



Health & Well-Being Coaching in Oncology: Competency Framework

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Acknowledgment of Subject Matter Expert Contributors

The Academy for Behavior Change gratefully acknowledges the subject matter experts who contributed their time, expertise, and professional perspective to the development of this specialization competency framework in Health & Well-Being Coaching (HWC) in Oncology.

Their contributions helped inform the competencies, applied practice expectations, and field relevance of this framework. The Academy recognizes the value of their insight in supporting a competency guide that reflects current practice, evidence-informed standards, and the needs of coaches working within this specialization area.

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Acknowledgment as a subject matter expert contributor reflects participation in the development or review process and does not imply individual endorsement of every provision, interpretation, or future application of this guide. Final responsibility for the content, interpretation, publication, and ongoing maintenance of this specialization competency guide lies with the Academy for Behavior Change.



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Introduction to the Health & Well-Being Coaching in Oncology Competency Framework

The Health & Well-Being Coaching (HWC) in Oncology Competency Framework defines the advanced knowledge, skills, and applied abilities expected of health and well-being coaches practicing within the context of health & well-being coaching in oncology. Developed by the Academy for Behavior Change in collaboration with highly qualified subject matter experts, this framework establishes a shared set of standards for specialized coaching practice in oncology.

This framework is intended to support the development of specialization education and training that extends beyond foundational health and well-being coaching preparation. The competencies reflect the unique considerations, practice demands, interdisciplinary dynamics, ethical responsibilities, and client needs associated with coaching in oncology.

The HWC in Oncology Framework functions as an advanced overlay to foundational coaching competencies, including those established through the Institute for Behavior Change Clinical Health & Well-Being Coach (CHWC) credential. Specialization competencies are not intended to replace foundational coaching competencies, ethical standards, or core coaching skills; rather, they identify the additional competencies required for effective, safe, and contextually appropriate practice within oncology.

Within this framework, specialized coaching competence is understood as the integration of:

- Core coaching processes and communication skills
- Ethical and professional practice
- Behavior change principles and evidence-informed approaches
- Client-centered and culturally responsive care
- Scope of practice awareness and appropriate referral
- Contextual knowledge specific to oncology
- Interdisciplinary collaboration and professional judgment

The framework is intended to guide:

- Curriculum and specialization program development
- Learner assessment and demonstration of competence
- Faculty preparation and instructional design
- Professional development planning
- Credentialing and quality assurance
- Consistency across specialization training programs

While this competency framework defines what coaches should know and be able to do, the curriculum represents the structured learning pathway through which those competencies are developed. Programs using this framework should clearly describe how foundational coaching competencies are ensured and how specialization-specific competencies are taught, practiced, and assessed, as outlined in the specialization handbook. Competency statements that include an “e.g.” in parentheses are meant to provide additional examples of what the statement is intended to address; examples are not comprehensive or prescriptive of what should be included in the curriculum.

The competencies should be interpreted holistically rather than as isolated tasks or checklists. Effective practice in oncology requires the integrated application of coaching skills, ethical practice, professional judgment, contextual awareness, interdisciplinary collaboration, and responsiveness to the unique needs of the individuals, populations, and settings served.

As the evidence base, practice landscape, and needs of the field continue to evolve, the Academy for Behavior Change will periodically review and update this competency framework to reflect advances in coaching practice, emerging evidence, evolving standards, and developments within health & well-being coaching in oncology. Through this ongoing stewardship, the Academy serves as a convener for the development of specialization competencies, creating a structured pathway through which subject matter experts define the advanced standards needed to support safe, effective, and field-aligned specialized coaching practice.

How to Use This Document

This competency framework is intended to serve as a guide for developing, delivering, and evaluating specialization education and training in HWC in Oncology. It identifies the advanced competencies coaches should be able to demonstrate when practicing within this specialization and provides a common reference point for programs, faculty, assessors, and learners.

Programs should use this framework to inform curriculum design, learning objectives, instructional activities, practice opportunities, and assessment methods. The competencies are intended to help programs ensure that learners are not only introduced to specialization-specific knowledge but also have opportunities to apply and demonstrate that knowledge in ways that reflect real-world coaching practice within the field of oncology.

