



Hummingbird
COACHING SERVICES

COACHING 2.0:
THE FUTURE OF COACHING



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THE CASE FOR COACHING



A recent report from Indiana University-Purdue University Fort Wayne found that 87 percent of health insurance claims were lifestyle-related

Coaching to establish healthier habits is one of the most promising and rapidly advancing developments in the healthcare field. The need for behavior change coaching can be traced back to a Canadian government report in 1974, which concluded that lifestyle was the factor contributing most to mortality. Experts at the Centers for Disease Control analyzed 1975 US mortality data and estimated that 48 percent of US mortality was due to unhealthy behavior or lifestyle (W.K. Kellogg Foundation, 1980). A recent report from Indiana University-Purdue University Fort Wayne found that 87 percent of health insurance claims were lifestyle-related (PR Newswire, 2007).

Health coaching seems to be one of the most promising methods for controlling escalating healthcare costs. Until recently, health coaching has primarily been delivered face-to-face, by phone, or online via video or instant messaging. All of these delivery methods require that the coach and the consumer set appointed (synchronous) times for the coaching session. With the advent of e-mail and text messaging, people have become accustomed to communicating “independently” – whenever and wherever it is most convenient for each party. When we talk, we don’t usually feel the need for brevity. When we use electronic, any-time (asynchronous) communications, we tend to be more brief and concise. Thus, any-time coaching methods offer great advantages of both convenience and efficiency. With these come greater levels of engagement, which in turn lead to improved effectiveness and a significantly lower cost structure. New communication technologies **and** new advances in psychological science bring coaching from its early form into its second generation – **Coaching 2.0**.

COACHING: THE MAIN INGREDIENTS



...effective coaching gets to the point quickly, leverages the user’s strengths and assets and occurs within a positive “therapeutic alliance”...

To change behavior and accomplish their goal, a person needs to a) articulate what they are aiming to accomplish (e.g. losing 15 pounds), b) identify what behavior(s) needs to change (e.g. reduce nighttime eating), c) create an effective plan for changing the behavior, and d) maintain adequate motivation throughout the change process (e.g. persisting through “failures” or struggles). Coaches help people at each step.

In addition to the importance of adequate intervention “dosage” (frequency and duration of contact), it seems that effective coaching gets to the point quickly (Hubble et al. 2004), leverages the user’s strengths and assets (Duncan et al. 1997; Lambert 1992) and occurs

within a positive “therapeutic alliance” (Norcross, 2002), where there is a sense of mutual respect and positive expectations about change (Brown et al. 1999).

COACHING: ISSUES AND METHODS

Advice vs. Collaboration

Coaches debate over the degree to which coaching is a *process* of “advice giving” vs. “collaborative problem-solving.” Is the primary role of a coach to be a *content* expert or an expert in the *process* of behavior change? Some coaches have professional medical education, which is largely an “expert model.” Thus, it is common for nurse-coaches to adhere more to an advice-giving approach. Coaches with backgrounds in social science (e.g. psychology or social work) tend to adhere more to a “collaborative” model.

A recent summary by Eakin et al. (2007) of published studies on coaching showed that only 40 percent of the studies using nurse-coaches reported positive client results compared with 75 percent of the studies using coaches with other backgrounds. Wagner (Bodenheimer et al. 2002) recommends engaging patients as collaborators rather than relying on them to be obedient followers of doctors’ orders. The expert model has resulted in non-adherence rates of 50 percent with something as simple as taking medication as prescribed (National Council on Patient Information and Education, 2007). This movement towards helper-as-collaborator is supported by a psychotherapy study showing that the specific knowledge and techniques of the helper are of far less effect on patient outcomes than the strengths that the patient brings to bear (Duncan et al. 1997).

Automation vs. Personal Support

As various approaches to coaching are explored, a number of questions arise. One is the question of whether coaching necessitates human interaction as opposed to fully automated computer programs.

Some have hoped that the power of knowledge would be sufficient to create behavior change. If so, then effectively helping people change behavior would simply be a matter of getting good information to them, and the Internet would be the perfect vehicle. That would be a very cheap and scalable solution. Online portals that help consumers access information on medical conditions are showing significant growth based on the premise that knowledge empowers good decision making. Other companies supply “best practices” information and coaching by a nurse or physician to consumers so they can make informed medical decisions.



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However, making behavior changes and sustaining those changes for long enough to impact health positively requires ongoing personal support. It is here that coaching has its primary role. A study by King et al. (2007) indicated that, in the case of helping people initiate and sustain an exercise program, personal coaching was significantly more effective than health education alone. Two other studies (Rothert et al. 2006; Tate, et al, 2001) indicate that personalized online coaching produces significantly superior results when compared with static, information-only websites. For example, Rothert's study showed that the tailored coaching program produced 2.5 times greater weight loss and subjects reported greater personal relevance, helpfulness and ease of understanding.

