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How do business coaches experience the boundary between coaching and therapy/counselling?

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The question ‘what is coaching?’ continues to provoke debate, with many writers attempting to distinguish coaching from other forms of ‘helping by talking’, particularly therapy and counselling. Despite this level of discussion, confusion and lack of clarity continues to exist. This situation is compounded by vested interests and lack of relevant empirical research. Practicing coaches must therefore decide on the limits of their own practice, and some writers point to the potential for unsafe and unethical practice. The study contributes to the debate by examining how business coaches experience the ‘boundary’ between coaching and therapy/counselling in practice. Using a phenomenological approach, four therapeutically trained and four non-therapeutically trained coaches were asked to describe instances when they felt they were working near the boundary with therapy/counselling in a coaching context. The study methodology included use of a ‘conceptual encounter’ and interpretive phenomenological analysis. Findings suggest that issues of a psychological nature are brought into coaching, and are considered appropriate territory for investigation where they block work performance. Differences in working practice were noted between and within the two groups. Findings for the study give impetus for the professionalisation of coaching, and recommendation for the development of a coherent psychologically-oriented syllabus for coaches is made.

Keywords: coaching; therapy; counselling; boundary; professionalisation; ethics; training; referral; supervision; mental health

Introduction

The last two decades has seen an explosion (Berglas, 2002) in both the numbers of those offering coaching services, and the range of activities included under the banner of ‘coaching’. This growth has been almost entirely unregulated, and it is not surprising that, along with this growth, there have been mounting calls for the ‘professionalisation’ of the industry (e.g. Bluckert, 2004). However, as yet, the coaching world is a long way from being able to call itself a true profession, and Grant and Cavanagh (2004, pp. 10–11) identify the ‘need to find a way to establish a clear identity... by establishing clear boundaries around what is professional coaching and what is not’. This is easier said than done, and it is possible to find multiple definitions of coaching in the literature reflecting different perspectives and interests (e.g. Bluckert, 2005a; Sperry, 1993; Tobias, 1996).
This issue is particularly acute in relation to the differentiation between coaching and therapy/counselling and many writers are at pains to stress the ways in which coaching is differentiated from therapy/counselling. Typical distinctions include the following points:

- Coaching takes a present and future focus, whilst therapy concentrates on the past. (e.g. Pointon, 2003, Williams 2003)
- Coaching is for highly functioning people, whilst therapy is for people with some level of dysfunction or disorder. (e.g. Grant, 2001, Williams 2003)
- Coaching is focussed on (business) performance improvement, while therapy is focussed on personal healing and trauma recovery. (e.g. Dawdy 2003, Garvey 2004)
- Therapy operates at psychological and emotional ‘depth’, coaching incorporates understanding of business drivers and dynamics. (e.g. Hart, Blattner, & Leipsic, 2001)
- Therapy is a confidential two-way relationship, coaching involves (at least) a three-way contract between client and commissioning organisation with potential for blurred confidentiality. (e.g. Zeus & Skiffington, 2000)
- Therapy is usually a protracted relationship, whereas coaching is usually tightly time-limited. (e.g. Rotenburg, 2000)
- Therapists and counsellors are typically highly trained and regulated by codes of ethics and professional bodies, with formalised continuing professional development based on well developed theoretical underpinnings. Coaches are limited only by their ability to attract clients. (e.g. Carroll, 2003)
- Therapists typically attract moderate/low hourly rates, whereas coaches, particularly executive coaches, can command much higher rates. (e.g. Channer, 2003)

However, more recently, other authors have focussed on the difficulties of making such clear distinctions and point to the numerous ways in which the boundary between coaching and therapy/counselling is blurred. For example, Buckley (2007b) questions the notion that coaching is for the mentally healthy only, contending that therapists are as likely to work on developmental issues as well as remedial ones. Equally Simons (2006) argues that coaches cannot be limited to a present/future focus if they are to work effectively, while Popovic and Boniwell (2007, p. 25) state that ‘the truth is that all these practices rely heavily on similar skills and their domains overlap to a large extent’. Similarly Bachkirova and Cox (2005, p. 5) contend that ‘coaches cannot avoid working with “blocks” to development within the client’ and argue that coaches need to build on the body of knowledge already developed by psychotherapy and counselling.