The competencies should be used alongside foundational health and well-being coaching competencies, ethical standards, and scope of practice expectations. They are not intended to replace foundational coaching preparation, but rather to clarify the additional knowledge, skills, and applied abilities required for safe, effective, and contextually appropriate specialized practice.

This document may be used to support:

- Specialization curriculum and program development
- Alignment of learning objectives and instructional content
- Design of applied practice and skills-based learning activities
- Learner assessment and demonstration of competence
- Faculty preparation and program quality assurance
- Ongoing professional development for coaches practicing as HWC in Oncology

The competencies should be interpreted as an integrated framework rather than as a checklist of isolated tasks. Effective specialized coaching requires coaches to integrate foundational coaching skills, ethical judgment, evidence-informed practice, cultural responsiveness, interdisciplinary awareness, and specialization-specific knowledge to serve the individuals, populations, and settings they support.

Programs using this framework should also consult the specialization handbook for additional guidance on program requirements, foundational competency expectations, assessment considerations, and implementation standards.

What is a Clinical Health & Well-Being Coach?

A **Clinical Health and Well-Being Coach (CHWC)** is a highly trained professional who partners with clients in clinical environments to foster meaningful behavior change and support whole-person health. Working with individuals managing chronic conditions, adjusting to complex diagnoses, or striving for improved lifestyle patterns, CHWCs help clients strengthen motivation, build self-efficacy, and translate medical recommendations into sustainable daily practices. Grounded in evidence-based practice, behavior science, and relational skills, CHWCs bring a human-centered approach that honors each client's lived experience while empowering them to take an active role in their care. As integrated members of healthcare teams, CHWCs complement clinical treatment by providing the time, continuity, and partnership necessary for clients to implement care plans and make changes that endure, ultimately strengthening the bridge between medical guidance and real-life transformation.

Key Elements of the Definition:

- Trained professional with expertise in behavior change, motivational interviewing, and coaching frameworks.
- Trained specifically to work in clinical or healthcare settings, alongside or within interprofessional care teams.
- Partners with clients in a human-centered way, emphasizing collaboration rather than direction.
- Focuses on client-determined goals, behavior change, lifestyle improvement, and overall well-being.
- Supports implementation of medical guidance, but does not diagnose, treat, or prescribe.
- Bridges the gap between clinical guidance and behavioral implementation to enhance patient activation and improve health outcomes.





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Competency Domains

Domain 1

Complexity and Individuality of the Cancer Experience

The cancer experience is complex and unique to each individual's journey. This domain outlines key areas in which an HWC in Oncology should gain additional knowledge and skills to effectively support clients throughout their cancer experience. This includes not only understanding the individuality of the cancer experience but also deepening and adapting foundational coaching skills to address the client's lived experience, social determinants of health, diagnosis, and cancer mindset.

1. Complexity and Individuality of the Cancer Experience

1.1. Client's Lived Experience

- 1.1.1. Recognize the impact of geographical location on cancer experience (e.g., access, available care)
- 1.1.2. Recognize the impact of cultural norms, traditions, expectations, and/or identity on cancer experience and healthcare engagement
- 1.1.3. Recognize the unique needs of clients who are members of underrepresented and/or vulnerable groups as it relates to receiving oncology care
- 1.1.4. Apply knowledge of social determinants of health and health-related social needs impacting cancer client experience (e.g. health system assessments)
- 1.1.5. Build client capacity to develop strategies and plans that align with the circumstances of their cancer treatment and lived experience
- 1.1.6. Build client capacity to proactively respond when faced with a health inequity
- 1.1.7. Reframe client's cancer mindset as related to their cancer experience when needed (e.g, relationship to cancer - catastrophe or manageable; relationship to body: body as friend or foe)

1.2. Individualized Cancer Experience

- 1.2.1. Explore the clients' health values, and their sense of meaning and purpose, as they relate to the cancer experience
- 1.2.2. Obtain basic knowledge of the diagnosis process regarding cancer type and stage for client population
- 1.2.3. Integrate knowledge of cancer type, stage, and treatment process into coaching process, as relevant and appropriate
- 1.2.4. Identify common treatment recommendations, side effects, and post-treatment medications relevant for client population

