

Health & Wellness Coaching Gets Certified

Coaches Trained in the Art and Science of Motivating Healthy Changes Have Been the Missing Link in Both Healthcare and Wellness

By Beth McGroarty, VP, Research & Forecasting, GWS & GWI

INTRODUCTION

Coaches trained in the art and science of motivating people to start and stick to healthy behaviors have been the missing link in both healthcare and wellness. Change is here: Training programs and standards are growing fast, new medical models are making the coach as central as the doctor, an explosion of digital health platforms are putting behavioral “coaching” at the center and the wellness world may be slowly waking up to their power.

The world spends \$8.3 trillion a year on healthcare and \$4.4 trillion on wellness and we still can’t stem the tide of chronic diseases and unhealthy behaviors. Behavior change is, of course, the very toughest human nut to crack. So, it’s been extremely befuddling in both healthcare and wellness that coaches who are laser-focused on helping people make healthy changes aren’t at the center of *everything*. Investing in professionals who are schooled in evidence-based models of behavior change is the definition of a no-brainer, if you actually care about the human and financial costs of chronic disease and unhealthy lives. This

kind of coach has been glaringly absent, but now they’re really, truly and finally here. And the rise of “health and wellness coaches” (HWCs) is one of the most potentially impactful trends we’ve ever covered.

But wait, you say, there are a million “wellness coaches” whose goal is *also* behavior change: fitness, executive/career and lifestyle coaches are long-established and new breeds are spawning—whether spiritual, parenting or even “burnout” coaches. “Wellness coaching” may be the most overused noun on earth, a concept made even fuzzier now that any Insta or TikTok influencer can hang up a digital shingle and boldly claim that title.

This trend (and the future) is about much clearer definitions and distinctions in “coaching.” Because, as Susan O’Connor, CEO, Prana Health Strategies and co-chair of the Global Wellness Institute’s (GWI) Wellness Coaching Initiative, puts it: “What a certified health and wellness coach does is utterly unique; no other health or wellness professional has their skillset.”

The Mayo Clinic defines a HWC as a healthcare professional trained in evidence-based behavior change theory and communications techniques who help people develop the intrinsic motivation, skills and confidence to hit realistic, personal health/wellbeing goals (whether around diet, exercise, sleep, stress-management and resilience-building). They *always* view the client as the expert in their own life and through motivational interviewing—which is a nuanced form of nondirective, empathic and mindful questioning and listening—they help you dig deep to find your motivation and goals and then support you each step of the way.

Unlike doctors, who spend 15 minutes with you, HWCs *really* spend time with people (usually 45-60 minutes/week for at least 3 months). This coaching approach is radically different than the “prescriptive” model that defines both medicine and wellness. Doctors tell you to make lifestyle changes. Wellness practitioners advise and teach, or train you in a specific practice—working on a “guru” model: Follow me on *this* exact path to weight loss or enlightenment. The foundational principle of health and wellness coaching is that behavior change cannot be prescribed (those models have failed); the motivation and the plan must be elicited from deep within you.

Jane Brody’s recent *New York Times* article (a real boost to this trend), “We Could All Use a Health Coach,” argues that health and wellness coaches

A Mayo Clinic study found that the large majority of people who worked with a trained HWC for 12 weeks lost weight, ate healthier and exercised more—and the habits stuck months later. Source: Mayo Clinic.

are a woefully underutilized weapon in fighting chronic disease and that everyone really needs one, because “health happens in the 99.9% of your life when you’re not in the doctor’s office.”

Jamie Friend, program director at Mayo Clinic’s Wellness Coach Training Program, notes: “Within the last few years, HWCs have been on the rise in response to rigorous, standardized training programs; the board-certification process; an increase in positive research; the potential for insurance coverage; and the dire need for preventative care. What really excites me about the future is just how much *collaboration* is underway: Coaches are increasingly working in tandem with doctors, primary care practices and hospitals; with insurers; and with physical therapists and fitness/wellness trainers—who now see them as *another very important piece of the health puzzle.*”

This trend explores the ways health and wellness coaching is poised to explode.

How...

- **Rigorous training and certification programs are growing worldwide**, at major medical institutions such as [Duke Integrative Health](#) and [Mayo Clinic](#) and global coaching organizations such as [Singapore’s The Coach Partnership](#) or [Wellness Coaches Australia](#).
- **A new “care team” medical model, where coaches are as central as doctors, is starting to shake up primary care and public health.** In the UK, the National Health Service’s (NHS) ambitious new vision of the future, “Personalised Care,” highlights coaching as central; in the US startups such as [Vera Whole Health](#) pioneering (and big medical institutions and corporations adopting) “advanced primary care,” integrate teams of physicians, nurses and certified health and wellness coaches to deliver “whole-person” care.
- **More insurance companies (from [UnitedHealthcare](#) to [Aetna](#)) are now covering coaching.** In the US, the American Medical Association (AMA) has the coverage codes in place—they just need activation.



- **An avalanche of heavily funded digital health companies (from chronic disease management platforms to weight loss apps) are claiming to put “personalized health coaching” at the center.** We look at the promise of using technology to automate more of the coaching process—and some rising problems with coding the “human” out of process (and how much “coach-washing” is going on).
- **Wellness resorts, that work on the revolving door (and “a week-can-change-your-life”) model, have resisted HWCs.** We see signs of experimentation: Some are incorporating certified HWCs to virtually extend coaching post-stay—and big resort players (i.e., Six Senses and Canyon Ranch) are opening urban wellness centers to deliver more “everyday” coaching.

FUELING THE TREND

Lifestyle Diseases (and Their Cost) Keep Surging—and “Prescriptive” Approaches to Behavior Change Haven’t Moved the Needle.

