

## WELLCIRCLE

### A Wellness Coaching Model for Managing Depression with the Art and Science of Wellness

#### **The Problem**

Depression is a complex, destructive condition, with multiple potential causes including physiological, cognitive, social and environmental. The exact mechanism of cause/s is still unclear. Anti-Depressant Medication (ADM) has become the cornerstone treatment with accelerating prescriptions rates in adults (USA -12%, Australia -10%, Canada -10%). ADMs are now prescribed not only for severe depression, but also for mild depression, anxiety, social phobia, and more. Research reveals many serious limitations and consequences of ADM including poor tolerability; delayed onset of action; adverse side effects including increased risk of suicide on commencement and at withdrawal ('discontinuation syndrome') and for all that, low response rates. Recent meta-analyses show a modest overall effect size of ADM about 0.3, far lower than earlier estimates. With teenage depression rates on the rise (11.3% USA, 2014), and ADM are linked to increased teen suicide risk, other safer treatment options are needed. Whilst psychotherapy or psychiatrist referrals are suitable for some teens, the often significant physiological or lifestyle related causes of depression are not managed in a way that can truly facilitate positive change. There is a need for ways to deliver safe management strategies that address the unique lifestyle and wellness challenges of 21st century teenagers.

#### **Effectiveness of Lifestyle and Nutritional Strategies**

Research-based evidence and large clinical trials demonstrate the significant impact that lifestyle and nutritional strategies can have on managing depression both as stand alone treatment option, or to add efficacy to anti-depressant medication. In fact many of these strategies are shown to be at least as effective compared with ADM for treating mild to moderate depression with far fewer or zero side effects. When a number of lifestyle strategies are combined, they have a multiplier effect. The most significant and successful example in the literature of a combined lifestyle treatment approach is the 'Therapeutic Lifestyle Change (TLC)' program from Kansas University. (see below for further details)

#### **Practitioner Needs Analysis**

In order to determine the barriers to bringing evidence based wellness strategies for managing depression into the mental health professional's toolbox, we interviewed general practitioners, psychiatrists, psychologists and counsellors about their use of lifestyle strategies in treatment. Whilst all strongly agreed that lifestyle was a fundamental element of wellness, the majority noted that the majority of clients with depression lack motivation and follow through when suggestions are made by the practitioner.

Several other key observations emerged:

1. That despite wanting to support patients towards positive changes, medical practitioners do not generally have the skills, resources or time needed to coach patients to lifestyle improvement whether as a first line or adjunct treatment.
2. Psychologists and counsellors who have more contact time to support clients, are generally not trained in how to implement a best practice lifestyle coaching approach for clients.
3. That practitioners would refer clients to a qualified mental health professional who could coach clients towards self-care via lifestyle and nutritional change.
4. That access to an online practitioner training would support practitioners to integrate and implement an evidence-based wellness lifestyle changes into their treatment framework.
5. That an evidence-based coaching handbook resource made available for clients would support planning and implementing changes

As a result of all of the above, we decided to research, design, develop and pilot a framework that would do this. Wellcircle is the outcome of our interviews, research and proto-typing. It is an evidence-based lifestyle and strategy change program designed to support people affected by depression.

### **What's a Wellcircle for Managing Depression?**

Wellcircle was designed as a strategy to address these lifestyle treatment challenges, to answer the question: How can we embed the brilliance of nature to heal through rebalancing known triggers to depression such as our physiological, communication and support systems? We draw on effective lifestyle strategies that we have called collectively 'Natural Anti-Depressants' (NADs).

With the support of a mental health professional with wellness coaching skills, clients learn about the physiology, psychology, social, communication & situational aspects of depression. Wellcircle also provides clients with a personal toolbox for change – tools to use, strategies to implement and skills to develop.

Wellcircle can be run either as a group where participants learn how to coach each other, or one-on-one with a coach practitioner. Sessions run weekly over 2-3 months, so participants have time to practice and integrate the new skills they will learn.

### **Research and Rationale;**

Depression is responsive to many different NADs. Our program is based on a number of evidence-based lifestyle and nutritional strategies including the research of Dr. Stephen Ilardi and team at the University of Kansas, Therapeutic Lifestyle Change (TLC) Program and author of the book '*The Depression Cure*'. TLC research has demonstrated success rate of over 70% in a trial with 2500 patients, where success means reduction of depression symptoms by more than 50%. TLC uses six evidence-based lifestyle and nutritional strategies, which include the use of dietary omega-3 fatty acids, engaging activity to reduce rumination, physical exercise, sunlight exposure, social support, and sleep.

Wellcircle was designed to support people to both become aware of depressant lifestyle and cognitive habits that can contribute to depression, and through a supportive coaching environment (peer or individual coaching) take small step by step to take on the NADs of their choice. In Australia, government funded the Life program - free telephone health coaching for those at risk of diabetes, heart disease and stroke. The author of this paper has worked with the Life program for several years, witnessing the effectiveness of health coaching to support people to lifestyle changes.