Face-to-Face vs. Remote Interaction

Some studies have examined the conventional wisdom that the power of an intervention decreases as one goes from face-to-face delivery to live phone delivery to asynchronous online delivery via e-mails to automated phone support. A number of studies refute this conventional wisdom. Two studies (Berino et al. 2002; Berino et al. 2004) have shown that online coaching is *as effective as face-to-face support* when it comes to maintaining weight loss. McMahon et al (2005) showed that online coaching was superior to "care as usual" by physicians in helping diabetics manage blood sugar and triglyceride levels. And as far back as 1992, Walther and Burgoon found that when people were working together on tasks, e-mail based relationships developed sufficiently but took more time to do so compared with face-to-face relationships (Walther & Burgoon, 1992). Prior to the advances in e-mail strategies that have evolved over the past 15 years, they concluded: "All things considered, although differences in relational communication between computer mediated communication and face-to-face communications may exist, they tend to be eliminated over time" (p.81).

COACHING 2.0: THE POWER OF CONVENIENCE

From Telephone to Internet

At its heart, coaching is a process of communication between two people. Prior to the invention of the telegraph in 1844 and then the telephone around 1876, communication could only occur in-person or through written correspondence. The widespread use of the telephone changed that dramatically. The telephone allowed people in different places to conduct relationships rendering distance nearly irrelevant. In the 1980's, coaches/trainers finally began using the telephone to deliver their services, extending their reach physically and finding time efficiencies that also created greater caseload capacity. Their reluctance was based on the aforementioned belief that they needed to interact face to face, but marketplace needs pushed for new models, and coaches embraced the telephone.



The combination of a technology that can deliver information efficiently and at the same time enable efficient yet meaningful relationships provides the perfect combination for coaching.

Now, with the widespread use of the Internet and wireless cell phones, coaching is transitioning into its next phase – **Coaching 2.0**. It is not new technology as much as it is the new application of technology and technique to the coaching process. It involves the layering of Internet and mobile communication on top of the already existing fundamentals of coaching practice.

Though the Internet came into being as primarily an “information technology,” it has since morphed into a “relationship technology.” Human beings are always seeking relationship. It’s what makes us tick and where our motivational system is deeply rooted. With the advent of e-mail, people began conducting online relationships with brief but often frequent interchanges. And these communications were occurring whenever and wherever it suited people. Any-time communication proved appealing to people due mainly to its greater convenience.

The combination of a technology that can deliver information efficiently (search engines, websites, e-mail attachments, instant messaging) and at the same time enable efficient yet meaningful relationships provides the perfect combination for coaching.

Effectiveness of Any-Time Online Delivery

A number of experimental randomized control studies show that online coaching is an effective way to help people lose weight (Berino et al. 2002; Berino et al. 2004; Hunter 2005; Rothert et al. 2006; Southard et al. 2003; Tate et al. 2001; Tate et al. 2003; Veverka et al. 2003). Three published studies (McKay et al. 2001; McMahon et al. 2005; Tate et al. 2003) of individuals with or at risk for developing type 2 diabetes indicate that online coaching is effective in helping at-risk individuals manage their weight—a major risk factor—and in helping diabetic patients not only manage their weight but other health markers related to diabetes as well. The study by McMahon and his colleagues showed online support for diabetics was actually superior to usual care from a doctor, and that the greater the online engagement, the greater the treatment effect.

A study by Southard and colleagues (2003) showed online coaching to be effective in managing cardiovascular disease. Compared with patients who received usual care from their physician, those with personalized Internet support lost significantly more weight and had fewer cardiovascular events. According to Southard, et al, “An Internet-based case management system could be used as a cost-effective intervention for patients with cardiovascular disease, either independently or in conjunction with traditional cardiac rehabilitation.”

Hummingbird Coaching Services has been the primary pioneer in asynchronous, online coaching methods and has been studying this methodology for over 10 years. It has found that a number of advantages accrue when new communication technologies are integrated into the delivery of coaching.

1. Convenience of Any-Time Online Delivery

Being able to engage with one's coach at times of convenience is compelling. When given the choice, approximately 30% of people choose to have their first coaching contact via telephone, and after that initial call, nearly everyone chooses to communicate by e-mail and online journaling. By removing the obstacles of scheduling appointments, traveling to coaches' offices, and consuming valuable time in 20-50 minute increments, more people can meaningfully participate in coaching programs that can actually help them establish new behavior patterns.

Coaches, for their part, need no longer cope with inconvenient time zone differences, working very early in the morning or very late at night. They also get rid of long-distance phone bills or wasted time from cancelled or forgotten appointments.

