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## **AN ACHA WHITE PAPER**

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# **Wellness Coaching**

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## Scope of Practice: What Is Wellness Coaching?

Wellness coaching has seen success across many professional domains. The International Coaching Federation (ICF, 2019) defines coaching as “partnering with clients in a thought-provoking and creative process that inspires them to maximize their personal and professional potential. Coaches honor the client as the expert in his or her life and believe every client is creative, resourceful and whole” (np). The National Board for Health and Wellness Coaching (NBHWC, 2019) states “Health and Wellness Coaches partner with clients seeking self-directed, lasting changes, aligned with their values, which promote health and wellness and, thereby, enhance well-being. In the course of their work health and wellness coaches display unconditional positive regard for their clients and a belief in their capacity for change and honoring that each client is an expert on his or her life, while ensuring that all interactions are respectful and non-judgmental” (np). There are many different types of health and wellness coaching programs in and outside of the higher education landscape. For the purposes of this paper, health and wellness coaching programs that serve to promote health and wellness in colleges and universities will be referred to under the umbrella term “wellness coaching.”

While wellness coaching in the context of higher education is still fairly new, its potential as an effective approach for improving student well-being and academic achievement in the higher education setting is gaining momentum (Larcus, Gibbs and Hackmann, 2016). College is a major transition period, and research continues to show that students are experiencing increased levels of stress and mental health concerns such as anxiety and depression, as well as overwhelming feelings when trying to balance their studies, health and social life. Additionally, promoting wellness within academia reduces disease frequency and enhances both mental and physical health (Miller et al., 2008; Slavin et al., 2014).

According to the ACHA-NCHA 2018 Fall Reference Group Executive Summary, stress was the top reported academic impediment (31.9%), with 97.6% of students reporting they experienced stress in the past 12 months.

Furthermore, 45.1% of students reported feeling more than average stress in the past 12 months and 85.5% of students reported feeling overwhelmed by all they had to do. Anxiety was the second highest reported academic impediment, with 25.9% indicating that anxiety seriously impacted their academic performance, followed by sleep difficulties (20.2%) and depression (16.9%).

Furthermore, students reported feeling very sad or very lonely (63.2%) at least once in the past year; this is important as college students who have difficulty connecting to others or finding support can become withdrawn, which may lead to depression or another mental health concerns. This constellation of holistic well-being concerns has warranted substantial initiatives, including health and wellness coaching, aimed at increasing student well-being at universities around the nation.

Wellness coaching addresses multiple dimensions of well-being, oftentimes those that reflect the unique success and wellness priorities of the institution of which it is a part. The potential outcomes from wellness coaching include increased self-awareness, acquisition of new knowledge and skills, attainment of personal and professional goals, sustainable behavior change, increased life satisfaction, increased self-efficacy and becoming one’s best self (Moore, M., Jackson E., & Tschannen-Moran, 2016). Wellness coaching is intended to provide preventive resources, coping skills, and opportunities for effective goal-setting and attainment for students who wish to proactively address their well-being, or who are in early stages of mental/emotional distress. It is reciprocal and synergistic to other campus resources such as counseling and psychological services, case management, and advising. Wellness coaches leverage each student’s motivations and strengths to support behavior change through a collaborative, non-judgmental partnership. Each student’s unique identities, backgrounds, and motivations are considered in an individualized, brief intervention context.

## Theoretical Underpinnings of Wellness Coaching

The theories and frameworks that follow are integral bases of services and disciplines such as mental health counseling, addiction and recovery, psychology, many

forms of student affairs advising, and wellness coaching. While none of these theories are unique to wellness coaching, they form the basis for the steadily growing field of coaching as it is presently known.

### ***Motivational Interviewing***

Motivational interviewing (MI) is a foundational tool used in wellness coaching. Motivational interviewing allows coaches to meet students where they are along the continuum of behavior change (Miller & Rollnick, 2013). The foundations of MI (compassion, acceptance, partnership, and evocation), as well as the strategies used to support change talk, are closely aligned with student development theory and social justice principles. This ensures coaching sessions are student-centered and grounded in eliciting motivation to change rather than passively offering information. Coaches work alongside students to elicit their individual values and leverage their personal strengths, utilizing empathy and self-reflection to actively engage them in individually relevant action planning to support long-term behavior change.

### ***Transtheoretical (Stages of Change) Model***

Developed by James Prochaska and Carlo DiClemente (1983), the Stages of Change model was born out of tobacco treatment protocol. This model recognizes behavior change as a process and that each person may be at a different stage of readiness to change. The five Stages of Change (Precontemplation, Contemplation, Preparation, Action, and Maintenance) reflect a fluid process rather than a linear progression. Using this model, a coach works with a client to set realistic goals based on the stage of change in which that client finds themselves presently.

The Stages of Change model works with a person's strengths and offers coaches an opportunity to help clients set realistic goals based on how likely they are to make a change. This empowers a client to realize success and gain motivation to keep going. It also provides coaches with a framework to choose appropriate MI questions to help a person move through the stages of change and ultimately towards goal achievement.