Many authors (e.g. Bachkirova, 2007; Campbell & Griffiths, 2008) regard this topic as more than a semantic debate. Currently in the UK, there is no compulsion, other than personal ethics, for any business coach to adhere to a professional code of ethics, never mind invest in training or supervision. Few training courses have substantial psychological content (Grant & Zackon, 2004), and even fewer give guidance on how to recognise common mental health disturbances such as depression or anxiety. Such training would, of course, be unnecessary if coaches could always guarantee that their clients where happily free of such conditions, or that their personal psychological histories do not impact their present day work lives. However
the evidence suggests otherwise (Green, Oades, & Grant, 2005; Spence & Grant, 2004), and it is a possibility that coaches may (unwittingly) cause harm to their clients through ignorance or failure to exercise the appropriate duty of care. Berglas (2002) and other psychologists and therapists go as far as to suggest that coaching should be the terrain of the psychologically trained and that others would do better by keeping out. Business coaches in turn, point to the lack of organisational awareness in the ‘therapist-turned-coach’ populations (Berman & Bradt, 2006). Coaching has become something of a power struggle between the psychologically and non-psychologically trained (Garvey, 2004).

Whilst some writers (e.g. Grant, 2006) dispute the potential for damaging clients, most professional bodies (e.g. Association for Coaching, 2005; European Mentoring & Coaching Council, 2007) recognise the need for practitioners to operate within the confines of their competence and not to stray into areas in which they are untrained or unprepared. Again, this is easier said than done, and it is left for the average practitioner to define their own limits of practice, including when they perceive they may be straying inappropriately into the territory of counselling and therapy. Ultimately, practitioners must decide what constitutes appropriate practice and define the ‘boundary’ for themselves as they meet each client. As Garvey (2004) suggests ‘the name does matter but perhaps what matters more is the meaning we place on the name’.

While the debate continues to rage, there is a dearth of empirical research into how coaches experience this practical and ethical issue, or indeed how they construe this conceptual boundary for themselves. Existing relevant studies (e.g. Alves Marques, 2006; Channer, 2003; Hart et al., 2001) have largely focussed on the experiences of therapists and counsellors transitioning into coaching and there is no specific research on how practitioners recognise and work at the coaching/therapy boundary. This study therefore contributes uniquely to the debate by seeking to explore and describe the experiences of business coaches in situations where they considered themselves to be working near the ‘boundary’ with therapy/counselling. As such it provides empirical evidence in an area often characterised by rhetoric, self-interest and opinion. The study potentially provides a benchmark for coaches to examine their own choices in this area, and gives impetus for less optional and more rigorous training, particularly in the area of coaching psychology.

Study method

Necessarily, because of the experiential, constructivist nature of the research topic, the study method leant itself to an interpretivist, qualitative approach. A form of phenomenological investigation was developed to gain insight into how coaches experience and construe ‘boundary’ working. The investigation included use of in-depth semi-structured interviews, incorporating a ‘conceptual encounter, as well as an interpretive phenomenological method of data analysis. This combined approach was an attempt to recognise the role and stance of the researcher whilst minimising the potential for distortion of the final outputs. A reflexive approach was therefore central to the methodology, and essential given the researcher’s own experiences of ‘boundary’ working.
**Sample**

The research sample comprised of eight practicing business/executive coaches, selected for their substantial experience of working as a coach, as well as their ability to recall instances of where they considered themselves to be working at the coaching/therapy boundary. On average sample members had 11 years experience of commercial coaching in large organisations. While all had previous experience in organisational roles, four coaches (termed the ‘therapist-coaches’) also had substantial psychological training and understanding, including previous experiences working as a therapist or counsellor. Their backgrounds included a wide diversity of training including Psychosynthesis, Gestalt, Person-centred counselling and Cognitive-Behavioural therapy. The balance of the sample was made up with four coaches with a broad business background (termed the ‘business-coaches’), typically having held senior executive roles in large organisations prior to becoming a coach. With one exception, all coaches were in regular supervision for their work, and most (5) were members of one or more coaching professional body (e.g. European Mentoring & Coaching Council, Association for Professional Executive Coaching and Supervision, Association for Coaches, International Coach Federation).

**Data collection**

Using in-depth semi-structured interviews, the coaches were asked to recount in detail instances of when they felt they were working at the ‘boundary’ with therapy/counselling in a coaching context. Participants were free to select their own examples and therefore define what constituted boundary working for them as individuals. This process yielded some 10 hours of taped material, which were transcribed and verified with participants.

