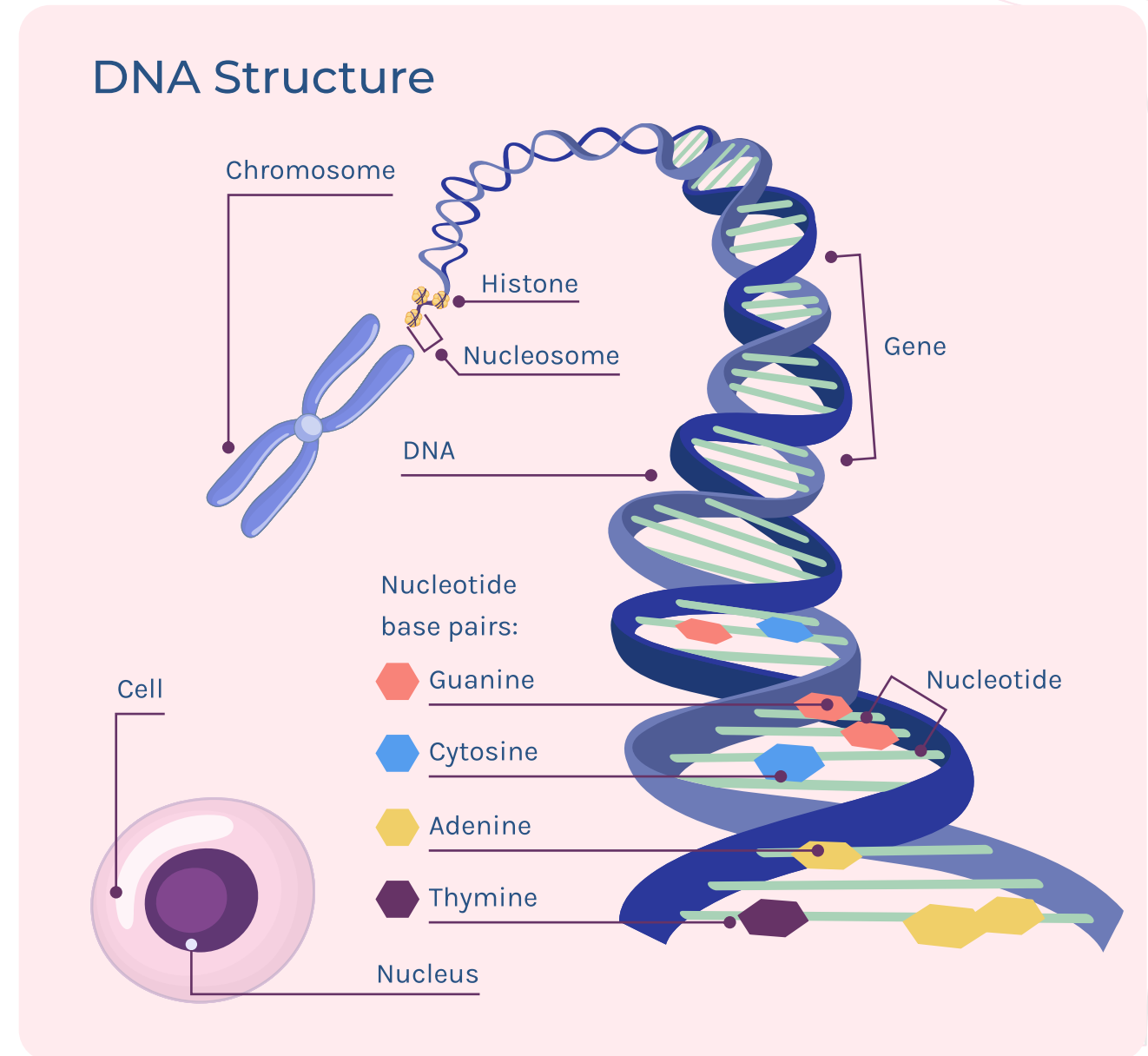
Genetic changes that cause cancer can happen due to:

- **Mistakes** when repairing DNA errors
- **Damage** to DNA caused by harmful substances in the environment, such as the chemicals in tobacco smoke and ultraviolet rays from the sun

Inherited changes from one or both of the parents

Normally, the body eliminates cells with damaged DNA before they turn cancerous. However, as we age, the body's capacity to do so **declines**. This contributes to an increased chance of developing cancer later in life.

Each cancer has a **unique combination** of genetic changes. As the cancer continues to grow, new changes might occur. This means that no two tumors look or behave the same.



Insight: Medical researchers estimate that up to **10%** of all cancers are caused by inherited genetic mutations that can't be controlled.

What Are The Most Common Cancers In Women In The US?

Data:



Four in ten American women *will be diagnosed* with cancer at some point during their lifetime.

