

Psychotherapy or Life Coaching: A Literature Review

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## Abstract

Psychotherapy and life coaching are both considered *helper* professions. This literature review looks at the two disciplines through a historical lens to understand their foundations and the path each took to their current successes. There are many similarities between the two while each remains distinct in important ways. When comparing psychotherapy to life coaching, some surface similarities exist, including the creation of strong relationships to help the client succeed in whatever problem brought them to the service. Other factors only help to create the illusion of sameness, as life coaching tends to borrow from psychology. An example of this borrowing is in the solution-focused approach. Solution-focused brief therapy set the groundwork for future, and goal oriented therapy. Through its innovative humanistic approach, it gained popularity in the discipline of life coaching as a guide towards a result- and performance-based practice. However similar they may seem, there are also subtle differences between the two disciplines.

Psychotherapy's roots derive from the medical model for healing and treatment, whereas life coaching's roots derive from a teacher and educational model. As the two disciplines differ in their roots, so do they differ in their pathways to mandatory regulation. In the last chapter, suggestions for further research are made and implications for scholarly action are discussed.

*Keywords:* psychotherapy, life coaching, history, solution-focused brief therapy, solution-focused life coaching, literature review, ethics, professional standards

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## Dedication

In dedication to my parents for their strength and love.

Your courage and tenaciousness keep showing me that I can always take the next step.

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## *Chapter 1*

### **Introduction**

This thesis begins with a brief introduction to the evolution of psychotherapy and life coaching. Chapter two undertakes a historical literature review to bring an awareness of the history that brought psychotherapy and life coaching to where they are today. Along with the historical perspective, this review narrowed its scope to the solution-focused approach and to where these two fields align in their philosophies. Chapter three is a critical analysis of the literature review conducted in Chapter two. The analysis will show patterns in psychotherapy and life coaching that add to the understanding of what the two disciplines contribute as well as identifying their shortcomings. Chapter four ties together both Chapter two and three and offers suggestions as to how these disciplines can be advanced.

In the continuum of human evolution, mental health treatment has undergone many transformations. It was not that long ago that those suffering from mental illness were warehoused in *insane asylums* and completely disenfranchised. A change in treatment arose from the necessity and desire to comprehend what was happening with these individuals. Neither religion nor medicine had a comprehensive answer as each viewed mental health as *the problem* given their respective analytic lenses but the lack of such an answer gave rise to modern psychotherapy. After World War I (WWI), and particularly after World War II (WWII), some returning veterans were displaying signs of mental illness. Cautin (2011) writes that “World War II brought with it an unprecedented number of neuropsychiatric casualties—the U.S. Army in fact reported that almost half of its first 1.5 million medical discharges were due to neuropsychiatric disabilities” (p. 23).



Alongside the emergence of psychotherapy, coaching also began to evolve from a way of managing athletes to achieve better performances, to a concept used in business to improve professional performance. The concept of life coaching would come later. Life coaching would undergo its own transformation as it matured into the life-enhancing industry it is today. The purpose of this thesis is to compare and contrast psychotherapy with life coaching, and to explore the need for mandatory regulation in both disciplines.

Chapter two is a review of the peer-reviewed literature regarding psychotherapy and life coaching, starting with a historical summary of each in order to understand their respective beginnings and how each one continues to evolve. There are many different schools of thought within psychotherapy. These grew out of different understandings and approaches to treating mental illness. Overall, there was an identified need to *treat* those suffering from mental illness, but little consensus on how it was to be done. Psychotherapy began developing around the turn of the 20<sup>th</sup> century. According to Cautin (2011), “prior to the 1st (*sic*) decade of the 20th century, most treatments for mental and physical illnesses, including diet cures, rest cures, electricity, and hydrotherapy, reflected the medical community’s staunch allegiance to the somatic paradigm” (p. 5). These cures meant that the *problem* of mental illness stemmed from something being wrong in the body, not in the mind. Since then, psychotherapy has evolved and generated many variations, as well as transformations, of theoretical perspectives. As a result, different approaches emerged giving way to evidence-based practice in psychotherapy. Psychotherapy started to be seen as a *helping* type approach to healing mental illness within mainstream society.