In addition a form of ‘conceptual encounter’ (de Rivera, 1981; McLeod, 2001, pp. 46–47) was used at the end of each interview. This involved the researcher sharing a personal experience of boundary working and discussion of how the research participant’s experiences contrasted or diverged from those of the researcher. This material was progressively evolved into a ‘concept diagram/map’ for both business-coach and therapist-coach groups. This step was included to bring transparency regarding the researcher’s own initial position in the study, and as a cross check against the more detailed analysis of the interview data.

**Data analysis**

Interview data was analysed using an ‘Interpretive Phenomenological Analysis’ (IPA) (Smith & Eatough, 2007; Smith & Osborn, 2008, pp. 53–80). This idiographic mode of enquiry is deemed particularly appropriate when the aim is ‘to say something in detail about the perceptions and understandings of a particularly group’ (Smith & Osborn, 2008, p. 55), without prematurely making more general claims.

The IPA method involved repeated readings of individual transcripts to identify relevant material and initial themes. Connections were then investigated, and clusters of themes evolved, repeatedly cross-checking against the original text to ensure preservation of meanings. (Smith & Osborn, 2008). The resultant analyses were
verified with participants and further amendments made. At the final stage, master themes were distilled from across all eight analyses, and referenced to typical quotes to illustrate and illuminate the material. Cross-referencing and checking within and between transcripts was therefore a necessary, if time consuming, activity to ensure the integrity of the final synthesis.

This ‘bottom-up’ process produced four major master themes, substantially converging with the ‘top-down’ themes contained in the ‘conceptual map’ material:

- opening Pandora’s box – the rich variety of issues presented by clients, how these were presented in the relationship and how the coach reacted to them initially;
- the co-created boundary – how the coach, client and commissioning organisation configured the boundary between them dynamically;
- working at the boundary – the approaches taken to working with boundary issues, highlighting a range of different assumptions about appropriate working; and
- differentiations between therapy and coaching – specific points of comparison made by the therapist-coach group regarding their therapeutic and coaching practices.

Findings

Opening Pandora’s box

Perhaps the single most striking feature of the interviews was the wide variety of issues described by participants as examples of ‘boundary’ issues – a veritable ‘Pandora’s Box’. While some coaches reported such instances as relatively unusual, others (typically the therapist-coaches), reported themselves as working at the ‘boundary’ more frequently.

Instances cited as examples of ‘boundary’ issues included:

- low self-esteem and confidence issues borne out of an over bearing and unsupportive parent;
- distress caused by relationship problems with a new partner;
- a pattern of anxiety attacks impeding ability to focus on a desired future;
- distress rooted in relationship problems with men;
- interpersonal problems at work particularly with women, linked to a recent divorce;
- overly dominant and aggressive behaviours limiting future career aspirations;
- hidden blindness impacting ability to interact and influence in the workplace;
- depression following the death of a partner and resultant inability to perform at work;
- patterns of self-limiting beliefs;
- work/life balance tensions caused by procreation problems, compounded by bereavement of a parent;
- problematic return to work following the suicide of a partner;
- work performance impacted by alcoholism;
- depression impacting performance and relationship with boss; and
- an over compliant approach to a recent redundancy rooted in upbringing.
Broadly, these issues fell into three categories:

- transient or present day issues triggered by some sort of recent (traumatic) event e.g. recent redundancy or relationship break-down;
- entrenched historic or behavioural pattern that were being played out in the present; and
- hybrid situations in which a recent event was triggering or re-evoking some much older pattern or distress.

Clearly in this sample the personal and the professional were deeply intertwined, and many coaches commented on how the ‘whole human’ inevitably shows up for coaching:

Because people don’t turn up for coaching sessions with just their business issues. They turn up with their hang ups and their brains … the whole damn human being. That messy thing turns up and sits in the room. (Coach 1)

The coaches perceived these issues as impacting their client’s ability to function at work, to a greater or lesser extent. Such blocks to work performance were therefore perceived as legitimate coaching territory:

Every client you work with successfully, the success lies in helping them to identify what’s stopping them. It’s never ‘they can’t do that’, it’s never that. They can do it, they just don’t. So what is getting in the way? (Coach 1)

Notably, these ‘boundary’ issues presented in the coaching relationship in a variety of ways, with at one extreme clients disclosing problems at an early stage, often in a tearful or emotional way. In such instances the coaches experienced this as quite shocking or surprising, leaving them unsure how to proceed:

It was not being aware of this being the underlying cause. I was quite shocked, not that I showed it, internally I actually felt my goodness, a) it’s a gulp moment – I didn’t know; and b) how am I going to handle it? (Coach 4)

Other clients were more guarded or oblique, with issues disclosed only when the level of trust had been developed sufficiently, perhaps after several sessions. Yet other issues, however, were only surfaced at a much later stage, as the coaches helped their clients to piece together the patterning of their personal psychology.

