

Towards a Psychology of Coaching

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Abstract

The use of an executive or life coach in order to enhance one's work performance or life experience is increasing in popularity. However, there is little empirical research attesting to the effectiveness of executive or life coaching, and there have been few attempts to outline a psychology of coaching. This paper reviews the empirical and theoretical psychological literature on executive and life coaching and, drawing on previous clinical and counselling psychology details a solution-focused, cognitive-behavioural framework for a psychology of coaching. The review finds that there is some measure of empirical support for the effectiveness of coaching, but coaching research is still in its infancy. A number of directions for future research are outlined which may further the establishment of the emerging discipline of coaching psychology.

Introduction

The aim of executive or life coaching is sustained cognitive, emotional and behavioural changes which facilitates goal attainment and performance enhancement, either in one's work or in one's personal life (Douglas & McCauley, 1999). Although worldwide there has been considerable media interest in coaching (Garman, Whiston, & Zlatoper, 2000), there is very little empirical research validating the efficacy of executive and life coaching (Kilburg, 1996), and to date there has been very little work on detailing a theoretical framework (Brotman, Liberi, & Wasylyshyn, 1998). Despite the lack of validated support for coaching it is clear that the idea of employing a coach for group or individual performance enhancement is highly attractive to many individuals and organisations (Dutton, 1997).

The coaching profession is unregulated in many countries including the US, the UK and in Australia. Unregulated coach training schools, whose syllabi tend not to be explicitly grounded in psychological science, have been in operation at least since the founding of CoachU in 1992. Many practicing coaches do not have psychological training, and psychologists are infrequently recognised as uniquely competent practitioners (Garman et al., 2000). Yet psychology is uniquely placed to make a significant contribution in this area, in terms of establishing a theoretical grounding and conducting empirical research, in addition to coaching practice and training.

The notion of using validated psychological principles to enhance life experience and work performance in normal, non-clinical populations goes back at least to Parkes (1955). Yet despite calls for the development of a specialised systemised body of psychological theory and practice (e.g., Sperry, 1993) to date there has been little movement towards the establishment of a specialised *coaching psychology*.

The focus of this paper is on coaching for enhanced performance in work and personal life domains with normal, non-clinical adult populations. This paper presents a review of the academic literature, outlines a proposed model of coaching that is grounded in established cognitive-behavioural therapy (CBT), and solution-focused theory and practice (SF), and argues that such an approach can form the basis for a psychology of coaching. A number of directions for future research are outlined.

Existing Definitions of Coaching

Definitions of the coaching process vary considerably in their degree of clarity and succinctness, and also the extent to which they emphasise teaching or direct instruction as opposed to the facilitation of self-directed learning. Emphasising an instructional approach, Parsloe (1995, p. 18) proposes that coaching is “directly concerned with the immediate improvement of performance and development of skills by a form of tutoring or instruction.” Also emphasising instruction Druckman and Bjork (1991, p. 61) propose that

“coaching consists of observing students and offering hints, feedback, reminders, new tasks, or redirecting a student’s attention to a salient feature – all with the goal of making the student’s performance approximate the expert’s performance as closely as possible.”

In contrast to the emphasis on imparting information through tutoring or instruction seen in Parsloe (1995), and Druckman and Bjork's (1991) approach, Whitmore (1992, p. 8) proposes that “coaching is unlocking a person’s potential to maximise their own performance. It is helping them to learn rather than teaching them.”

The theme of facilitation rather than instruction is echoed by Hudson (1999) who defines the process of coaching as occurring when “a coach helps a client see options for becoming a more effective human being” (p. xix). Hudson (1999, p. 6) proposes that

“a coach is a person who facilitates experiential learning that results in future-oriented abilities ... (a coach) refers to a person who is a trusted role model, adviser, wise person, friend, mensch, steward or guide – a person who works with emerging human and organisational forces to tap new energy and purpose, to shape new vision and plans and to generate desired results. A coach is someone trained and devoted to guiding others into increased competence, commitment and confidence.”

Focusing on executive coaching Kilburg (2000, p. 65) proposes that

“executive coaching is defined as a helping relationship formed between a client who has managerial authority and responsibility in an organisation and a consultant who uses a wide variety of behavioral techniques and methods to assist the client to achieve a mutually identified set of goals to improve his or her professional performance and personal satisfaction and consequently to improve the effectiveness of the client’s organisation within a formally defined coaching agreement.”

Although all the above definitions have merit, they fail to succinctly define a psychology of coaching. By focusing on executive coaching, Kilburg (2000) excludes personal and life coaching and workplace coaching with non-executive staff. Hudson’s (1999) definition confounds coaching with a wide number of other roles, and Parsloe (1995) and Druckman and Bjork (1991), by emphasising the instructional aspect of coaching preclude the facilitation of self-directed learning. Whitmore’s (1992) definition construes the coach a learning facilitator but says little about the nature of the coaching process.

Before presenting a proposed definition it would be useful to outline some of the salient features of coaching which differentiate coaching from therapy, mentoring and training.

Coaching Compared with Therapy

Although coaching is clearly therapeutic in that its aim is to enhance an individual’s performance, or life experience, there are significant differences between coaching and psychotherapy. Of course, as there are a large number of different schools of psychotherapeutic thought, caution should be exercised when making generalisations about therapeutic practice. For example, psychoanalytical therapy is concerned with the dynamics and unconscious processes underlying psychological dysfunction, and is typically long-term in duration. In contrast, brief solution focused therapy is short term, construes the client as

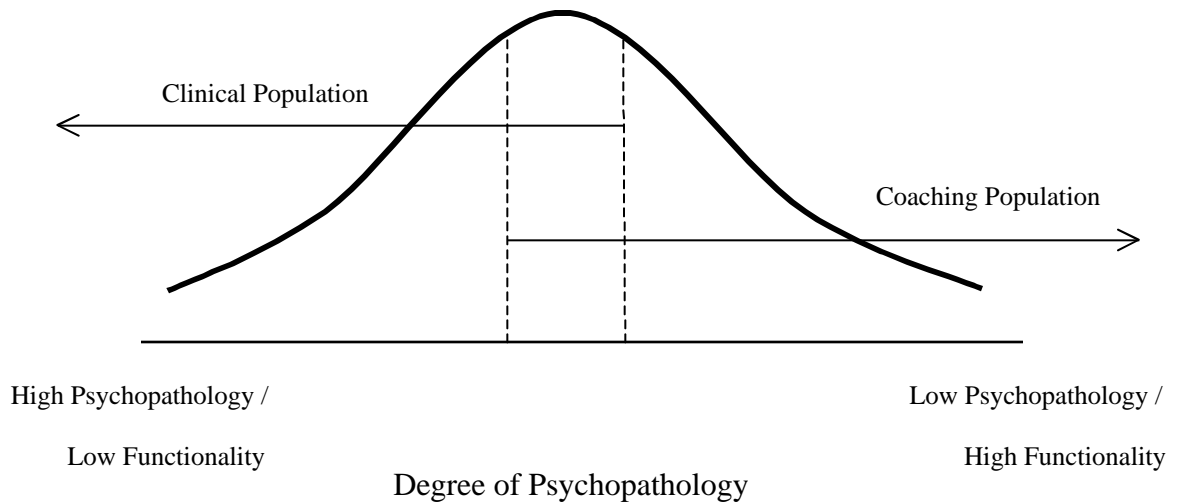
being able and functional, is focused on the present and the future not the past, and rather dissect or analyse the problem, focuses on constructing and implementing solutions.

Nevertheless, regardless of differences in techniques and philosophies between psychotherapeutic schools, clinical psychotherapy per se is primarily remedial and concerned with repairing or curing dysfunctionality. Many schools of psychotherapy are based on a diagnostic medical model wherein the client is conceptualised as being ill or sick, and the therapist is seen as being the expert with a high degree of domain-specific knowledge who cures or treats the unwell. Many psychotherapeutic approaches are concerned with healing old emotional pain.

As regards psychopathology and dysfunction, coaching is about enhancing performance or one's life experience rather than treating dysfunction. However, some coaching clients may well present for coaching due to perceived deficits in performance. A common scenario would be the over-controlling manager who wishes to enhance their leadership skills. Although these individuals are performing sub-optimally and in this sense are 'dysfunctional', such individuals do not display the highly dysfunctional, clinically-significant problem behaviours associated with, for example, the acute social phobic or the obsessive-compulsive clinical patient. Thus, one critical difference between therapy and coaching is that, in terms of psychopathology, these client populations are very different. There may well be some overlap in these populations, but this overlap would occur in the central range of the distribution curve (Figure 2.1).

This factor has important ramifications for differentiating coaching practice from clinical practice. For example, with clinical clients the therapist need always to be aware that they are working with an individual who may do themselves (or others) harm – for example the depressed client may attempt suicide, or the over-aggressive client may harm others. With coaching clients this is much less of an issue. This difference means that the coach can be far more robust and challenging (albeit in a client-friendly manner) than the therapist, and can hold the client accountable to their commitment to change to a greater degree than the therapist can with his or her clients or patients.

Figure 1.1. Clinical and coaching client populations and degrees of psychopathology



Coaching Compared With Mentoring

Over time there has been considerable research into mentoring, including issues of gender (Ragins, 1989; Ragins & Cotton, 1999), ethnicity (Koberg, Boss, & Goodman, 1998) and age (Rogers & Taylor, 1997). There have also been evaluations of the effectiveness of mentoring in corporations (Clutterbuck & Megginson, 1999) and in Government organisations (Haskell, 1999). However, as Zeus and Skiffington (2000) note, the findings from mentoring research may not directly map onto coaching practice and may not reliably inform a psychology of coaching. This is because there are some important differences between coaching and mentoring.