1. Wellness Lifestyle Literacy: Learn which lifestyle changes can reduce depression
2. Self-awareness: Become aware of which are specific challenges to oneself
3. Set Goals: Choose which NAD to take on at a rate that feels comfortable. Whether through a health professional or by their Wellcircle peers, a client can be supported to take on the changes using coaching wisdom and processes to maximise chances of success, and reduce obstacles
4. Practice new communication skills – In both contexts, clients are taught valuable communication skills to change their system – specifically the way they interact with the world. Whether it be assertiveness, coaching or compassionate communication, this becomes a key element of the coaching. Modelling by coach or the group, and feedback and recording to become aware of one's habits.

## WELLCIRCLE PILOTS

In our first two group pilots, 12 participants with mild to moderate depression were recruited using social media such as Facebook to share the Wellcircle flyer with friends and colleagues. Both Wellcircles took place over a period of seven sequential weeks - each meeting ran for 2-2.5 hours one evening a week. The value of the group in normalising the experience of the participants was powerful. They all left with a more empowered sense of self, increased refusal skills and a toolbox of strategies

Despite enthusiasm about the value of this framework, there are barriers of motivation and sociability with depression. As a result we have now designed Wellcircle as a one on one curriculum booklet, so it can be delivered by a health or wellness coach, counsellor, psychologist or other health professional in parallel with counselling, CBT or other treatment. Providing each person with depression with the opportunity to become self-aware and literate in a broad range of lifestyle and cognitive causes of depression, and set simple goals with support of a broad range of practitioners.

Wellcircle curriculum gives health professionals the opportunity to bring a more systems thinking approach to their practice, and target the people who have access to a difficult to access population.

The main aspects to the Wellcircle approach.

Wellness Lifestyle Literacy: Learn which lifestyle changes can reduce depression

1. **Self-awareness:** Become aware of which are specific challenges to oneself
2. **Set Coaching Goals:** Choose which NAD to take on at a rate that feels comfortable  
Whether through a health professional or by their Wellcircle peers, client can be supported to take on the changes using coaching wisdom and processes to maximise chances of success, and reduce obstacles
3. **Practice new communication skills** – In both contexts, clients are taught valuable communication skills to change their system – specifically the way they interact with the world. Whether it be assertiveness, coaching or compassionate communication, this becomes a key element of the coaching. Modelling by coach or the group, and feedback and recording to become aware of ones habits.
4. **Practice group support** and peer coaching skills with the whole Wellcircle group of others who are also prone to depression. This is a safe place to share stories, explore common challenges and support each other and to build skills for better self care

## RESEARCH SAYS:

- Our program is based on a number of evidence-based frameworks including the research of Dr. Stephen Ilardi at the University of Kansas, designer of the Therapeutic Lifestyle Change (TLC) Program and author of '*The Depression Cure*'. <http://tlc.ku.edu/>
- TLC research has demonstrated success rate of over 70% in a trial with 2500 patients, where success means reduction of depression symptoms by more than 50%.
- TLC uses six evidence-based lifestyle and nutritional strategies, which include the use of dietary omega-3 fatty acids, engaging activity to reduce rumination, increase physical

exercise, sunlight exposure, social support, and sleep. A link to details of the elements of the program is here: <http://tlc.ku.edu/elements>.

## OVERVIEW:

Wellcircle uses a unique range of anti-depressant tools to support and coach wellness changes

- Evidence-based wellness lifestyle (taking action)
- Positive thinking habits (changing thoughts)
- Peer coaching skills (communication skills)
- Group support (connected community)

**Wellcircle** connect participants with the common challenge of depression, enabling them to meet regularly, share stories, learn how to peer coach each other, develop awareness of 'depressant habits' and decide which 'anti-depressant habits' they want to take on as goals with peer coaching support.

## What Are the Key Components of our Program and How does the Research Support Them?

1. **Social Support:** Connecting into a supportive group. We all know lifestyle changes are hard. But research confirms it is easier when there is a group of people supporting you through it. The positive effects of connection, especially between those who are affected by common challenges are evidence-based. As Dr. Illardi points out, "when it comes to depression, relationships matter. People who lack a supportive social network face an increased risk of becoming depressed, and of remaining depressed once an episode strikes."