### ***Self-Determination Theory***

Self-determination theory (SDT) is another foundational theory for wellness coaching. According to Deci & Ryan (2008), autonomous motivation increases the likelihood of goal achievement. When people are motivated by integrating goals into their sense of self,

they have higher likelihood of continued action toward desired outcomes. SDT suggests that people are motivated to grow and change by three innate and universal psychological needs: competence, connection, and autonomy. Conditions supporting the individual's experience of these three needs increases the probability of higher levels of motivation and engagement for activities, including enhanced performance, persistence, and creativity. In addition, SDT proposes that the degree to which any of these three psychological needs is unsupported or thwarted within a social context can have a detrimental impact on well-being in that setting. To the extent that the needs are continually satisfied, people will develop and function effectively and strive for personal goal attainment. In the context of wellness coaching, students/clients can struggle to find energy, mobilize effort, and persist at the tasks of life and classwork; and they are often moved by external factors such as reward systems, grades, evaluations, or the opinions they fear others might have of them. Yet, just as frequently, people are motivated from within by interests, curiosity, care, or values alignment. Wellness coaches help students tap into their intrinsic motivations in order to sustain motivation and efforts to achieve their goals

### ***Positive Psychology***

Wellness coaching utilizes positive psychology measures grounded in strengths to guide the conversation and recommend practices to bolster student well-being. In addition to addressing the student's desired area of focus for coaching, positive psychology posits that it is worth looking at the elements of life that lead to human flourishing such as positive emotion, engagement, relationships, meaning, and accomplishment as underpinnings of building a well life (Seligman, 2011). Wellness coaches can help students to build the foundation for a life of flourishing through practices of gratitude, mindfulness, self-compassion, and personal values. Through these practices, students build lasting self-care and coping skills suitable for use throughout the rest of their lives.

### ***Appreciative Inquiry***

David Cooperrider of Case Western Reserve University and Suresh Srivastava of The Taos Institute developed Appreciative Inquiry (AI) in the 1980s. It is a process for engaging people in building the kind of world they want to live in. Working from peoples' strengths and positive experiences, AI co-creates a future based on collaboration and open dialogue. AI takes a "what's right" approach that focuses on identifying and building

strengths, resources, and solutions, rather than a "what's wrong" approach, which focuses on deficiency. When there is a focus on deficiency, we are more likely to limit motivation, innovation, and growth, which are highly beneficial when individuals want to make effective changes (Sloan & Canine, 2007).

The principles of AI, its generativity, the emphasis on building on what works, and on people's strengths helps foster the conditions for resilience and well-being. It is important to realize that it is not a set of techniques, but a way of working from an appreciative, positive, and strength-based standpoint—it is both a philosophy and an approach.

## **Framework for Wellness Coaching in Higher Education**

### ***Connection to Student Development Theory***

While there are plenty of wellness coaching certification programs and products on the market, there are few that focus on the unique aspects of the collegiate environment. The developmental trajectory and progression through the college experience lends itself to the use of student development theory in any wellness coaching practice.

Student development theories provide a broad understanding of how students change during their college experience. These conceptual foundations explain a variety of factors including biological, psychological, spiritual, moral, cultural, and social domains of functioning (Patton, Renn, Guido, & Quaye, 2016). Some of the more salient student development theories that apply to wellness coaching are self-authorship, emerging adulthood, and transition theory.

Baxter, Magolda, and King (2004) defined self-authorship as "the capacity to internally define a coherent belief system and identity that coordinates engagement in mutual relations with the larger world" (p.xxii). This growth is informed by reflection, typically when individuals encounter events that challenge their previous ways of making sense and navigating life's transitions (Baxter Magolda, 2001). The process of self-authorship after these crossroad moments includes trusting one's internal voice, building an internal foundation, and securing internal commitments to new ways of being (Baxter Magolda, 2008). This process may be seen in many forms throughout the coaching process, as the ultimate aim is to aid students in navigating transitions through empowering, partnering relationships that are non-directive in nature.

Transition theory was posited by Anderson, Goodman, and Schlossberg (2012) as any event, or non-event, that results in changed relationships, routines, assumptions, and roles. College often presents a significant transition period for young adults. Transition theory states perception is important in successful transitions of individuals (Anderson et al., 2012). Coaches play a key role in eliciting perspective change for students and provide support through internal and external resource navigation.

Emerging adulthood (Arnett, 2015) is a unique developmental timeframe that aligns with most traditional-aged college students and further highlights the transitional stress that arises in college. Emerging adulthood is described by five distinct elements: identity exploration, self-focus, instability, feeling in-between, and possibilities and optimism (Arnett, 2015). Each of these elements provides an opportunity for coaches to help students navigate normative transitions for their developmental stage and age.

### ***College Public Health Expertise***

Although the wellness coaching intervention is typically a one-on-one interaction, it is informed by population-level issues and challenges. Wellness coaches are also uniquely situated to provide information to administrators about the barriers and challenges that particular student populations are experiencing. Development of a wellness coaching program should be grounded in the public health indicators of the specific community it serves. Health and well-being data, such as National College Health Assessment (NCHA) data, as well as other institution-level health, wellness, and student success data will inform the training and resources that wellness coaches will need.

### ***Grounded in Holistic Wellness***

Historically, colleges and universities have addressed top public health issues in siloed, content-specific areas. Content area experts are utilized and often engage students in topic specific conversations and interventions (BASICS, HIV counseling, disordered eating consults, etc.) That approach serves a purpose (conduct, acute worry, etc.) but does not address the complexity and reality that these issues are often interdependent and dynamic. Wellness coaching is an intentional effort to reconnect all parts of the student and guide them in setting goals that acknowledge the complexity of the behaviors in which they choose to engage and the varying barriers that exist in the collegiate environment. A multidimensional model of well-being allows the coaching session to affirm that

well-being is dynamic and often exists at the intersection of their identity, the environment in which they live and the behaviors they choose.