Domain 2

Behavior Change Across the Cancer Continuum

The client experience and the behavior change needed may vary across the phases of the cancer continuum. This domain ensures coaches understand the phases of the cancer continuum, including prevention, risk reduction, diagnosis, active treatment, survivorship, and transitions between phases, and adapt coaching strategies according to the client's capacity to engage in change across the cancer continuum. Furthermore, coaches gain knowledge of common symptom clusters relevant to their client population and build client capacity to self-manage symptoms across the cancer continuum.

2. Behavior Change Across the Cancer Continuum

2.1. Client Context, Capacity, & Activation

- 2.1.1. Recognize client experience may vary across the phases of the cancer continuum (e.g., prevention, risk reduction, genetic predisposition, survivorship, transitions)
- 2.1.2. Apply knowledge of the impact of physical symptoms, side effects & emotional distress on a client's capacity for behavior change
- 2.1.3. Build client capacity to prepare for and adapt to changes across the phases of the cancer continuum
- 2.1.4. Tailor coaching skills, strategies, and approaches across phases and transitions of the cancer continuum and respective of client's stage of life
- 2.1.5. Adapt coaching skills to client's functional status, multiple chronic conditions, and capacity for change

2.2. Side Effects & Symptom-Informed Self-Management

- 2.2.1. Identify symptom clusters relevant to client population
- 2.2.2. Utilize evidence-based guidelines by symptom type to support client self-management
- 2.2.3. Facilitate client awareness of the bi-directional nature between symptoms and health-supporting behaviors
- 2.2.4. Build client capacity to apply appropriate recommended lifestyle strategies and integrative therapies for symptom management
- 2.2.5. Adapt coaching strategies to address client expectations around symptom resolution and recovery

Domain 3

Emotional and Psychological Impact of Cancer

HWC in Oncology must understand the emotional and psychological impact of the cancer experience on clients in addition to the physical side of cancer. This domain details in-depth key skills, strategies, and approaches coaches should demonstrate to effectively support clients across the cancer continuum as it relates to the impact of cancer on one's identity, meaning, purpose, and psychological and emotional health. Coaches should be prepared to support clients in utilizing emotional regulation strategies and navigating distress with advanced coaching presence and strategies. Furthermore, coaches must be able to work with grief and loss across the cancer continuum, not just around death, but around the loss that often comes with a cancer diagnosis and across the cancer continuum.

3. Emotional and Psychological Impact of Cancer

3.1. Emotional Regulation on the Cancer Continuum

- 3.1.1. Recognize when a cancer patient presents with a dysregulated nervous system across the cancer continuum
- 3.1.2. Utilize appropriate emotional regulation strategies to support cancer patients when necessary (e.g. breathing strategies, mindfulness, self-compassion theory, co-regulation)
- 3.1.3. Support client in developing proactive and flexible coping skills (e.g., self-compassion theory, mindfulness, problem-solving, meaning-based)

3.2. Distress

- 3.2.1. Identify common causes of distress in cancer clients across the cancer continuum (e.g., fear of recurrence)
- 3.2.2. Recognize distress tolerance and the impact of the cancer experience on a cancer patient's window of tolerance
- 3.2.3. Validate and normalize client experience with distress
- 3.2.4. Identify the impact of distress on an individual's cognitive functioning (e.g., process information, decision making)
- 3.2.5. Recognize client distress is within coaching scope and refer appropriately
- 3.2.6. Modify coaching strategies to accommodate clients experiencing distress

3.2.7. Trauma-Informed Competence might include:

- 3.2.7.1. Recognize how trauma presents in the cancer context (e.g., diagnostic shock, post-medical procedure, scanxiety)
- 3.2.7.2. Recognize how trauma may contribute to and impact client response to treatment, coaching, and other health care or personal interactions (e.g., behavior, resistance, trust)
- 3.2.7.3. Validate client's trauma while maintaining a high-level view
- 3.2.7.4. Refer clients for additional emotional and trauma support, as appropriate
- 3.2.7.5. Facilitate post-traumatic growth, as appropriate