Although in organisational settings the dynamics have changed somewhat in recent times, traditionally mentoring has been a hierarchical relationship in which a wise senior passed on his or her domain-specific knowledge to a grateful junior. The key issue in comparing coaching to mentoring is that mentoring traditionally involves an individual with expert knowledge in a specific domain passing on this knowledge to an individual with less expertise. This transfer of knowledge can be accomplished in a number of ways – the

relationship between mentor and mentored may be authoritarian or egalitarian, systematic and structured, or ad hoc. In contrast, coaching is a process in which the coach *facilitates* learning in the coachee. The coach need not be an expert in the coachee's area of learning. The coach need only have expertise in facilitating learning and performance enhancement.

Of course many coaches have great expertise in specific areas and use this expertise to advance their coachee's learning. Many mentors may have good coaching skills and many mentoring relationships undoubtedly involve high levels of nurturance, but mentoring per se does not require coaching skills. Indeed, it has been argued that to make mentoring a truly effective practice its implicit coaching element must be brought to the surface through explicit training in coaching skills (Darwin, 2000).

Coaching Compared with Training

The primary goal of any training program is to prepare trainees to perform effectively on a specific post-training task (Druckman & Bjork, 1991). Training agendas are predetermined by the trainer, are normally not very flexible and are designed to impart specific competencies to the trainee. In general the trainee must adapt themselves to the process and structure of training. Training is thus a more rigid, externally determined process than coaching. In coaching practice it is the coachee who sets the agenda and determines the goals to be achieved. Again, some trainers may have excellent coaching skills, and a coach may well act as a trainer.

There are many situations where training does not result in enhanced performance following satisfactory completion of the training program (Schmidt & Bjork, 1992). One issue in this lack of transfer of training is that in general training programs do not explicitly impart metacognitive skills to trainees (Hesketh, 1997). Yet metacognitive skills – the ability to think about one's thoughts, feelings and behaviours – are essential factors in mastering new skills (Carver & Scheier, 1998), and it has been argued that relapse prevention training and training in functional self-talk should facilitate transfer of learning (Latham & Sejts, 1997).

As the fostering of such metacognitive skills is central to the coaching process, it may be that coaching may prove to be a useful adjunct or replacement for some training programs. Indeed Olivero, Bane, and Kopelman (1997) found that training followed by one-

to-one coaching significantly increased productivity compared to training alone. Although a valuable addition to the research base on coaching, training and performance enhancement, the Olivero et al. (1997) study did not investigate the skills or metacognitive processes associated with the coaching-related intervention. Future research should further investigate the utility of coaching as an adjunct to training, and seek to detail the interpersonal and intrapersonal factors related to enhanced performance.

Defining Coaching

In thus distinguishing coaching from therapy, mentoring and training, it is clear that coaching is not about remediating dysfunctionality. It is not about *telling* people what to do and it is not necessarily concerned with domain-specific expertise.

Underpinning the coaching process are the principles guiding effective adult learning. These include the recognition that adult learners are autonomous, have a foundation of life experiences and knowledge from which they are able to generalise, have a readiness to learn and engage in reflective practice, and the notion that adult learners wish to be treated with respect (Dailey, 1984; Knowles, 1970).

With these concepts in mind in this thesis it is proposed that life or personal coaching can be defined as follows:

Personal or life coaching is a solution-focused, results-orientated systematic process in which the coach facilitates the enhancement of the coachee's life experience and performance in various domains (as determined by the coachee), and fosters the self-directed learning and personal growth of the coachee.

Similarly, coaching in the workplace, whether for executives or non-executives can be defined as follows:

Workplace coaching is a solution-focused, result-orientated systematic process in which the coach facilitates the enhancement of work performance and the self-directed learning and personal growth of the coachee.

In summary, the core constructs of coaching include: a collaborative, egalitarian rather than authoritarian relationship between coach and coachee; a focus on constructing solutions not analysing problems; the assumption that clients are capable and not dysfunctional; an emphasis on collaborative goal setting between the coach and coachee; and the recognition that although the coach has expertise in facilitating learning through coaching, they do not necessarily need domain-specific expertise in the coachee's chosen area of learning. Further, to expedite goal attainment the coaching process should be a systematic goal-directed process, and to facilitate sustained change it should be directed at fostering the on-going self-directed learning and personal growth of the coachee.

Literature Review

The literature search excluded mentoring and peer coaching and sought to identify only those academic papers which made specific reference to coaching and where the individuals who were the coach had received explicit training in coaching skills. The search was restricted to academic peer-reviewed psychological journals, purposefully excluding professional and trade journals and newsletters.

Whilst there is a significant body of literature on mentoring, training and clinical and counselling psychology, an overview of the literature on executive or life coaching indicates that there is not yet a coherent body of knowledge underpinning a coaching psychology although the roots of such a discipline are clearly evident and of long standing.

In organisational settings Glaser (1958) reported on the use of psychological consultations as a means of enhancing executive performance, and there has been sustained interest in using psychology in work-related coaching to the present day (e.g., Acklin & Wixom, 1984; Conway, 2000; Frohman & Kotter, 1977; Gorby, 1937; Hillman, Schwandt, & Bartz, 1990; Peterson, 1996). Filippi (1968) and Ponzio (1977) noted the need for the counsellor to act as a life-skills coach, and Thompson (1980) predicted that by the year 2000 psychologists would have increased their emphasis on life quality enhancement as opposed to remedial therapy.

A review of the academic literature on coaching and psychology is somewhat hampered by the varied meanings given to the term “coaching”. A search of the databases PsychInfo and PsychLit between 1872 and 2001 using the terms “coaching” or “coach” found a total of 1435 citations.

Preliminary analysis of this data indicated that coaching has been used with a wide range of populations and issues since its first mention, in reference to workplace performance coaching to reduce wastage, in 1937 (Gorby, 1937). The terms coach and coaching have been used in the literature to refer to coaching individuals to fake malingering on psychological tests (Suhr & Gunstad, 2000), peer coaching in educational settings (Scarnati, Kent, & MacKenzie, 1993), cognitive training for learning difficulties and disabilities (Dalton, Morocco, Tivnan, & Mead, 1997), resolving relationship difficulties (Jacobson, 1977), coping with infertility (Scharf & Weinschel, 2000), premature ejaculation (Maurer, Solamon, & Troxtel, 1998), career coaching (Scandura, 1992), job coaching to help disadvantaged individuals gain and retain employment (Davis, Bates, & Cuvo, 1983), improving performance in interviews (Maurer et al., 1998), executive coaching (Tobias, 1996) and sales performance (Rich, 1998).

Excluding the keywords “sports”, “sport” “athlete” and “athletes” from the search reduced the number of citations to 1039. Of these 108 were related to performance enhancement coaching in work or personal life areas with normal, rather than clinical populations.

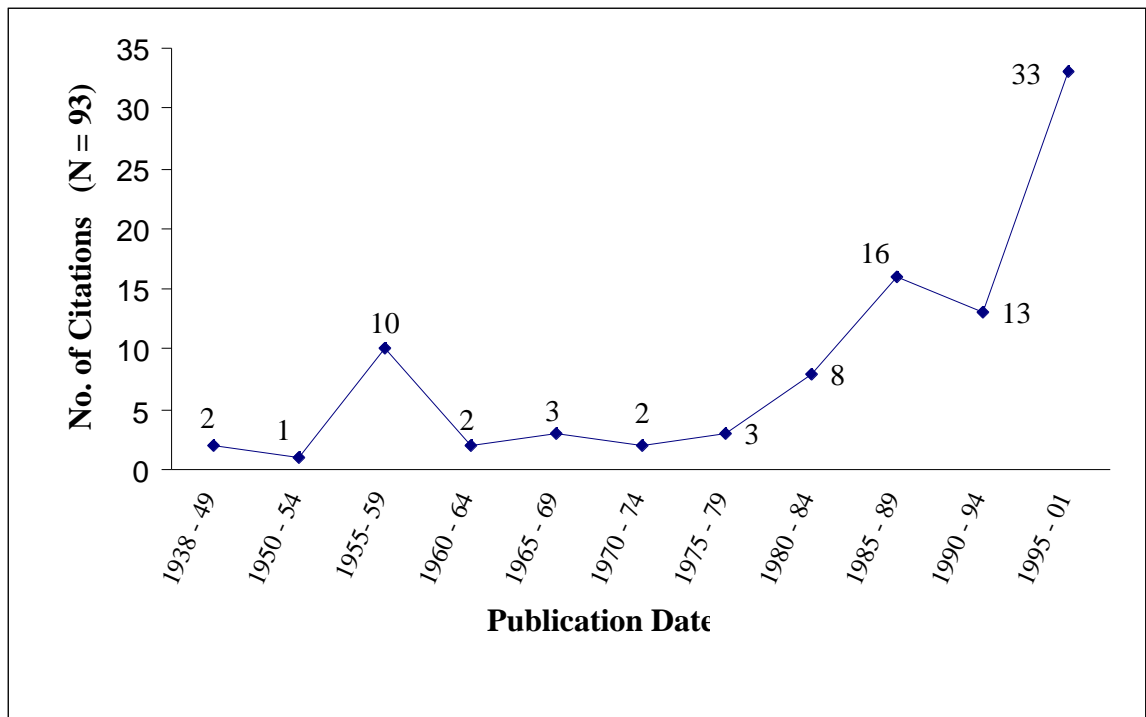
Because this paper is also concerned with personal or life coaching, a separate search of the PsychInfo data base using the keywords “life coach” and “personal coaching” was conducted. This produced only 2 citations of relevance (Risley, 1996; Wilkins, 2000). A search was also run using the keywords “life coach” and “life skills”, and excluding psychiatric patients, adolescents, children and youth. This found a total of 230 citations. As combining “life skills” with “coach” found only 1 citation (Ponzo, 1977) the 230 citations were individually examined to see whether they had relevance for a coaching literature review.

The vast majority of these citations were concerned with disadvantaged or psychiatric populations (Hobbs et al., 2000), drug addiction rehabilitation (Morgan, 1994), ethnic minorities (Howe, 1999), or children and students (Meyer, 1999). Excluding these

categories resulted in 19 citations of interest. Combining all search results and excluding duplicated citations resulted in a total of 126 citations. A further, more detailed examination reduced this to a total of 93 citations related to coaching normal populations for enhanced performance. Of these 93, 25 were PhD or Masters dissertations.