*'Our ancestors lived in small tight knit communities. Rarely did one do something alone, and community members looked to each other for entertainment, comfort, safety, and support. Thus, it is important to lean on friends and family, not only to get needed social support, but also because spending time with others is a good way to distract yourself from rumination.'* (Source: 'Depression Cure' 2008 Stephen Illardi)

2. **Exercise:** Exercise is a powerful anti-depressant. However, taking on regular exercise often requires motivation and support, especially for individuals with depression. Wellcircles are designed to get people active from the first session. Researchers have compared aerobic exercise and Zoloft head-to-head in the treatment of depression. Even at low "doses" of exercise, patients who worked out did just as well as those who took the medication. Strikingly, the patients on Zoloft were about three times more likely than exercisers to become depressed again over a ten-month follow-up period.
3. **Sleep Hygiene:** There is a very strong relationship between sleep patterns and depression. If sleep is an issue, this is a focus of goal setting. Participants discover a broad range of strategies to improve sleep habits and patterns using the principles of sleep hygiene.
4. **Nutritional Support:** There is a growing body of evidence based research demonstrating the impact of nutrients and micronutrients on mental health. For example, countries with the highest level of omega-3 consumption have the lowest rates of depression. Recent research from the University of Melbourne and Harvard has demonstrated that taking

nutritional supplements, including omega-3, in addition to anti-depressants can significantly reduce clinical depression.  
([https://www.nlm.nih.gov/medlineplus/news/fullstory\\_158505.html](https://www.nlm.nih.gov/medlineplus/news/fullstory_158505.html)).

Victoria is also well positioned to become leaders in the area as we have several key players in this research area in Victoria where research could be further progressed.

The **Food and Mood Centre** at Deakin University is in Victoria and is researching risk factors and developing solutions to mental health problems using dietary and nutritional strategies. Nutritional Psychiatry is the term used to describe this field of research, approaching the prevention and treatment of mental ill health, that focuses on diet and nutrition, with a growing body of evidence of the impact of high and low inflammatory food impact on mood. They are the only such research centre in the world conducting high quality research that helps us to learn about how we might reduce risk, prevent, and treat mental disorders through diet and nutrition. It has been shown over the last several years that unhealthy diet (too much junk food, or not enough 'nutrient-dense' foods, or both) is a risk factor for depression and anxiety. It also appears to be a risk factor for more general emotional dysregulation in children, which is in turn related to the risk for a range of mental disorders as children grow.

In New Zealand, Professor Julia Rucklidge is a researcher and registered clinical psychologist who directs the **Mental Health and Nutrition Research Group** at the University of Canterbury and is one of the leading experts on the use of micronutrients for treating psychiatric disorders. The research uses a specific formula '*Daily Essential Nutrients*' by *Hardy Nutritionals* and its early version called '*EMPowerplus*'. These the most researched formulas in the world for the treatment of psychiatric disorders and psychological symptoms, with research conducted by scientists around the world has been done without any funding from the companies and no direction or oversight being expected or provided by them. There are psychiatrists in Australia who are trained to use micronutrients. The micronutrient approach has been shown to be successful with a range of patients with unique needs including; those who refuse pharmaceutical medications; those who do not respond to pharmaceutical medication; those who respond poorly to pharmaceutical medication. As a result of this research in New Zealand, insurance companies are now funding micronutrient therapy for patients who show they benefit more from this than from medication. Links to some of the research is further below.

5. **Peer Coaching:** We establish a group dynamic where everyone is supporting each other *and simultaneously* learning the skills of peer coaching by practicing on each other. The peer coaching environment offers participants the opportunity to support one another in learning how to set goals, maintain lifestyle changes, share their experiences, connect and learn from one another in a positive, non-judgmental environment of learning and growth.
6. **Thought Pattern Changes:** Participants learn the 'change your thoughts to manage your moods' approach. This comes from psychiatrist Dr. David Burns, author of *Feeling Good*. When depressed, negativity dominates our thoughts, which then causes cognitive distortions. Helping people understand the 12 key cognitive distortions is the important first step of changing negative thinking. We add positive frameworks so participants practice recognizing strengths, expressing gratitude and reframing their negative stories.

7. **Light therapy.** Light therapy (LT) consists of exposure to daylight or artificial bright light for a determined period of time at a specific time of day. A double-blind trial demonstrates that LT is a very effective stand-alone treatment for non-seasonal depression, in addition to its known benefit for seasonal-affective disorder. Research is here: <http://archpsyc.jamanetwork.com/article.aspx?articleid=2470681> Participants can go outside in the sun (take off sunglasses, but leave on the sunscreen) or get light exposure from a special light box that emits the same amount of light (10,000 lux) which are available online
8. **Stress Less Toolbox.** Stress is another major factor that triggers depression. Stress occurs when you perceive that demands placed on you — such as work, school or relationships — exceed your ability to cope. Finding your own positive, healthy ways to manage stress reduces the consequences on your mood. Everyone is different, and so are the ways they choose to manage their stress. Some people prefer pursuing hobbies such as gardening, playing music, and creating art, while others find relief in more solitary activities: meditation, yoga, and walking. Mindfulness-based stress reduction training has now been confirmed by neuroimaging to cause changes to the brain
9. **Stop Rumination –** Rumination, a habit that many depressed people get into, is dwelling on negative thoughts and feelings. Rather than coming up with a solution to a problem and acting on it, people with depression often let their negative thoughts spiral out of control. It is important to recognize rumination for what it is and put a stop to it as quickly as possible. Learning how to step ruminating is a key skill that can be learnt.

### **MICRONUTRIENT:**

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