It was therefore not uncommon, for the initial presenting (business) issue to be superseded by discovery of a more underlying personal issue and the coaching goals/process to require revision or renegotiation:

We’re the individual who has got to be able to sit with a person and whatever comes out, even if it turns out in the moment that actually what you thought was coaching, isn’t. (Coach 2)

The ‘boundary’ between coaching and therapy/counselling was therefore experienced, as a ‘grey’ or ‘fuzzy’ area with clarity only available at the extremes.

The co-created boundary

So I think the line is really, really hard to define – it’s in different places for different clients and I suspect it is in very different places for different coaches. (Coach 1)
I think the boundary softened for herself as she became more confident that I might have known what I was talking about. (Coach 6)

A feature of the data was the co-active nature of the coaching/therapy ‘boundary’, apparently configured very differently in different coach-client relationships. Thus in some relationships, the ‘boundary’ was configured relatively ‘conservatively’ and statically, with one or both parties avoiding discussion of personal material and deliberately confining themselves to a work-based agenda. However, in other relationships, both coach and client were willing to undertake deep and wide-ranging personal explorations.

There appear to be a number of factors influencing this configuration. So for example, the coaches were highly influenced by their own sense of respectful, ethical and responsible working and the self-imposed limits they placed upon the work. These limitations included both their own perceptions of the role of a coach, their own competence limits, and their ability to hold clarity in the relationship. Interestingly, whilst business-coaches tended to be more concerned with embarrassing or intruding on their client’s private lives, the therapist-coach group tended to be more concerned with the potential for collusion or transference.

Coaches were also influenced by their perceptions of their client’s resourcefulness and self-awareness – their ability to discuss and process personal and/or emotional matters relatively dispassionately and rationally. This factor seemed to be a key determinant for most of the coaches in deciding whether their client was suitable for coaching, and indeed how far they could take the dialogue with them:

There is a degree of resourcefulness in his ability to get a handle … it means I can take him slightly closer to the line and trust his resourcefulness to hold him where he needs to. (Coach 2)

All the coaches were highly cognisant of the organisational contract for the work, but also of the tensions this could bring when this conflicted or diverged from the needs of the client. Interestingly, in several instances this conflict did not arise as the commissioning organisation seemed highly aware of some of the deeper personal roots of performance issues, and were using coaches to address these. Indeed some of the therapist-coaches were of a view that they were particularly prized for their therapeutic backgrounds, not despite of them:

So I think I often get asked to do those sort of assignment because they know I have both a business and a therapy background. (Coach 6)

In summary, both the coach and client appear to dynamically ‘shape’ the position of the boundary depending on their willingness and ability to explore the psychological and personal dimensions of the work. There appears to be a level of self-regulation in operation, with particularly the less psychologically trained coaches avoiding territory that they or the client perceive as uncomfortable. Conversely, the more psychologically-minded coaches were more willing to take the work further but risked taking the client into territory where they were unwilling or unequipped to go. This can be conceptualised as in Figure 1.

This diagram suggests that ‘safe’ dialogue exists where there is a match between coach and client willingness and ability, resulting in either (1) avoided or (2) deeper exploration. In these areas is a mutual and tacit agreement as to the ‘position’ of the boundary. More problematic are situations where coaches take their client into
(3) uncomfortable or forced dialogues, or in (4) frustrated explorations where the coach resists exploring as widely or deeply as the client would like. Overlaying these scenarios is the influence of the organisational expectation of the coaching work, and whether there is permission to extend the work beyond a purely business agenda.

This dynamic view of the coaching/therapy boundary is largely absent from the coaching literature, however the Campbell & Griffiths (2008) study of life coaches and their clients included reference to the ‘safe’ relationship and the conditions under which disclosures were made possible. The question of what constitutes an appropriate coaching conversation is therefore considerably more complex than much of literature would suggest and has ramifications for coach training as well as representing a fruitful area for further research.

**Working at the boundary**

In addition to the above data on how the boundary was co-created in the relationship, was data relating to how the coaches chose to work in ‘boundary’ situations and the sorts of support mechanism they used to help them operate effectively and appropriately.