At this point, we’re numb to the depressing stats on the rise of preventable chronic diseases, leading to skyrocketing healthcare costs—by far the biggest challenge facing healthcare systems, employers and governments. We’ll re-recite just a few: Chronic diseases represent 71% of all global deaths and are responsible for the majority of the \$8.3 trillion spend globally on health—and the World Economic Forum predicts the world will lose \$30 trillion by 2030 in treating chronic conditions (48% of global gross domestic product [GDP]).

Every health stakeholder knows that helping people spark and stick to behavior changes has been the elusive Holy Grail and that conventional approaches have failed. We’ve been calling the human and economic costs of not getting a grip on chronic disease “unsustainable” for years. But the hand-wringing is now turning into action and experimenting with HWCs is the next logical step, as more healthcare players now see exercise, stress management and healthy eating as far more than some “soft side” of medicine.

The Medical Evidence for HWCs Is Growing

While clinical trials on the impact of HWC only began in the last few years, the evidence is promising and growing. A 2017 metareview found coaching reduces risk factors for heart disease and diabetes, lowers body mass index (BMI) and blood pressure and boosts exercise and healthy eating—with the researchers arguing that the body of research “provides substantial evidence for a HWC clinical intervention.” Another metareview revealed especially positive results for weight loss, increased exercise and improved mental health. A Mayo Clinic study found that the large majority of people who worked with a trained HWC for 12 weeks lost weight, ate healthier and exercised more—and the habits stuck months later. Studies also show coaching’s positive impact on Type-2 diabetes and glucose control, chronic pain, high cholesterol and ADHD management. One study found that patients supported by HWCs saved \$412 per month in healthcare claims. It’s still early days in studying certified HWC’s impact on health outcomes and savings—but a stream of hard data is ahead, as more medical organizations make the HWC a central player on the care team.

ASPECTS OF THE TREND

1. What Does a Certified Health and Wellness Coach DO? What DON’T They Do?

Most people have no idea what a health and wellness coach does or what the process feels like. To experience it firsthand, we’ve been lucky to be coached weekly by Alina Hernandez, Mayo Clinic-trained HWC, co-chair of the GWI’s Mental Wellness Initiative and Advisory Board Member, Gharieni Group. It’s been an *extremely* productive and revelatory experience (not like any we’ve ever had). And generally, we owe Hernandez deepest gratitude for bringing the process to life for us.

What Makes Health and Wellness Coaching Unique

It’s 100% about YOU—You’re the Star:

The coach gets to know you by listening intently. At the center of the process is an evidence-based

technique called motivational interviewing (see the textbook: *Motivational Interviewing: Helping People Change*; William R. Miller and Stephen Rollnick). That means your coach asks you open-ended, nonjudgmental questions that get you really talking and thinking about what you want to change and why.

They keep eliciting you through questions, they objectively observe and continuously reflect your thoughts back without judgement—especially your self-limiting beliefs, those stories you tell yourself about why you can't change. In this conversational method, it's easy to spew everything out: your life, your struggles, what matters to you, why you want to change.

It's cathartic-like therapy, but no expert analyzes you or dispenses advice. You do most of the talking and the coach subtly guides you to get your buy-in: For example, they ask, on a scale of 1-10, how important is it to you to make that change? The revelations are all yours, you set the goals. You feel *activated* and that you're the star.

They Meet You Where You're at Right Now:

While psychotherapists will often focus on the past to get at prior issues/traumas holding you back, HWCs stick to the realities of your life today. What was your week like—what's happening at home? They help you identify your strengths and past successes. For example, when you *did* exercise, what exactly made it possible? What's blocking you in taking that walk? The coaching philosophy is that YOU know what you're ready for and together you create a first-week plan that feels super-easy.

Small, but Expanded, Steps Every Week:

You set and sign onto your goals for each week; they start small but keep building. For instance, I committed to being outside in the sun three times a week, which grew the following week to three daytime walks. You will often write out your long-term wellbeing vision on old-fashioned paper and read it aloud to your coach. The coaching premise (unlike promises of a “radical new you”) is that baby steps expanded over time lead to new habits that become second nature. You don't know it,

but they're moving you through the transtheoretical model of change (from precontemplation to contemplation to preparation to action to maintenance).

“Coaching Presence” Is a Huge Value:

“Coaching presence” is extremely important in training programs: Coaches are trained in empathy (you're not just born with it, it can be taught); in how to mindfully pause, recognize what's happening and reflect back; and in cultivating an authentic tone, voice and presence.

Hernandez states that: “The #1 thing strongly emphasized in our Mayo Clinic training is that **as a coach, you aren't the star of the show; you're 100% there for that person.** You must check all ego and even your health/wellness expertise, at the door. That's because effective coaching is a conversational model where the **coachee begins to develop their own motivations—it's a process that puts them at the very center of their own care and where they build self-efficacy—perhaps the key to achieving success.** This stance can be very foreign to doctors and to “star” wellness practitioners—both used to direct the patient/client relationship.” Mayo's Jamie Friend adds: “New coaches can really struggle with not dispensing information and advice (it's human nature to want to ‘fix’ people)—and coachees want to be told what to do (to be magically ‘fixed’). The essence is for both to trust in this evidence-backed process.

