



LIVING HEALTHIER

POWERED BY **IT'S TIME TEXAS**

Bridging Gaps in Patient Care

The evidence behind a free health coaching program empowering Texans to better manage their health

**IT'S
TIME
TEXAS**

Healthcare providers are overburdened

As a healthcare provider, you do everything you can to help your patients improve their health. You listen to their health concerns, ask clarifying questions, make recommendations, and provide supportive resources and education. You explain what they need to change to feel better and be healthier.

Yet, too often, your patient returns on the next visit, and nothing has improved. The reasons for nonadherence vary from patient to patient, and often involve a range of sociocultural, environmental, and psychological influences. Work and family commitments, home and neighborhood environment, access to resources and information, behavior patterns around eating and exercise, personal attitudes and beliefs, and the complexity of change needed—all of these factors can serve as barriers to lifestyle change.

As healthcare providers attending to the acute and chronic health concerns of multiple patients, there often is not enough time to explore all of the individual factors affecting patient adherence, let alone offer the kind of tailored solutions that work with—and not against—the complexities of their lives.

Given the limited time and number of visits you get with patients, how do you support them in following through on recommendations to improve their health and wellbeing? How do you keep them motivated on those days when they feel stuck or hopeless about changing?

Ample evidence suggests that the most promising approaches to health behavior change include a combination of extended care, skills training, social support, treatment tailoring, self-monitoring of progress, and the incorporation of multiple strategies to promote long-term adherence.^[1]

The challenge is finding an accessible resource that will work with patients through the various stages of change, aligning with them to support lasting improvements to their lifestyle and overall health.

Among patients with chronic disease, rates of non-adherence to prescribed treatment regimens have been reported to be as high as 50%.^[2]



A partnership-based approach to help patients better manage their health

This white paper was developed by Living Healthier, a free, health coaching program for Texans, available in English and Spanish. Powered by the nonprofit It's Time Texas, the program empowers individuals to successfully change their behaviors to achieve better health.

Through this paper, we hope to elevate awareness of the complex factors influencing health and lifestyle choices, while highlighting the effectiveness of our evidence-based health coaching program as a means of helping patients prevent and manage chronic conditions.

Referencing current research, as well as data taken from 395 program participants over a year-long period, we illustrate how an empathetic understanding of the change process paired with the culturally-relevant application of motivational interviewing, has helped people across Texas adopt healthier habits and achieve lasting success in managing their health.

As a partner in health, we aim to fill critical gaps in patient care by offering a free resource to those in need of personalized support in adhering to treatment and lifestyle recommendations from their doctors or clinical care team.

What We Offer



Expanded Patient Support

Healthcare providers and clinical care teams can refer patients in need of additional support for prevention or management of a chronic health condition



Specialized Expertise

Health coaches are bilingual community health workers with training and certification in diabetes, chronic kidney disease, tobacco cessation, and chronic obstructive pulmonary disease



Personalized Approach

Participants receive one-on-one coaching, health information, follow up reminders, resources, and referrals tailored to their schedule, personal and cultural preferences, and level of readiness



Multifaceted Interventions

Using motivational interviewing techniques, coaches offer support and accountability through a combination of weekly phone sessions, text and email follow ups, and an online group forum



Focus on Lasting Results

Coaches work with patients for as long as needed to develop the motivation, confidence, strategies, and skills to achieve their health-related goals

84%

of health coaching participants report positive health behavior changes

The high costs of chronic illness

Chronic diseases are the leading cause of disability and death in the United States, significantly decreasing the length and quality of people's lives. Approximately 60 percent of U.S. adults live with a chronic health condition, and 42 percent live with more than one.^[3] Among older adults, those numbers jump to 85 percent and 60 percent, respectively. ^[4]

Lifestyle is a major contributor. American adults are stressed, anxious, and overworked.^[4] Limited time and high levels of stress often force people into making tradeoffs for the sake of time, affordability, and convenience, resulting in less healthy choices. Additionally, changes in how we work and spend leisure time mean that many American adults sit for more than half of their day, a behavior strongly linked to obesity, heart disease, and type 2 diabetes. ^[6]

Fortunately, many chronic illnesses are preventable through lifestyle changes, like eating a healthy diet, exercising regularly, and finding healthy ways to cope with stress.^[7] Yet, despite evidence showing that lifestyle changes can help prevent, and sometimes even reverse, chronic health conditions, many people struggle to make them a part of their lives. As a result, millions of Americans continue to grapple with chronic conditions, contributing to increased medical costs and a strain on healthcare systems and community resources.