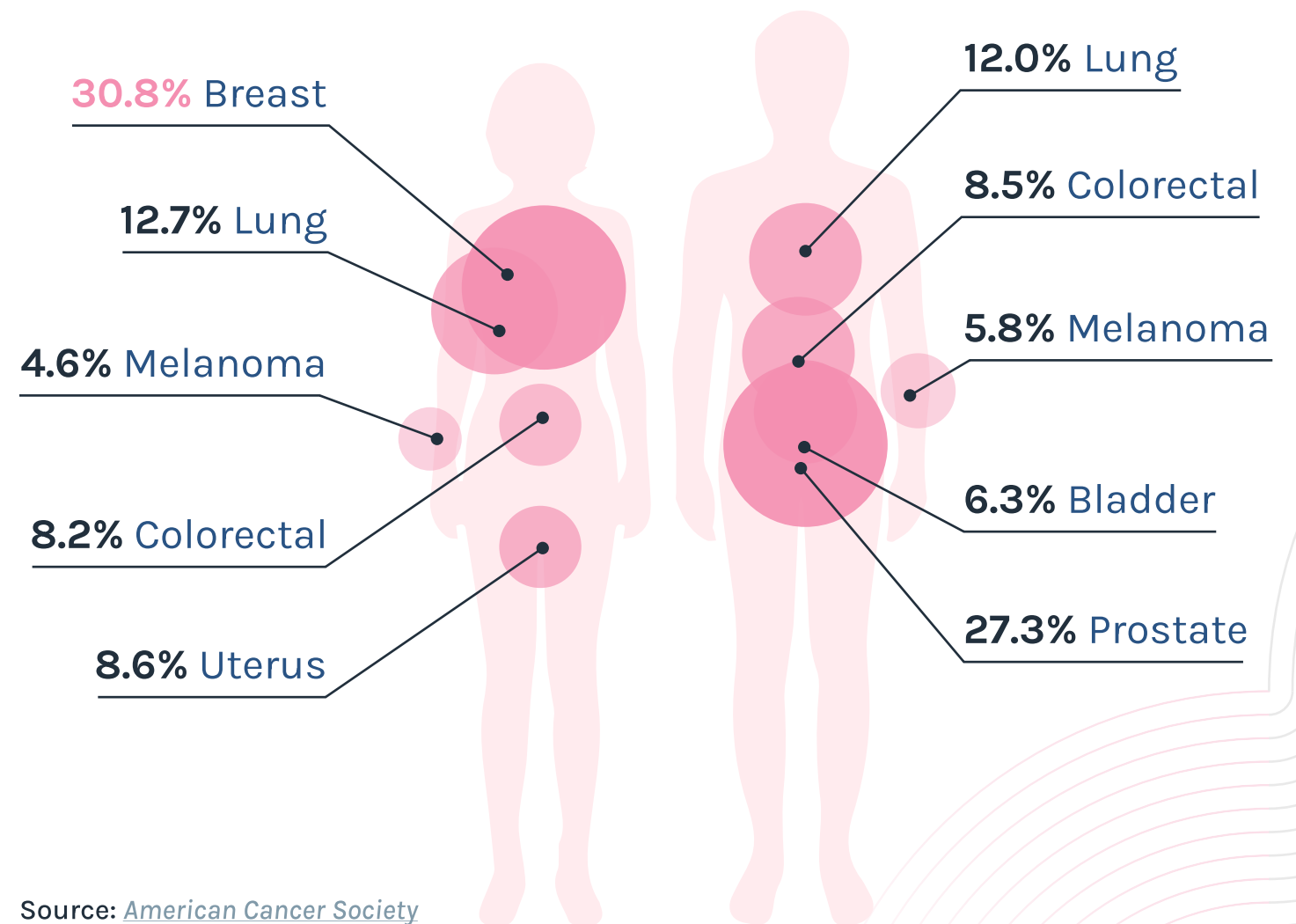
The most common types of women's cancers in 2019 included *breast cancer*, cervical, ovarian, uterine (endometrial) cancer, and vulvar cancer. Each type of cancer has unique characteristics, risk factors, symptoms, and treatment options.

According to *projections from the American Cancer Society*, in 2022, breast cancer was to account for 1 in 3 of all new cancer diagnoses among women. Lung cancer—the second most common cancer for both sexes—is slightly more prevalent among women. Uterine cancer, colorectal cancers, and melanoma share the third to fifth positions.

Projected number of new diagnoses:

934,870

983,160



Source: *American Cancer Society*

Breast Cancer

Data:



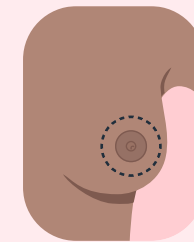
About 30% (or 1 in 3) of all new female cancers are breast cancer.

Breast cancer is **the most common** cancer among women globally and **in the United States**. It can occur at any age, but the risk goes up with age. Because of certain factors, some women may have a greater chance of developing breast cancer than others.

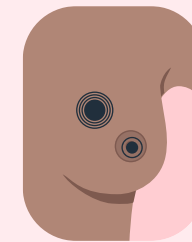
Breast cancer might initially occur in the breast cells and then can spread to the lymph nodes under the arms. **Early detection** through regular screenings, like mammograms, and self-exams, can significantly improve the chances of successful treatment.

Insight: There are more than 4 million breast cancer survivors in the United States, including women still being treated and those who have completed treatment.

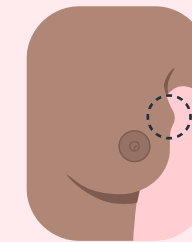
Signs of Breast Cancer



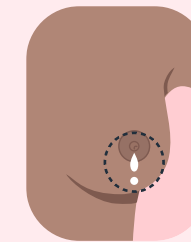
Retracted or inverted nipple



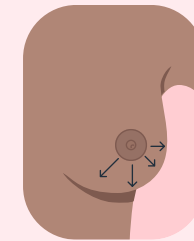
Breast or nipple pain



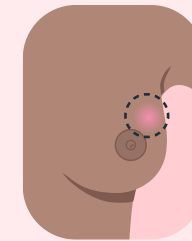
Lumps



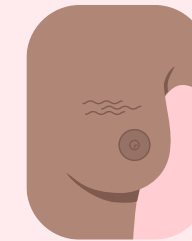
Nipple discharge



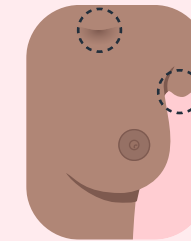
Swelling



Redness/rash



Changes to skin texture



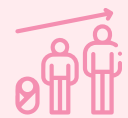
Lump around collar bone or underarm

Data:

\$29.8 billion ↗

breast cancer cost to the U.S. economy in 2020. Breast cancer has the highest treatment cost of any cancer, accounting for 14% of all cancer treatment costs.