With “Wellness Coaching” Models Exploding—Distinctions Will Become More Critical:

We took time to try to capture the essence of health and wellness coaching because “wellness coaching” in general is surging and the areas of focus are becoming hyper-specific. For instance, professional ADHD coaches are rising, offering clients creative solutions to help keep them functioning and focused, with major medical organizations such as the University of Pennsylvania's Perelman School of Medicine now offering it. The *New York Times* recently reported that **with the pandemic igniting a profound interrogation of work, that the traditional career coach is being reimagined as a wellness coach.** Career coaches are now less focused on helping people climb the corporate ladder and



With surging demand for high-quality coaches, the number of NBHWC-certified training programs has more than doubled in the last five years. The 95 training programs now credentialed include high-profile medical institutions, independent coaching organizations, insurance companies and primary care providers. Source: One Medical.

more on helping them find true purpose and meaning, using journaling, bodywork, breathwork and reiki. The wellness coaching angles will further proliferate and it means the future is distinct titles and a clear understanding of what each type does.

2. Standards Are Getting Beefed Up; Rigorous Training Programs Are Booming

Health and wellness coaching was accused of being a nebulous profession with few training and accreditation standards, but this is no longer the case. Accredited training programs are multiplying and they offer an increasingly unified education in evidence-based behavior change theory and motivational and communication techniques, leading to a standardized exam that is no cakewalk. Demand for training is booming, with top programs now seeing long waitlists.

The key organization in the US—and increasingly globally—is the [National Board for Health & Wellness Coaching](#) (NBHWC) and the leap forward for standards came in 2016, when the organization joined forces with the [National Board of Medical Examiners](#) (the body that licenses physicians) to provide unified standards for training and certification, so that HWCs could be integrated into clinical settings. The AMA designates a NBHWC-certified coach (and those certified by the [National Commission for Health Education Credentialing](#)) as a “healthcare professional.”

To become NBHWC-board-certified (and 6,500 people now have) you must complete a minimum of 75 hours of training (but most accredited programs last 3-24 months), 200 hours of coaching sessions and a 4.5-hour exam (so tough it weeds people out). With surging demand for high-quality coaches, the number of NBHWC-certified training programs has more than doubled in the last five years. The [95 training programs now credentialed](#) include high-profile medical institutions, such as [Duke University](#), [Emory University](#) and the [Mayo Clinic](#); independent coaching organizations such as [Wellcoaches](#), the [Institute for Integrative Nutrition](#) (graduates from 175 countries), [India's Weljii](#), Singapore's [The Coach Partnership](#), [Wellness Coaching Australia](#) and [Dr. Sears Wellness Institute](#); insurance companies such as Aetna and UnitedHealth Group; and primary care companies such as [One Medical](#) and [Vera Whole Health](#).

The [NBHWC website](#) is a great place to find a wellness coach. The cost for one-on-one coaching (if hired independently) can range between \$50-\$150 an hour and some coaches do two-person or group coaching. HWC now happens almost entirely online via Zoom.

Most NBHWC-certified programs require a minimum of a bachelor's degree, or equivalent medical experience, such as 3+ years in nursing, psychotherapy, physical therapy, nutrition, etc. [The time commitment varies](#) (Mayo Clinic's program is 12 consecutive weeks, while Duke Health's lasts



There is so much demand, Alina Hernandez, Mayo Clinic-trained HWC and co-chair of the Global Wellness Institute's Mental Wellness Initiative, predicts that the field will experience exponential future growth. For example, the program at Duke Health has a waiting list of a year. Source: Duke University.

10 months). The syllabi can vary somewhat, but these programs all involve a multidisciplinary education in evidence-based approaches for behavior change—and many hours in the trenches developing coaching skills through peer practice and mentor feedback.

Hernandez reports on her Mayo Clinic program: “There is a massive load of reading and video-viewing on the science of behavior change. There’s 25-30 hours of homework each week and much writing, including defending your point of view in case studies. To become a Mayo Clinic Wellness Coach you must pass a written exam showing you mastered the science as well as a practical skills test judging your coaching ability and presence.”

There is so much demand and Hernandez predicts that the field will experience exponential future growth. Duke Health, for example, has a waiting list of a year, while Mayo Clinic is now pooling from other departments to train more coaches for Mayo clinical practice. She notes that what’s fascinating is the interesting people in her class of 46 at Mayo: successful doctors, a physicist, a major criminal defense attorney, a former Apple executive—and these new graduates’ coaching practices are already fully booked. Jamie Friend notes that with the pandemic making all training programs entirely virtual, that Mayo (and others) are seeing an increase of individuals from around the world having access to training.

Mastering communication techniques proven to motivate people to make behavior changes is a skill-set most people in health or wellness should have. More wellness practitioners (fitness and yoga instructors, etc.) are moving to HWC as a new career. So, it’s no surprise that fitness/wellness practitioner certification organizations are now adding wellness coach training programs: The National Academy of Sports Medicine, a global leader in fitness certifications, just launched a “Certified Wellness Coach” program.

3. Coaching’s Role in Global Healthcare and Health Policy Is Rising

For anyone who has to *pay* for all the chronic disease engulfing the world—whether government-funded insurance programs or employers—health and wellness coaching is increasingly being experimented with as a brilliant way to improve outcomes and lower costs.

The trend is playing out globally in diverse ways. In 2019, the UK’s NHS, the second-largest public healthcare system in the world, unveiled its long-term plan called “Personalised Care,” a dramatic new vision for its services aimed at “giving people the same control over their health that they expect in every other aspect of their life.” The ambitious, prevention-focused plan, which will impact up to 2.5 million people by 2024 and is designed to save half a million lives, has six pillars, one of which is

“supported self-management”—and within that, health and wellness coaching is key. People will be offered ongoing coaching sessions to help them make lifestyle changes “as active participants in their care.” The pandemic surely slowed the launch of this vast initiative, but the coaching is rolling out now. The NHS also just announced a crucial initiative for obese children across the UK (as one in five UK kids are now obese) that assigns each child a clinical team that includes a health coach.