The out-of-pocket healthcare costs for individuals with chronic illnesses can be five times higher than for people without.^[2] Overall, treatment for individuals with chronic health conditions accounts for about 75 percent of our country's aggregate healthcare spending.^[10]



People want to be healthy

In the United States, the weight loss industry is worth \$72 billion, and the wellness industry also continues to grow. [11] A survey by Ipsos found that about half of adults making New Year's resolutions for 2020 had health-focused goals like eating healthier (51 percent) and increasing physical activity (50%). [12]

Americans want to be healthy. Yet, many adults struggle to adopt and maintain healthy behaviors, even those recommended by their doctors. Even when people are motivated to change, a number of real and perceived barriers – like lack of time or resources and limited social support – can get in the way of progress.

Change is difficult, requiring people to work against the grain to disrupt established patterns of behavior and incorporate new habits— many of which are unfamiliar. During this process, setbacks are normal, but this fact frequently leads to frustration and self-doubt, which often causes many people to give up altogether.



Common Barriers to Behavior Change
Lack of time
Feeling overwhelmed
Limited access to healthy foods
Difficulty staying accountable
Limited social support
Not sure where to start
Feel defeated when have a setback
Lack of confidence

Change isn't linear

In an ideal world, people would work through a problem one step at a time, with each step moving them closer to their goal. Unfortunately, behavior change is rarely that simple or straightforward.

Successfully changing a behavior is a process that takes time, often longer than people want. A setback, or relapse, can happen early on in someone's attempt to adopt a new habit, causing them to return to a previous, more comfortable pattern of behavior.

State of Change	Description
Precontemplation	They do not recognize there is a problem or may have given up on being able to change. The behavior continues.
Contemplation	They are ambivalent about changing. They know change might help them but hesitate to change. The behavior continues.
Preparation	They want to change and are thinking about how. This stage involves them planning and making small attempts to change. However, the behavior continues.
Action	They are actively engaging in significant actions to change. The goal is for the behavior not to continue.
Maintenance	They have successfully changed and maintained the behavior for a sustained amount of time. They can handle challenges when they arrive.
Relapse	Setbacks can occur at any stage causing people to move to an earlier stage. Understanding and normalizing relapse can help prevent people from giving up.

Source: Based on work by Prochaska and DiClemente on the Transtheoretical Model, more information at <https://habitslab.umbc.edu/the-model/>

It's hard for people to keep themselves motivated and encouraged when the process of changing a behavior can involve multiple ups and downs. Knowing how to manage setbacks is a critical component that can ultimately lead to successful behavior change. During these periods of difficulty, support and accountability are crucial.

Technology advances have provided new ways to give support and accountability for people engaging in new healthy behaviors. There are apps to track the foods you eat and how much water you drink. Fitbits and watches can send reminders to people to move when they've been sitting too long. Some health apps provide challenges or competitions to help with motivation.

These advances are helpful to many people. Yet, at present, these technologies do not provide the tailored recommendations or personalized support that many people need to advance through the stages of change.

Social context matters

In the United States, Hispanic and non-Hispanic Black adults experience higher rates of obesity and preventable chronic disease than their non-Hispanic white counterparts.^[11] They are also more likely to develop chronic illnesses earlier in life.^[12]

Underlying these persistent health disparities are deeply entrenched inequities in social factors like housing, education, employment, healthcare, social supports, and physical environment that influence health across the lifespan.^[13] Black and Latino Americans experience greater rates of childhood poverty and are also more likely to grow up in economically underdeveloped areas that lack access to healthy food options, housing, healthcare, transportation, and safe places to walk and be active.^[14]

Apart from its direct effects on health and health behavior, social context can influence an individuals' mindsets around health and even beliefs about their ability to be healthy. A patient who grows up in a community and culture where being overweight is considered normal may come to view poor health as an inevitability. They may not want to change certain eating habits or behaviors at the risk of offending people they care about.

Cultural differences, language barriers, and not taking the patient's beliefs and values into account can further contribute to health disparities. It also can make it difficult for patients to engage and trust providers.^[15] Perceived racial and ethnic differences between patients and providers have been reported to result in less partnership with physicians, less participation in medical decisions, and lower levels of satisfaction with care among patients.^[16]

By minimizing the influence of social and cultural factors on the individual, health providers risk missing critical elements that help form their patient's beliefs and behaviors.