Figure 2.3 illustrates the distribution of these 93 studies over time, and shows a substantial increase in coaching-related citations from the beginnings of the 1980's to the present day, with an earlier peak during the period 1955 - 59.

Figure 1.2. Publication of psychological academic literature on coaching 1938 - 2001



Empirical Research and Coaching Psychology

Of the above 93 citations in the psychological academic press, there are only 17 published reports of empirical evaluations of coaching interventions with normal populations. There are 10 case studies and seven reports of group-based coaching interventions. The other 77 include 25 PhD or Masters dissertations and 52 general articles or papers describing models or techniques of coaching. The following review focuses on

published case and group-based studies in the psychological literature which investigated the effect of coaching on the enhancement of performance. The review presents the studies in chronological order.

Published case studies

In an early case study presentation Mold (1951) reported on a manager-as-coach training program in which priority was placed on enhancing the manager's interpersonal skills. The program focused on establishing a coaching culture in which each manager was coached by their superior and encouraged to explore and accept their own personal fears and aggressions – an early example of the use of emotional competencies (Goleman, 1998) in the workplace.

Glaser (1958) reported two case studies of psychological coaching with executives. In the first the psychologist acted as a coach to the president of a large manufacturing company, facilitating the president's development of insight into his own personal attitudes, values and behaviour patterns. There was a specific focus on enhancing leadership behaviours. The coaching process was then extended to include the key senior executives. As would be familiar to contemporary executive coaches, this 1958 program was directed at developing better understandings of self and others, forming new ideas about reducing inter- and intra-personal tension whilst maintaining productivity and aimed to find ways to “encourage a continued esprit de corps, high productivity and creativity, while the company continued to expand” (p. 487). Although Glaser (1958) bemoaned the lack of scientifically-validated measurements to assess the effectiveness of the coaching intervention, there was a reported general agreement that the coaching led to improved interpersonal understanding, reappraisal of personal and company goals which led to enhanced performance, and increased acceptance to accept constructive criticism, and a lessening of recruitment problems.

The second case study reported by Glaser (1958) involved a psychologist originally called in to evaluate the company's salesperson training director. Following suggestions from the psychologist, the brief was extended to foster the establishment of a more egalitarian workplace culture, in which sales staff received ongoing support and peer

coaching and through structured team building sessions. This program met its objectives of reduced staff turnover, higher sales and greater team motivation.

No coaching case studies that fell within this paper's criteria could be found between 1958 and 1994.

Strayer and Rossett (1994) reported on the design, implementation and evaluation of an in-house coaching program for Century 21® real estate salespersons. Concerned with the poor sales performance and high attrition rate of new sales staff Century 21® management originally decided to expand their existing training program. However, a needs analysis and staff consultation indicated a need for ongoing sales coaching rather than more training *per se*. The needs assessment found a considerable gap between the established brokers' and the new salespersons' perceptions of the post-induction training support. Established brokers saw the existing post-training system as being highly supportive whereas the new sales staff experienced an acute lack of support and felt discouraged and unable to deal with rejection from clients.

Explicitly drawing on cognitive theory, the coaching program sought to foster meta-cognitive skills in the coachee with the aim of assuring transfer of skills from the training and coaching environment to the actual sales situation. The program targeted both behavioural skills (lead generation, basic communication and selling skills) and cognitive skills (dealing with fears, rejection, developing an optimistic outlook). The coach worked with the coachee for a total of 20 one-hour coaching sessions, with each structured session concluding with the setting of between-sessions assignments. Coaches were carefully selected and trained, and were financially rewarded for their time either through a flat fee or with a percentage of the coachee's initial sales.

An evaluation of the program found considerable benefits in terms of increased property listings, sales and staff satisfaction. The time for a new sales associate to get their first property listing fell to an average of 3.53 weeks, less than half the industry average of 10 weeks. This translated into a first month's gross commission of \$2,430 compared with an average of \$871 for those who did not participate in the coaching program.

Tobias (1996) discussed a case study of a technically excellent, highly efficient 44 year old male manager whose strengths lay in attention to detail, delivering projects on time and within budget. However, this manager was perceived as being over-controlling, lacking

in empathy and self-awareness and with little appreciation for creativity. The coaching process focused on enhancing the coachee's inter and intra-personal skills through psychological assessment and feedback. Specific coaching strategies included behavioural skills rehearsal (basic communication skills such as open questioning), personal and leadership skills such as greater staff consultation, becoming more open and expressive, and clear communication to the staff regarding the coachee's commitment to change.

As regards outcome, only qualitative data are presented: After one year of coaching the coachee was perceived by others in the workplace as having made substantial improvements in terms of managerial style. This was evidenced by perceived enhanced team performance and less interpersonal conflict.

Although detailing process and content, Peterson's (1996) case study of a female executive being coached by a consultant psychologist for enhanced leadership skills also presents only qualitative outcome data. In this case, following a 360 degree assessment the coaching process focused on development of the manager's values, vision and cognitive skills, in addition to behavioral rehearsal designed to increase competencies in specific situations such as meetings and staff interactions. Following four one-half day coaching sessions (approximately 16 hours of coaching), a formal review six months into the coaching process found little visible change in the coachee's performance. Coaching was thus re-directed with the aim of making behavioural change more explicit. Following this re-direction the coachee's annual performance evaluation was highly complementary about her managerial style, levels of proactivity and development of new business. The coachee reported benefits such as increased confidence, being more strategic and proactive and being more comfortable with conflict.

Diedrich (1996) presents a case study of a technically outstanding male manager in his mid-40's who had poor interpersonal and team-building skills. The coachee was perceived as being inflexible, unreasonably perfectionist and overly task-focused. Starting with a 360-degree evaluation the behaviourally-orientated coaching centred on enhancing eight competencies; interpersonal sensitivity, concern for personal impact, relationship building, use of influencing strategies, directing versus developing others, group management and self-control. In a qualitative assessment Diedrich (1996) reports that eight months into the coaching relationship the coachee had been able to be less controlling, and

now rewarded and developed others as opposed to just directing them, and although still highly competitive was now able to manage his reactions displaying less aggression and hostility.

Drawing on a systems perspective Kiel, Rimmer, Williams, and Doyle (1996) report on a 40 year old male 'star performer' who was described as being intimidating, needlessly competitive and with "immense interpersonal problems" (p. 73). The Kiel et al. (1996) case study is distinguished from the previous studies in that the authors detail both work-related and family of origin issues, and this broad assessment perspective forms the basis for their coaching intervention.

The two-year long coaching process began with a two day presentation in which the coachee is presented with the results of a comprehensive assessment based on interviews with colleagues, peers, family and friends. The interview data were read verbatim but anonymously to the coachee. Although not made explicit in the study the coachee clearly found this to be a confronting experience. Kiel et al. (1996) report that this approach to coaching facilitates a rapid shift in the coachee's self-perception, and this breakthrough allows a strong coaching relationship to be quickly established. The coaching process focused on helping the coachee develop a clear vision and developmental goals, and then enacting these in conjunction with work colleagues and family support. Coaching strategies were predominantly cognitive-behavioural and included journal keeping, self-monitoring, self-evaluation and reframing. A qualitative evaluation indicated that the coachee's colleagues observed substantial changes very quickly. The coachee reported substantially enhanced insight and self-awareness in addition to behavioural change.

From a psychodynamic perspective, Kilburg (1996) presents a case study of "several months duration" (p.282) with a female computer programmer who had high technical skills but poor inter and intra-personal skills. This coachee had a history of conflict with peers, subordinates and clients. Kilburg (1996) describes a psychodynamically-orientated coaching process in which the coach encouraged the coachee to explore unconscious influences and patterns of behaviour. For example, one coaching session explored the meaning underlying a typo in an email sent by the coachee to her boss. The typo was a misspelling of the word 'morale', spelt in the email as 'moral'. The coach interpreted this typo as meaning that the coachee believed that her boss was behaving immorally with regard to resource allocation –

a major source of conflict. Despite the implantation of some behavioural changes and improvements in interpersonal relationships the coachee's employment was terminated. However, despite losing her job the coachee reported feeling optimistic and intended to continue to work on improving her inter- and intra-personal skills.

Adapting multimodal therapy (Lazarus, 1976) for use in the coaching context, Richard (1999) presents a case study involving a senior female executive. The consultant psychologist-coach worked with the coachee, assessing problems and presenting behavioral and cognitive solutions in the six modalities of behaviour, affect, sensation, imagery, cognitions, interpersonal and biological domains. Over a ten month period the coachee reported greater productivity, increased ability to handle stress and conflict at work, and enhanced satisfaction in personal areas of life.

Foster and Lendl (1996) reported four case studies using eye movement desensitisation and reprocessing (EMDR) (Shapiro, 1989). Originally and primarily used to treat post-traumatic stress disorder and other psychopathologies, EMDR is a new, and somewhat controversial, psychological procedure (Lipke, 1997; Rosen, 1997; Welch, 1996). Delineated as probably efficacious (Spector & Read, 1999) EMDR integrates established cognitive restructuring procedures with induced specific eye moments. It is hypothesised that the side-to-side eye movements central to EMDR facilitate information processing, and this leads to rapid cognitive and affective change.

The procedure outlined by Foster and Lendl (1996) involved essentially four steps: the initial expression of existing negative cognitions, affect and images; the choice of new preferred and positive cognitions feelings and images; the induction of side to side eye movements; and finally, the mental rehearsal of the desired outcome.