The last four decades have seen a rise in another type of *helping* approach, life coaching. Nowadays, choosing a career as a life coach has become a viable option. Popular culture and the media have played a significant role in this development as many people embrace the personal

and professional growth industry, and realize the benefits of having a life coach. A life coach is someone who supports the enhancement of performance and empowers clients to transform their lives. According to Vaughan Smith (2007), “the coaching process is one that encourages empowerment; the sense that we can influence what happens in our life as a result of accessing our inner creative resourcefulness” (p. 4). A life coach can be someone who asks the *right* questions to empower clients to shift their thought process so they may have what they originally stated they wanted. Life coaches can become sounding boards for hopes and dreams or the devil’s advocate who challenge one’s limits and push one forward. Most often, individuals seek coaching during a life transition, when they have lost motivation within their current circumstances or want to be held accountable by someone other than themselves (Vaughan Smith, 2007, p. 5). A life coach bears the external accountability that people often seek when they want to have something more or new or different in their lives.

Both psychotherapists and life coaches should be held ethically accountable to their clients. In the United States of America (USA), by 1997, all states and territories required psychotherapists to have a license in order to practice therapy (Schaffer, DeMers & Rodolfa, 2001, p. 654). Currently, in British Columbia (BC), Canada, a therapist does not need to be part of any professional regulatory body. “This means there is no regulatory body that has legislative authority to ensure competencies and ethical practice of counselling therapists, nor to ensure accountability for those who may be providing counselling to clients without the necessary training, education and experience” (FACTBC, “Core Principles”, para. 8). The Federation of Association for Counselling Therapists in British Columbia (FACTBC) has been making the case for psychotherapy to be a mandatory regulated practice. FACTBC states that:

The Task Group for Counsellor Regulation was formed in late 1997 in response to the Health Professions Council (HPC)'s recommendation in its February 1997 report to the Minister of Health that counselling not be designated under the Health Professions Act (HPA) but some other form of regulation be developed. ([www.factbc.org](http://www.factbc.org), "About Us", para. 2)

While psychotherapy is already largely regulated, life coaching has some catching up to do. A life coach is not required to register with a professional regulatory body in order to practice in any country. Stelter (2014) states that "coaching and coaching psychology form a relatively young practice field. Until now, there have been no clear guidelines for coaching as a profession" (p. 182). This might not change until a client complains of psychological damage caused by the negligence or abuse of a life coach; only then might regulation become part of the discourse.

### **Statement of Problem**

The issue at hand is that the general public does not always know the difference between psychotherapy and life coaching. There is still stigma attached to seeking psychotherapy and at times, life coaching is seen as a way to receive therapy without the stigma. According to Link and Phelan (2001) "people form expectations as to whether most people will reject an individual with mental illness as a friend, employee, neighbor, or intimate partner and whether most people will devalue a person with mental illness as less trustworthy, intelligent, and competent" (p. 373). Life coaching focuses on the enhancement of performance and this is seen as a positive step forward in life. Since psychotherapy and life coaching are perceived to be similar *helping* professions, it would support clients to gain a better understanding of the differences in order to make an informed decision as to which of the two disciplines will suit them best.

### **Nature of the Study**

The intention of this study is to compare and contrast psychotherapy and life coaching to identify similarities and differences within the two disciplines. The goal of the review is to look at the history of the two disciplines, look for patterns within the literature, and find out what makes psychotherapy and life coaching the same yet at the same time distinct. This thesis also focuses on finding a gap in these disciplines which requires attention. The premise is that there will be a gap that will highlight what is missing and which will then be brought to the forefront so that further research can be conducted.