3.2.8. Grief & Loss Across the Cancer Continuum

- 3.2.8.1. Recognize the different types of grief and loss that can be experienced across the cancer continuum (e.g., loss, anticipatory grief, grief)
- 3.2.8.2. Promote self-compassion and self-care for clients addressing loss and expressing grief
- 3.2.8.3. Support client in awareness and expression of emotions and sentiments of grief as aligned to the client's values, culture, and lived experience
- 3.2.8.4. Demonstrate cultural humility around grief and mourning
- 3.2.8.5. Support clients in culturally appropriate mourning rites and behaviors, as needed
- 3.2.8.6. Support clients in navigating and integrating loss from a wider perspective (e.g., somatic, neurobiology)

3.3. Identity & Meaning Integration

- 3.3.1. Recognize the cancer experience is multidimensional, dynamic, and non-linear (e.g., existential, physical, interpersonal)
- 3.3.2. Recognize the impact of cancer on an individual's sense of self (e.g., self-esteem, body image, meaning, purpose, relationship)
- 3.3.3. Describe how a client's self-belief influences and impacts the cancer experience, behavior change, activation, and empowerment
- 3.3.4. Support clients in exploring existential concerns in the context of cancer
- 3.3.5. Support clients in exploring values and meaning-making as it intersects with the cancer experience
- 3.3.6. Support clients in maintaining or reclaiming identity throughout the phases of the cancer continuum
- 3.3.7. Utilize coaching strategies to promote thriving, flourishing, and resilience across the cancer continuum

Domain 4

Relationships and Support Systems

HWC in Oncology support clients in strengthening meaningful connections and navigating the complex systems that influence their health and well-being throughout the cancer experience. This domain emphasizes the importance of relationships, social support, and a sense of connectedness as foundational elements of resilience, coping, and quality of life. Coaches help clients identify, cultivate, and sustain supportive personal and professional relationships while honoring individual values, identities, and cultural contexts. In addition, oncology coaches assist clients in effectively engaging with healthcare teams, community resources, caregivers, and support services to promote coordinated care, informed decision-making, and continuity across the cancer care ecosystem.

4. Relationships and Support Systems

4.1. Connectedness, Relationships, & Social Support

- 4.1.1. Identify when a client is expressing feelings of isolation and disconnection
- 4.1.2. Describe the impact of support (or lack thereof) on client health, well-being, and outcomes
- 4.1.3. Recognize the impact of cancer on a client's relationships and sense of connectedness
- 4.1.4. Recognize how distress might be perceived by others in the clients' support system
- 4.1.5. Support clients in identifying and utilizing available supports and resources
- 4.1.6. Assess client support needs and gaps

4.2. Systems & Care Ecosystem Engagement

- 4.2.1. Describe the full ecosystem of cancer client relationships and supports (e.g., family, friends, co-workers, community, care team, care systems, other patients)
- 4.2.2. Recognize the impact of transitions during the cancer experience on client relationships, and relationships within the ecosystem (e.g., cross-sector care, transitions across phases)
- 4.2.3. Build client capacity to engage, self-advocate, and communicate in their care and support systems

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- 4.2.4. Recognize that support or lack of support may be culturally defined/influenced
 - 4.2.5. Recognize how the client narrative around support and support systems impacts their experience and change process
 - 4.2.6. Adapt coaching strategies to work with the client's narrative around support and support systems



Domain 5

Professional Practice, Ethics, and Scope of Practice in the Oncology Setting

HWC in Oncology demonstrate ethical, reflective, and professional practice grounded in clear role boundaries, client-centered care, and collaboration within the broader oncology environment. This domain emphasizes the cultivation of professional presence, emotional self-regulation, and sustainable practices that support both coach effectiveness and well-being in emotionally complex care settings. Coaches recognize the importance of ongoing self-awareness, supervision, and self-regulation in maintaining high-quality practice. In addition, oncology coaches work collaboratively with interdisciplinary care teams and community partners while understanding the distinct role of coaching within clinical delivery and supportive care. They navigate their scope of practice responsibly, communicate effectively across systems, and contribute to coordinated, compassionate, and ethically grounded cancer care.