**Ways of working**

In broad terms four, overlapping forms of working were evidenced:

- ‘Separation’ – avoiding discussion of personal material. Here the coaches tried to minimise the discussion of personal material and compartmentalise this from discussion of the business agenda. There was however recognition that this was difficult to achieve completely, and that inadvertent comments could trigger unexpected reactions:

![Figure 1. The co-created boundary.](image-url)
You could ask a question that inadvertently triggers a memory or whatever it might be and it wasn’t intended by the coach, wasn’t intended by the coachee, and you’ve ended up there. (Coach 2)

- ‘Rational’ working. Here the coaches tended to take what might be termed as a ‘rational’ or cognitive approach, attempting to engage their clients in discussion of personal materials in an intellectual or dispassionate way. This seemed to be a particularly fruitful approach, particularly for those clients who were uncomfortable with emotional or personal material and who seemed to have limited ability or desire to connect their internal and external experiencing:

What I was trying to do all the way through it quite consciously was to have an intellectual conversation to engage his head, rather than an emotional conversation because if we’d have had an emotional conversation my sense was we’d have had to deal with the anxiety in that space. (Coach 2)

- ‘Dipping in’. This approach refers to selective ‘visits’ to personal history and selective use of approaches drawn from psychology and psychotherapy. This approach was used particularly when the origins of a work performance issue – a block of some sort – was deemed to originate in personal/historic material and where client was deemed suitably resourced to look at this sort of material:

In other words you can dip in and out of something that you could say has a therapeutic nature to them but the focus of it is very much in a coaching context. And the person can separate them and the person can use them and the person doesn’t necessarily need the intervention of a therapist. (Coach 8)

- ‘Straddling the line’. Strikingly, three of the therapist-coaches talked in terms of ‘straddling’, ‘bridging’ or ‘shuttling’ across the coaching/therapy ‘boundary’. Rather than attempting to avoid the personal, historic or emotional, these coaches tended to see these dimensions of their clients as central and causal to their work performance and therefore as potentially legitimate and necessary territory for exploration. While emphatic that they were not working therapeutically, they saw the intersection of the personal and professional as a point of maximum leverage and a coaching/therapy ‘boundary’ as somewhat illusory. Not surprisingly, it was these coaches who saw themselves as working most often in boundary situations.

Where I generally work is on the bridge of the personal and the professional … and it is the area I am most excited by because I think the most work can be done and it has the most impact. (Coach 5)

While some coaches seemed to operate in one dominant mode, others seemed to work more flexibly, with the therapist-coach group appearing to flex their approach and methods to a greater degree than their business-coach counterparts. This is characterised in Figure 2.

According to this conception, the therapist-coach group seem to operate in a more overtly ‘psychological’ fashion in comparison with the business-coach group.
Exception to this was coach 4 who particularly emphasised the psychological aspects of his client work, and coach 5 who tended to stress the systemic and organisational dimensions of coaching.

While the coaching literature has little to say about these forms of working, these findings generally agree with the other empirical studies in this area. For example both the Hart et al. (2001) and Campbell & Griffiths (2008) studies found evidence of coaches ‘visiting the past’ according with the ‘dipping in’ approach. However it appears that for some coaches such visits are rather more extended even if the intent is not to heal or remove past wounds. Thus the Channer study of therapist-coaches talked about ‘the therapeutic instinct and capability not going into abeyance when therapists work as coaches’ (2007, p. 7).

### Supporting the work

All the coaches mentioned ways in which they supported themselves in boundary situations, including contracting, referral, training and supervision. While all stressed the importance of initial contracting the group were divided as to whether they felt able to discuss the coaching/therapy boundary, particularly at an early stage of the relationship. Many felt that while contracting was a vital part of the coaching process, it was impossible to anticipate what might emerge. Contracting was therefore seen as provisional and contingent on what issues actually arose.

In all the instances cited by the interviewees, there was only one instance in which they felt they should refer on to another professional rather than do the work themselves. However, in many of the cases, the coaches mentioned working in parallel with another party, who could provide additional medical, therapeutic or emotional support for the client:

> It was a hypnotist helping him with panic attacks so that was important information I guess for coaching, to understand that he's working with somebody else. (Coach 2)

> So she was being treated for her depression by somebody competent to do that, which I wasn't, and in parallel I continued to work with her. (Coach 7)

While some of these parallel relationships predated the coaching work, many were a stipulated condition of working by the coaches. This form of working therefore
served to give the coach some comfort that their client’s issues were being appropriately managed, and that the client could maintain the resourcefulness required for coaching. This was seen as a more comfortable arrangement than straight referral, which carried the potential for being perceived as a rejection by the client.

