Is There a Ceiling Effect for Participant Activation?

Experienced health coaches are especially proficient with “chronic contemplators.” These are the participants who beguile us with their good intentions while they embark — with unusual prowess — on avoiding, bewitching, and betraying their best laid plans. They are familiar with disappointing themselves, but now they need to more finely hone their excuses as they deal with the added weight of a coach holding them accountable. But participants find good coaches to be no fun at all in deflection and manipulation. We replace the blame game with an equally well-honed ability to treat failure as a worthy experiment in establishing doable goals and achieving real progress, no matter how incremental.

But what of the occasional participant who isn’t stuck at all?

How useful is a health coach when the participant has a track record of achieving their goals and a health profile every bit as tuned up for preventing health problems as our own?

Health coach Eileen had such a participant and recognized how little she could rely on her usual techniques of rolling with resistance, eliciting change talk, or using a therapeutic paradox. Instead, Eileen found herself weighing in with her most authentic self. That is, when working with a highly activated client, Eileen realized she could share ideas that she, as a kindred activated health-seeker, was finding useful in her own life.

Eileen had reviewed several self-care steps with a stress management client we’ll call Melissa, and was not surprised to learn that Melissa already embraced them all. Still, Melissa described a “low-grade anxiety” in dealing with her staff after being promoted to a higher leadership level in a pressure-filled environment. Eileen asked permission to offer advice and then quietly said: “So, are you breathing?” Here is their conversation 4 months later:

**Eileen:** We seem to keep coming back to breathing as the goal that fits well into your day. You started with 3 to 4 deep belly breaths once a day and now you’re up to 5 times a day. Sometimes reviewing benefits can help sustain a new habit. What have you found helpful about breathing?

**Melissa:** It is breaking a cycle that I hadn’t really noticed. I was anxious going into staff meetings, which made the staff anxious. Then, seeing them uncomfortable made me even more anxious. Breathing before and after meetings or difficult interactions with colleagues has really raised my awareness of the stress cycles we’ve discussed… how you can break the cycle only when you recognize how insane work demands are affecting you both mentally and physically.

**Eileen:** Anything else that deep breathing has helped you become more intentional about?
Melissa: Well, that’s an interesting word choice. My intention about a breathing routine has a byproduct that can’t be coincidental: Breathing is making me feel normal. I know that sounds funny but, really, I think a lot of my anxiety came from a new job that threw me out of my comfortable routines. Being intentional about breathing has affected my intention to cope more effectively in general.

Eileen: That’s wonderful, Melissa. So, could it be that your new goal of connecting more regularly with friends can be traced to your breathing?

Melissa: You know, I guess so! I hadn’t thought about it that way but, yes, another thing that’s just as normal and nourishing as deep breathing is time with friends. Here’s to normalcy as a way to cope with the insanity!

Melissa is a marvelous example of someone who’s already activated in protecting her health but continues to make personal improvements that build on a solid base. She affirms what research has demonstrated: Highly activated people have higher likelihoods of adopting proven prevention strategies. But given how much the helping professions have focused on moving people from lower to higher levels of activation, do we know whether coaching typically benefits highly activated people, or was Eileen’s expert coaching an exception? Paul recently coauthored research papers using data from a randomized controlled trial that included a health coaching intervention and gauged activation with the Patient Activation Measure.¹

PAM captures 4 levels of activation, from those who feel they have little control over their health to those actively engaged in improving their health. Study findings indicated the highest level of activation (level 4 of PAM) is not an endpoint.²

The study, called ACTIVATE, followed 320 employees, with and without chronic disease, for 3 years. We showed that changes in PAM were associated with changes in health behaviors at all 4 levels. This presents a worthy challenge for health promoters. Interventions need to not only move people up in their activation levels but also keep offerings relevant to those already doing the right things. As Eileen found, we may not need focus groups to generate ideas for this type of product development. We need only look within.

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References