The result can be misunderstandings or gaps in essential information that ultimately hinder the person's progress. Conversely, understanding these factors can allow providers to help their patients work through challenges. The more providers can tailor approaches to fit a patient's worldview, the better the outcome for the patient.

"Natalie is a great coach. I really enjoy when she calls me because she gives me good advice on how to be healthier. She also speaks Spanish, which is good because I feel like I am talking to a friend, and that's how I usually talk with some of my friends, in Spanglish. She is also very friendly and motivational."

From a Living Healthier Program Participant, January 22, 2020



Traditional healthcare models offer limited support

A personalized, multifaceted approach is especially important for patients navigating the complexities of chronic health conditions. Unfortunately, the traditional healthcare model does not make it easy for healthcare providers to offer the consistent, individually-tailored care that patients may need to make healthy change.

Most people are limited to one wellness visit a year based on their insurance. Additionally, physicians are typically only able to spend a brief amount of time with their patients at each visit, even those patients with chronic conditions. As a result, healthcare providers may be unable to provide support, accountability, and feedback on health practices and behavior change during sessions. Traditional models also do not support ongoing contact between appointments, thus, limiting the providers' bandwidth to offer long-term help in implementing prevention strategies.

A survey by the Commonwealth Fund found 24 percent of primary care doctors in the United States felt their practices were not well equipped to manage patients with multiple chronic conditions.^[20]

Many physicians also reported difficulties coordinating care and communicating with other providers, which is particularly problematic when caring for patients with comorbidities.

These barriers can lead to frustration for both the provider and the patient. The provider wants to help their patient become healthier and knows what the person needs to change. The patient also wants to feel better but may need more help than the traditional healthcare model allows.

Barriers Providers Encounter That Limit Helping Patients Change Behaviors
Not enough time with patients during appointments
Cultural differences
Limited number of visits per year due to insurance
Difference in perception regarding the doctor-patient role
Large caseload
Patient resistance to discussing health changes
Limited communication between other health services, hospitals, and specialists
Limited belief in their ability or having resources needed to support patient in changing behavior

Based on study by Keyworth et al (2019) [18]

Aligning with patients to inspire change

Many interventions aim to help people change certain behaviors like increasing their physical activity or quitting smoking. Few of them align with patients to acknowledge how difficult it sometimes is to make these changes.

Motivational interviewing is an evidence-based counseling style rooted in empathy.^[19] Utilizing a framework of open-ended questions, reflections, and summaries that demonstrate their understanding of the patients' thoughts and needs, motivational interviewers help patients find their own desire and reasons to change. As patients hear their reasons reflected back to them, they work through feelings of unreadiness and insecurity, eventually finding their motivation and committing to the difficult process of change.

Rather than confronting patients as the “expert,” practitioners of motivational Interviewing become collaborators in the change process, helping to trouble-shooting challenges by drawing on patients' own knowledge, ideas, experiences, and goals. As a result, the patient feels empowered. They have a say in establishing their goals and how to best work towards them. Therefore, they are better able to resolve ambivalence and resistance that would otherwise interfere with their progress.^[20]

Motivational interviewing is well-researched for its effectiveness in addressing a variety of behaviors - from overeating, to substance abuse and smoking - while supporting lifestyle change for chronic conditions such as obesity, diabetes, cardiovascular disease, and chronic pain.^[21]

The approach allows the provider to be flexible in meeting the patient at their current stage of change. This can help guide the provider on what types of strategies and approaches will be best to help the patient continue to work toward their goals.

“We [health coaches] may have our own ideas about what will work and what participants should change, but our guiding principle is to focus on what the participant wants to change.”

*Elizabeth Del Rio, R.D., Texas DSHS
Health Coach, Living Healthier*

Four Guiding Principles of Motivational Interviewing for Healthcare Settings

Resist the righting reflex	Resist telling the patient what to do. Explore their motivations to change instead.
Understand the patient's own motivations	Openly explore the patient's motivations for change with curiosity. This will lead to a better understanding of the patient and potential barriers.
Listen to your patient	Genuinely listen to the patient with the goal to understand their perspective and pros and cons of changing.
Empower your patient	Explore their ideas about how they can change and help them draw on their own knowledge about what has helped them in the past. This collaborative approach can help increase motivation.