### **Purpose of the Literature Review**

The purpose of this literature review is to gain a comprehensive understanding of psychotherapy and life coaching by looking for foundational commonalities and differences in how these two professions support clients in their lives. The literature review looks at patterns to gain insight into these two varying approaches and what may be missing from the literature. Understanding these two disciplines may allow clients to make better choices based on understanding their needs.

### **Conceptual Framework**

The focus of this literature review is to examine the methodology of psychotherapy vis-à-vis life coaching to continue to advance the discourse of how these are at once similar and different. The research involved reviewing literature on the history of psychotherapy and life coaching, including how each came into the professional *helping* field. Several themes were common to both disciplines:

- There are similarities in their history of acceptance into mainstream society.

- In psychotherapy and life coaching, much of the literature is grouped according to different schools of thought.
- The importance of the therapist or life coach's relationship with the client.
- Professional standards for both disciplines.

The review also looks at the solution-focused approaches as they apply to psychotherapy and life coaching in order to further narrow the discourse between these two disciplines.

### **Definition of Terms**

#### *Psychotherapy:*

1. "Broadly defined, *psychotherapy* refers to the treatment of emotional or physical ills by psychological means, implying a belief in the influence of the mind on the mind and of the mind on the body" (Cautin, 2011, p. 3).
2. Psychotherapy is a mode of treatment in which "the therapist and patient(s) work together to ameliorate psychopathological conditions and functional impairment through focus on (1) the therapeutic relationship; (2) the patient's attitudes, thoughts, affect, and behavior; and (3) social context and development" (Brent & Kolko, 1998, p. 17).
3. FACTBC has defined counselling therapy as follows:

The practice of counselling therapy assists people experiencing difficulties in relationships, or within themselves, and enhances their growth and well-being, by making use of relational, conversational, somatic, expressive, or educational methods and techniques informed by established counselling and psychotherapeutic theories, research, ethical standards, human diversity, and the range of human traditions (Cane, 2016, p. 2)

4. For the purpose of this thesis, psychotherapy references the essence of the above statements, which is that psychotherapy is a treatment-based relationship.

*Life Coaching:*

1. According to Grant (2003), life coaching is "a collaborative solution-focused, result-oriented and systematic process in which the coach facilitates the enhancement of life experience and goal attainment in the personal and/or professional life of normal, non-clinical clients" (p. 254).
2. Biswas-Diener (2009) states that personal coaching is a "professional relationship in which coaches work with clients to facilitate experiential learning and improve functioning and performance, often in the context of working towards specific goals" (p. 544).
3. Starr (2003) writes that coaching is a "conversation, or series of conversations, one person has with another. The person who is the coach intends to produce a conversation that will benefit the other person, the coachee, in a way that relates to the coachee's learning and progress" (p. 3).
4. According to Visser (2011), coaching is "the process of a coach helping a client achieve professional or personal desired outcomes" (p. 9).
5. Robbins (n.d) posits life coaching as being:

Ideal for offering you sound, unbiased guidance as you face major decisions about life changes. A results coach can also help you clarify your goals and vision and chart a course toward a more proactive path. Your life coach also helps you shrewdly assess risks and assert yourself intelligently as you let go of older, more limiting beliefs. (www.tonyrobbins.com, "Life Coaching FAQ's", para. 1)

6. For the purpose of this thesis, life coaching refers to a future-focused relationship between a life coach and a coachee to improve performance and attainment of goals.

*Accountability:*

This term has a different meaning when referring to a client versus either a psychotherapist or a life coach. The reason for this difference is that each individual is accountable for their actions and reactions according to their role in the professional relationship.