Risk Factors for Breast Cancer



Age

The risk of breast cancer increases as a person gets older, with the majority of breast cancers diagnosed in women over 50



Gender

Being born female is the most significant risk factor for breast cancer. While breast cancer can occur in men, it is much more common in women



Genetic mutations

A family history of breast cancer, especially in close relatives (mother, sister, daughter), can increase risks. Additionally, specific genetic mutations like BRCA1 and BRCA2 significantly increase the risk of breast cancer



Dense Breast Tissue

Having dense breast tissue, which appears white on mammograms and is made up of less fatty tissue and more glandular and connective tissue, can slightly increase the risk of breast cancer



Early Menstruation and Late Menopause

Starting menstruation before age 12 and experiencing menopause after age 55 exposes individuals to estrogen for a more extended period, which can increase the risk of breast cancer



Personal History of Breast Cancer

Individuals who have had breast cancer in one breast are at an increased risk of developing breast cancer in the other breast or in a different part of the same breast

Risk Factors for Breast Cancer



Previous Treatment Using Radiation Therapy

Radiation exposure to the chest, especially during childhood or adolescence, for conditions like Hodgkin's lymphoma can increase the risk of breast cancer



Physical Inactivity

Women who are not physically active have a higher risk of developing breast cancer



Overweight and Obesity

Being overweight or obese, particularly after menopause, and leading a sedentary lifestyle can increase the risk of breast cancer



Hormone Replacement Therapy (HRT)

Long-term use of combined hormone replacement therapy (estrogen and progesterone) after menopause can increase the risk of breast cancer



Reproductive history

Having a first pregnancy after age 30, not breastfeeding, and never having a full-term pregnancy can raise breast cancer risk



Alcohol Consumption

Regular and excessive alcohol consumption has been linked to an increased risk of developing breast cancer

Lung Cancer in Women

Data:

The American Cancer Society estimates that in 2023 the U.S. will see:

About

238,340

new cases of lung cancer (117,550 in men and 120,790 in women)

About

127,070

deaths from lung cancer (67,160 in men and 59,910 in women)

Lung cancer has a reputation for being a “man's disease.” What many don’t realize is that lung cancer is the second most common cancer diagnosis in women in the U.S., and the leading cause of cancer-related mortality.

In recent years, lung cancer has risen among women steadily. According to the American Lung Association, lung cancer diagnoses have risen a shocking 84% among women over the past 42 years while dropping 36% among men over the same period. The overall number of cases remains fairly steady.

Data:



The risk of developing lung cancer during a woman’s lifetime is about 1 in 16 for those who smoke.

Lung cancer affects both tobacco smokers and non-smokers; for smokers, the risk is much higher. This type of cancer often occurs in older people. The average age of people when diagnosed is about 70.

Symptoms



A cough that persists, worsens or produces blood



Wheezing



Chest pain



Fatigue

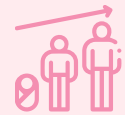


Shortness of breath



Unexplained weight loss

Risk Factors for Lung Cancer



Age

Lung cancer risk increases with age, with the majority of cases being diagnosed in older individuals.



Lung Diseases

Pre-existing lung diseases like chronic obstructive pulmonary disease (COPD) and pulmonary fibrosis can increase the risk of developing lung cancer, especially in smokers.



Indoor Air Pollution

Prolonged exposure to indoor air pollutants like cooking fumes, wood smoke, and other household pollutants can contribute to an increased risk of lung cancer.



Occupational Exposures

Exposure to certain occupational carcinogens, such as asbestos, arsenic, diesel exhaust, and other chemicals, can increase the risk of lung cancer among women working in certain industries.



Smoking

Cigarette smoking is the most significant risk factor for lung cancer in both men and women. Women who smoke have a higher risk of developing lung cancer compared to non-smokers.

Risk Factors for Lung Cancer



Secondhand Smoke

Exposure to secondhand smoke (passive smoking) increases the risk of lung cancer among non-smoking women



Hormonal Factors

Some research suggests that hormonal factors, such as estrogen exposure, may play a role in lung cancer risk. Hormone replacement therapy (HRT) and certain reproductive factors could influence risk



Genetic Predisposition

Family history of lung cancer can increase a woman's risk, indicating a potential genetic predisposition or shared environmental factors



Diet and Nutrition

Poor dietary habits, including a diet low in fruits and vegetables, may contribute to a higher risk of lung cancer. Antioxidant-rich foods may have a protective effect



Personal or Family History

Having a personal history of lung cancer or a family history of lung cancer increases the risk for developing the disease

Uterine Cancer

Data:

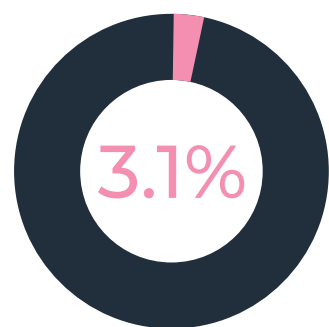
In 2020, there were an estimated

845,825 ↗

women living with uterine cancer in the United States.

Uterine cancer is the most common gynecological cancer in the United States and one of the most prevalent cancers among women. Also known as endometrial cancer, this cancer primarily affects the uterus (sometimes known as the womb), or the organ responsible for housing a developing fetus in pregnant women. It's **the third most common cancer** type among women in the U.S.

Data:



Approximately **3.1%** of women will be diagnosed with uterine cancer at some point during their lifetime, based on 2017-2019 data.

Types of Uterine Cancer:

1. Endometrial cancer

The most common type of uterine cancer, which originates in the lining of the uterus (the endometrium).