Source: Rollnick, Miller, and Butler. (2008) Motivational interviewing in health care. Helping patients change behavior. New York: The Guildford Press. [22]

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Case Study:
A free health coaching program for Texans

“Living Healthier provides the opportunity for people throughout Texas to have access to free coaching along their journey to better health. The coaches are able to help identify measurable goals and work hand in hand with participants to take the necessary steps to achieve them. Blue Cross and Blue Shield of Texas is proud to partner with It’s Time Texas to bring this valuable resource to Texans.”

*Sheena Payne, Director
Community Affairs
Blue Cross and Blue Shield of Texas*



**BlueCross BlueShield
of Texas**

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What is Living Healthier?

Living Healthier is a free, confidential telehealth coaching program offering personalized, one-to-one support for behavior change. Powered by the nonprofit It's Time Texas, the program is available to anyone in Texas age 18 or older.

Grounded in motivational interviewing techniques and the Transtheoretical Model of change, the program provides culturally relevant health coaching tailored to each individual's needs. Health coaches are bilingual—speaking both English and Spanish—and are certified by the Texas Department of State Health Services. They also have specialized training in chronic disease prevention and management.

Consistent with motivational interviewing principles, health coaches work with patients one-on-one to identify goals and discuss their need and motivation to change their behaviors.

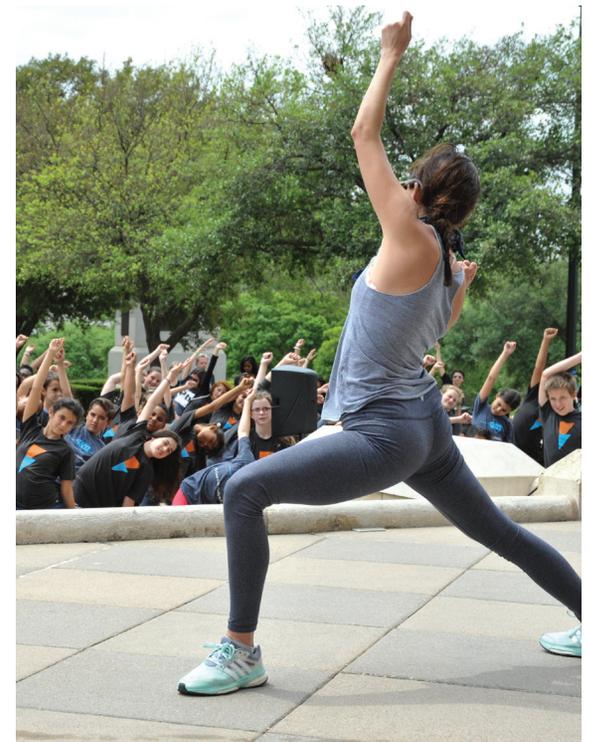
Through weekly phone calls, emails, texts, and an online group forum, coaches provide personalized support, accountability, information, and tools – including recipes and referrals to free or low-cost health resources – aligned with the person's needs at various stages of change. The aim is to help patients set realistic goals and gain confidence in their ability to achieve them.

The optional use of texting and email gives health coaches a way to quickly check in with their patients between sessions, as well as send appointment reminders and follow ups regarding health information, medication adherence, and goals discussed that week. It also gives patients a direct line to their health coach when they need an additional touchpoint throughout the week.

Unlike many free and low-cost assistance programs, Living Healthier participants have access to an unlimited number of health coaching sessions. As patients grow more comfortable in disrupting past behaviors and maintaining new habits, they address the barriers and mindsets that previously stood in the way of progress. With time, persistence, and the right support, patients develop the skills, knowledge, and confidence to achieve lasting change on their own.

“Our hope is that participants will reach the point where they no longer need us...they will be independent and confident about their health.”

*Arlet Polack, M.Ed., CHES
Program Coordinator, Living Healthier*



Partnering with clinical providers to bridge gaps in patient care

Committed to improving health outcomes and reducing the economic burden of chronic disease, Living Healthier actively partners with health clinics, community health workers, and other health professionals to serve as a resource for Texans who may be struggling to make a healthy change. This focus on collaboration allows for our health coaching team to understand critical service gaps and meet unique needs within Texas communities.