Coaches are becoming central in more public health and community programs around the world. Singapore’s National Healthcare Group reimaged its primary care system with health and wellness coaching at the center. At their Tan Tock Seng Hospital a growing team of HWCs head out to the city’s senior and community centers to provide one-on-one lifestyle-change coaching. China is using local health coaches (dubbed “village doctors,” but not formally trained in medicine) to tackle hypertension in rural areas. They coach on how to make behavior changes and monitor blood pressure—and a large new study showed that this on-the-ground coaching experiment led to an impressive half of all hypertensive patients reaching normal blood pressure.

The Future? “Advanced Primary Care” and Medical “Care Teams” Where Coaches Are as Central as Doctors

More doctors are now vocal about how primary care needs to be reimaged as less of an annual checkup and more of an everyday wellness process—and that HWCs are the powerful weapon in realizing that. More medical experts are also arguing that the work being done with the doctor shouldn’t be disconnected from the work being done with the coach (a disconnect that plagues almost all employer- and insurance-provided coaching platforms).

To solve for these issues, a new group of US companies have a mission of disrupting primary care with a preventative, “whole person” approach, where patients are assigned an entire “care team” where coaching is central. With a membership at Parsley Health you get five annual medical visits

and five annual health coach sessions (note the parity), as well as advanced diagnostic testing to set a personal, supported-all-year-long health plan. Firefly Health gives each patient a team including a doctor, nurse, health coach and behavioral health specialist—with an app to book virtual and in-person coaching. Iora Health, a network of primary care practices geared towards Medicare patients, also gives each person that dedicated doctor + health coach + nurse team.

Hernandez notes it’s not just primary care startups, but clinicians at renowned medical institutions that are waking up to this model: “Many Mayo Clinic clinicians are taking an interest in a new patient-centric (not problem-centric) care model where three key team members—the doctor, nutritionist and health coach—work in tandem: The complete patient record is monitored by all three—and the coach actually becomes the main ‘bridge’ to the patient.”

US startup Vera Whole Health has pioneered “Advanced Primary Care” (APC) and it’s a radically new approach to how employers will deliver healthcare to workers. It views the fee-for-service healthcare model as broken and instead revolves around a “value-based,” flat-monthly-fee model, where the Advanced Primary Care provider has a massive incentive to keep that person healthy (imagine that!). APC’s foundation is an integrated team of primary care physicians, nurses and certified health and wellness coaches (backed by a tech platform). Vera Whole Health is adamant that “behavior change cannot be prescribed,” which is why “health coaches are essential stakeholders on the APC care team.”

The leading human resources organization, The Society for Human Resource Management (SHRM), just called Advanced Primary Care “the next big thing in medicine” and notes that it’s getting the endorsement of some of the US’ biggest employers and policy experts—and with big corporate names putting big money behind it. JP Morgan Chase recently launched Morgan Health (with an initial \$250 million investment) to roll out coaching-central Advanced Primary Care for its employees, as did Baylor College of Medicine

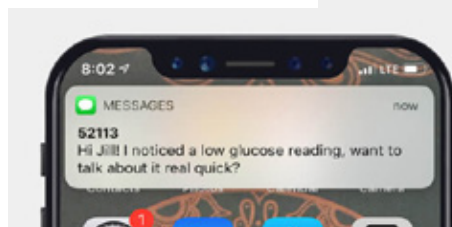
(both programs realized by Vera). It's too early for hard data on health cost savings, but Baylor reports eye-opening numbers: "Half the visits are not to see a physician but for the other services such as wellness coaching." As SHRM notes, big medical organizations and corporations are now committing to this new vision of primary care with integrated coaches on a scale never seen before.

4. Insurance Companies Are Starting to Cover

Healthcare models that combine insurance with the actual healthcare delivery—whether public health systems such as the UK's NHS or the US' Kaiser Permanente (where your insurance premium covers total care within its medical system) obviously have a greater incentive to keep people healthy, if they want to reduce costs—so they're more likely to embrace prevention-focused HWCs. Kaiser Permanente, for instance, offers free wellness coaching to its members.

More private health insurance companies—Aetna, UnitedHealth Group, Blue Cross-Blue Shield and Cigna—are providing health coaching to members. But in private healthcare systems, such as the US', insurance hasn't yet covered coaching in a meaningful way, because there haven't been the codes that doctors can submit to get reimbursed. But real action is percolating on this front. In 2019, the AMA granted category III codes for board-certified (NBHWC or NCHWC) health and wellness coaches so they could gather the data to support Category I reimbursement (insurance companies don't typically fork over reimbursements without Category I status).

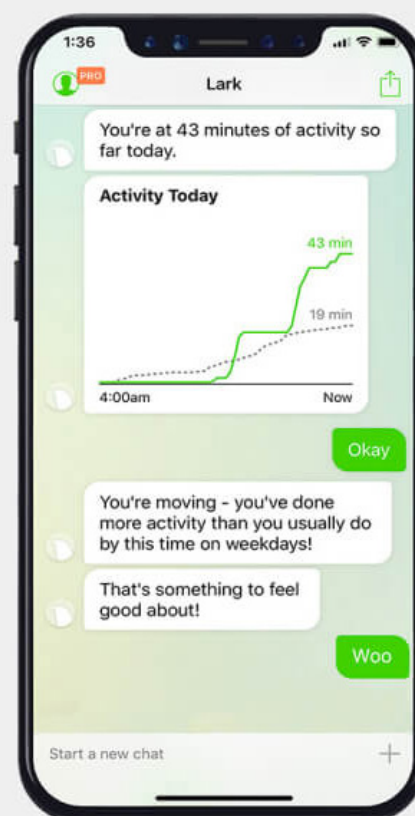
Lark Health revolves around AI-generated behavioral health coaching. Users get a "Personalized Health Coach" that "always responds in two seconds" (because it's an automated text message, not a human) and Lark argues it offers "the same benefits as in-person coaching" but is more scalable. Source: Lark.