The four presented studies were cases of underperformance due to anxiety, stress or depression. The first was the case of a male chief executive officer who was depressed after losing his job four years prior to coaching. He was troubled by intrusive thoughts, self-doubt and nightmares. The second case was a female university professor with acute performance anxiety who wished to work outside of academia. Her anxiety about talking at an interview prevented her from applying for jobs. The third case involved a male airline pilot who experienced acute anxiety during his obligatory proficiency test in an aircraft simulator. The anxiety was in part due to two years of personal difficulties which included separation from

his wife and a child who was regularly using drugs. The fourth case involved a female office manager who had been traumatised by a work accident that left her in physical pain, anxiety and with severely reduced confidence.

Foster and Lendl (1996) report successful outcomes and improved performance for all four cases. However, it is not entirely clear that these cases can be truly be delineated as 'coaching' in that the cases were all were clinical in terms of levels of anxiety, depression or inter-personal difficulties, and the observed performance enhancement was essentially a return to previous performance levels.

Published group-based studies

Bridgman, Spaethe, Driscoll, and Fanning (1958) reported the development of coaching program for salespersons. Using a grounded theory approach (Glaser & Strauss, 1967), Bridgman et al. (1958) enlisted 46 sales managers in the collection of qualitative data about sales interactions with customers. The 500 responses were sorted into categories. From this information, generic scenarios giving exemplars of desired sales behaviours (e.g., how to prepare for a sales call) were used as templates for coaching by sales managers. No objective outcome data was presented, although an informal analysis indicated that the program was successful in enhancing sales training and sales performance.

Comparing verbal coaching with self-observation via video recording, Haines and Eachus (1965) examined US military advisors who were learning cross-cultural skills. They found that verbal coaching improved performance, but was not as effective as direct self-observation. Given that self-observation is a more direct form of feedback than that derived from verbal coaching by another, this finding can be understood as supporting the hypothesis that improvement in performance is related to the clarity and precision of performance feedback (Hillman et al., 1990; Locke, 1996). Unfortunately this study did not examine the effects of both verbal coaching and self-observation combined, a condition one would predict to have greater impact than either condition alone.

The next experimental group-based study reported in the academic literature was presented by Graham, Wedman, and Garvin-Kester (1993). It is unclear why there was such lack of interest in publishing coaching research between 1965 and 1993. Graham et al. (1993) reported an evaluation of a coaching skills program for 13 sales managers with a total

of 87 account representatives. The object of the program was to enhance sales managers' coaching skills. The program consisted of a five-day training in the coaching skills delineated by Schelling (1991), in addition to training in how to implement a sales coaching program. Sales managers were provided with behavioural checklists to guide them with their sales coaching.

Significant increases were found in five key coaching skills; setting performance expectations; providing feedback; providing relevant information; observing the coachee's performance with clients; and rewarding performance. Seventy percent of coachees reported that they had seen a positive change in their managers. Managers with eight or fewer account representatives benefited more from the program. Graham (1993) suggested that this finding indicated that coaching is a complex interaction between manager behaviours, available time and manager/employee relationships. No objective measure of sales performance was reported.

Graham, Wedman, and Garvin-Kester (1994) reanalysed the data presented in Graham et al. (1993), asking the question 'what makes a good coach?' Graham et al. (1994) concluded that the more insightful, genuine and specific in feedback-giving managers were, the more effective they were as coaches. Good coaches were found to be good communicators, set clear goals, were able to see the big picture, gave useful advice and had good people skills. Graham et al. (1994) make the salient point that although coaching can improve performance, often managers have little idea of what constitutes good coaching, and that even with a clear understanding of the key coaching behaviours, good coaching is hard to perform.

Investigating the impact of a program which sought to train school counsellors as coaches, Veenman, de Jonghe, and van Wezel (1996) found no significant difference in pre/post coachee's evaluations of the coaches' coaching skills. The coaching program was intended to provide the coachees, who were teachers, with feedback on their own functioning, and in doing so stimulate self-reflection and self-analysis in order to improve the coachees' instructional effectiveness.

The self-regulatory cycle associated with enhanced performance requires that individuals monitor, evaluate and adjust their performance in order to better reach their goals (Carver & Scheier, 1998). As not all individuals have the ability to self-generate

performance enhancing strategies (Latham & Locke, 1991; VandeWalle, Brown, Cron, & Slocum, 1999) the failure of this training program may well be related to the fact that coaches gave no explicit performance enhancing instructions. Indeed this program stands in contrast to Graham et al. (1993) who emphasised a more proactive feedback and advice-giving coaching style.

Investigating the effect of one-to-one post-training coaching on the transfer of training, Olivero et al. (1997) found that executive coaching increased performance by 88% compared with an increase of 22.4% for training alone. In this study 31 managers in a public health agency participated in a three day training course designed to teach key managerial skills. Eight of these managers were selected to be trained as executive coaches and these eight provided one-to-one executive coaching to the remaining 23 participants over an eight-week period. Coaching sessions were one hour weekly and the coaching program involved a public presentation. Productivity was measured objectively and was based on work tasks completed fully and on time. Olivero et al. (1997) argue that the coaching program facilitated the transfer of the training information to actual workplace practice and suggests that the goal setting and the public presentation were critical factors in the programs success. To this author's knowledge this is the first study to investigate the differential effects of coaching and training. Given the oft-cited lack of transfer from training to workplace (Hesketh, 1997) future research would do well to uncover the relevant cognitive and behavioural factors associated with enhanced performance following coaching.

Noting the limitations of coaching in a study which drew on the experiences of 43 team leaders, Wageman (1997) found that the design of a self-managed team, in terms of clear engaging direction; task interdependence; authority to manage own work; goals; skill and demographic diversity of team members; team size; stability of team membership over time; training and basic recourses, were more important than managerial coaching. However, good coaching was found to have a more powerful effect on well-designed teams than poorly designed teams. Conversely, poor coaching had a greater detrimental effect on poorly designed teams but little impact on well designed teams. The Wageman (1997) study effectively highlights that coaching is no panacea, and that good coaching works most effectively when it is part of a broader strategic or cultural initiative.

Summary of Empirical Research

Overall the literature indicates some measure of empirical support for the efficacy of coaching for enhanced performance, but it is clear from this review of the academic literature that empirical research into the effectiveness of coaching is at a formative stage.

Agars and Berkowitz's (1980) model of the development of clinical research and practice delineates a series of stages in the development of psychological procedures and models. The first stage involves the assessment of the current status of interventions within a specific population, and the development of new approaches by creative practitioners. Once an approach appears to have some measure of efficacy, the next stage normally involves case studies followed by short-term group outcome studies and eventually, randomised, controlled comparative group-based clinical trials.

Given the above review, in which the majority of empirical research is of the case study type, it would appear a coaching psychology is still very much in its infancy, and has yet to progress to the later stages of empirical evaluation. Future research may do well to focus on the evaluation of coaching by following established clinical research methodologies, including random assignment to treatment and control groups, and group-based research as opposed to single case studies.

Many of the studies reviewed employed predominantly qualitative evaluations. Qualitative evaluations are useful in that they can provide depth and breadth of insight. However, quantitative evaluations can provide a more objective evaluation in terms of the impact of coaching. Such benchmarks could include increased profit and performance, and reduced staff turnover. Future research may consider an increased emphasis on quantitative evaluation and evaluation of objective outcomes as well as investigating the relative efficacy of differing approaches to coaching.

Theoretical Approaches

There have been few attempts to detail a theoretical framework for a psychology of coaching. Many of the papers which purport to present theoretical models in fact are predominantly focused on detailing strategies and techniques rather than detailing conceptual models from which techniques can be drawn (e.g., Evered & Selman, 1989; Kondrasuk, 1974). The issue here is that detailing technique alone is an inadequate means of advancing a science of psychology; advancement requires the explicit delineation and testing of theory (Chalmers, 1976).

An examination of the academic coaching literature since 1937 indicates that there are 18 citations which present or discuss models, methodologies or procedures about coaching. Kondrasuk (1974) outlined a step-by-step coaching procedure designed for job enrichment, but did not discuss the underpinning psychological principles. Evered and Selman (1989) contrasted coaching with a traditional management-by-control approach, but again failed to detail the psychological principles involved. Sperry (1993) and Witherspoon and White (1996) described the different roles played by executive coaches. Peterson (1996) and Saporito (1996) presented papers detailing coaching strategies and processes, and the character structure of executives was the focus of Sperry (1997). MacMillan's (1999) doctoral dissertation and Brotman et al. (1998) explored issues for clinicians working in organisational settings.

Ten papers have explicitly discussed the theoretical underpinnings of a coaching model rather than simply detailing methodologies or procedures. A post-modernist model of ontological coaching presented in a doctoral dissertation by Delgado (1999) describes how coachees can learn to transcend the inhibiting effects of their histories through the hermeneutics of stigmatised narratives. Krausz (1986) described the process of coaching in reference to a Transactional Analysis perspective, but did not detail how this approach could be used in coaching practice. Hillman et al. (1990) centred on the feedback and performance appraisal aspect of coaching.

Recognising that most managers who coach have little education in psychology or adult learning, Kopf and Kreuze (1991) proposed an Experiential Learning Model as a basis for coaching practice, and Popper and Lipshitz (1992) focused on the enhancement of self-efficacy and the process of giving constructive feedback.

Laske (1999) presents an integrated model of executive coaching which outlines an approach to coaching derived from constructive-developmental psychology, family therapy and theories of organisational cognition. Kiel et al.'s (1996) model is based on systems theory, emphasising that leadership effectiveness is strongly influenced by the individual's past, personal life and work environment. Although Kiel et al. (1996) and Laske's (1999) approach is more comprehensive than some of the previous work, their models are explicitly and exclusively directed at top executives, limiting their use in personal or life coaching.

Some of the most detailed theoretical work to date has been a psychodynamic model presented by Kilburg (1996, 1997). Although presenting both a comprehensive theoretical model and detailing typical goals and behavioural strategies, Kilburg's (1996, 1997) approach has two limitations which impede its adoption as a generic model or basis for coaching psychology: its grounding in psychodynamics is a barrier for psychologists working from other (e.g., cognitive and behavioural) theoretical perspectives, and its exclusive focus on executive coaching, which may preclude its use in personal or life coaching.