The program assists partners by supplementing the work of healthcare providers, offering patients additional care and accountability beyond regular visits to a doctor or clinic. With patients' permission, coaches can also support health clinics and providers with HIPAA-compliant communication supporting continuity in treatment and care.

As a committed partner in health, our health coaches have assisted partners in raising awareness of how to prevent the onset of chronic disease and trained community health workers in motivational interviewing techniques that they can apply in clinical settings.

This collaboration between care teams and health coaches can ultimately help both providers and their patients see desired health outcomes.



“[Healthcare] providers often give the diagnosis and recommendations, but health coaches with Living Healthier develop a plan that is relevant to the patient for achieving said recommendations.”

*Tammy L. Wilkerson
Community Health Worker, Tyler Family Circle of Care*

Meeting people where they are

In 2019, the telehealth coaching program of It's Time Texas served **395** Texans enrolled in their free health coaching program. Of those, **188** were living with one or more chronic conditions, including diabetes or pre-diabetes, hypertension, COPD, and chronic kidney disease. **227** individuals were at a heightened risk due to hypertension or high cholesterol.

Participant Reported Barriers to Behavior Change

- » Mindset
- » Habits
- » Inconsistency
- » Lack of motivation
- » Lack of money
- » Busy schedules and unexpected circumstances
- » Time and preparation
- » Underlying conditions
- » COVID-19 pandemic
 - Limited access to gyms and groceries
 - Working from home and not being able to go out

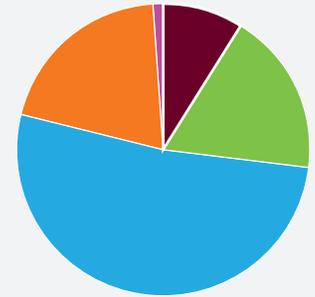
The Participant Journey



Participant Demographics

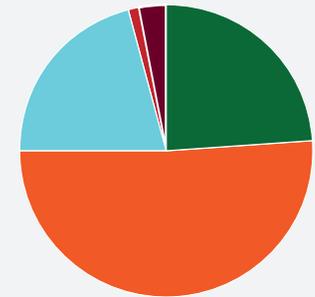
Age

- 20-30 9%
- 31-40 18%
- 41-60 52%
- 61-80 20%
- >80 1%



Race/Ethnicity of Participants

- Black, Non-Hispanic 24%
- Hispanic 51%
- White, Non-Hispanic 21%
- Asian 1%
- Other 3%



Communication Avenues



Phone



Email



Text



Online Forum

Impact of health coaching

In 2019, 84% of health coaching participants reported positive health behavior changes and progress toward their goals.

Participants also report a high level of satisfaction, citing the variety of communication avenues that help them easily connect with their health coach. The following outcomes were obtained from a sample of Living Healthier participants who completed 3-month follow up survey.

Among participants that set a goal to get more exercise/physical activity:

- » 98% made progress
- » 45% met goal
- » 96% are confident in their ability to continue making progress

Among participants that set a goal to eat healthier:

- » 98% made progress
- » 56% met goal
- » 100% are confident in their ability to continue making progress

Among clients that set a goal to better manage high blood pressure, pre-diabetes, diabetes, CKD, or COPD:

- » 100% made progress
- » 52% met goal
- » 91% are confident in their ability to continue making progress

Among clients that set a goal to reduce use of tobacco products:

- » 100% made progress
- » 40% met goal
- » 100% are confident in their ability to continue making progress



Success Story:

“Raquel” lived with multiple health conditions, including type 2 diabetes. She wanted to be healthier but struggled with accountability. Within three months of starting health coaching, she was able to control her blood sugar levels, adhere to medication requirements, and lose ten pounds.

Providing truly personalized support

Many participants have shared their success stories and report being able to sustain the health changes they made. They report more confidence and determination in changing their lives and achieving additional health goals.

Patient Reported Drivers of Success

- » Learning how to hold myself accountable for making better choices
- » Tips on how to change to a healthier diet
- » Having someone check up on me
- » Being reminded about why I'm doing this
- » Encouragement and accountability
- » Willingness to go over information
- » Follow ups with resources and recipes
- » Tips for grocery shopping and easy food preparation
- » Regular weekly reminders and encouragement
- » Having conversations about my challenges
- » Receiving helpful suggestions on how to overcome challenges

Success Story:

“Anna” entered the program in February of 2020 after being diagnosed with diabetes and hypertension. She was also binge eating high sugar foods such as chocolate, which would regularly cause her blood sugar to elevate to 200 or more. Moreover, she was not exercising as COVID-19 closures restricted access to her local gym. She was able to get on the right track by creating small attainable goals with her health coach. By her third session, she had increased her blood sugar check to daily frequency, increased her physical activity by engaging in free, online exercise classes (a resource provided by her health coach), and, after changing her dietary habits, has decreased her blood sugar within the range of 105 – 115.