5. Professional Practice, Ethics, and Scope of Practice in the Oncology Setting

5.1. Professional Presence, Self-Regulation, Sustainability

- 5.1.1. Recognize the emotional impact of oncology work by cultivating emotional literacy
- 5.1.2. Recognize the importance of coach self-care and professional boundaries to prevent compassion fatigue and burnout
- 5.1.3. Regularly engage in self-care and emotional regulation practices to mitigate the emotional load of oncology work
- 5.1.4. Recognize and navigate moral distress in self and others when it arises
- 5.1.5. Engage in appropriate practices or protocols to support colleagues experiencing moral distress
- 5.1.6. Establish professional boundaries with clients and care team members.
- 5.1.7. Recognize the need for and offer resources and information “at just the right time”
- 5.1.8. Prepare for the possibility of a client entering end-of-life stages, the possibility of losing a client, and their impact on the coach

5.2. Interdisciplinary Collaboration & Clinical Delivery

- 5.2.1. Work within a clearly defined scope of practice across the phases of the cancer continuum

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- 5.2.2. Clearly define the role of the coach on the oncology care team
 - 5.2.3. Actively work to integrate the coach role on the oncological care team
 - 5.2.4. Adapt coaching to clinical environment (e.g., infusion center, waiting room, bedside)



Glossary of Terms

Instructions for Use

The glossary of terms provides general definitions for terms used throughout the competencies. Students should be able to define these terms and explain their relevance to the health & well-being coaching relationship in oncology prior to engaging in clinical simulations or advanced coursework.

A

Active Treatment

The phase in which a patient is receiving cancer-directed therapies such as chemotherapy, radiation, surgery, immunotherapy, or targeted therapy.

Adherence

The extent to which a patient follows agreed-upon medical recommendations, medications, lifestyle changes, or treatment plans.

Advance Care Planning

Discussions and decisions regarding future healthcare preferences, values, and goals of care.

Anxiety

A common emotional response in cancer care that may affect sleep, concentration, decision-making, and self-management.

B

Behavior Change

The process of modifying health-related habits, routines, or lifestyle practices to improve health outcomes.

Biomarker

A biological indicator used to assess disease presence, progression, or treatment response.

Burnout

Emotional, mental, and physical exhaustion resulting from prolonged stress, common in both

patients and caregivers.

C

Cancer Survivorship

The phase of care begins at diagnosis and continues through treatment and beyond, including long-term physical and psychosocial effects.

Cancer Continuum

The full spectrum of experiences, stages, and care processes related to cancer, from prevention through survivorship or end-of-life care.

Cancer-related Cognitive Dysfunction

Changes in cognitive functioning that may occur before, during, or after cancer and its treatment. These changes can affect a person's ability to think, remember, process information, concentrate, communicate, or complete everyday tasks.

Caregiver Burden

The physical, emotional, social, and financial strain experienced by family caregivers.

Chemotherapy

Drug treatment used to destroy or slow the growth of cancer cells.

Clinical Team

Healthcare professionals involved in a patient's care, including physicians, nurses, social workers, therapists, dietitians, and coaches.

Comorbidity

The presence of one or more additional health conditions alongside cancer.

Compassion Fatigue

Emotional exhaustion that may occur in caregivers or healthcare professionals exposed to ongoing suffering.

D

Distress

An unpleasant emotional experience that may interfere with coping, functioning, and quality of life.

Diagnosis

The process of identifying whether cancer is present and determining the type of cancer.

Decision Fatigue

Mental exhaustion caused by repeated healthcare decisions, often affecting patients and caregivers.

E

Executive Function

Cognitive processes involved in planning, organization, initiation, memory, prioritization, and follow-through.

Evidence-Based Practice

Approaches informed by scientific research, clinical expertise, and patient values.

F

Fatigue (Cancer-Related Fatigue)

Persistent physical, emotional, or cognitive exhaustion associated with cancer or its treatment.

Functional Status

A person's ability to perform daily activities and maintain independence.

G

Goals of Care

The patient's priorities, preferences, and desired outcomes related to treatment and quality of life.

