**What is Behavioural and Social Health?**

Behavioural and social health, used in combination with clinical care, provide the patient with motivation and support to change lifestyle and behaviours that directly influence their long-term condition. An example of this is where the GP will provide clinical advice on a person’s HBA1c but a behavioural and social service will work with the patient to understand how their food choices, exercise, and other daily activates impact their diabetes. They support the patient to make the changes as part of their role in the patient’s care team.

Behaviour and social health services have the greatest impact on people with long-term conditions and high health need, low health literacy, cultural and access barriers. The services can also help provide patient centred strategies to influence weight (loss or gain), decrease substance abuse/dependence, and manage chronic pain and general mental health services.

There is an increasing need in primary care for these services as the delivery of care shifts to focus more on the whole patient, not just the clinical symptoms. This approach meets an unmet need in the community and provides for better patient satisfaction and better health outcomes. Behavioural and social health services provide the balance between ‘cure’ and ‘healing’.

**Why is Individual Health Planning important?**

Good health planning with the patient lays the foundation for planned and proactive care for this patient group who are often frequent attendees at practices and other health and social services.

Individual Health planning involves forecasting a patient’s care requirements (Year of Care Plan) and therefore shifting care in general practice from reactive care to proactive care. IHPs encourage patient engagement, improved health literacy and self-management. It shifts the clinician-patient relationship from paternal to collaborative and one of shared decision-making.

Addressing resilience and social determinants of health in a 15-minute consultation is unlikely but when identified in an IHP, they become the focus of the patient, health coach and care coordinator prior to or post the consultation.

An IHP engages patients in their health journey, promotes greater health gain and better experiences with the health sector. The patient is more motivated to achieve their goals, which may not be the clinical markers set by their GP. Dis-engaged patients are not generally suited to an IHP approach to planned care.

Health planning only works with the support of health coaching and care coordination who could be a member of the health care team, a health coach or peer supporter, the patient’s whanau or community health worker may provide the coaching. Part of the IHP is identifying who the best coach for the patient is.

**What is Health Coaching?**

Health coaching is helping patients gain the knowledge, skills, tools and confidence to become active participants in their care so that they can reach their self-identified health goals, improve health literacy and self-management. Health coaching increases a patient’s resilience and assists the patient to address their social determinants of health.

The familiar adage “Give a man a fish, and he eats for a day. Teach a man to fish, and he eats for a lifetime,” demonstrates the difference between rescuing a patient and coaching a patient. For chronic care, patients need the knowledge, skills and confidence to participate in their own care. [Abstract](http://www.aafp.org/fpm/2010/0900/p24.html#abstract)

Health coaching encompasses five principal roles: 1) providing self-management support, 2) bridging the gap between clinician and patient, 3) helping patients navigate the health care system, 4) offering emotional support and 5) serving as a continuity figure

**What is Peer Support?**

Peer support links people living with a chronic condition such as diabetes. People with a common illness are able to share knowledge and experiences – including some that many health workers do not have.

Peer support is frequent, ongoing, accessible and flexible. Peer support can take many forms – phone calls, text messaging, group meetings, home visits, going for walks together and even grocery shopping. It complements and enhances other health care services by creating the emotional, social and practical assistance necessary for managing the disease and staying healthy.