2. Engagement in Any-Time Online Delivery

As every employer who has bought coaching services for their employees can attest, the biggest problem is that of engagement – i.e. getting employees to participate in a program in a way that is meaningful enough to derive its benefits. Scheduled telephone calls have limited success. It takes multiple outbound calls to establish an actual connection, and then the average number of times a person talks with his/her coach can be quite limited (estimates based on experience of various coaching vendors suggest an average of about three calls). More frequent contact is difficult to achieve because there is a degree of inconvenience for employees to squeeze in scheduled calls into their already hectic lives, and because it is expensive to pay a coach for his/her time. Thus, much telephone coaching results in a relatively low dosage of intervention. Compared with any-time and wireless alternatives, appointed phone coaching is awkward, time consuming, and expensive.

Hummingbird's examination of thousands of its own coaching records indicates that its online health coaching results in approximately three to five direct coach contacts *per month*, with approximately a third of participants staying engaged for three to six months and another third for 12+ months. In addition to this greater intensity of direct coach contact (20 contacts on average), users benefit from online technology when they make journal entries, look up information on the content portal, and when they record and monitor their progress with "behavior trackers," such as food diaries or a record of steps



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3. Efficiency of Any-Time Online Delivery

Internal studies by Hummingbird also indicate greater efficiency of any-time online delivery compared with telephone delivery, allowing approximately twice the “dosage” of intervention to be delivered for approximately the same cost. There are a number of reasons for this improved cost-effectiveness.

First, in spoken communication, each party spends about half of the time listening. Any-time online coaching essentially removes the listening time. In this case, “listening” takes the form of reading, and, on average, we read about 50 percent faster than we speak. Therefore, instead of spending 30 minutes “listening,” coaches may only take 5 minutes to read client communications online. Hummingbird found that, on average, it takes a coach about 15-20 minutes per month per consumer to provide health coaching.

Second, when people speak on the phone and in person there are usually no cultural constraints around being brief and to the point. However, e-mails tend to be to the point and no longer than a few paragraphs. (Think of the abbreviated texting standards like “l8r” and “omg,” for example.) Though these communications are brief, they are to the point and thus have a depth of content. Any-time communications are packed with power.

Other efficiencies of any-time coaching include:

- The expense and time lag of mailing print-based educational materials can be avoided.
- Clients can use their “smart” phones to access coaching help in transit with text message capability, as well as access to e-mail and the Internet. Automated programs can send timed personal reminders to reinforce behavior changes.
- Coaches can take better advantage of “teachable moments,” compared with providing their service only at pre-appointed times.
- Because online coaching leaves a full written record of transactions, these records can be used to provide higher-quality supervision and quality assurance. Supervisors can, on their own schedule, examine written transaction records, as opposed to either having to listen to recorded sessions or base supervision on reports filtered through the eyes and ears of the coaches themselves.
- Written transactional records have advantages in risk management and legal defense.

COACHING AND TECHNOLOGY: A MATCH WHOSE TIME HAS COME



Coaches are important catalysts that activate motivation, and motivation is the key to effective coaching and sustained behavior change.

Coaching 2.0 is upon us, and now the challenge is to discover increasingly creative and effective ways to combine technology with coaching relationships. Human beings are social in nature; we have a primal need to communicate. Thus, even though technology will continue to offer us good tools to help people change behavior, it is unlikely that the human element will ever be replaced or rendered insignificant. Coaches are important catalysts that activate motivation, and motivation is the key to effective coaching and sustained behavior change.

Recent advances in communication technology enable new, any-time communication patterns between coaches and their clients that increase both *convenience* and *timeliness* of coaching interventions. While there is still a place for old methods of pre-appointed telephone or online meetings, any-time communication has multiple advantages over real-time methods and should be part of any comprehensive, cost-effective coaching solution. With increased *convenience* comes a greater rate of engagement, which in turn is a requisite for producing desired results. Improved *timeliness* of interventions should also produce greater effectiveness, as the client receives support, suggestions, and educational materials much closer to the actual moment of interest and relevance. Improved communication technology enables the collection of more accurate behavioral data, thereby creating an enhanced performance feedback loop that keeps clients “on track.” Finally, Coaching 2.0 is more scalable and cost-effective, which makes it superior for population-based interventions.



ABOUT HUMMINGBIRD COACHING SERVICES

Cincinnati-based Hummingbird Coaching Services is a pioneer in health coaching since 1997. Hummingbird provides comprehensive workplace wellness programs that impact employee health and productivity. Using its proprietary coaching model and online delivery platform, Hummingbird provides coaching services to businesses such as Motorola, United Healthcare, Leeza Gibbons Inc., and the Muhammad Ali Center. Through its innovative technology platform and coaching programs, Hummingbird provides health, parenting and life coaching to drive real behavior change in individuals and help employers control healthcare costs. For more information, visit www.hummingbirdcoaching.com, or contact us at 1.877.240.4588.

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