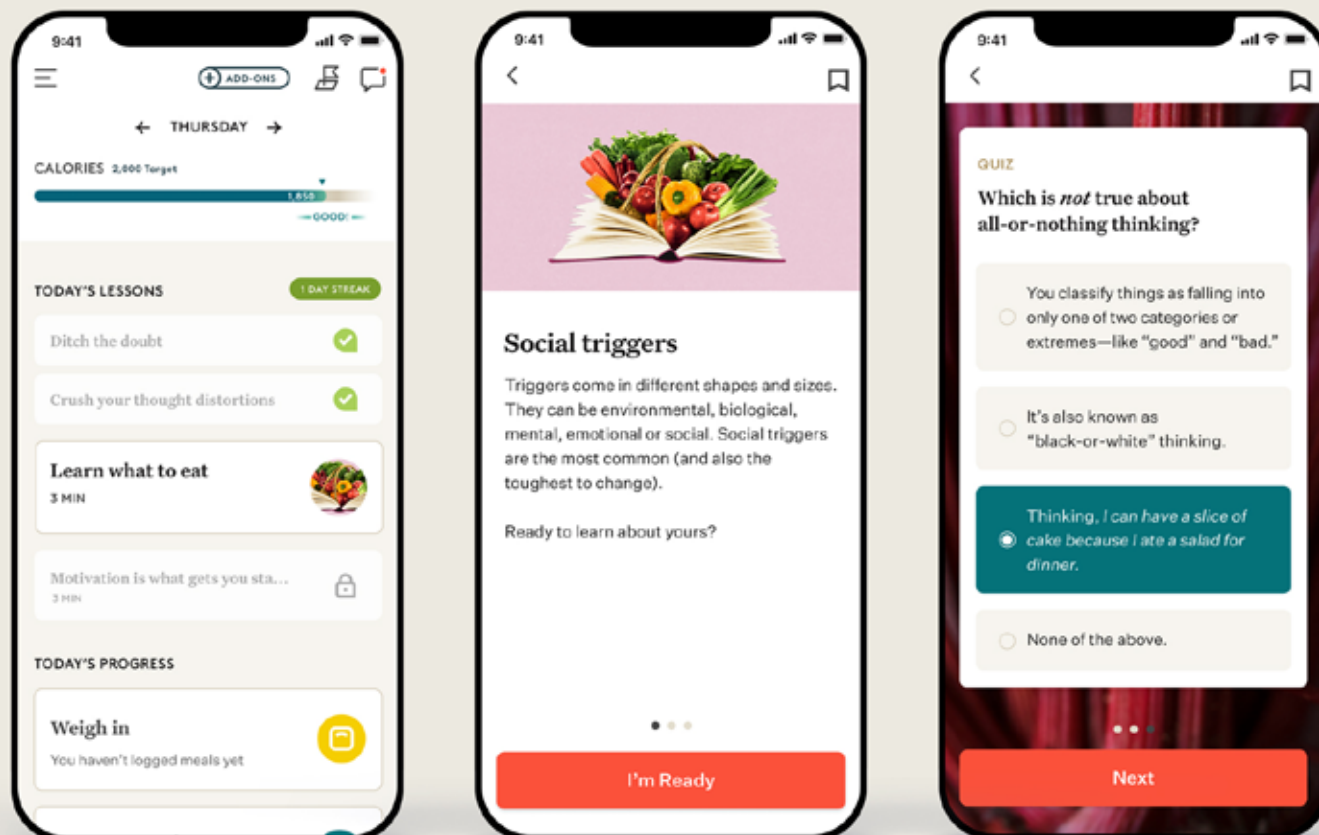


The US Department of Veterans' Affairs (VA) is a key organization now tracking the use of these codes to study how effective HWC is. Certified VA coaches (there are 2,300) are called "Whole Coaches," and are vital members of this vast organization's total system of healthcare. In April 2021, the AMA granted a new code to identify that a HWC is working in a medical practice, so that the practice can use the code when they bill for coaching services. These new codes are temporary placeholders to gather data on coaching's efficacy and to boost the use of coaching in healthcare. The codes are firmly in place—and there's real optimism that board-certified HWCs will be billable to US insurance companies in the next few years.

5. The Coach in the Machine: A Wave of Digital Health Platforms Are Putting "Personalized Coaching" at the Center

The pandemic, of course, kicked into overdrive every kind of digital health platform, a market expected to grow from \$175 billion in 2019 to a staggering \$660 billion in 2025. Within that space, a storm of new platforms and apps is focused on behavior change: from the many new virtual solutions to manage chronic conditions, such as Lark Health or Virta; to the rise of behavioral-psychology-based weight loss platforms, such





Unlike most apps, Noom provides some transparency into its coaches' training: It requires a bachelor's degree or associate degree with 2,000 hours of wellness experience; its "Noomiversity" (requiring 75 hours of training) is the only coach-training program from a weight loss app approved by the NBHWC. Source: Noom.

as [Noom](#) and [Optavia](#); and mental wellness and coaching apps for employees, such as [BetterUp](#).