Richard (1999) is one of the few papers which explicitly details a cognitive and behavioural framework for executive coaching. Richard (1999) presents an adaptation of multimodal therapy (Lazarus, 1976, 1997). A multi-modal approach delimitates seven dimensions that should be to be assessed and, if necessary, modified. These are behaviour, affect, sensation (e.g., physical discomfort), imagery, cognitions, interpersonal and biological issues (e.g., drug and alcohol use). Although presenting a useful model or approach to coaching, Richard (1999) does not make explicit the underlying cognitive and behavioural mechanisms by which individuals can increase their self-regulatory abilities and better set and reach their goals. Nor does Richard (1999) discuss the process of change or present a model of change that can ground and inform coaching practice.

Hence whilst these papers are a welcome addition to the theoretical literature, more work is needed to develop a model of cognitive-behavioural coaching.

A Theoretical Framework for a Psychology of Coaching

What are the essential criteria of a coaching framework? Such criteria should include explicit delineation of:

- an empirically-validated model of change which facilitates the coaching process;
- a model of self-regulation which allows delineation of the processes inherent in self-regulation and goal setting and attainment;
- how behaviour, thoughts and feelings arise and interact; and
- how behaviour, thoughts and feelings can be altered to facilitate goal attainment.

Self-regulation and coaching

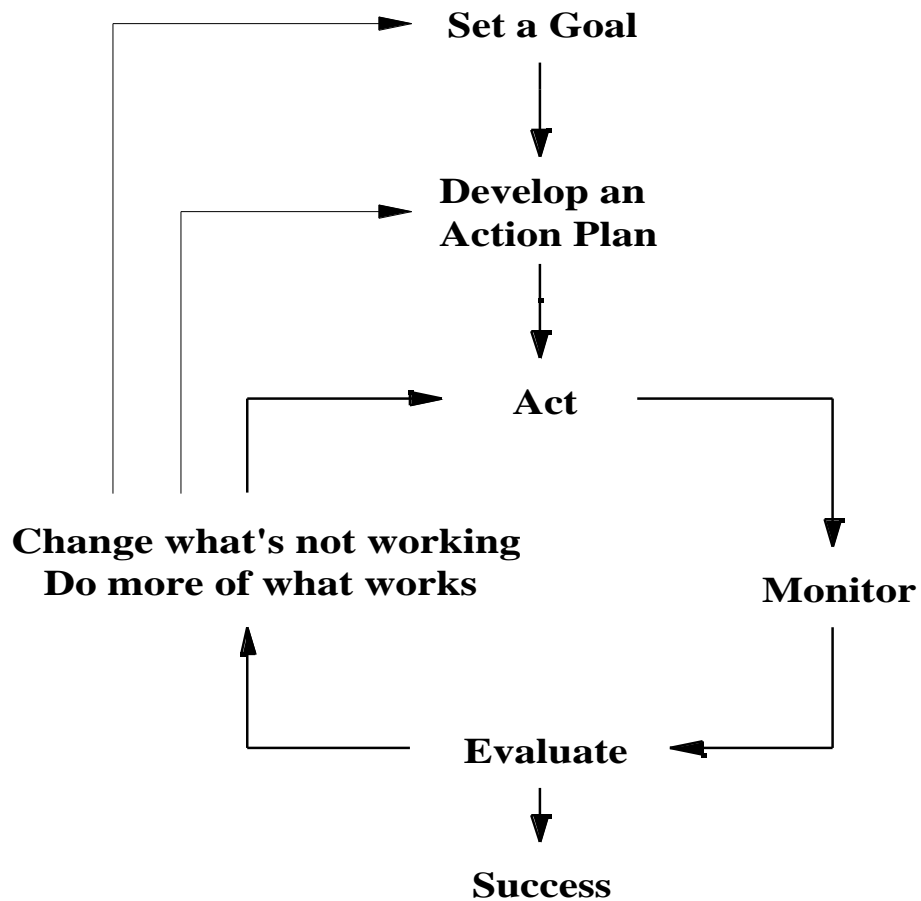
The process of coaching is essentially about helping individuals regulate and direct their interpersonal and intrapersonal resources to better attain their goals. Such self-regulation has a long and well researched history in psychology (Bandura, 1982; Collier, 1957; Fox & Spector, 2000; Rosenbaum, 1990; Thorne, 1946; VandeWalle et al., 1999) but to date there has been little explicit reference to models of self-regulation in the coaching literature.

Carver and Scheier (1998) argue that human behaviour (here behaviour is broadly defined to include cognitions, emotions and actions) is a continual process of moving towards or away from mental goal representations, and that this movement occurs by a process of feedback control.

Theoretical approaches to behavioural self-regulation through feedback date back at least to Miller, Galanter, and Pribram (1960), and have become increasingly sophisticated over time (cf. Brown, 1995). The core constructs of goal-directed self-regulation are a series of processes in which the individual sets a goal, develops a plan of action, begins action, monitors their performance, evaluates their performance by comparison to a standard, and based on this evaluation changes their actions to further enhance their performance and better reach their goals. In relation to coaching, the coach's role is to facilitate the coachee's movement through the self-regulatory cycle. Figure 2.4 depicts a generic model of self-regulation.

In practice, the steps in the self-regulatory cycle are not discrete and separate stages, rather there is significant overlap between each stage and the next. Thus, the coaching in each step should aim to facilitate the process of the next step. For example, goal setting should be done in such a way as to facilitate the implementation of an action plan; the action plan should be designed to motivate the individual into action, and should incorporate means of monitoring and evaluating performance in addition to incorporating regular follow-up coaching sessions.

Figure 1.3 Generic model of self-regulation.

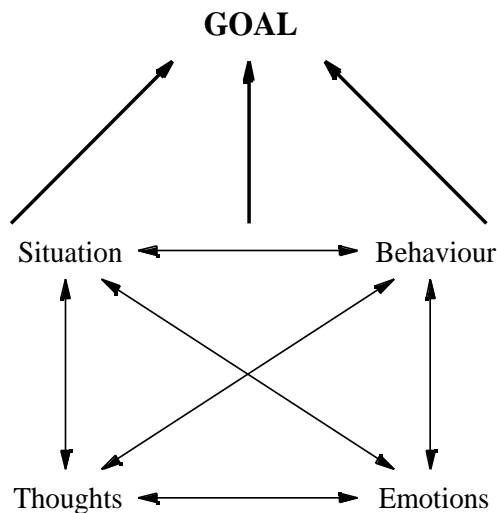


What is regulated in coaching, and how?

Human experience encompasses four dimensions – thoughts, feelings, behaviour and the situation or environment. There is a quadratic reciprocity between these four dimensions (Bandura, 1977b). For example, how we think impacts on how we feel, how we feel effects the way we behave (Beck, Rush, Shaw, & Emery, 1979; Ellis & Harper, 1961) and situations and environments can elicit specific behaviours (Skinner, 1963, 1975).

Thus, underpinning a cognitive-behavioural approach to coaching is the recognition that goal attainment is best achieved by regulating all four dimensions to facilitate goal attainment. Figure 2.5 illustrates the reciprocity between the four dimensions and their relation to goal attainment. Drawing on this conceptual foundation, cognitive-behavioural clinical and counselling psychologists have developed an extensive repertoire of techniques designed to enhance self-regulation in each of these domains.

Figure 1.4. Quadratic reciprocity between the four dimensions of human experience and goals



Burns (1989) details about 50 techniques used in CBT to enhance the self-regulation of thoughts feelings and behaviour. These include self-monitoring (in which behaviours, thoughts or feelings are observed and recorded), cognitive restructuring (the altering of unhelpful thoughts), and behavioural skills training protocols.

Self-monitoring alone, that is self-monitoring in the absence of other self-regulatory techniques, has been found to be an effective tool for behavioural change for a wide range of problem behaviours including inappropriate social behaviour (Pope & Jones, 1996), learning in young disabled students (Lalli & Shapiro, 1990), and poor time-management for small business owners (Gaetani, Johnson, & Austin, 1983). However, self-monitoring is often more effective when combined with other cognitive-behavioural strategies (Febbraro & Clum, 1998; Green, 1982) such as behavioural skills training (Bhandari & Agarwala, 1996) and cognitive restructuring (Pecsok & Fremouw, 1988).

There are a wide range of specific techniques which aim to facilitate cognitive restructuring and thus enhance emotional self-regulation. These include identifying dysfunctional cognitive distortions, conducting cost-benefit analyses, and uncovering erroneous and unhelpful underlying assumptions and beliefs using the downward arrow technique (see Burns, 1989a for further details). Regardless of the specific nature of the technique, central to all cognitive restructuring is a process in which unhelpful, negative thoughts are systematically examined, challenged and replaced with more helpful positive and realistic thoughts. Such techniques have been found to be effective in alleviating a wide range of psychological disorders (Barlow, 1993).

All human experience is contextualised and takes place within a specific environment. The situation or environment can have a powerful influence over behaviour (Bargh & Gollwitzer, 1994). For example, ex-addicts are more likely to relapse if prematurely exposed to the environment in which they developed their addiction (Klingemann, 1994; Schindler, Katz, & Goldberg, 1988). However, environments can be regulated and structured to facilitate the adoption of specific behaviour (Chesney, Thurston, & Thomas, 2001), and individuals can be taught how to overcome the influences of specific environments (Berry, Demgen, Hardy, & Wicklund, 1982). Environmental structuring is effective when combined with self-monitoring and behavioural skills training (Dean, Marlott, & Fulton, 1983).

Clearly, appropriate behavioural self-regulation is an important factor in goal attainment. As the exact nature of goal-related behaviours vary according to individuals' specific goals, what constitutes behavioural self-regulation differs from case to case. For example, when coaching an executive for enhanced leadership it may be important for the

coachee to practice interpersonal behaviours, such as the use of open questions, active listening and appropriate body language (Zeus & Skiffington, 2000). In contrast, the behavioural skills important for a student who wishes to enhance their academic performance may not be interpersonal behaviours, rather they are likely to include the use of deep rather than surface learning strategies (Biggs & Rihn, 1984) and effective time management (Zimmerman, Greenberg, & Weinstein, 1994).