2. Uterine sarcoma

This is typically a less common and more aggressive type of uterine cancer and starts in the muscle or other tissues of the uterus.

Scientists **found** that, from 2010 to 2017, female deaths from all racial and ethnic groups from uterine cancer overall increased by **1.8%** per year. Deaths from uterine sarcoma, which is more aggressive than endometrial cancer, increased by 2.7% per year. Black women had more than twice the likelihood of death from uterine cancer overall and compared to other racial and ethnic groups.

Symptoms



Abnormal vaginal bleeding, spotting, or brownish discharge after menopause



Pelvic pain or pressure
Abnormal Pap results



Irregular or heavy bleeding in younger women between periods



Heavier than usual periods or a change in periods

Risk Factors for Uterine Cancer



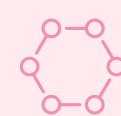
Age

Uterine cancer is more common in postmenopausal women, with the majority of cases diagnosed in women over 50 years of age.



Obesity

Obesity is a significant risk factor, as excess fat tissue can produce estrogen, which can stimulate the growth of the uterine lining and increase the risk of uterine cancer.



Hormonal Factors

Hormonal imbalances, such as an excess of estrogen without sufficient progesterone, can increase the risk of uterine cancer.



Endometrial Hyperplasia

Abnormal thickening of the uterine lining (endometrial hyperplasia) can progress to cancer if left untreated.



Family History

Having a first-degree relative (parent, sibling, child) with a history of uterine cancer may increase an individual's risk.



Personal History

A personal history of breast, ovarian, or colorectal cancer can also increase the risk of uterine cancer.



Hormone Replacement Therapy (HRT)

Prolonged use of estrogen-only hormone replacement therapy (HRT) without progesterone in menopausal women can elevate the risk of uterine cancer.

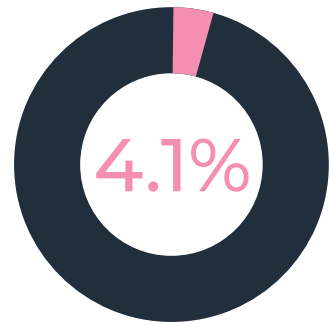


Diabetes and Hypertension

These conditions, particularly when poorly managed, are associated with an increased risk of uterine cancer.

Colorectal Cancer

Data:



Approximately 4.1% of women will be diagnosed with colorectal cancer at some point during their lifetime, based on [2017-2019 data](#).

[Colorectal cancer](#) is the fourth most common cancer among women and men, and represents [7.8%](#) of all new cancer cases in the U.S. It is also the [fourth leading cause](#) of cancer-related deaths in the United States. This cancer is most frequently diagnosed among people aged [65-74](#), with a median age of 66 years.

Data:

The **death rate** among those with colorectal cancer was

13.1 per 100,000

among women per year based on [2016-2020 data](#).

Early Stage Symptoms



Changes in bowel habits



Bloody stools



Pain or cramping in the abdomen



Unintended weight loss

Advanced Stage Symptoms



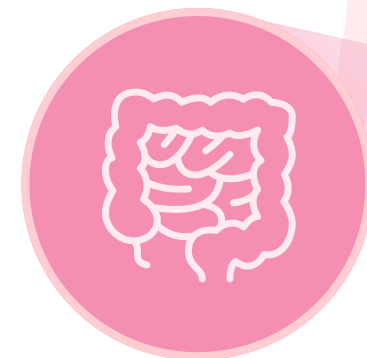
Cancer spreading to lymph nodes



Cancer spreading to liver and other organs



Bowel obstructions



Risk Factors for Colorectal Cancer



Age

The risk of colorectal cancer increases with age, with a majority of cases occurring in individuals aged 50 and older.



Obesity

Being overweight or obese, especially after menopause, is a significant risk factor for colorectal cancer.



Inflammatory Bowel Disease (IBD)

Conditions like Crohn's disease and ulcerative colitis increase the risk of colorectal cancer.



Lifestyle Factors

Unhealthy lifestyle habits such as a diet high in red and processed meats, lack of physical activity, excessive alcohol consumption, and smoking can increase the risk.



Family History and Genetic Factors

Having a family history of colorectal cancer or certain genetic conditions, like Lynch syndrome or familial adenomatous polyposis (FAP), increases the risk.



Personal History of Colorectal Polyps or Cancer

Individuals with a history of colorectal polyps or cancer are at an increased risk of developing the disease again.



Diet and Nutrition

Low-fiber, high-fat diets, and diets low in fruits and vegetables are associated with an increased risk.



Diabetes

Individuals with type 2 diabetes have an elevated risk of developing colorectal cancer.

Melanoma

Data:

In 2023, an estimated

 **39,490** 

women in the United States will be diagnosed with invasive melanoma of the skin.

Melanoma is one of the most common types of skin cancer and can occur in both genders, but it's worth noting that the incidence rates vary.

The average age of diagnosis is 65. Before age 50, the disease is more common among women. After age 50, rates are higher in men.