1. Merriam-Webster's definition of accountability is "the quality or state of being accountable; especially: an obligation or willingness to accept responsibility or to account for one's actions" (www.merriam-webster.com, 2017).
2. *Client accountability:* Clients are accountable, within therapeutic or coaching relationships, for their actions and reactions.
3. *Professional accountability:* The therapist or life coach owes a duty of care to the client in ensuring that they engage in ethical behaviour to further develop the client's welfare

### **Assumptions, Limits, and Scope**

This literature review began with the assumption that trained psychotherapists would be more effective in supporting clients through life dilemmas than life coaches. Secondary to that assumption was that life coaches employed a limited understanding of therapeutic principles. A limit that is beyond the scope of this thesis, is that the literary review is based on insufficient quantitative or qualitative studies of the solution-focused approach to life coaching. A literature review is bound by the research previously done and the sample population they chose to use. According to Kilburg (2016), an "assessment of coaching activities, when they are done at all,

tend to be pre- or postservice (*sic*) delivery, with self-reports by clients and coaches providing the vast majority of the data” (p. 180). Kilburg (2016) further states that “page limitations always necessitate editorial decision about what to include and exclude in any journal article” (p. 180). Therefore, the available literature is based on the coaches’ experiences, limits of their research, knowledge or the researcher’s editorial limits.

### **Significance of the Literature Review**

The literature review touches on the historical roots of psychotherapy and life coaching to compare and contrast these two approaches. It narrows its focus to the solution-focused approach in order to make a direct comparison of the two disciplines. Several patterns within the literature are identified to better understand the differences in psychotherapy and life coaching. Once these were identified, it added to the understanding of the importance of what is currently missing in each of these two disciplines. This is of importance as it allows the public to recognize the choices they face when selecting either psychotherapy or life coaching.

The significance of this literature review for professional application is to clarify for psychotherapists and life coaches each of their standardized ethical responsibilities towards clients. Vaughan Smith (2007) addresses this need after “many conversations in which some therapists/counsellors have dismissed coaching as being light-weight (*sic*) and superficial, and others where coaches have dismissed psychotherapy/counselling as being long-winded and bringing unnecessary focus on pain and distress. Neither of these is true” (p. 51). There is room for both disciplines in the *helping* field as they each address different needs.

### **Summary**

Current understanding about the similarities and differences between psychotherapy and life coaching is that, for the uninformed public, the choice between one or the other does not



make a difference in their lives. However, the differences in the two disciplines are significant enough to warrant a further look. The purpose of this thesis is to gain more knowledge in how psychotherapy and life coaching intersect by using a literature review to compare and contrast the two, and further understand what is missing in the critical review of these disciplines.

## Chapter 2: Literature Review

### Introduction

This chapter is a literature review of the different ideas of what is a therapist's role within a therapeutic setting in contrast to a life coach's role within a coaching setting. A broad search was done using the City University of Seattle's Library which lead to the ERIC, ProQuest, ResearchGate and PsycINFO databases, Google Scholar and also a broad search. Of particular interest were the differences and similarities between psychotherapy and life coaching in order to understand how each plays a role to further support the development of a client. An examination of the literature as it pertains to the different understandings of both methodologies was done. There appears to be an ongoing debate amongst the public on which method to choose, psychotherapy or coaching. In this review, the common threads of both fields will be discussed as well as how they intersect. The similarities and differences will be reviewed and how these can be traced back to the foundations of each practice. The development of psychotherapy and life coaching, from their inceptions, have both been seen as exciting developments in the humanities and social sciences.

There is a plethora of literature devoted to either psychotherapy or to *executive* or *life* coaching. However, there seemed to be a lack of comparison between psychotherapy and life coaching. The research strategy that was used was to explore the rise of life coaching as an alternative to psychotherapy. In addition, the same research was used to identify its theoretical foundation. Life coaching and psychotherapy differ in various aspects but they also have many similarities. Williams (2003) states that "coaching can look to the uninformed public like therapy because of its commonalities" (p.1). To better understand these differences and similarities, the historical evolution of psychotherapy and life coaching, and the intention behind these methods,

was used as a starting point. Secondly, the literature review revealed that much of the peer-reviewed literature for psychotherapy is often grouped according to different theoretical models. The same trend has developed in life coaching.

