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Title

The effect of a single visit to a health coach on perceived health in 50-year old residents in a high-income country – an RCT

Priority 1 (Research Category)

Screening, prevention, and health promotion

Presenters

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Abstract

Context: In the context of a strained primary health care system, health coaches can potentially be used to meet some of patients' needs and to improve preventive care. However, most research on successful health coaching is based on longer interventions with multiple sessions where the coach creates a relationship with their client or patient. These long interventions include frequent follow-ups with the health coach, which means monetary as well as timely costs. The effect of briefer interventions that might be more cost-effective is insufficient. Especially there is a lack of randomized controlled trials.

Objective: To evaluate the one-year-effect of a single visit to a health coach on perceived health and exercise level in 50-year-old citizens.

Study design and analysis: A randomized controlled trial allocating participants into two groups (intervention and control). Differences in changes over time in the outcome measures between groups were analyzed using t-test as well as Mann-Whitney's test.

Setting and population studied: Half of 50-year-old residents in a mid-sized town in the south-western part of Sweden were randomly selected from the Swedish population register (n=105) .

Intervention: The intervention group (n=52) received a single one-hour visit to a health coach. The control group (n=53) received no intervention. The one hour visit consisted of a specific health profile assessment (HPA) being a well-tried Swedish health coaching model based on a questionnaire, body measurements, blood pressure measurements, a sub maximal bicycle exercise stress test, and a

discussion between the health coach and the client / patient. It ended with a motivational conversation on health behavior change.

Outcome measures: Change over 12 months in the SF-36 dimensions physical functioning, role-physical, bodily pain, general health, vitality, social functioning, role-emotional, mental health, physical component summary and mental component summary. Reported health transition at follow-up. Change in exercise level.

Results: The control group changed their perceived health more favorable than the intervention group in the following dimensions of the SF-36; general health ($p=0.0055-0.025$), role-emotional ($p=0.034-0.040$) and mental component summary ($p=0.033-0.073$).

Conclusion: A single visit to a health coach does not improve perceived health or exercise-level in 50-year-old citizens. On the contrary it may make perceived health worse.