Goals and Health Changes Participants Have Achieved

Eat more fruits and vegetables

Lose weight

Reduce and manage stress

Cook at home more

Increase compliance with checking blood sugar

Improve sleep quality

Lower A1C numbers

Increase energy & positivity

Increase physical activity

Stabilize blood sugar

Practice portion control

Reduce sugar intake

Lower blood pressure

Increase compliance with taking medications

Reduce or eliminate tobacco use

Change begins with one small step

Lasting behavior change is possible, but takes time, persistence, support, and accountability. Living Healthier, a free health coaching program powered by the nonprofit It's Time Texas, can assist partners such as healthcare providers, employers, municipalities, and nonprofits in providing the consistent support and accountability that people need to change their behavior and, ultimately, their life.

Every day at It's Time Texas, our dedicated health coaches partner with Texans working to change their lifestyles for the better. Some are busy working parents struggling to make time for their health. Others are coping with injuries, loss of income, or other circumstances that prevent them from living the life they want to lead. Many have been diagnosed with a health condition. Nearly all have tried many times before to change.

The Living Healthier program is free to any Texan looking to make a healthy change. Our health coaching staff are experienced at helping people manage a wide range of conditions, from hypertension, to Chronic Kidney Disease (CKD), to type 2 diabetes. Calls are taken in English and in Spanish. There's never any charge, and we work with participant for as long as needed.

Become a Referral Partner

To explore partnership opportunities with Living Healthier, contact:

Andrea Rosario MPH, CHES

Telehealth Coaching Program Director

It's Time Texas

Email: lhcoach@itstimetexas.org

Phone: (844) 262-6224

Web: livinghealthier.itstimetexas.org/partners



1. Middleton KR, Anton SD, Perri MG. Long-term adherence to health behavior change. *American Journal of Lifestyle Medicine*. Nov-Dec 2013; 7(6):395-404. [online] Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4988401/>. Accessed: 13 August 2020
2. Christensen PAJ. *Patient Adherence to Medical Treatment Regimens: Bridging the Gap Between Behavioral Science and Biomedicine*. New Haven, CT: Yale University Press; 2004. [Google Scholar] Accessed: 23 August 2020
3. Buttorff C, Ruder T., Bauman M. (2017). Multiple chronic conditions in the United States. Available from: <https://doi.org/10.7249/TL221>. Accessed: 24 July 2020
4. National Institute on Aging. Supporting older patients with chronic conditions. [online] Available from: <https://www.nia.nih.gov/health/supporting-older-patients-chronic-conditions> Accessed: 22 July 2020
5. Chokshi N. (April 25, 2019). Americans are among the most stressed people in the world, poll finds. [online] Available from: <https://www.nytimes.com/2019/04/25/us/americans-stressful.html> Accessed: 21 July 2020
6. Laskowski ER, M.D. Healthy Lifestyle Adult Health. [online] Available from: <https://www.mayoclinic.org/healthy-lifestyle/adult-health/expert-answers/sitting/faq-20058005> Accessed: 21 July 2020
7. Roberts CK, Barnard RJ. Effects of exercise and diet on chronic disease. *J Appl Physiol*. 2005;78:3-30. <https://doi.org/10.1152/jappphysiol.00852.2004> Accessed: 20 July 2020
8. National Association of Chronic Disease Directors. Why public health is necessary to improve healthcare. [online] Available from: https://cdn.ymaws.com/www.chronicdisease.org/resource/resmgr/white_papers/cd_white_paper_hoffman.pdf. Accessed: 22 July 2020
9. Businesswire. The \$72 billion weight loss & diet control market in the United States, 2019-2023 - Why meal replacements are still booming, but not OTC diet pills - ResearchAndMarkets.com. [online] Available from: <https://www.businesswire.com/news/home/20190225005455/en/72-Billion-Weight-Loss-Diet-Control-Market>. Accessed: 21 July 2020
10. Ipsos. (December 11, 2019). Urban Plates/Ipsos Poll 2020 New Year's Resolutions. [online] Available from: <https://www.statista.com/chart/20309/us-new-years-resolutions-2020/>. Accessed: 2 August 2020
11. Centers for Disease Control and Prevention. Racial and ethnic approaches to community health. [online] Available from: <https://www.cdc.gov/nccdphp/dnpao/state-local-programs/reach/> Accessed on: 2 August 2020
12. Quinones AR, Botosaneanu A, Markwardt S, Nagel CL, Newsom JT, Dorr DA, Allore HG. Racial/ethnic differences in multimorbidity development and chronic disease accumulation for middle-aged adults. *PLoS One*. 2019;14(6):e0218462. [online] Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6576751/#__ffn__sectitle Accessed: 2 August 2020