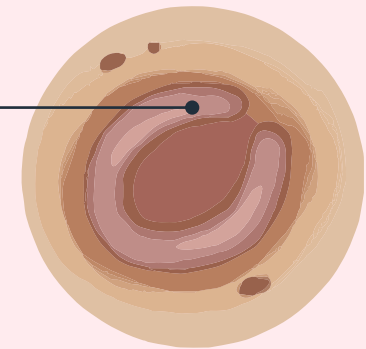
Until the age of 50, more white women have melanoma than white men

Women 49 or younger have a higher probability of developing melanoma than any other cancer, except breast or thyroid cancer

Signs (all types)

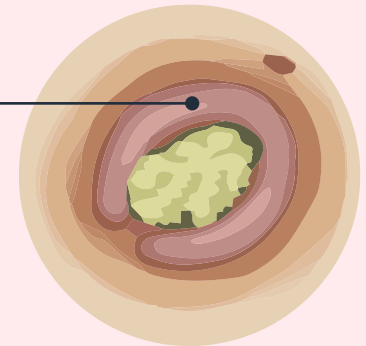
Basal Cell Carcinoma

- flat, raised, or dome-shaped spot
- pearly or skin-colored



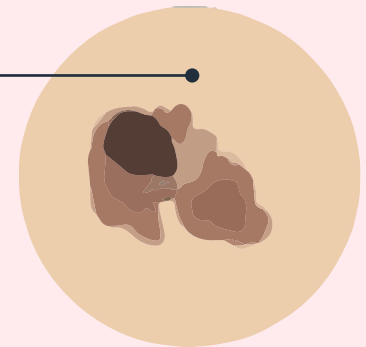
Squamous Cell Carcinoma

- raised, crusty, or scaly patch
- sometimes ulcerated



Melanoma

abnormal mole (assymetrical, irregular border, multiple colors, diameter over 6mm, etc.)



Risk Factors for Melanoma



Age

Melanoma can occur at any age, but the risk increases with age.



Excessive Sun Exposure and Sunburns

Intense or frequent exposure to ultraviolet (UV) radiation from the sun or artificial sources like tanning beds increases the risk of developing melanoma.



Fair Skin, Light Eyes, and Light Hair

Individuals with fair skin, light-colored eyes (blue or green), and light hair (blonde or red) have a higher risk of developing melanoma.



History of Sunburns

Having a history of severe sunburns, especially during childhood or adolescence, increases the risk of melanoma later in life.



Family History

A family history of melanoma or other skin cancers can elevate an individual's risk.



Personal History of Skin Cancer

Having previously been diagnosed with basal cell carcinoma or squamous cell carcinoma, both types of non-melanoma skin cancer, increases the risk of developing melanoma.



Weakened Immune System

People with weakened immune systems, such as those with HIV/AIDS or undergoing immunosuppressive therapy, have an increased risk.



Moles and Atypical Moles (Dysplastic Nevi)

Having many moles or atypical moles can increase the risk of melanoma.

Cervical Cancer

Data:

In 2020, for every 100,000 women, 7 new cervical cancer cases **were reported** and 2 women died of this cancer.

Cervical cancer is a type of cancer that starts in the cervix, which is the lower part of the uterus (womb) that connects to the vagina. It occurs when cells in the cervix undergo abnormal changes and begin to grow and multiply uncontrollably. Over time, these abnormal cells can form a mass or tumor and invade nearby tissues, and if left untreated, **may spread** to other parts of the body.

In 2020, the latest year for which incidence data are available, **11,542** new cases of cervical cancer were reported among women, and 4,272 women died in the United States.

Most cervical cancers **are caused** by certain strains of the human papillomavirus (HPV), a common sexually transmitted infection. Not all HPV infections lead to cervical cancer, but persistent infection with high-risk HPV types can increase the risk.

Symptoms



Leg pain that feels like a persistent sharp or dull ache



Back pain



Fatigue



Difficulty urinating and having a bowel movement



Bone fractures



Leakage of urine or feces from the vagina



Swelling in the legs



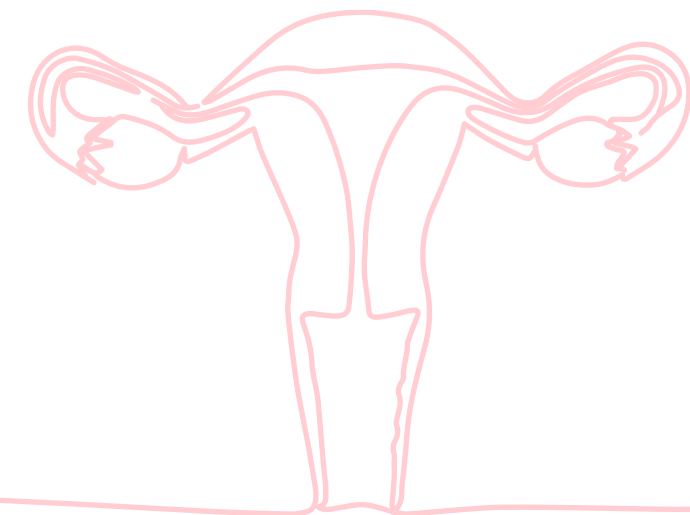
Blood in the urine



Weight loss



Menstrual bleeding that is heavier and lasts longer than usual



Risk factors for Cervical Cancer



Human Papillomavirus (HPV) Infection

HPV is the most significant risk factor for cervical cancer. Certain strains of HPV, especially high-risk types like HPV 16 and 18, are strongly linked to the development of cervical cancer



Weakened Immune System

Individuals with a weakened immune system, either due to conditions such as HIV/AIDS or certain medications (e.g. immunosuppressants after organ transplantation), have an increased risk of persistent HPV infection and consequently, cervical cancer



Sexual Behavior

Engaging in sexual activity at an early age increases the risk of exposure to HPV. Having multiple sexual partners or having a partner with multiple sexual partners can also increase the risk



Smoking

Smoking increases the risk of developing cervical cancer, particularly in individuals infected with HPV. Tobacco byproducts can damage the cervical cells, making it easier for HPV to cause cancer



Long-Term Use of Oral Contraceptives

Long-term use of birth control pills (usually 5 years or more) may slightly increase the risk of cervical cancer

Risk factors for Cervical Cancer



Exposure to Diethylstilbestrol (DES)

Women exposed to DES, a synthetic estrogen prescribed to some pregnant women from the 1940s to the early 1970s, have an increased risk of clear cell adenocarcinoma, a rare type of cervical cancer.