### *Part of a Continuum of Care*

Interprofessional health care teams consisting of physicians, mental health providers, health educators, and wellness coaches can help societies prepare for futures in which the impact of behavior change on health outcomes is more important than ever (Jordan & Livingstone, 2013). Within college communities, wellness coaching is part of a range of multidisciplinary services and resources offered to support student mental health and well-being. Coaching is an effective methodology for energizing individual behavior change because it concentrates on helping clients become more autonomous experts in their own well-being and personal journeys. While there are several differences between wellness coaching and other health, wellness, and student success support services, the main one lies in the approach used to help individuals make behavior changes in their life.

Wellness coaching offers a complimentary yet distinct venue for students to explore areas of their lives that may be out of alignment. Such an offering enhances the promotion of mental health and holistic well-being and aligns with the JED Foundation's (2011) recommendations that promoting mental health on college campuses cannot only be housed in the counseling center.

Wellness coaching is initiated from a lens of an advocate and inspire mindset, in which it is believed that the client is the expert in their own well-being and life. One common allied campus resource is mental health counseling. College counseling centers are facing an increasing demand for services, as students report high levels of stress, anxiety, and other mental and emotional health concerns (Center for Collegiate Mental Health 2018 Annual Report, 2018). While mental health providers may help clients understand how the past is influencing the present, coaches focus on the present and help the client move towards the future (Moore, M., Jackson E., & Tschannen-Moranm, 2016). The practice of coaching is not intended to address severe mental health concerns (Buckley, 2010), as therapy may be in some cases.

Jordan and Livingstone (2013) describe the general differences between coaching and psychotherapy to include the depth of the psychological self-awareness required of the professional, goals of the professional, and interviewing skills required. Further divisions

consist of the psychologically based processes used; the expectations of the client regarding the focus of their work with the professional; the topics and depth of exploration; and the relational experience, duration, and outcome of services (Jordan & Livingstone, 2013).

While wellness coaches and other mental, emotional, and physical health care providers tap into some of the same theoretical frameworks and methodologies, coaches do not assess or diagnose health conditions, nor do they identify the issues to be addressed as in therapy. Coaches also recommend that clients seek additional support from an appropriately licensed mental health or primary care provider for concerns that lie outside the scope of coaching.

Wellness coaching is inherently a non-clinical service in terms of its scope, practice, required coach training and expertise, and client relationship. Coach expertise lies in helping students discover their own motivations for making changes to their overall well-being and supporting their personal and academic success (Smith et al., 2016). Coaches do not offer advice or expertise without first partnering with the student to explore strengths, motivations, and techniques that have worked for them in the past. Only with permission will coaches offer advice to help move the student forward on their journey to making shifts or changes to improve well-being (Swarbick, Murphy, Zechner, & Spagnolo, 2011). See Appendix A for a comparison chart that further highlights the primary differences between coaching and counseling.

Wellness coaching can be offered via self-referral or through direct referral, not only from initial consultation/triage at counseling and psychological services, but from medical providers, residence life staff, and academic advisors, among others. The effectiveness of working with a coach is in the power of the individual being asked where they want to go with their wellness, why it matters to them, translating their values and desires into a motivating, meaningful and individualized vision and goals, and supporting them in operationalizing recommendations offered by other campus support staff into their daily lives. Furthermore, specialists who work in only one area, such as exercise, nutrition, or mental health, without integration of others, often experience a limit in their effectiveness (Moore, M., Jackson E., & Tschannen-Moranm, 2016). Coaching can also be perceived to carry less stigma and students may present in wellness coaching when they are better suited for counseling and other psychological services. It then becomes the coach's responsibility to encourage the student to explore these other avenues as a means to address their concerns. Screening tools such

as the PHQ-9 can be used to guide appropriate referrals to counseling. As such, when appropriate communication mechanisms are in place, staff can offer increased continuity of care, and students benefit from cohesive, multilayered support from those on their care team.

### ***Cultural Competency/Multicultural Approach***

As colleges and universities broaden the spectrum of support for students, administrators also seek to build programs and services that serve our diversifying campus populations (Freudenberg et al., 2013) “...social identities—and the sense of psychological community associated with them—constitute much of what we live for and of what we live by. Indeed, it is for this reason that they are such a fundamental part of our lives and so central to our well-being” (Haslam, Jettern, Postmes, & Haslam, 2009).

Intercultural competency is an essential part of effective wellness coaching, so that coaches may provide services that are inclusive across social identities. Health and wellness equity is integral to a culture of well-being on college campuses. Thus, a comprehensive, multicultural approach to wellness coaching must be utilized if the goal is to provide a service that is desirable for use with a diverse student population. In addition, institutions must continuously seek feedback and strategic direction from marginalized student populations in order to align services with the needs of all campus community members.

### ***Peer Health and Wellness Coaches***

While wellness coaches in university settings are typically health promotion or student affairs professionals, some programs show that peer health coaches can also effectively serve in this capacity and greatly benefit from the experience. Thoroughly trained undergraduate- or graduate-level students who have a passion for and expertise in holistic wellness and student development can help form a cost-effective and scalable model to implement.