**Differentiations between therapy and coaching**

In addition to the above themes, within the therapist-coach group a number of additional perspectives emerged reflecting their experiences of working on both sides of the ‘boundary’. Interestingly views among this group were far from homogenous, perhaps reflecting the beliefs and assumptions of their different schools of training. For example, while most of the group saw the coaching client as generally more psychologically robust, one therapist-coach argued that coaching clients could be every bit as fragile as therapy clients, but were just better at concealing it. These perceptions of relative robustness translated into different ways of working with some stressing the need for more robust contracting in therapeutic situations, while others saw this being of equal importance in therapeutic or coaching contexts.

There was more general agreement however regarding expectations of coaching and therapy. Therapy clients were characterised as expecting a slower paced exploration of personal history, resulting in an improved understanding or even resolution of past difficulties. In contrast, coaching clients were portrayed as expecting support to enhance their work performance, with changes expected relatively quickly. However one therapist-coach noted a belief that many coaching clients had unconscious needs for therapy that propelled them into coaching.

This material is largely consistent with similar studies reported in the literature. For example, the Hart et al. (2001) study of 30 therapist-coaches noted the prospective orientation of coaching, the expectations of rapid change in both therapist and coaching clients, the relative fragility of therapy clients and the need for supervision in both settings. Interestingly, the same disagreement regarding contractual rigour appeared in this study as well.

**Conclusions and recommendations**

Coaching is going through the birth pangs of becoming a recognised profession and as such is tussling with questions of definition, competency requirements, ethics and regulation. This study contributes to that debate, informing how business coaches define the limits of their work by describing how they operate at the margins of their work. Due to its in-depth nature IPA is necessarily more appropriate for small sample groups and findings are not necessarily generalisable, although there was substantive agreement with other empirical research. The sample group was a relatively mature group in terms of their coaching experience and training and findings may thus represent somewhat of a high benchmark. It is therefore possible that general awareness of the issue and relevant skills for handling these complex
situations may be somewhat lower than portrayed by this sample. Further qualitative work could therefore be usefully done with (1) less experienced/trained coaches and (2) other forms of coaching e.g. life coaching. Quantitative work is also required to establish the prevalence of boundary working within wider populations of coaches.

However it is very clear, from this sample at least, that the personal and the professional are deeply intertwined in the coaching conversation, and attempts to compartmentalise these by either coach or client are unrealistic. Coaches must therefore be prepared to work with the ‘whole human’ whilst maintaining a focus on the agreed contract. This supports arguments (Bachkirova & Cox, 2005) that coaches cannot avoid working with psychological blocks, and refutes ideas that coaches work only with the positive aspects of their clients. Some of the current definitions of coaching may therefore be inadequate, failing to represent the realities of coaching work.

Working with psychological blocks is not necessarily problematic if coaches operate within their competence and remit, however gives rise to serious ethical, moral and potentially legal questions otherwise. Consequently coaches must learn (at least) how to recognise a wide variety of psychological conditions including those of a clinical nature (Buckley, 2007a,b). Coaching risks being superficial at best if it cannot investigate the ‘whole human’ but coaches must be equipped to explore the territory safely and at appropriate depth, or refer on to those who can. Whilst clinical issues are clearly out of scope, a more grey area exists for those sorts of psychological issues which disrupt or impede performance in an otherwise functioning client.

Development of ‘psychological mindedness’ (Bluckert, 2005b) is therefore a necessary but insufficient prerequisite for practice, and implies the need for less optional and more rigorous training than at present (Bachkirova, 2007). The successful tri-partite model of supervision, personal development and theoretical knowledge long adopted by therapists and counsellors to underpin their practice, therefore seems a sensible and perhaps inevitable direction to go. Such a coherent professional development process would require the coordination of the current professional bodies and possibly their convergence over time. As Simons (2006) suggests, this might also imply the need for registration, limiting those who can call themselves a coach. This would provide the added benefits of providing some level of quality assurance to purchasing organisations and their employees. However comprehensive psychological training does not imply a ‘carte blanche’ and coaches must continue to be mindful of the contracted remit of their work as well as the level of permission granted to them by their clients.

While unpalatable to many, this route would be preferable to the US model (Martinez, 2004) where the activities of coaches are more tightly curtailed and proscribed, with a boundary artificially enforced between the disciplines. While this direction would particularly constrain therapist-coaches, it would also unhelpfully limit the range of solutions available to clients, as well as impeding development of a sound psychological basis for coaching.
References


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