Behavioural skills training is an effective way of inducing change in a wide range of dysfunctional and clinical populations (Kalichman, Sikkema, Kelly, & Bulto, 1995; Murphy, 1984; Nichols et al., 2000; Stevens et al., 1998). However, the impact of behavioural self-regulation training is often mediated by the level of the original baseline skills; an individual with high baseline behavioural skills is likely to benefit less from behavioural skills training than an individual who has low baseline skills (Sloan & Mizes, 1999).

The above cognitive-behavioural techniques have been developed and validated primarily in relation to clinical or dysfunctional populations with the aim of eliminating psychopathology (Febbraro & Clum, 1998), rather than with normal individuals seeking to enhance their performance and goal attainment. However, techniques originally developed to treat clinically significant problems may not necessarily lead to increased performance; performance enhancement and amelioration of negative affective states are logically independent (but see Whelan, Mahoney, & Meyers, 1991 for an alternative view). Indeed, the literature supporting the utilisation of cognitive behavioural techniques, or any approach in general, in the area of performance enhancement per se is, in general, less impressive in quality and quantity than in the literature related to clinical practice. However, two areas where there is substantial evidence that the use of psychological techniques can foster change and enhance performance, are sports and academic performance (see Druckman & Bjork, 1991).

Sports performance-enhancing strategies which have empirical support include cognitive restructuring (Davis, 1991; Silva, 1982), relaxation (De Francesco & Burke, 1997), anxiety management training (Suinn, 1990), goal setting (Burton, Weinberg, Yukelson, & Weigand, 1998), metacognitive training (Strean, Senecal, Howlett, & Burgess, 1997) and mental rehearsal or imagery (Jones & Stuth, 1997). Similarly, in the educational field, goal setting (Wolters, Yu, & Pintrich, 1996), self-monitoring (Lan, Bradley, & Parr,

1993; Zimmerman & Paulsen, 1995), metacognitive training (McCombs, 1988), cognitive behavioural relaxation therapy (Dendato & Diener, 1986), cognitive restructuring (Nam Sung, 1980) and attributional retraining (Perry, Hechter, Menec, & Weinberg, 1993) are some of the techniques derived from clinical psychology that have been found to be effective in enhancing academic performance.

Although the application of clinical techniques to coaching practice may well be justified, and there is some empirical support for their use in some areas, it has not yet been empirically established that clinical techniques will be in fact be applicable to a coaching psychology. Establishing whether clinical techniques are indeed applicable to coaching psychology should be a focus of future research. For example, future coaching research could examine the relative efficacy of cognitive coaching interventions as compared to behavioural coaching interventions.

This is of interest to coaching practice for three reasons: Firstly, this would begin the process of validating and establishing a cognitive-behavioural framework for a psychology of coaching. Secondly, such research will assist the design of effective coaching programs. Given that individuals with high baseline behavioural skills are likely to benefit less from behavioural skills coaching than those with low baseline skills (Sloan & Mizes, 1999), and that normal populations do not tend to display the behavioural skills deficits observed in clinical populations, it may be that a cognitive emphasis in coaching may be specifically appropriate for enhancing outcomes in non-clinical populations. Thirdly, there are a large number of personal development publications which promote a cognitive-only approach to self-development and self-coaching (e.g., Dyer, 1989; Hill & Stone, 1960). Despite the fact that there has been little or no research into their effectiveness (Rosen, 1993), many psychologists recommend such books to their clients (Starker, 1990). Empirical research into the relative effectiveness of cognitive and behavioural approaches would provide valuable guidelines of practitioners and the public alike.

Solution-focused Approaches

One important issue stemming from the use of clinically-derived techniques is that such techniques have a pathological orientation – they tend to be concerned with diagnosis and identifying and ameliorating dysfunctional issues, a problem-focused approach. Yet

coaching populations are not clinical clients with clinical problems. For coaching clients the use of pathology-laded terminology and a clinical approach can be alienating (de Shazer & Lipchik, 1984; Drewery & Winslade, 1997), and may even contribute to the creation and maintenance of problem behaviours (Walter & Peller, 1996).

One way to circumvent the potential problems associated with the use of problem-focused clinical techniques is to integrate a solution-focused approach (de Shazer, 1988, 1994) into a cognitive-behavioural framework, and use this to form a basis for a psychology of coaching.

Brief solution-focused therapy (BSFT) has its roots in Milton H Erickson's approach to strategic therapy. Erickson's work was highlighted by the foundation of the Mental Research Institute (MRI) in Palo Alto, California in 1958, and the publication of *Strategies of Psychotherapy* (Haley, 1963; see Cade and O'Hanlon, 1993 for further details of the development of BSFT and Erickson's contribution). O'Connell (1998) cites the following as being central characteristics of Erickson's approach and these form the basis of BSFT (de Shazer, 1988). These may well prove to be the essential constructs underpinning a psychology of coaching.

- Use of a non-pathological model: Problems are not indications of pathology or dysfunctionality, rather they stem from a limited repertoire of behaviour.
- A focus on constructing solutions: The therapist/coach facilitates the construction of solutions rather than trying to understand the aetiology of the problem.
- Use of existing client resources: The therapist/coach helps the client recognise and utilise resources of which they were unaware.
- Utilization: The mobilisation and utilisation of any part of the client's life experience which could help resolve the presenting problem.
- Action-orientation: There is a fundamental expectation on the therapist/coach's part that positive change will occur, and therapist/coach expects the client to act to create this change outside of the coaching session.
- Clear, specific goal setting: Setting of attainable goals within a specific time-frame.

- Assumption that change can happen in a short period of time: This stands in contrast to therapeutic schools that assume that the problem must be worked on over a long period of time.
- Strategic: Therapeutic/coaching interventions are designed specifically for each client.
- Future-orientation: The emphasis is more on the future (what the client wants to have happen) than the present or the past.
- Enchantment: The therapy/coaching process is designed and conducted in a way that is attractive and engaging for the client.
- Active and influential therapist: The therapist/coach is openly influential.

The Process of Self-Regulation in Coaching Practice

Goal setting

Goal setting is the foundation of successful self-regulation (see Figure 2.4). Although there is a voluminous literature on goal setting (Rawsthorne & Elliott, 1999), little of this has been explicitly discussed in the coaching literature. Locke's (1996) and Latham and Locke's (1991) seminal reviews of goal setting research summarises a range of findings which usefully inform a cognitive-behavioural approach to coaching.

According to Locke's (1996) and Latham and Locke's (1991) reviews, for individuals who are committed and have the necessary ability and knowledge, goals that are difficult and are specifically and explicitly defined allow performance to be precisely regulated and lead to high performance. Commitment to goals is critical (Hollenbeck & Brief, 1987), and high commitment is attained when the goal is perceived as being attainable and important, or when the individual participates in determining outcomes. Goal setting is most effective when there is feedback showing progress in relation to the goal, and goals stimulate planning in general, and often the planning quality is higher than that which occurs without goals. Furthermore, the effects of goal setting can be long-lasting. For example, Howard and Bray (1988) found that managers' goals for the number of levels of future promotion was a significant predictor of the number of promotions received over a 25-year time span.

The implications of Locke's (1996) and Latham and Locke's (1991) findings for coaching practice is that coaches should strive to help their coachees set stretching, specific, attractive, realistic and time-framed goals which are easily operationalised and developed

into action plans. For example, when coaching for career development, a poor goal would be “to develop a series of alternative career options”. This goal is vague and poorly defined. In contrast, the goal “by the (specific date) I will have five career path options which are congruent with my needs, values and beliefs” is far more specific and is easily developed into a workable action plan. Coaching may do well to explicitly incorporate Locke’s (1996) and Latham and Locke's (1991) findings into coaching programs.

Action planning and action

Goal setting is a necessary, but not sufficient part of the coaching process – plans must be developed and enacted. Action planning is the process of developing a systemic means of attaining goals. VandeWalle et al. (1999) found that systematic action planning was associated with sales performance, and good action planning is particularly important for individuals who have low self-regulatory skills (Kirschenbaum, Humphrey, & Malett, 1981). The coach’s role in the action planning stage is to facilitate the coachee’s ability to develop a realistic and workable plan of action. The coach may need to teach planning skills if necessary.

One key outcome of successful action planning is the facilitation of the coachee’s transition from a deliberative mindset to an implementational mindset (Gollwitzer, 1996; Heckhausen & Gollwitzer, 1987). The *deliberative* mindset is characterised by a careful weighing of the pros and cons of action and a careful examination of competing goals or courses of action (Carver & Scheier, 1998). The *implementational* mindset is engaged once the decision to act has been made. This mindset has a determined, focused quality, and is biased in favour of thinking about success rather than failure. The shift from the deliberative to the implementational mindset is important, not least because individuals in implementation tend to perceive themselves as being in control of their outcomes (Gollwitzer & Kinney, 1989) and experience a positive, and optimistic view of their chances of success (Taylor & Gollwitzer, 1996). Such cognitions themselves are associated with higher levels of self-efficacy, self-regulation and goal attainment (Bandura, 1982).

Monitoring, evaluation and change: The role of self-awareness

Goal setting and action planning need to be complemented by monitoring and evaluation. Because self-monitoring and self-evaluation are key components of the self-regulatory cycle it is important to have an understanding of the sociocognitive mechanisms involved and how they impact on coaching practice and outcomes.