While peer health educator models continue to grow within higher education, peer coaching initiatives are much newer. It is important to note that both are effective health promotion strategies and hold an important place in the development of multipronged and robust campus well-being model. As these peer coaching programs continue to emerge, it becomes important to explicitly distinguish between peer health and wellness *educators* and peer health and wellness *coaches*.

Multiple models of peer education exist within higher education settings. Within a health and wellness context, one major certified peer education program is called Boosting Alcohol Consciousness Concerning the Health of University Students (BACCHUS) from the NASPA–Student Affairs Administrators in Higher Education. This program (BACCHUS) defines a peer health educator through five roles: friend, educator, activist, role model, and team member (Certified Peer Educator Training, 2016). Peer educators focus their efforts on changing environmental norms, expectations, and behaviors related to a variety of health and wellness topics including alcohol and other drug prevention, stress management, nutrition, and physical activity, among others. These interventions take place through a variety of outreach events, including presentations and workshops. Additionally, some peer health educator groups have wellness or health huts to provide “pop up” educational programming aimed at improving student health, wellness, and safety knowledge.

Peer health and wellness coaches build upon and extend the work of peer education. Similar to the definitions set forth by the International Coaching Federation (ICF) and the National Board for Health and Wellness Coaches (NBHWC), peer health and well-being coaches partner with fellow students in the process of creating the lives desired by the students (coachees) from a holistic health and wellness perspective. This is accomplished through honoring the student as the expert in their own life and the belief that every student is creative, resourceful, whole, and the driver of their own experience. Peer coaches facilitate solution- and goal- focused sessions for students to align their values and realize their potential while at their respective institution.

### ***Similarities Between Peer Educators and Peer Coaches:***

Both peer educators and peer coaches are oriented towards increasing the health, wellness, and safety of their respective environments. Both peer educators and coaches take part in trainings emphasizing the latest educational interventions, facilitation and presentation skills, crisis management, referrals, and campus resource navigation.

### ***Differences Between Peer Educators and Peer Coaches:***

Key differences in peer education and coaching lay in their delivery modality. Peer educators often conduct educational outreach on behalf of wellness and health promotion offices via tabling, presentations, events, and various programmatic interventions. Coaching takes place as either a 1:1 or group intervention, focused on developing individualized relationships with their

peers and supporting student agency toward the attainment of self-defined health and wellness goals. Additionally, coaching provides a deeper exploration of intersectional domains of a student's life. Since the modality of engagement between peer educators and coaches vary, coach training often consists of more involved modules as it relates to campus resource navigation, suicide prevention, Title IX and campus policies, along with referral resources and processes, and foundation coaching skills. Peer-based coaching programs often also include specific trainings on when to refer students to clinical services. Often, these peer-based programs are housed within an integrated health and wellness office with access to clinical staff. Some programs even have clinical staff who oversee the service for liability and appropriate scope of care for students, while honoring the non-clinical nature of coaching. If peer-based programs are not embedded or overseen by clinical staff, many peer-based programs partner with counseling and other clinical service to provide robust training on peer coach's roles, scope, and referrals.

## Wellness Coaching Models

When reviewing the landscape of college-based wellness coaching programs, a variety of models are used, and each reflects the individual institution's needs and available resources. Ten institutions were identified to serve as case studies for this white paper: seven public universities and three private. Of these ten institutions, five were large, three mid-size, and two small; three institutions were located in the southeast, three in the Midwest, and four in the northeast (See Appendix B). Representatives from each institution were identified through their respective program's website and asked to answer a series of questions via email about their program. Question scope included institutional background, profile, and challenges related to implementation; program type, scope, and reach; session information and client fit; and assessment and data considerations (See Appendix C).

### Program Type, Scope and Reach

Eight institutions brand their programs as "Wellness Coaching" instead of "Health Coaching" due to the program's focus on holistic well-being and a desire for the marketing to invite in as many clients as possible. Nine institutions serve students only, while one program facilitates coaching services for both students and employees. Eight programs are housed under the institution's health promotion office, while one is housed under student health services and another

directly under the general Health and Wellness Student Affairs and Student Success unit.

## Program Differentiation, Service Overlap, and Supporting the Whole Student through Continuity of Care

Upon creating their programs, each institution identified services on campus whose offerings might be similar to wellness coaching. This allowed them to determine a scope for their program that students and campus partners can use to differentiate effectively between services. Some commonly identified resources and experiences similar in nature to wellness coaching were other niche campus coaching services (i.e., career services, leadership, academic, financial, personal training, or Exercise is Medicine™), peer mentor services, case management, and subclinical services offered through counseling and student health services. Institutions differentiated their wellness coaching programs through an emphasis on the holistic nature of wellness, personal accountability, and the ability for wellness coaching to complement the aforementioned campus services. Additionally, nine out of ten institutions mitigate concerns related to program differentiation and service overlap through implementation of a formal integrated care model and/or information referral processes designed to close the gaps in supporting student success and well-being through multiple different campus resources. Commonly identified partners participating in wellness coaching referral models and information sharing were counseling, student conduct, housing and residence life, academic advisors, student health services, dietitians and nutritional counseling, case management and behavioral intervention teams, campus recreation, and academic colleges.