It's astounding how many new digital health companies claim that "personalized health coaching" is a cornerstone of their platforms: [Virtual coaching feels everywhere](#) and it's a validation of the model by big, well-funded companies. With healthcare systems overtaxed and chronic disease and mental health issues surging, solutions have never been so direly needed. These startups' typical pitch is that virtual platforms can revolutionize behavior-change by deploying tech such as artificial intelligence (AI), Big Data and connected wearables, to automate more (or all) of the coaching process—scaling "coaching" at a low cost for many millions more people.

Surge in Chronic Disease Management Platforms Where "Coaching" Is Central

A fast-growing crop of global healthcare companies are combining remote-patient monitoring (to continuously track patient biometrics) and virtual

coaching (along with other tools) to help people improve chronic conditions, from diabetes to hypertension. Companies such as [Onduo](#), [Livongo](#), Switzerland-based [Oviva](#), [Vida Health](#), [Omada](#) and [One Drop](#) are just a few. With the digital diabetes care market alone set to reach \$700 million in 2022, these companies are attracting serious funding. Their models differ, but all put behavioral coaching at the center: whether that's daily nudging by entirely virtual "coaches" or a hybrid model that also offers access to real coaches.

[Lark Health](#) provides people with Fitbits and smart scales and revolves around AI-generated behavioral health coaching. The company calls it "coaching done differently": Users get a "Personalized Health Coach" that "always responds in two seconds" (because it's an automated text message, not a human) and Lark argues it offers "the same benefits as in-person coaching" but is more scalable. Singapore-based [Naluri](#) offers remote patient monitoring and AI-driven and "human-led" digital health coaching for people

with chronic diseases and mental health issues—and is expanding across Southeast Asia. Other models make a human care team—doctors and real coaches—more central. Primary care startup One Medical just launched Impact to expand into digital chronic-care management and it combines access to a care team of the doctor and the HWC with connected wearables, so both can make treatment and coaching adjustments in “real time.”

So Many Virtual Coaching Platforms, from Weight Loss to Mental Health!

There are a dizzying number of wellness-focused apps and platforms (beyond chronic disease management) putting behavioral coaching at the center.

Many deploy virtual coaching as the weapon to improve mental health. BetterUp, which says it's the biggest coaching and mental health company (worth \$4.7 billion; with 2,000+ coaches in 66 countries; and famously just hiring Prince Harry as Chief Impact Officer), is aimed at driving behavior change and personal growth for employees, using AI to automate coaching in the app, but also providing access to human coaches. Ginger (just acquired by Headspace) wants to solve the profound global need for more mental health support by connecting people to behavioral health coaches for text conversations—and escalating them up to therapists/psychiatrists as needed.

The new “anti-diet” weight loss platforms, focused on changing your mindset towards food, lead with “personal coaching.” Optavia calls its thousands of “real coaches” its “lifeblood.” Betr tackles weight loss through gut health and pairs users with “remote personal coaches” for one-on-one phone sessions. For the goliath “psychology-based” weight loss app Noom (45 million downloads in 100 countries), coaching is critical: It promotes that you'll be assigned your own “personal coach” for “unlimited one-on-ones” for a \$59/month fee. Unlike most apps, Noom provides some transparency into its coaches' training: It requires a bachelor's degree or associate degree with 2,000 hours of wellness experience; its “Noomiversity” (requiring 75 hours of training) is the only coach-training program from

a weight loss app approved by the NBHWC; and it “encourages” its coaches to take the board exam.

In New Digital Health World of Coach-bots and Algorithm-Generated ‘Nudges’—the Human Coaching Experience Is Getting Lost...and a Lot of “Coach-Washing” is Going On

While digital platforms using AI, Big Data and algorithms have great potential in *expanding* the work of doctors and real HWCs in supporting ongoing behavior change, we're quickly entering a world where the “coaching” is either entirely reduced to chatbots and automated text exchanges—or where they're taking over most of it, even for the hybrid platforms also promising “real, one-on-one coaching.” We could not find a digital-first company that used the health and wellness coaching process this trend is about: 30-to 60-minute weekly sessions over months with a dedicated-to-you, certified coach using evidence-based behavior change techniques... coaches that spend time to get to know you—a specific process where human presence, empathy and time spent is key.

We tested a couple behavior-change apps promising us a “personal coach.” In a nutshell, we got a lot of bot-feeling weekly check-ins and encouragements (and anybody that knows me, knows that saying “You got this!” is like nails on a chalkboard). When I texted to say I was upset and had a question, they got back in three days and asked me a short question. My “coach” felt like avatar, a metaphor. An in-depth article in Vice on Noom details similar user experiences: absent human coaches and generic high-fives. A former employee got to the heart of the problem: Noom says that it has 2,300 coaches supporting “millions of users,” but employees report that each coach has to support 400 users! Hence, the canned motivational texts and conversations.

In the Vice article, Harvard professor John Torous gets to the real issue: “Coaching costs money, it's a human being.” It's simple math: If a company charges, say, \$50 for “unlimited one-on-one coaching,” that coaching has to largely be bots and programmed nudges.

Digital health companies want to scale chronic

disease management, weight loss and mental health coaching to reach millions in need, more efficiently—the very noblest of missions. Companies are attracting huge funding—and more medical and insurance organizations are partnering with them—because they’re desperate to move the needle on these issues (cheaply). You can’t blame *anyone* for wanting technology to fix a chronic disease crisis when nobody else has been able to.

But it’s a worrisome trend that the big insurance companies are fast outsourcing crises such as chronic disease and mental ill-health to third-party Silicon Valley providers (who, by nature, chase earnings and venture capital funding, so must scale ever-bigger, ever-more cheaply)—rather than covering actual coaches and therapists and without *integrating* behavior-change coaching into the actual medical care. Insurance company “wellness programs” are increasingly a menu of memberships to apps (most “coaching” centered): For instance, [Blue Shield’s Wellvolution](#) offers 14 memberships, from Headspace to Betr to Virta.