Self-monitoring and self-evaluation are metacognitive processes, metacognition being the process of thinking about one's thoughts, feelings and behaviours. As Carver and Scheier (1998) note, key abilities mediating effective self-monitoring and self-evaluation include self-awareness and self-consciousness. *Self-awareness* refers to focusing attention on some aspect of the self or one's experiences (Wicklund, 1975), and *attention* refers to the selective processing of sensory input and information. Self-awareness is thus the selective processing of information about the self (Fenigstein, Scheier, & Buss, 1975). *Self-consciousness* refers to individual's propensity or ability to be self-aware. Fenigstein et al. (1975) differentiate between private self-consciousness, which is concerned with attending to one's own inner thoughts and feelings, and public self-consciousness which is a general awareness of oneself as a social object that has an effect on others.

In relation to the self-regulatory cycle, focusing attention on the self allows the individual to better access the internalised mental representations of the standards and reference values by which they evaluate their performance. Thus, individuals who are high in private self-consciousness should perform better than those low in private self-consciousness, and the difference between those with high and low levels of private self-consciousness should be particularly noticeable when the standards are salient or of personal importance (Carver, 1996). Indeed, higher levels of private self-consciousness were found to be related to sales performance for salespersons for whom sales performance was important (Hollenbeck & Williams, 1987). However, it should be noted that although high levels of private self-consciousness are associated with accurate and extensive self-knowledge, they may be also associated with psychopathological rumination and depression (Trapnell & Campbell, 1999).

The development of an individual's private self-consciousness through coaching may be particularly important when coaching is directed at enhancing interpersonal skills, for

example in leadership coaching or sales coaching (Church, 1997; Sosik & Dworakivsky, 1998), or the enhancement of intrapersonal skills as in mental skills training (Bull, 1991; Sinclair & Sinclair, 1994). This is because the development of intra- and inter-personal skills may well be limited by low self-awareness or a lack of interest in the psychological or emotional aspects of human experience and interaction (Bar-On & Handley, 1999; Goleman, 1998). For such coaching clients their levels of private self-consciousness may be an indicator of their psychological mindedness, that is their interest and ability to understand the psychological causes and meanings of their behaviour, thoughts and feelings (Fenigstein, 1997).

Private self-consciousness has long been regarded by some theorists as being synonymous with psychological mindedness (McCallum & Piper, 1997). This synonymity is evident in Farber (1989, p. 170) who defines psychological mindedness as being a “disposition to reflect upon the meanings and motivation of behaviours, thoughts and feelings in oneself and others”. Because such self-reflection plays a critical role in the self-regulatory cycle, exploration of the role of psychological mindedness may give insights into the cognitive change mechanisms associated with change in both in coaching and in therapy.

Despite a longstanding suggestion in Fenigstein et al. (1975) that private self-consciousness may be an important predictor of the outcome of therapy, there has been little research into this issue. There is some evidence that high levels of private self-consciousness are associated with anxiety, stress and depression (Jimenez, 1999; Keogh, French, & Reidy, 1998; Kuiper, Olinger, & Swallow, 1987), although other studies have found negative correlations between private self-consciousness and psychopathology (Kim, Oh, Moon, & Kim, 1999). Only one study has examined the impact of therapy on private self-consciousness. Using the Private Self-consciousness Scale (Fenigstein et al., 1975), Thomassin (1999) found a moderate increase in private self-consciousness following psychotherapy. There is also some evidence that higher levels of self-awareness are associated with better performance. For example, Church (1997) found that high performing managers in an organisation were significantly more self-aware than low performing managers. Further, individuals with high levels of private self-consciousness appear to hold more functional (i.e., stable and internal) attributions for success, than individuals low in

private self-consciousness (Briere & Vallerand, 1990) and they tend to be less negatively effected by negative feedback (Doherty & Schlenker, 1991).

Given the lack of research in this area and its relevance for coaching practice, future research could examine the effect of coaching interventions on private self-consciousness and psychological mindedness, and seek to uncover the relationship of these factors to the enhancement of performance.

Towards a Model of Change for Coaching Psychology

Coaching is about fostering directed purposeful change. Yet there has been little work in the coaching-related literature directed at developing a coaching-specific model of change or adapting and verifying existing models of change for use in coaching. There are two key models of change that have been applied to individual career development, life changes and organisational change: Bridges' (1986) Transition Model and Schlossberg's (1981a) Adaptation to Transitions Model.

Bridges' Transition Model

Bridges' (1986) model distinguishes between *change* and *transition*, and focuses on the role of emotional reactions to change. Bridges (1986) argues that change is something situational and external. Change happens when something starts or stops. For example, the physical act of moving from one office to another is a change. In contrast, transition is the internal experience of a gradual, psychological reorientation process as we respond and adapt to change. Transition may result from a change, but is often triggered by the news that a change is imminent. In Bridges' (1986) model there are three parts to transitions: endings, neutral zone and new beginnings.

The model starts with the recognition that transitions start with an ending. The idea here is that one thing must end for something else to begin. Hence, the endings phase is one of letting go of the past. Here there may be an acute sense of loss, of mourning and anger and resentment. Bridges (1991) recommends the individuals in the endings phase give themselves time to complete the process.

The next stage is the neutral zone, the core of the transition process. This stage is characterised by a sense of confusion and uncertainty about the future. Bridges (1991) again

cautions against prematurely moving out of the neutral zone and suggests that the neutral zone is a place of promise and opportunity, and represents a great chance for creativity and renewal.

The final stage in the model is new beginnings. Here the new vision for the future is developed and enacted. Fear and disorientation turn into excitement about new opportunities. Bridges (1991) suggests that individuals in this stage need to maintain the focus on achieving results, become more aware of their thoughts and emotions, and be open to the need to alter plans in response to unexpected events.

There are over 70 published articles in the trade and professional press which discuss Bridges' model, and his model has been actively marketed by major training companies (Bridges, 2000). Despite the adoption of the model by organisational change, human resource practitioners and outplacement consultants (Fisher, 1997; Williams, 1999), the model has attracted little empirical research. Although Bridges (1986; 1991) cites a number of case studies in support of the Transition Model, the database PsychInfo list only 5 papers investigating the model (Bridges, 1986; Pun, 1997; Scanlan & Stumph, 1995; Scheier, Carver, & Bridges, 1994; Shields & Milks, 1994). One reason for this lack of interest from researchers may be the model's purely descriptive nature and its failure to delineate potential psychological mechanism associated with change.

Schlossberg's Transition Model

Another transitional model of change is presented by Schlossberg (1981a; see also Schlossberg, 1981b; 1987; 1997; Schlossberg, Waters, & Goodman., 1995). Schlossberg (1981a) has received less publicity than Bridges, despite being somewhat more sophisticated in its efforts to delineate the key psycho-social mediating transition through change.

In attempting to present a comprehensive model of change, Schlossberg (1981) cites three sets of factors that affect a person's adaptation to change:

1. The characteristics of the transition itself: These include role change (gain or loss), source (internal or external), timing (gradual or sudden onset), affect, (positive or negative), and duration (permanent, temporary or uncertain).

2. The characteristics of the pre-transition and post-transition environments: These include internal support systems, intimate relationships, cohesion of family unit, social networks, institutional supports and the physical environment.
3. The characteristics of the individual going through the transition: These include psychosocial competence, sex and sex-role identification, age and life span, state of health, race/ethnicity, socio-economic status, value orientation and previous experience with a transition of a similar nature.

Schlossberg (1981b) argues that this model provides a direct link to interventions by providing a framework for analysing an individual's difficulties with a particular transition, and a cognitive map for understanding reactions to life events, and a way for counsellors and clients to analyse the missing links between transition and adoption.

To facilitate movement towards adaptation to change Schlossberg (1981b) proposes that counsellors should: work to help clients develop a clearer perception of their overall life needs; facilitate clients in developing a clearer understanding of their present needs; help clients evaluate how they presently manage strain, stress and decision making; help clients identify and evaluate their present typical response patterns to a new situation; and facilitate the acquisition of new skills that will aid in more effective coping with the participant's own objectives.

Schlossberg's (1981a) model is designed to give an understanding of human change in relation to major life events such as job loss, marriage, geographical moves, returning to school, caring for aging parents or retiring and attempts to present a framework from which to understand why some individuals cope with change better than others.

Whilst this is a broad approach to understanding the process of change, and provides a useful heuristic from which to coach individuals through change, it is unclear how this model can be adapted in relation to facilitating the highly specific and purposeful behavioural and emotional changes central to coaching practice. Thus, although providing useful guiding heuristics, neither of these models more beyond description, allow prediction, or give insight into how to best facilitate the adoption of specific behaviours.

The Transtheoretical Model of Change

The need for theory on which to base practice is widely acknowledged throughout psychological sub-disciplines (Hershenson, Power, & Seligman, 1989; Retief, 1986; Schmitt, 1994). A science-based psychology of coaching requires a theory of change that goes beyond mere description, one that details the underlying psychological mechanisms (Kazdin, 2000), and provides insight into how best to facilitate the adoption of specific behaviours (Smith, 2000). One such model of change that has received very little attention outside of the clinical arena is the Transtheoretical Model of Change (Prochaska & DiClemente, 1984).

The Transtheoretical Model (TTM; Prochaska & DiClemente, 1984) was originally developed in reference to addictive behaviours such as smoking (DiClemente, Prochaska, Fairhurst, & Velicer, 1991; Prochaska & DiClemente, 1983) and drug and alcohol misuse (DiClemente & Hughes, 1990). Over time the model has been successfully applied to a wide range of problem and health-related behaviours including anorexia (Ash, 1997), HIV prevention (Bowen & Trotter, 1995), obesity (Chupurdia, 1993), adoption of healthy diet (Cullen, Bartholomew, Parcel, & Koehly, 1998) and sunscreen use (Prochaska, Velicer, Rossi, & Goldstein, 1994). The model posits that change is not an all-or-nothing dichotomous process. Rather, change involves a progressive transition through a series of five identifiable, although somewhat overlapping stages.

Although there is a substantial body of research into the TTM, much of which has found support for the core constructs of the TTM, latterly the TTM has been subject to critical theoretical re-evaluation (e.g., Sutton, 2001; Weinstein, Rothman, & Sutton, 1998).