## Coach Designation and Recruitment

Three main coach designation models emerged between the identified case study institutions: professional staff only (full-time or part-time staff), peer coaching only (undergraduate and graduate students), and mixed model (professional staff and grad staff only; professional staff and peer coaches/interns). Five programs offer a mixed model, four programs offer a professional staff-only model, and one program follows a peer coaching model. Peer and mixed models boast the largest number of coaches (between six and upward of thirteen coaches, depending on the semester) and cite benefits of program scalability as the primary impetus for selecting these coach designation models. Case study institutions with a professional staff-only model

have no more than five coaches designated, and most staff have coaching added as a responsibility to their primary job description.

Case study institutions recruited coaches using a variety of methods. Programs operating under a professional staff-only model utilize formal employee recruitment strategies to identify candidates who met the educational and experience levels required of their primary role (e.g., health promotion specialists, assistant director). Those individuals were subsequently trained and certified as wellness coaches, if they did not possess the designation at the time of hire. This trend held true for professional staff members serving as coaches in a volunteer capacity, as well as those working in mixed model programs. At one institution, volunteer coaches who are professional staff members must submit an interest form to the coaching coordinator. This form includes basic demographic information, supervisor approval verification, questions about holistic well-being, areas of strengths, and areas for growth around holistic well-being. The coordinator also meets with each potential coach one-on-one to determine capacity and fit. This process allows for an intentional focus on recruiting and maintaining a diverse array of coaches.

Peer coach recruitment occurs using a variety of methods. One institution targets undergraduate and graduate students pursuing careers in health and helping professions (public health, counseling, psychology, higher education, and student affairs), while another leaves the call open to any student on campus interested in wellness and health behavior change. Students interested in becoming coaches complete an application and interview process prior to selection and training. One institution with a mixed model (professional staff and graduate students only) opts to train and certify graduate students who already work in their department and are skilled in health promotion and wellness initiatives. One institution offers a practicum/internship experience to undergraduate and graduate students working toward a certificate in Health and Wellness Coaching offered through the institution. Students must apply to the appropriate level certificate program (undergraduate or graduate) first, and then complete two courses prior to beginning their practicum experience.

### **Training, Certification, and Accountability Considerations**

The type, scope, and certification level of coach training varies widely among the case study institutions.

Six of ten institutions require coaches to be trained and certified through a nationally or internationally recognized coaching training preparation program, while four do not. Those four institutions offer an institutionally developed coach training and preparation program and process. The institutionally developed programs offer knowledge and experience in coaching history and modalities, holistic wellness awareness, university-specific public health topics, motivational interviewing, appreciative inquiry, positive psychology, active listening, goal setting and client accountability, session shadowing, and skills assessments. The institutionally developed programs are all reflective of topics and experiences covered in nationally- and internationally recognized training programs.

Coach accountability also varies among institutions. Some common accountability measures include supervision meetings (1:1 and/or as a team), coach notes/client chart reviews and feedback sessions, audio recordings with feedback provided, session shadowing and observations, and case consultations. Additionally, coaches trained and certified via nationally or internationally recognized programs are expected to maintain active certification by completing CEUs, while those trained through institutionally developed programs are required to participate in on-going in-service training.

### **Funding and Coaching Fees**

Student tuition and fees cover the cost of wellness coaching services across all institution types, with most programs funded directly through the department that houses the program. One program is supported through general department funds with additional funds from Student Affairs for full-time staff support and program infrastructure and Higher Education and Student Affairs program support for part-time staff. Coaching services across all ten institutions are free for participating students, though one institution implemented a no-show fee for students who miss their appointment without formally canceling their session.

### **Marketing**

Each institution implemented a multifaceted marketing approach comprised of flyers, rack cards, electronic media (email marketing, digital signage, campus info boards, social media, website banners, learning management systems), department and student leadership trainings, orientation and course presentations, tabling, giveaways (stickers, pens, etc.) and word of mouth/client referrals.

## **Coaching Modality, Session Structure, and Duration**

All programs include a longer initial session and shorter follow-up sessions. Initial sessions range from 45–90 minutes, with a mode of 60 minutes. Follow-up sessions range from 30-60 minutes, with a mode of 30 minutes. During initial sessions, most programs conduct an intake that allows a client to identify their desired area(s) of focus for coaching. While all institutions practice one-on-one coaching, three already offer group coaching and an additional three cite plans to add or consider this modality in the future.

## **Session Frequency/Limits**

None of the case study institutions have hard session limits in place, though one begins to “off-board” a client after five or six sessions. The average number of sessions per client varies among institutions, with half citing an average of between two to four sessions. Frequency of client sessions depends on the client’s schedule and individual needs.

## **Sign Up Process**

Most institutions use a combination of email, phone, drop-in, and web/online booking for appointment scheduling. Two institutions use a pre-screening process to determine if the client will be better served by a professional staff, graduate student, or peer coach, with some asking for the client’s preference for coach at the onset. Programs that offer a referral system into coaching all emphasize involving the client in decision-making and communication processes from the onset, which helps set the tone that coaching is a process driven by the client’s goals and needs.

## **Coaching Fit Screening Process**

All programs include a pre-screening process, occurring during the first appointment or online booking. The pre-screening process is used to determine on which dimension of wellness the client wishes to work. Four institutions used evidence-based survey tools at intake (online or in-person at appointment check-in) such as the PHQ-9, SCOFF, and AUDIT. One institution is exploring the use of a resiliency scale during the intake process. All programs use the initial session to explain the coaching process, gain additional clarity on the client’s desired area of focus for coaching, and establish the client’s readiness to engage in behavior change. These conversations help to provide insight into any necessary referrals for the client.