Socioeconomic Factors

Lower socioeconomic status, limited access to healthcare, and inadequate healthcare education may contribute to a higher risk of cervical cancer.



Family History of Cervical Cancer

Having a first-degree relative (like a mother or sister) with a history of cervical cancer may increase the risk.



Previous Abnormal Pap Smears

A history of abnormal Pap smears or cervical intraepithelial neoplasia (CIN) increases the risk of developing cervical cancer.



Not Having Screenings or Regular Pap Smears

Not undergoing routine Pap smears or HPV tests for cervical cancer screening increases the risk of undetected abnormal cervical cell changes.

Ovarian Cancer

Data:

According to [the American Cancer Society](#), about

 **19,710**

women will receive a new diagnosis of ovarian cancer and about 13,270 women will die from ovarian cancer in the U.S. in 2023.

[Ovarian cancer](#) is a type of cancer that originates in the ovaries, which are the female reproductive organs responsible for producing eggs (ova) and hormones such as estrogen and progesterone. Ovarian cancer typically starts in the cells covering the surface of the ovary or in the cells that form the eggs.

This cancer mainly develops in older women. About [half of the women](#) who are diagnosed with ovarian cancer are 63 years or older. It is more common in white women than black women.

Symptoms



Back pain



Acid reflux



Extreme tiredness



Constipation or upset stomach



Weight loss



Unusual belly swelling



Pain during sex



Menstrual changes



Risk Factors for Ovarian Cancer



Age

The risk of ovarian cancer increases with age, particularly after menopause. It is most frequently diagnosed in women over the age of 63.



Genetic Mutations

Certain genetic mutations, such as mutations in the BRCA1 and BRCA2 genes, significantly increase the risk of ovarian cancer. These mutations are also associated with an increased risk of breast and other cancers.



Reproductive History

Women who have never been pregnant or had children have a higher risk of ovarian cancer. Having the first full-term pregnancy after age 35 or experiencing infertility may increase the risk.



Hormonal Factors

Starting menstruation before age 12 or experiencing menopause after age 50 may increase the risk. Long-term use of estrogen-alone hormone replacement therapy (HRT) may slightly increase the risk, especially if used for more than 10 years.



Family History

A family history of ovarian cancer, especially in first-degree relatives (mother, sister, daughter), increases the risk. Also, a family history of breast, colorectal, or uterine cancer may elevate the risk.



Obesity

Being overweight or obese may increase the risk of developing ovarian cancer.



Talcum Powder Usage

Some studies suggest a potential link between long-term talcum powder usage in the genital area and ovarian cancer.



Diet and Lifestyle

Diets high in fat and low in fruits and vegetables may increase the risk of ovarian cancer. Lack of physical activity and tobacco use may also be associated with a higher risk.

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 women's health. Coaches leverage an evidence-based approach 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 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 Personal Trainer

While health 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.

✕ 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.

Insight: Demystifying Health Coaching: Unpacking the Differences Between Dieticians, Nutritionists & Health Coaches

How Health Coaches Can and Do Help Women To Prevent and Manage Cancer

Goal Development

Collaboratively set achievable health goals related to cancer prevention and management, and create action plans to reach those goals.

Risk Factors Awareness

Educate women about the risk factors associated with different types of cancer, such as lifestyle choices, family history, environmental factors, and genetics.

Education on Preventive Methods

Provide information on preventive measures like regular screenings, vaccinations, and lifestyle changes that can significantly reduce the risk of developing cancer.

Awareness of Screening Tests

Educate women about recommended cancer screenings for their age and risk profile, emphasizing the importance of early detection.

Encouragement and Reminders

Encourage individuals to schedule and follow through with recommended screenings, offering reminders and motivation to prioritize their health.

Tobacco Cessation

Support individuals in quitting smoking or using tobacco products, which is crucial for preventing lung, throat, and other types of cancer.

How Health Coaches Can and Do Help Women To Prevent and Manage Cancer

Regular Check-Ins

Conduct regular follow-ups to track progress, celebrate achievements, and provide accountability and encouragement to stay on track with health goals.

Stress Management

Teach stress-reduction techniques such as mindfulness, meditation, deep breathing, and relaxation exercises, as chronic stress can impact overall health and potentially contribute to cancer risk.

Emotional Well-being

Provide a safe space for individuals to express their emotions, fears, and concerns related to cancer prevention, diagnosis, or treatment. Offer strategies to enhance emotional well-being and resilience.

Medication Adherence

Support individuals in understanding and adhering to prescribed medications, treatments, and follow-up appointments to effectively manage cancer or reduce its progression.

Improving Nutrition

Offer support in adopting a nutritious, balanced diet that includes fruits, vegetables, whole grains, and lean proteins, which can help prevent cancer and support overall health.

Physical Activity

Encourage regular physical activity tailored to individual needs and preferences to maintain a healthy weight and reduce the risk of various cancers.

How Health Coaches Can and Do Help Women To Prevent and Manage Cancer

Hope

Maintaining hope during the cancer journey can be challenging. Health coaches can foster hope by helping Individuals set achievable goals, emphasizing the importance of a positive mindset, and encouraging participation in activities that bring joy and fulfillment.

Transition to Survivorship

The transition from active treatment to survivorship can be emotionally challenging. Health coaches can help Individuals set post-treatment goals, address concerns about potential long-term effects, and offer support on resuming pre-treatment activities.