13. Swain GR. How does economic and social disadvantage affect health? Institute for Research on Poverty. Fall/Winter 2016-2017; 33(1):1-6. [online] Available from: <https://www.irp.wisc.edu/publications/focus/pdfs/foc331.pdf> Accessed on: 13 August 2020 so
14. Annie E. Casey Foundation. 2017 Race for Results: Building a Path to Opportunity for All Children. October 24, 2017. Available from: <https://www.aecf.org/m/resourcedoc/aecf-2017raceforresults-2017.pdf#page=26>. Accessed: 23 August 2020
15. Georgetown University Health Policy Institute. Cultural competence in health care: Is it important for people with chronic conditions? [online] Available from: [https://hpi.georgetown.edu/cultural/#:~:text=\(1\)%20A%20culturally%20competent%20health,racial%20and%20ethnic%20health%20disparities](https://hpi.georgetown.edu/cultural/#:~:text=(1)%20A%20culturally%20competent%20health,racial%20and%20ethnic%20health%20disparities). Accessed: 2 August 2020
16. Institute of Medicine (US) Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care; Smedley BD, Stith AY, Nelson AR, editors. Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care. Washington (DC): National Academies Press (US); 2003. Patient-Provider Communication: The Effect of Race and Ethnicity on Process and Outcomes of Healthcare. [online] Available from: <https://www.ncbi.nlm.nih.gov/books/NBK220354/>. Accessed: 23 August 2020.
17. Osborn R, Moulds D, Schneider EC, Doty MM, Squires D, Sarnak DO. (December 7, 2015). Primary care physicians in ten counties report challenges caring for patients with complex health needs. [online] Available from: <https://www.commonwealthfund.org/publications/journal-article/2015/dec/primary-care-physicians-ten-countries-report-challenges>. Accessed: 2 August 2020
18. Keyworth C, Epton T, Goldthorpe J, Calam R, Armitage CJ. 'It's difficult, I think it's complicated': Health care professionals' barriers and enablers to providing opportunistic behaviour change interventions during routine medical consultations. *British Journal of Health Psychology* 2019; 24(3):571-592. [online] Available from: <https://doi.org/10.1111/bjhp.12368>. Accessed: 2 August 2020
19. Center for Substance Abuse Treatment. Enhancing Motivation for Change in Substance Abuse Treatment. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 1999. (Treatment Improvement Protocol (TIP) Series, No. 35.) Chapter 3—motivational interviewing as a Counseling Style. Accessed 23 August 2020: <https://www.ncbi.nlm.nih.gov/books/NBK64964/>
20. Magill M, Apodaca, TR, Borsari B, Gaume J, Hoadley A, Gordon REF, Tonigan JS, Moyers T. A meta-analysis of motivational interviewing process: technical, relational, and conditional process models of change. *J Consult Clin Psychol.* 2018 Feb;86(2):140-157. [online] Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5958907/#__ffn_sectitle Accessed: 22 July 2020
21. DiClemente CC, Velasquez MM. 2002. Chapter 15 Motivational Interviewing and the Stages of Change. In *Motivational Interviewing Second Edition*. New York: Guilford Press. [online] Available from: https://www.researchgate.net/profile/Mary_Velasquez/publication/231081405_Motivational_Interviewing_and_the_Stages_of_Change/links/0fcfd50b5f8c5af70e000000/Motivational-Interviewing-and-the-Stages-of-Change.pdf#page=222 Accessed: 23 July 2020
22. Miller WR, Rollnick S. 2013. *Motivational Interviewing: Helping People Change*. New York: Guilford Press.

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