Additionally, one institution currently offering group coaching uses a pre-group contact that includes a similar intake assessment process and scope.

## **Client Confidentiality and Privacy Concerns**

Depending on the scope of the program and areas of focus addressed in coaching, case study institutions vary in terms of compliance with FERPA and HIPAA laws. For institutions in which no personal health information was collected or recorded, programs follow protocols that comply with FERPA only. Regardless of program scope, all ten programs require clients to sign a coaching agreement that outlines the nature of coaching, a commitment to privacy, and establish limits to confidentiality. For any program in which referrals are sent or received, institutions use secure systems and protocols through which to transmit information, with most using a third-party company platform to house client files and facilitate referrals. The programs also require students to sign a release of information prior to facilitating referrals to or from coaching.

## **Client Complaints**

Some programs offer a formal process through which a student can submit a complaint and follow codified steps to address that complaint. Others manage complaints on a case-by-case basis, with all offering the opportunity for clients to speak with the program and department’s director should a complaint arise. One institution includes a statement regarding client progress in their coaching agreement to help manage expectations at the onset of the coaching relationship. Another program has staff dedicated solely to quality control, and this staff handles all client complaints as they arise.

## **Program Assessment**

While some programs focus more heavily on utilization and satisfaction (initial and final coaching session) data, other programs utilize more formal pre-and post-test assessment designs to measure student outcomes connected to the goals of the program and department. Three institutions use specific assessment outcomes designed to support the efficacy of coaching with special populations, including racial, ethnic, and gender minorities, first-generation college students, and graduate and professional student populations. Two additional institutions note plans to dissect data related to populations of particular interest as a means of planning for future program growth and improvement.

## Program Scalability

While some institutions' programs are still fairly new, those that are more established cite partnerships and integration of peer coaching as primary options for meeting the growing demands for coaching services on their respective campuses. Whether mitigating challenges related to space to facilitate sessions or to coach availability, partnerships and peer coaching allow institutions to provide quality services without increasing wait times to access a coach.

Group coaching is another viable solution to increase reach and generate efficiencies. For institutions considering group coaching in the future, representatives discuss models that utilize data on the most common areas of focus in 1:1 coaching as topics for group coaching experiences. Programs with access to more resources offered opportunities for more staff on campus to be trained as health and wellness coaches through nationally- and internationally recognized programs, though programs with institutionally developed programs present opportunities to train more coaches for little or no additional cost.

Other options to meet increasing demand include streamlining processes, setting limits on the number of sessions offered, cutting down on the amount of time spent per coaching session with each student, and creating graduate and undergraduate certificate programs in health and wellness coaching and offering practicum experiences as part of the certificate (or other academic degree programs).

## Implementation Challenges

Common program implementation challenges include redirecting staff time and focus, program differentiation from other services offered on campus, office space constraints, client tracking, resource allocation and program scalability, campus referral systems, department and campus buy-in, and technological constraints.

## Beginning a Wellness Coaching Program

Every campus culture differs in its commitment to student health and well-being. While for some institutions it might be easier to start from scratch, others might find it most beneficial to build upon existing programs and structures. Regardless of the starting point, seeking input, generating buy-in, and creating synergy are critical for developing a coaching

program that is intricately and intentionally woven into the fabric of the institution's wellness framework.

Below is a general framework for establishing a wellness coaching program on a college campus.

## Develop and Conduct a Needs Assessment

Conducting a needs assessment will help determine the institution's coaching program scope and focus. Consider the institution type and student body; what are the institution's unique needs considering its type (i.e., faith-based or secular institution, community college or four-year institution, private or public, large or small, rural or urban)? Additionally, it is also important to consider the culture, needs, and interests of the student body before establishing the program's goals.

Begin the process by gauging what existing health, wellness, and student success data currently exist within the institution. If no data exists, or if there are critical gaps in the data, create and/or disseminate surveys (e.g., the ACHA-NCHA, The Wellbeing Assessment). Consider also facilitating a listening tour involving critical stakeholders and populations on campus and subsequently identifying a cross-section of those stakeholders to digest the data and identify existing resources designed to positively impact health and wellness outcomes.

### Key Questions to Consider:

- What institution characteristics most directly impact student well-being and the overall student experience?
- What important characteristics and qualities define the institution's student body?
- What are the institution's student health, well-being, and success outcomes?
- What health and wellness data does the institution have to benchmark the impact of current and future wellness interventions?
- What health promotion/wellness model has the institution adopted?
- Who owns or leads health and wellness on campus?
- Who are the key health and wellness stakeholders on campus?
- What programs and services exist that target campus success and wellness outcomes?
- What are the impediments presently affecting achievement of wellness outcomes?

- What foreseeable changes in focus or strategy exist related to health and wellness?
- Based on these outcomes, impediments, and anticipated future directions, what areas of focus might wellness coaching positively impact?
- How can wellness coaching be integrated into the existing strategy designed to support the model?
- What will differentiate wellness coaching from other support and coaching services offered on-campus?