Furthermore, the strategy used was to search for commonalities within psychotherapy and life coaching. This was used to enhance understanding of the choices clients are currently facing when deciding which methodology to choose. The literature was used to identify where to begin to compare and contrast psychotherapy with life coaching which could potentially bring forward a deeper understanding of the intersectionality in both fields of study. It could also find a gap within the literature that currently exists for life coaching.

In comparing and contrasting psychotherapy and life coaching, the intersectionality of these two fields is easier to understand. How did each develop and what are the contributions each has made to enhance the lives of clients? David & Breitmeyer (2016) state that “although life coaching presents many similarities to other helping professions, especially with psychotherapy and counseling, it has developed mostly parallel to the psychotherapy arena, often ignoring the foundations and evolution of these fields and reinventing established concepts” (p. 1). The implication here is that coaching in its broader sense, has borrowed concepts from other disciplines, in particular psychotherapy, and reworked them to make these concepts their own. As in other disciplines, it appears that life coaching borrowed and built upon other disciplines’ concepts and re-interpreted these to fit the genre of coaching. However, there was little research done on the effectiveness of coaching until recently. “There has been an almost exponential growth in the amount of coaching-specific and coaching-related research over the past ten years” (Grant, 2016, p. 74). There is little doubt that these efforts have made big inroads with the

public's acceptance of coaching as an acceptable venue for personal and professional growth. What follows will trace out the historical development of these two fields.

### **History of Psychotherapy**

*“In my early professional years, I was asking the question: How can I treat, or cure, or change this person? Now I would phrase the question in this way: How can I provide a relationship which this person may use for his own personal growth?”*

~ Carl R. Rogers

Around the end of the 19<sup>th</sup> century, there were changes happening in the understanding and treatment of mental illness. “Psychotherapy as a clinical theory and method emerged around the year 1900” (Paris, 2013, p. 99). It developed as a response to the changes taking place within society and, as Berman and Taylor state, to the fact that people gravitated less towards “the power of organized religion” but more towards cities which increased social and geographical mobility (as cited in Paris, 2013, p. 99). Then two world wars occurred and with them, came bigger changes in the understanding of the function of the individual within a society. According to Paris (2013) with the change of traditional values, “modern life [became] characterized by individualism...[which] helps explain why psychotherapy has its greatest success” in North America (p. 99). After the WWI, returning veterans were coming back with mental problems such as “shell-shock” that could not be explained away as mere physical symptoms (Cautin, 2011, p. 14). The medical model of healing could no longer explain the neuroses that veterans and civilians alike were experiencing after years of war.

There was a paradigm shift in attitudes for North Americans that came at the end of WWII. As doctors could not explain what was happening to veterans, many psychotherapists saw this as an opening to legitimize their work. Kilburg (2016) points out that “the challenges

and demands of the Second World War quickly brought the leaders and members of both APA [American Psychological Association] and AAAP [American Association of Applied Psychology] into collaborative efforts to serve the United States Government” (p. 179). Post-war, many norms and ideals began to be questioned including psychotherapy. “The unprecedented need for mental health care among newly discharged veterans underscored the demand for more mental health professionals. Indeed, in spring 1946, almost 60% of patients in the VA hospitals were Neuropsychiatric” (Cautin, 2011, p. 24). After WWII, soldiers came back with post-war trauma and long-term psychotherapy was simply not a viable option due to its lack of affordability (S. Conway, personal communication, April 12, 2016). According to Paris (2013), “psychoanalysis had a well-deserved reputation of being excessively long, or even, as Freud (1937/1962) once admitted, ‘interminable’” (p. 101). Long-term psychotherapy was not easily accessible but with post-WW II tensions, there was still a need for psychotherapy.