The Science of Health Coaching

The Science of Health Coaching

A *research analysis* of 12 scientific studies based on 1038 participants, 257 of which are women, with a mean age of 57 years and various types of cancers, showed statistically significant improvements among cancer survivors when working with health coaches:

75% of studies reported a significant decrease in fatigue and pain

67% of studies showed an increase in quality of life and acceptance

67% of studies demonstrated an increase in physical activity

33% of studies showed improvements in social relationships

Author, Year, Country	B	R	W	S
Hawkes et al. ^{25,23}	✓	✓	✓	Ø
Lynch et al. ²⁴ Australia				
Koller et al. ³⁶ Germany	NA	✓	Ø	NA
Park et al. ²⁷ Korea	✓	NA	NA	✓
Pinto et al. ²⁸ United States	NA	✓	✓	NA
Ream et al. ³¹	✓	✓	✓	✓
Thomas et al. ²⁹ United States	✓	Ø	✓	Ø
Galantino et al. ³³ United States	✓	✓	NA	Ø
Kenyon et al. ³⁰ United Kingdom	Ø	Ø	Ø	Ø
Berg et al. ³²	✓	✓	✓	Ø
Galantino et al. ³⁴	✓	✓	✓	✓
Hawkes et al. ²⁶ Australia	Ø	✓	✓	Ø
Wagland et al. ³⁵ England	✓	✓	✓	✓

✓, at least 1 significantly positive outcome; Ø, outcomes assessed in this domain significant improvement; -, at least 1 significantly negative outcome; NA, no relevant outcomes assessed. B=ability to reframe Biography; R=ability to mobilize Resources; W = ability to accomplish Work of life and of being a patient; S=ability to function Socially.

Source: Barakat, Suzette; Boehmer, Kasey; Abdelrahim, Marwan; Ahn, Sangwoo; Al-Khateeb, Abdulrahman A.; Villalobos, Neri Álvarez; Prokop, Larry; Erwin, Patricia J.; Fleming, Kirsten; Serrano, Valentina; Spencer-Bonilla, Gabriela; Murad, Mohammad Hassan (2017). Does Health Coaching Grow Capacity in Cancer Survivors? A Systematic Review. Population Health Management, 2017.

Researchers concluded that in cancer survivors, health coaching:

“

Improved quality of life and supported patient capacity by several mechanisms, suggesting an important role for ‘Capacity Coaching.’ Future interventions that improve self-efficacy and patients' environments of care are needed. Capacity Coaching may improve health and quality of life of cancer survivors.

Preventing Breast Cancer

A [2021 randomized controlled study](#), based on responses from 240 females with a potential for developing breast cancer, showed significant improvements among those who participated in a pharmacist-based health coaching program.

After 12 weeks of face-to-face coaching sessions, those assigned to the active arm (health coaching) demonstrated **better results in physical activity, practicing a healthy diet, and practicing breast self-exam** three months after the end of the coaching program.

Comparison of active and control arms results after 3 months after ending of program

	Health Coaching	Control Group	Difference between HC&C
High physical activity	52%	17%	35%
Practicing healthy diet	63%	28%	35%
Practicing breast self-exam	82%	23%	59%

Source: Ibrahim OM, El-Bassiouny NA, Dergham EA, Al Mazrouei N, Al Meslamani AZ, Ebaed SBM, Ibrahim RM, Sadeq A, Kassem AB.
The effectiveness of pharmacist-based coaching in improving breast cancer-related health behaviors: A randomized controlled trial. Pharm Pract (Granada). 2021

Moreover, those who participated in health coaching (active arm) said they were comfortable with the financial (95%) and social (89%) aspects of the program. Health coaching demonstrated itself as an effective approach to improving health behaviors related to breast cancer.



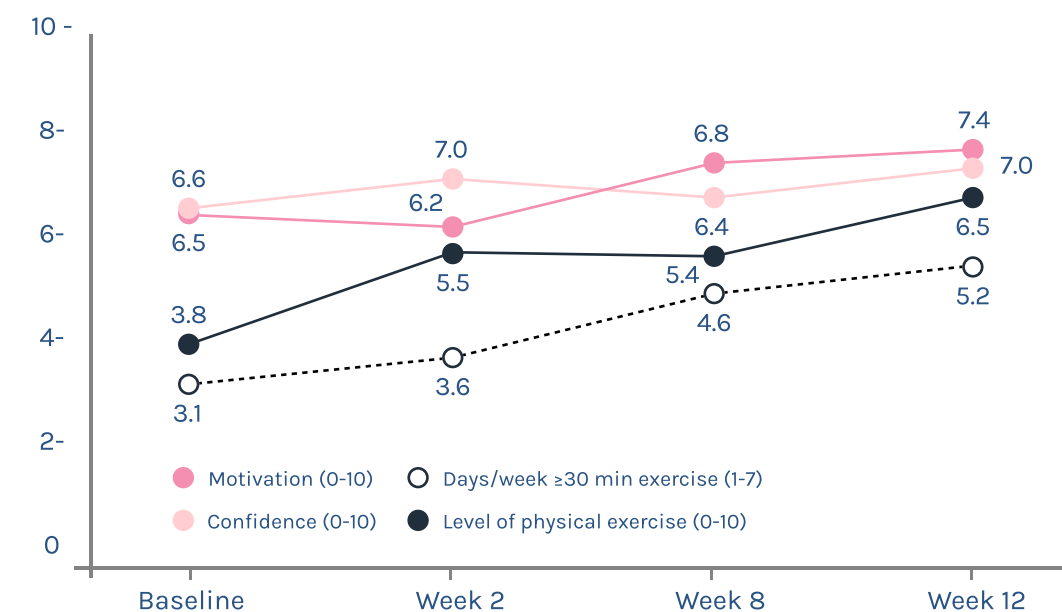
Supporting Breast Cancer Survivors Through Health Coaching

A 2020 study on the feasibility and effectiveness of health & wellness coaching for breast cancer survivors showed strong positive outcomes, namely in increasing physical activity, quality of life, and improving nutrition habits.