## Consider the Logistics

### *Program Home, Staffing, and Training*

Based upon the data collected, determine a best-fit home for wellness coaching (e.g., student affairs, health promotion, or health services, etc.). Many departments or units might feasibly make sense to house the program; make this determination based upon resource allocation (funding, personnel/staffing) and the institution's student success and wellness outcomes.

Depending on the identified unit's size, structure, and scope, wellness coaches can be professional staff in the office or pre-identified staff trained throughout campus. These professional staff may be certified through accredited coaching or master's degree programs or institutionally developed coach training.

Departments may also choose to use undergraduate or graduate students through assistantship, internship, on-campus employment, or volunteer opportunities. Paid consultants or third-party vendors are also an option for institutions without the capacity or resources to hire, pay for, or train staff at any level on an ongoing basis.

### **Key Questions to Consider:**

- What office will house the wellness coaching program?
- What will the name of the program be (e.g., Wellness Coaching, Health Coaching, Health and Wellness Coaching, etc.)?
- How will the program be funded?
- What is the budget allocation specific to the coaching program?
- Based upon that allocation:
  - Who will serve as wellness coaches (professional staff, undergraduate and/or graduate staff, third party provider)?

- How will coaches be recruited?
- How will coaches be trained (ICF and/or ICHWC approved training program, institutionally developed, consultant-driven)?
  - If opting for an ICF or ICHWC approved training program, how will new coaches/staff be trained in the future to make the model fiscally sustainable?
- How many coaches will there be?
- What options for low-cost or volunteer support can be leveraged?
- If coaching will be added onto existing staff roles, how many hours per week will be dedicated to coaching?
  - How many students will each staff be able to serve based upon the identified number of hours per week?
- If opting for an institutionally developed training program, what might the training curriculum look like?
  - Who will develop it?
  - Who will train the coaches?
  - Who will facilitate the training on an ongoing basis?
- What will the oversight and liability of the coaches look like?

## Develop Assessment Outcomes and Success Metrics

The unit housing the program will need to develop assessment outcomes and metrics in conjunction with key stakeholders on campus. These stakeholders might include departments represented during the initial needs assessment, as well as others who have emerged as vital to the integration of wellness coaching into the landscape resources offered to support student success and wellness. Assessment outcomes and metrics should frame how the unit defines success of the program, and will drive collected client demographic information, questions asked in pre-post coaching forms, as well as the exploration assessments and tools used during the coaching process. Some example target areas for assessment include (but are not limited to) formal assessments of client knowledge gains, behavior change, attitude, awareness, personal habits, use of clinical biomedical measurements, impact on academic performance, and impact on other related services such as counseling or health service visits. Institutions may

also choose to identify two or three outcomes to define success each year based upon program growth and institutional or department changes and foci for the year.

Feedback from wellness coaches is also essential to the development and growth of a wellness coaching program. Using self-evaluations, summary notes, and debrief sessions, clients can provide quality control data used to facilitate program enhancements throughout the year, as well as to inform ongoing staff training topics.

### **Key Questions to Consider:**

- How will the program be evaluated?
- What metrics will be used to measure success?
- How often and by whom will data be collected and reviewed?
- How (and to whom) will program impact be communicated?
- If issues emerge from the data (outcomes or feedback), who will handle it and how?

### **Identifying the Program's Scope and Needs**

Based on the wellness trends and outcomes of the institution and the coaching program, as well as the focus and expertise for the department in which the program is housed, identify the areas of focus for wellness coaching. Additionally, determine what specific wellness coaching services the program will offer. Wellness coaching sessions can be offered in-person or virtually, individually or in group settings, and sessions can be general or topic-specific (e.g., time management, stress management, etc.).

Program scope and modality will also inform decisions related to initial and subsequent training needs, space for sessions, session limits, intake processes and assessments, in-session coaching tools, integration of Wellness coaching into a new or existing integrated care model, referral systems and protocols, as well as any necessary technologies related to scheduling, client/session attendance tracking, and note-taking.

If the program will be part of an integrated care model or will support referrals to or from other entities on campus, wellness coaches should be trained on established protocols and mechanisms for facilitating referrals. Additionally, these protocols should always reflect adherence to all FERPA and HIPAA (if applicable) guidelines for information sharing and transmission, be discussed with each client as the need arises, and be reflected in all coaching agreements and forms.

### **Key Questions to Consider:**

- What health or wellness topics will students be able to receive coaching around?
  - What additional or supplemental ongoing training will be necessary to coach around these topics?
- Will the program offer sole 1-to-1 coaching services, or group as well?
- If offering group coaching, will the sessions be open format or topical?
- For 1-to-1 and group options, where will the sessions take place?
- Will the program offer virtual services? If so, via what platform?
- Will the program be part of an integrated care model or offer referrals to/from coaching?
  - If so, how will referrals be facilitated?
  - To and from whom will referrals be allowed?
  - What forms will be necessary to offer seamless and FERPA/HIPAA compliant communications?
- What coaching forms, pre-post coaching assessments, and session tools will be needed?
- What will be the process for student intakes?
  - How will students schedule appointments?
  - Will students be able to choose a specific coach or will it be based upon mutual availability?
  - At what point will students complete initial forms and assessments?
  - How will these forms and assessments be sent and received?
- What budget-friendly technological solutions will be used to offer administrative support (sign-ups/scheduling, note-taking, client tracking, referrals and information sharing, etc.)?
- How will sessions be structured?
- Will there be limits on the number of sessions a student will be offered?
- How long will intake and follow-up sessions be?
- What will be the process for off-boarding a client?

