

Home-Based Wellness Coaching in Childhood Obesity

Obesity prevention efforts have been studied in a variety of settings, including during and outside of the school day. The home environment functions as a major influence in a child's dietary and physical activity behaviors (1), with US children consuming approximately two thirds of their daily calories in the home (2) and the physical and social environment of the home playing a role in children's physical activity and sedentary levels (3).

Obesity prevention interventions delivered within the home setting can be effective in reducing body mass index in youth, specifically when education sessions and information are provided regarding healthful behavior change in physical activity and nutrition (4). It has been suggested that obesity prevention programs may not be effective or sustainable without impacting the home environment of a child (5).

The potential barriers to activation of a program in obesity prevention can be reduced with home-based interventions including needed transportation and childcare (6). Attendance at center-based obesity prevention and treatment programs drops off quickly as the result of such barriers to participation (7).

There is a need for additional research examining the impact of childhood health promotion and obesity interventions that are delivered within the home setting, where participation barriers can be minimized. One type of health promotion and obesity prevention strategy that has shown success is behavior change through wellness coaching. In the home wellness coaching model, children and adults work with coaches to assess and identify personal goals in a client-centered setting in order to promote sustainable lifestyle behavior changes (8). The ways in which wellness coaching has been implemented are quite diverse, as there has been success across various age groups and delivery sources. Successful wellness coaching practices may include client-chosen goal setting and activities designed to develop self-efficacy and intrinsic motivation. Nutrition education combined with behavior change counseling has been shown to reduce body mass index in overweight and obese adolescents (9). Additionally, a health coaching intervention that focused on nutrition and was delivered to families resulted in improved dietary intake and weight control (10).

1. Spurrier NJ, Magarey AA, Golley R, Curnow F, Sawyer MG. Relationships between the home environment and physical activity and dietary patterns of preschool children: a cross-sectional study. *Int J Behav Nutr Phys Act.* 2008;5(1):31.
2. Adair LS, Popkin BM. Are child eating patterns being transformed globally? *Obes Res.* 2005;13(7):1281–99.
3. Tandon P, Grow HM, Couch S, Glanz K, Sallis JF, Frank LD, Saelens BE. Physical and social home environment in relation to children's overall and home-based physical activity and sedentary time. *Prev Med.* 2014;66:39–44.

4. Stark LJ, Spear S, Boles R, Kuhl E, Ratcliff M, Scharf C, et al. A pilot randomized controlled trial of a clinic and home-based behavioral intervention to decrease obesity in preschoolers. *Obesity*. 2011;19(1):134–41.
5. Rosenkranz RR, Dzewaltowski DA. Model of the home food environment pertaining to childhood obesity. *Nutr Rev*. 2008;66(3):123–40.
6. Conwell LS, Trost SG, Spence L, Brown WJ, Batch JA. The feasibility of a home-based moderate-intensity physical activity intervention in obese children and adolescents. *Br J Sports Med*. 2010;44(4):250–5.
7. Wolcott D, Huberty J, McIlvain H, Rosenkranz R, Stacy R. Changing health behaviors: exploring families' participation in a family-based community intervention for overweight/obese children. *Childhood Obesity (Formerly Obesity and Weight Management)*. 2011;7(3):206–14.
8. Wolever RQ, Eisenberg DM. What is health coaching anyway? Standards needed to enable rigorous research: comment on “evaluation of a behavior support intervention for patients with poorly controlled diabetes”. *Arch Intern Med*. 2011;171(22):2017–8.
9. Rice J, Thombs D, Leach R, Rehm R. Successes and barriers for a youth weight-management program. *Clinical Pediatrics*. 2007;47:143–47.
10. Paineau DL, Beaufils F, Boulier A, Cassuto DA, Chwalow J, Combris P, et al. Family dietary coaching to improve nutritional intakes and body weight control: a randomized controlled trial. *Arch Pediatr Adolesc Med*. 2008; 162(1):34–43.