Digital solutions can help medical teams and human coaches support behavior change: It’s the future. We lack any studies comparing human-delivered HWC to the new digital platforms’ specific coaching models. Until peer-reviewed studies appear, some caution is needed for all this



high-tech “scaling” of coaching—this slashing of human-time to make coaching cheap. To differing degrees with these companies, there’s a lot of “coach-washing” going on. A [review of the 2022 J.P. Morgan Healthcare Conference](#) noted the swarm of chronic disease management platforms/apps presenting and how they all want to change your behavior by deploying AI to create virtual “nudges.” Their take: “We’re going to have to come up with something better than (digital) nudges to save our healthcare system.”





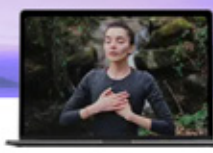
Jamie Friend on the issue: “The most essential thing in the health and wellness coaching framework is two people coming together in the spirit of collaboration: You’re coaching a *person* not a problem; it takes time and involves building a relationship of trust and rapport.”


6. Wellness Resorts & Centers Have Avoided This Coaching Model—Will That Change?

Wellness resorts and centers offer every breed of practitioner imaginable—from fitness to sleep to breathwork “coaches.” But the wellness world seems to have an allergy to the coaching model we’re describing here. Part of it may be that HWCs are just hitting people’s radar, but other reasons may be at play. As with medicine, the wellness model has been a heavily “prescriptive” one:

Wellness resorts experimented with tele-wellness during the pandemic and many programs are sticking. Kamalaya in Thailand launched “Kamalaya Connect” to bring dozens of wellness programs and private coaching sessions to people at home—which it describes as a new “virtual bridge” to the resort.
Source: kamalayaconnect.com.



WELLNESS PROGRAMS	WORKSHOPS	WELLNESS PROGRAMS	ONLINE COURSE	ONLINE PRIVATE SESSIONS
				
INTRODUCTION TO OPTIMAL WEIGHT This mini wellness program is perfect for someone who is not sure where to start	KEYS TO A RESTFUL SLEEP In this replay of the workshop with our Life Enhancement Mentor, Sujoy you will learn about a step-by-step process to relaxation and the importance of mental and physical conditions to support a replenishing sleep.	FIT FOR LIFE Begin exercising again, or take your fitness to the next level in a fun and rewarding way led by our personal trainers, yoga and mindfulness experts.	THE FUNDAMENTALS OF NUTRITION Gain a greater understanding of the vital link between healthful eating and enhanced longevity and wellbeing.	PRANAYAMA A private pranayama session will guide you in various techniques to control and regulate the breath.
\$69		\$684 – \$2,327	US\$ 59	\$168 – \$1,258





“We’re now beginning to explore the incorporation of this coaching model into our current integrative wellness programming,” shared Sergio de la Vega, the owner of award-winning Cartesiano Urban Wellness Center in Puebla, Mexico. This is the first full execution of bringing the certified HWC into a wellness destination. Source: Cartesiano.

Wellness practitioners dispense much advice, not just do yoga or eat healthy, but only do this exact kind of yoga or diet. Certified HWCs don’t prescribe (so aren’t a selling platform): They help people identify a plan and solutions that are typically free/affordable and in your own “backyard.”

Wellness resorts fly the banner of “transformative” behavior change: “the week that will change your life.” While wellness destinations offer incredible immersion in new, healthy experiences; can ignite the desire for change; can have a surprisingly quick impact on stress levels and other key health markers; and, of course, deliver so much pleasure—the science is clear: You cannot create real behavior change in a week, or even two. Studies concur that, on average, it takes more than two months (for some people, eight) for new behaviors to become habits. Wellness companies offering one-off and short-stay experiences may do important, blissful things, but they defy the science of behavior change.

More wellness resorts are now adopting a “health coach” model that, rather than extending behavior change beyond the stay, is instead a pre-stay

consultation to personalize the resort experience—and let’s face it, that kind of “coach” is a great way to pre-sell treatments and experiences. For instance, the gorgeous new Hacienda AltaGracia in Costa Rica (a collaboration between Auberge Resorts and New York City’s famed wellness center, The Well), has guests meet with a “health coach” before they set off, because, as The Well’s Director of Health Coaching put it, “customized experiences...are how wellness becomes sustainable.”

There are some signs that wellness destinations are moving beyond the “prescribe, sell and goodbye” model to create some form of an ongoing coaching model—or at least the possibility of it. Canyon Ranch in Tucson will soon launch a life coaching program that looks grounded in the principles of HWC: deep listening to find people’s intrinsic motivations and then ongoing work to support it. And Canyon Ranch Woodside in California now offers ongoing health/wellness coaching.

Wellness resorts experimented with tele-wellness (delivering classes/coaching online) during the pandemic and many programs are sticking. Ka-

malaya in Thailand launched “[Kamalaya Connect](#)” to bring dozens of wellness programs and private coaching sessions to people at home—which it describes as a new “virtual bridge” to the resort. These new platforms would be perfect for integrating certified HWCs.