After one in-person wellness coaching visit followed by four telephone calls over 12 weeks, study participants reported significant improvements in physical behavior in terms of self-reported levels of physical activity, motivation, and confidence. Moreover, the number of days performing at least 30 minutes of **physical activity** during the previous week increased consistently from a **mean of 3.1 at baseline to 5.2 at week 12**.



Physical Activity Parameters Among Breast Cancer Survivors: Baseline Through Week 12



Researchers also observed significant changes in nutrition behavior among study participants in terms of the ability to follow a healthy diet, motivation, and confidence parameters. The number of days per week the participants had at least 5 servings of **fruits and vegetables increased from an average of 3.3 at baseline to 4.9**, and the number of days/week eating fast food decreased from an average of 4.2 at baseline to 2.3 at 12 weeks.

Study participants indicated that coaching provided them with emotional support, helped them implement behavior change, and increased their accountability. Some impactful feedback comments include:

“

I am capable of change

“

Compassion

“

I felt important

“

Small steps, small goals

“

*Reinforced some actions I had to take
to make changes in my life*

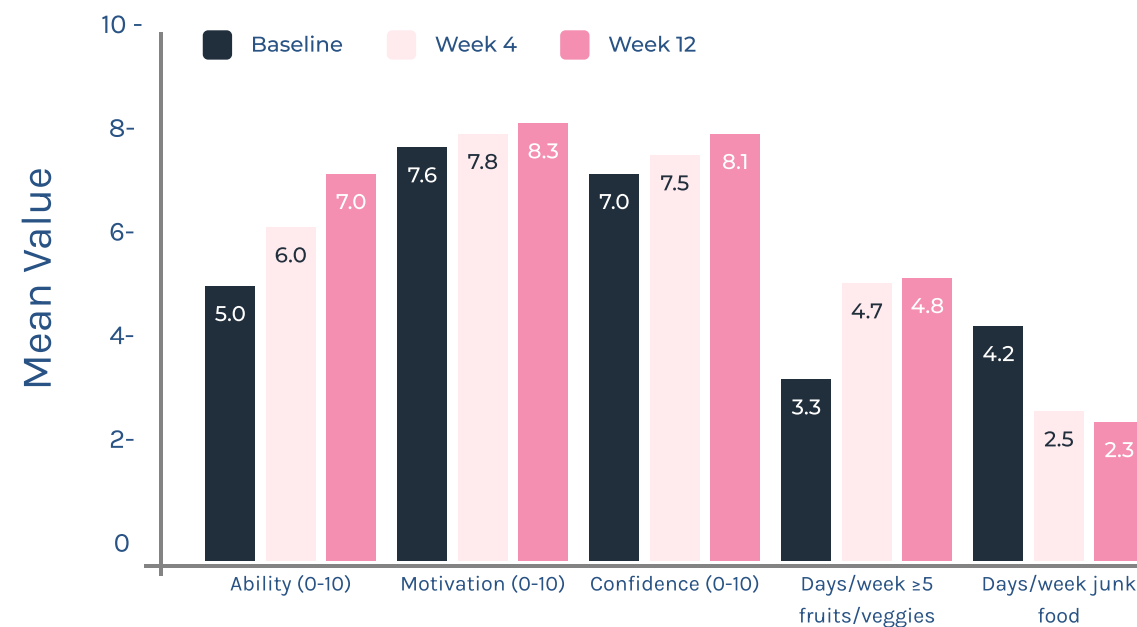
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Unbiased ear

Supporting Breast Cancer Survivors Through Health Coaching

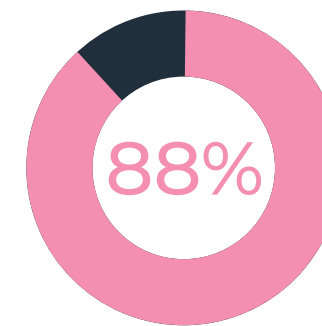
The overall quality of life scores increased significantly by a mean of 6.3 points from before to after interventions, mainly driven by increases in physical well-being and breast cancer-specific concerns.

Dietary Habits Among Breast Cancer Survivors: Baseline Through Week 12



Source: Stan DL, Cutshall SM, Adams TF, Ghosh K, Clark MM, Wieneke KC, Kebede EB, Donelan Dunlap BJ, Ruddy KJ, Hazelton JK, Butts AM, Jenkins SM, Croghan IT, Bauer BA. Wellness Coaching: An Intervention to Increase Healthy Behavior in Breast Cancer Survivors. Clin J Oncol Nurs. 2020 Jun 1;24(3):305-315.

Data:



88% of study participants with breast cancer indicated that coaching was extremely helpful in achieving their health & wellness goals.

+42% Level of Physical Exercise

+40% Physical Activity

+32% Optimal Nutrition

+13% Confidence

Medication adherence

Results from a [2014 study](#) testing the effectiveness of a tailored nurse coaching intervention to promote adherence to oral chemotherapeutic medications in 45 adult patients, 65% of which were women, showed that adherence rates were superior to the standard group that solely received chemotherapy education provided at the cancer center.

Adherence Rates

Group	2 Months		4 Months	
	Self-report	Pharmacy refill	Self-report	Pharmacy refill
Entire sample (n=45)	86.0%	73.3%	89.0%	71%
Health Coaching group (n=25)	91.3%	80.0%	95.1%	73.7%
Control group (n=20)	80.0%	65.0%	82.4%	68.8%

Source: Schneider SM, Adams DB, Gosselin T. A tailored nurse coaching intervention for oral chemotherapy adherence. J Adv Pract Oncol. 2014



We are here for you!

We stand up, scale and operate best-in-class health coaching services for the health and care industry 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 tech-augmented 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