Grief

A natural emotional, psychological, physical, social, and spiritual response to loss. Within the cancer experience, grief may arise in response to many types of losses, including changes in health, identity, functioning, relationships, future plans, roles, independence, or the death of a loved one.

H

Health Behavior

Actions that influence health outcomes, such as sleep, nutrition, movement, medication use, and stress management.

Health Coaching

A collaborative, client-centered process that supports sustainable behavior change and self-management.

Health Literacy

A person's ability to understand and use health information effectively.

I

Immunotherapy

Cancer treatment that helps the immune system recognize and fight cancer cells.

Integrative Oncology

An approach combining conventional cancer treatment with evidence-informed supportive therapies and lifestyle interventions.

Interdisciplinary Care

Collaborative care involving multiple healthcare disciplines working together.

M

Medical Trauma

Emotional or psychological distress associated with medical procedures, diagnoses, or treatment experiences.

Metastasis

The spread of cancer from one part of the body to another.

Moral Distress

The psychological, emotional, and sometimes physical suffering that occurs when an individual recognizes the ethically appropriate action to take but feels constrained from acting on it due to internal or external barriers.

Motivational Interviewing

A communication approach used to strengthen motivation and commitment to change.

Mourning

The outward, observable expression of grief—the ways individuals and communities respond to and process loss through behaviors, rituals, and social or cultural practices.

N

Navigation

Support provided to help patients move through healthcare systems, appointments, treatments, and resources.

Neurocognitive Effects

Changes in memory, attention, processing speed, or executive function related to cancer or

treatment.

O

Oncology

The branch of medicine focused on the prevention, diagnosis, and treatment of cancer.

Outcome Measures

Tools used to assess changes in health, functioning, quality of life, or behavior.

P

Palliative Care

Specialized care focused on improving quality of life and relieving symptoms, stress, and suffering at any stage of illness.

Patient Activation

A patient's knowledge, confidence, and willingness to manage their health and healthcare.

Patient-Centered Care

Care that respects and responds to individual patient preferences, needs, and values.

Previvor

A person who has not been diagnosed with cancer but has an increased hereditary or genetic risk of developing cancer.

Psycho-Oncology

The study and support of the psychological, behavioral, emotional, and social aspects of cancer.

Q

Quality of Life

A multidimensional concept including physical, emotional, social, spiritual, and functional well-being.

R

Radiation Therapy

Treatment using high-energy radiation to destroy cancer cells.

Resilience



The ability to adapt and recover during adversity or stress.

S

Scanxiety

An informal term used to describe the anxiety, fear, distress, or emotional tension that individuals may experience before, during, or after medical scans and diagnostic testing related to cancer.

Scope of Practice

The professional boundaries defining what a coach is trained and authorized to do.

Self-Management

A patient's ability to manage symptoms, treatment, lifestyle changes, and emotional impacts of illness.

Shared Decision-Making

A collaborative process in which patients and healthcare professionals make healthcare decisions together.

Staging

The extent or spread of cancer within the body, typically described as stages 0 - IV..

Survivorship Care Plan

A document outlining follow-up care, monitoring, and supportive recommendations after cancer treatment.

T

Targeted Therapy

Cancer treatment designed to specifically attack certain cancer-related genes or proteins.

Therapeutic Alliance

The collaborative and trusting relationship between coach and client.

Treatment Adherence

The extent to which a patient follows prescribed treatment recommendations.



V

Values-Based Coaching

A coaching approach that aligns goals and behavior changes with a client's core values and priorities.

W

Whole Person Health

An approach recognizing the interconnected physical, emotional, cognitive, behavioral, social, and spiritual dimensions of health.





The Academy for Behavior Change is dedicated to advancing the science, practice, and impact of behavior change in health, wellness, and clinical care. Rooted in the belief that people are whole and capable of change, we bring evidence, equity, and humanity together to shape a new standard for how change is understood and supported.

Through research, training, and professional development, we equip leaders and practitioners with the tools to foster lasting transformation. Our work is about more than skills — it's about reimagining healthcare and wellbeing through partnership, possibility, and shared humanity.

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