## Marketing and Communication

Next, it becomes important to develop a multifaceted marketing strategy for wellness coaching. This strategy might include presentations or tabling in residence halls, first year seminar courses, or in student clubs/organization meetings, as well as advertising services through websites, social media outlets, emails, and word of mouth. To increase the impact of digital and print marketing materials, the program should be named, branded, and supported by a logo and other recognizable graphics.

### Key Questions to Consider:

- How will the program be marketed?
- How can existing marketing strategies and tools be leveraged to support effective wellness coaching program marketing?
- What collaborators and allies can be leveraged to increase the reach of marketing efforts?

## Program Sustainability and Scalability

When building a program that is both sustainable and scalable, it is important to develop a strategic short- and long-term plan that reflects the realities of the institution's priorities around health and well-being. This will help ensure implementation of a cohesive and coordinated program designed to meet the unique needs of each campus. Start small and integrate the program into existing services by collaborating with other departments to generate buy-in and enthusiasm around wellness coaching. Choose staffing models, processes, and procedures that are fiscally sustainable, and create marketing deliverables that are evergreen and can be minimally adjusted to meet the anticipated future direction of the program. Some common strategies for meeting increased demand or adjusting to changes in funding include implementing a peer coaching model, using coaching data to implement group coaching options, setting limits on the number of coaching sessions or time spent in sessions, and creating efficiencies to cut down on coach time spent on administrative tasks.

### Key Questions to Consider:

- Given the identified coaching model (peer, professional staff, or mixed), what percentage of the student population could be feasibly supported during the initial implementation?
- What adaptations in staffing and program framework could be made to support future growth of the program?
- What short-term efficiencies could be easily leveraged to meet rapid program growth?
- What future funding sources can be leveraged as options to support program maintenance and expansion?

## Conclusion

Wellness coaching boasts a number of tangible benefits to students who participate in this intervention, including improved self-awareness, acquisition of new knowledge and skills, attainment of personal and professional goals, sustainable behavior change, increased life satisfaction, and increased self-efficacy (Moore, M., Jackson E., & Tschannen-Moran, 2016; Gibbs, T., & Larcus, J., 2015). Wellness coaching offers a unique opportunity for students to increase their capacity to navigate challenges inherent in the collegiate environment, as well as a safe space for them to effectively set goals and try out new behaviors that improve their holistic wellness outcomes in college and beyond (Larcus, J., Gibbs, T., & Hackmann, T., 2016). With special attention paid to institution type, size, location, and other important characteristics that shape the creation and implementation of wellness services and resources, wellness coaching is an intervention worth exploration to forward institutional outcomes related to student success and well-being.

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# Appendix A

## Distinguishing Coaching and Counseling

	<b>Counseling</b>	<b>Coaching</b>
<b>Confidentiality</b>	Confidential services	Private, not confidential
<b>Scope</b>	Provides effective consultation and treatment for mental health concerns.	Supports college students by enhancing holistic well-being, mental health promotion and overall success.
<b>Staff Training and Licensure</b>	Counseling center staff are licensed mental health professionals.	Wellness coaching staff are a mix of professional staff, graduate and upper-level undergraduate students who have participated in training as wellness coaches.
<b>Goals</b>	Counseling staff work with clients to flourish and cultivate emotional and psychological growth, resolving or managing mental health concerns as they arise.	Coaches help clients identify and strengthen their distinctive voice, allowing them to make decisions that are best suited for their preferred health and wellness outcomes.

# Appendix B

## Case Study Institutions

<b>Case Study Institutions</b>	<b>Location</b>	<b>Size</b>	<b>Type</b>
<b>University of Michigan</b>	Midwest	Large	Public, Research
<b>The Ohio State University</b>	Midwest	Large	Public, Research, Land Grant
<b>University of South Carolina</b>	Southeast	Large	Public
<b>University of Florida</b>	Southeast	Large	Public, Research
<b>Boston College</b>	Northeast	Midsized	Private, Research, Jesuit
<b>Skidmore</b>	Northeast	Small	Private, Liberal Arts
<b>University of Northern Iowa</b>	Midwest	Midsized	Public
<b>University of New Hampshire</b>	Northeast	Midsized	Public
<b>University of South Florida</b>	Southeast	Large	Public, Research
<b>Ithaca College</b>	Northeast	Small	Private, Residential

# Appendix C

## Case Study Institution Questionnaire

Institution Name:

Institution Type:

Institution Size:

Institution Location:

Program Name (i.e., Health Coaching, Wellness Coaching, Success and Wellness Coaching, etc.):

Department supporting program:

Population Served (i.e., Students, Faculty/Staff, both):

Cost to Students:

Program Funding Source:

Coach Designation (Full-time staff, part-time staff, graduate students, undergraduate students, etc.):

Number of Coaches/Coaches in Training:

How do you recruit coaches to work in your program?

How are your coaches trained?

Do your coaches participate in a national/international certification process?

How do you hold your coaches accountable? What does coach oversight look like?

What similar services exist on your campus and how do you differentiate your program from those other services?

How does your program sustain growth from year-to-year?

What challenges or concerns did you all encounter during program creation and implementation?

What does marketing look like for your program? What media do you all use to promote this resource?