A key focus in this debate has been whether the TTM can be truly considered to consist of a series of mutually exclusive and discrete stages, or whether the notion of discrete stages is unwarranted, and the TTM would be better understood as a model of change in which the proposed stages represent identifiable ordered categories or pseudo-stages on an underlying continuum (e.g., Kraft, Sutton, & Reynolds, 1999). Although some empirical research supports the notion of an underlying continuum (e.g., Rakowski, Dube, Marcus, Prochaska, Velicer, & Abrams, 1992), the theoretical debate continues.

Nevertheless, the TTM has many strengths which may be useful in informing coaching practice. These include the model's focus on the processes involved in the

adoption of a specific behaviour, its detailing of key sociocognitive factors associated with purposeful behavioural change, and that it can be used to specify which strategies are likely to be most effective at each different stage of change.

Progression through these stages can eventuate in permanent change. However, for most individuals change is a cyclic rather than a linear process, and many individuals relapse into old behavioural patterns before the new behaviour is permanently maintained. The stages of change are:

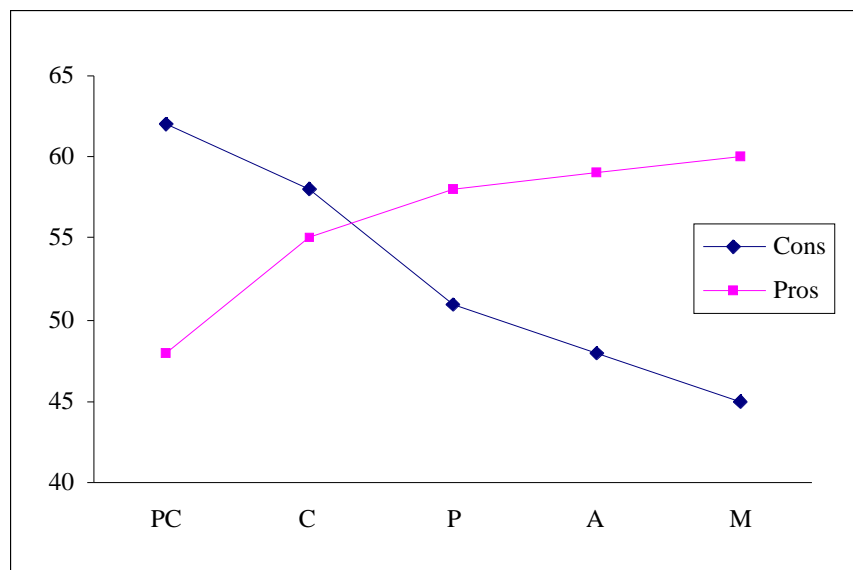
1. Precontemplation: In this stage there is no intention to change in the foreseeable future.
2. Contemplation: Individuals in this stage are considering making changes, but have not yet made any changes.
3. Preparation: Here individuals have increased their commitment to change, intend to make changes in the near future and often have started to make small changes.
4. Action: Individuals in this stage are engaging in the new behaviours, but have made such changes for only a short period of time (less than six months for addictive behaviours).
5. Maintenance: Individuals in this stage have been consistently engaging in the new behaviour over a period of time (six months for addictive behaviours).

The TTM posits that individuals will experience a number of cognitive and motivational shifts as they move through different stages. One key construct is that of decisional balance. Developed from Janis and Mann's (1977) gains vs. losses model of decision-making, the decisional balance construct suggests that individuals weight up the pros (perceived benefits) and cons (perceived costs) of making change, and that the weighting given to the pros and cons varies as individuals move through the stages of change.

The model predicts that for individuals in the precontemplation stage the cons of change will be more salient than the pros, and that this decisional balance will be gradually reversed as individuals move through the stages (Prochaska et al., 1985). Thus for

individuals in action and maintenance the pros of change will be more important than the cons. Figure 2.6 illustrates the typical pattern of pros and cons over the stages of change. Similar patterns have been observed for a number of different problem behaviours including smoking, condom use, exercising, quitting smoking and drug use (e.g., Basler, Jaekle, Keller, & Baum, 1999; Grimley, Prochaska, Velicer, & Prochaska, 1995; Lafferty, Heaney, & Chen, 1999; Prochaska et al., 1994).

Figure 1.6. A typical pattern of pros and cons across the stages of change.



Note: PC = Precontemplation; C = Contemplation; P = Preparation; A = Action; M = Maintenance

There are two other core constructs in TTM: self-efficacy and habit strength. Self-efficacy is the belief in one's competency to perform a specific task (Bandura, 1977a). Self-efficacy plays a central role in behaviour change effecting whether individuals decide to make changes, the amount of effort they put into creating change and the length of time they persevere in the face of adversity (Bandura, 1982; Bandura, 1986; Velicer, DiClemente, Rossi, & Prochaska, 1990). The TTM model predicts that self-efficacy will increase as individuals move through the stages of change, and indeed this relationship has been observed in various behavioural changes including the adoption of healthier diet (Ounpuu,

Woolcott, & Rossi, 1999), condom use (Lauby et al., 1998), dental hygiene (Stewart, Wolfe, Maeder, & Hartz, 1996) and physical exercise (Marcus, Eaton, Rossi, & Harlow, 1994).

Habit strength refers to the psychological and physiological aspects of the behaviour in question (Velicer, Rossi, & Prochaska, 1996). For example, for cigarette smokers habit strength is measured by behavioural variables such as the number of cigarettes smoked each day, the time the first cigarette of the day is smoked, and psychological variables such as the individual's temptation to smoke in various situations. The TTM model predicts that habit strength will be high in precontemplation, decreasing slightly through contemplation and decreasing dramatically through action and into the maintenance stage, and these predictions have been supported (Velicer, Norman, Fava, & Prochaska, 1999).

Implications of the Transtheoretical Model for coaching practice

The TTM has important implications for guiding coaching practice. Prochaska, DiClemente, and Norcross (1998) outline a number of guidelines for facilitating change based on the TTM which may have application in coaching practice.

Avoid treating all individuals as though they were in the action stage:

Prochaska et al. (1998) emphasise the need to assess the client's readiness for change. Such assessment can be conducted by written questionnaire, behavioural observation or (possibly of most use to coaches) by verbal self-report. Self-reports can involve asking the client a simple series of questions such as "Do you think behaviour X is a problem for you right now?". If the answer is yes, then the coachee is in the contemplation, preparation or action stage; if no, then the coachee is in the maintenance or precontemplation stage. The other question to be asked is "When do you intend to change behaviour X?" If the answer is, at some point, or not soon, the coachee is in the contemplation stage; if they answer in the next month or so, then they are probably in the preparation stage, and if the answer is now, then they are probably in the action stage.

Individuals in the action stage are likely to achieve better and quicker outcomes than those in contemplation and preparation:

The model suggests that individuals in the action stage can handle more challenging behavioural-change assignments and more difficult goals than other individuals.

Facilitate the insight-action crossover:

Individuals who are reluctant to make changes are typically in the contemplation or preparation stages (Grimley & Lee, 1997) and spend more time thinking about their problems than actually changing their behaviour. For such clients it is important that coaches focus on facilitating a shift from thinking about problems to behavioral change.

Anticipate relapse:

For most people, relapse - slipping back into old behaviour - is a normal part of the change process (Brownell, Lichtenstein, Marlatt, & Wilson, 1988; Marcus, Bock, & Pinto, 1997; Marlatt, 1996). The coach needs to include relapse-prevention strategies, prepare the client for possible setbacks, and minimise guilt and shame if relapse does occur and help the client move back into action as quickly as possible.

Validating the TTM for use in coaching practice

There has been a considerable amount of research support for TTM. However, although the databases PsychInfo and PsychLit list over 500 citations in the academic literature, all but four of these citations are in relation to problem or health-related behaviours (Grove, Norton, Van Raalte, & Brewer, 1999; Levesque, Prochaska, & Prochaska, 1999; Prochaska, 2000; Rider, 1998).

Two of these studies (Levesque et al., 1999; Prochaska, 2000) investigated the applicability of TTM to organisational change. Levesque et al. (1999) found support for the model in relation to the organisational changes involved in a move to integrated service delivery within a university. Prochaska (2000) found support for the application of the TTM to assessing readiness for organisational change in family service agencies moving to the use of time-limited therapy.

The other two studies examined the application of the TTM to sports-related psychological skills training. Rider (1998) found support for the TTM in this area, observing

the hypothesised relationships between stages of change, decisional balance and self-efficacy. Grove et al. (1999) found that, compared to controls, individuals in a mental skills training program for basketball players moved systematically through the stages of change and they progressed through the program.

Building on this initial support for the application of the TTM to non-pathological, non-health-related issues, future research should examine the applicability of the TTM to performance enhancement coaching. Research questions could include whether the constructs of decisional balance, habit strength and self-efficacy are as important in coaching practice as they have been shown to be in pathological and health-related settings.

Summary

The roots of a coaching psychology are long-standing, yet to date little theoretical or empirical work has explicitly focused on executive or life coaching. This paper suggests that the development of a framework for a psychology of coaching may be developed in the following manner: Given the success of cognitive and behavioral techniques in clinical and counselling practice, researchers should determine if such techniques are indeed applicable to coaching populations seeking to enhance performance rather than clinical populations attempting to ameliorate psychopathology.

Future research should also seek to extend the applicability of the TTM to non-clinical populations. Such an extension would provide a useful and much needed model of change for coaching psychology. In addition, the development of a coaching psychology would be facilitated by an understanding of how coaching interventions impact on, and are mediated by sociocognitive factors such as psychological mindedness, self-awareness and self-regulation. Future research should focus on utilising group-based rather than single case studies, and follow established clinical research methodologies using random assignments to treatment and control, with an emphasis on objective, quantifiable outcome measures.

Psychology is uniquely placed to make a significant contribution in terms of enhancing life performance and work experience through executive or life coaching. Establishing a theoretical grounding and conducting empirical research along the suggested lines will lay sound foundations for the emerging discipline of coaching psychology.

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