The trend of high-profile wellness resort brands now opening urban wellness clubs creates the platform for long-term behavior-change coaching. [Canyon Ranch’s urban wellness club](#) coming to Forth Worth, Texas, in 2023 revolves around “frequent coaching” to expand the resort experience into an “everyday wellness practice.” [Six Senses](#) just reported that it’s incubating the launch of Six Senses Place, wellness clubs within its urban properties in New York, London, Bangkok, Shanghai, the Loire Valley, Istanbul, Rome and Lisbon. CEO Neil Jacobs [has stated](#) that this urban club model lets guests continue the healthy behaviors kickstarted at the resort back home and is meant to tackle the [“problem with destination spas...where guests clean up their act...and then they...are back where they started.”](#)

The first full execution of bringing the certified HWC into a wellness destination is being experimented with at the award-winning [Cartesiano Urban Wellness Center](#) in Puebla, Mexico. Owner Sergio de la Vega and his partners told us: “We’re now beginning to explore the incorporation of this coaching model into our current integrative wellness programming. Alina Hernandez, co-designer of our wellness concept, has developed a Health and Wellness Coaching component to be added to select retreats starting in Q1 2022.” Hernandez explained: [“The coaching process will start pre-stay, people will experiment at the retreat and set future goals and the coaching journey will then continue at home.”](#)

There’s so much opportunity to bring health and wellness coaches (and, more broadly, evidence-based behavior change techniques) into the heart of more wellness businesses. It may not be a model that “sells” much, but it certainly creates stronger, longer guest/client connections. HWCs could be a cornerstone of wellness real estate developments that are all about “everyday wellness” and they’re a natural for urban wellness/fitness centers, where

Canyon Ranch in Tucson will soon launch a life coaching program that looks grounded in the principles of HWC: deep listening to find people’s intrinsic motivations and then ongoing work to support it. Source: Canyon Ranch Tucson.



the HWC can inspire and support the mindset for change and the coachee can *choose* to be supported by that business' fitness, food, stress-management, etc. offerings.

THE FUTURE:

Professionals trained in evidence-based approaches of behavior change—who spend real time with people—are a no-brainer. The no-brainer that is the certified health and wellness coach has been oddly delayed, but it is HERE.

The Future Is Simply MORE of Everything We've Covered Here:

If HWCs integration in healthcare (and coverage by insurance) has been held back by a lack of training and accreditation standards, they're fast being put in place. **If most people don't currently grasp what they do, they will: We know what a doctor, nurse and fitness trainer does and the health and wellness coach will be a recognized professional designation practicing a very specific thing. In the wild west of "wellness coaching" new distinctions will be made.**

As Susan O'Connor notes, the future is "more medical and primary care organizations, more insurers, more global governments and community-based programs, more digital health platforms and more wellness companies, integrating HWCs—employee wellness programs are now even being delivered by coaches virtually to support remote workers struggling at home." The profession will boom: We will need tens of thousands more.

As medicine moves to "value-based" models calling for more "patient activation" in care (i.e., models where there's an *incentive* to actually keep people well), the experiments now underway with a "care team" model (integrating the doctor, nurse, coach, mental health professional) will be extremely interesting to watch: New data on outcomes, cost-savings and how coaching is really best delivered, will likely grow adoption—but will also evolve how coaching gets done.

The explosion of digital health platforms promising to revolutionize chronic disease, weight loss and mental health, now automating behavior change "coaching" to scale it broadly and cheaply (all those chatbots "nudging" us on), are coding all or much of the human, more time-intensive, evidence-based coaching experience out of the equation... before it has even been integrated into healthcare! **These platforms are admittedly at the 1.0 stage and the call is out on their results compared with human-led coaching. The future: using digital tools that can expand (and make smarter) the human coaching process—because coaching IS a human process.**

As Jane Brody argues, as more doctors argue that coaching should be an integral part of medical care, private/public health insurers governments and tech companies will need to decide where they stand. To tackle the astronomical costs of healthcare we need to make HWCs far more accessible and not doing so represents more of the maddening "penny-wise, pound-foolish" approach of most medicine. A life with diabetes and heart disease can cost hundreds of thousands—even millions of dollars. And organizations won't pay



Dean Michelle A. Williams, ScD, dean of faculty at Harvard's T.H. Chan School of Public Health, presented a keynote on The New New Era in Public Health at the 2021 Global Wellness Summit. Key takeaways included how a new era was emerging where healthcare would meet wellness and self-care. Health and wellness coaching may be the most tangible example of the trend. Credit: Len Rubenstein, for the GWS.

a few hundred bucks for a few months to see if coaches can help prevent or roll back the behaviors fueling these conditions?

The 2021 Global Wellness Summit's key topic was how a new era was emerging where healthcare would meet wellness and self-care. Health and wellness coaching may be the most tangible example of the trend. It is *precisely* supported *self-care* in healthcare—and expands medicine's focus from cure and shorter-term fixes to prevention, while instituting core wellness values within a profession: empathy and real human relationships.

The bedrock science behind HWC (behavior change can't be prescribed and it takes months for habits to stick) raises questions about what the wellness world leads with: magical, quick “fixes”—take this supplement or spend a week at this resort and “be transformed” (it's funny that so many “wellness journeys” are so short!). In fact, there may be no clearer evidence that prescriptive, quick-

fix wellness doesn't work for sustaining behavior change than wellness fanatics constantly chasing the next diet, workout, or Insta-guru. People try everything and still feel “stuck” because we need to acknowledge the science: **Behavior change gets switched on (and stays on) only from within.** We believe more wellness centers/resorts will experiment with certified health and wellness coaches and certainly longer-term coaching connections. HWCs may not feel as sexy as shamans, but evidence- and results-based wellness is the big shift coming out of the pandemic.

It's not just people that struggle mightily with behavior change, industries do too. It will take *years* to really broaden health and wellness coaching—and the evolving science of behavior change—in both the medical and wellness worlds.

*But we believe **2022 is the tipping-point year.***