Globally, more tensions arose from the fallout of political instability through Europe. There were veterans returning with mental illness, civilians under duress as they did not know how to handle the influx of those with trauma and lastly, civilians who survived the war in Europe and were looking for a better future. All of this was happening while the US was entering the Cold War. This also affected individuals’ levels of stress and in the midst of it, psychotherapy was trying to figure out which direction to take. Psychotherapists agreed that there was a need to help, but they did not always agree on how to help. There was a proliferation of different schools of thought in psychotherapy. Hilsenroth (2013) writes that the publication “*Psychotherapy* was born [approximately] 50 years ago, at the time when the anxiety of the Cuban missile crisis was still fresh in the psyche of the nation” (p. 1). Times were changing and psychotherapy was in the midst of its own changes. “The field of psychotherapy was also

experiencing its own ‘Cold War’ between different camps regarding issue of efficacy and outcome” (Hilsenroth, 2013, p. 1). Essentially, an evaluation was conducted to understand if psychotherapy was helping clients recover: some said yes and others no. In 1952, a review of over seven thousand psychotherapy cases was conducted by Eysenck (1952/1992) in which he found that psychotherapy did not facilitate therapeutic recovery (p. 662). This caused an uproar within the field of psychotherapy resulting in considerable debate and competition. A prominent figure opposing Eysenck’s study was Hans Strupp, who questioned the efficacy of the 1952 study (Hilsenroth, 2013, p. 1). Hilsenroth (2013) states that Strupp contributed to the development of how studies are conducted in the field of psychotherapy (p. 1). The debate lasted for over a decade and would be an important contributor to the development of evidence-based psychotherapy.

Psychotherapists were forced to look at the efficacy of the length of treatment within their practices. Visser (2013) states that “psychotherapy usually took a long time and did not tend to be very pragmatic and goal-oriented” (p 10). At the same time “many psychotherapists were dissatisfied with the traditional views on psychotherapy” (Visser, 2013, p. 10). Seligman explained that problems “were thought to be hidden away deep in the psyche of the patient and were often related to unresolved problems in early childhood” (as cited in Visser, 2013, p. 10). This meant that only experts in psychotherapy would be able to unravel the problems associated with unresolved childhood issues and left the psychotherapist completely accountable for the client’s treatment success or failure. As Visser (2013) writes, in order “to obtain that information, psychotherapists used techniques like dream analysis and interpretation, hypnosis, drugs, and different kinds of projective techniques” (p.10). However, in the 1950’s, the focus changed from the psychotherapist being the expert over the client to the client being their own

expert. There was also a shift in gathering information from the client as it had been thought that most of the useful information came from the client's subconscious.

The idea of efficacy and outcome coupled with therapy duration brought about a shift in long-term therapy to what is currently known as Brief Therapy. Howard, Kopta, Karuse and Orlinsky conducted "research on dose response to psychotherapy [which showed] that for most patients, effectiveness peaks by 20 weeks and then flattens out rapidly" (as cited in Paris, 2013, p. 102). The shift to brief therapy has been significant as it has made therapists aware of their own accountability and made therapy more accessible to more people since it was less time-consuming and less expensive. In effect, psychotherapy continues to evolve.

### **Through a Brief Therapy Lens**

In the previous century, from its humble beginnings, indeed right from psychotherapy's infancy, opinions differed on what type of theory or therapy would cure individuals. "Despite its increasing prominence, psychotherapy at this time consisted only of a collection of techniques that practitioners implemented in accordance with their own relatively disjointed theories" (Cautin, 2011, p. 6). Freud's theory of the suppressed sexual desires of his clients caused Jung to split from him and start a more humanistic approach to psychotherapy. According to Cautin (2011) "this [split] provides an important context within which to understand the subsequent development of the practice" (p. 6). Ultimately, it set the stage for the different branches that developed within psychotherapy.

Psychotherapy developed into different schools of thought, which reflected and continue to reflect the beliefs, needs and progress of society. Norcross, Freedheim & Vandenbos (2011) also added that "theoretical developments and clinical innovations are increasingly fueled by—and a consequence of—economic considerations" (p. 749). The APA website identifies the major

schools of thoughts in therapy as: psychoanalysis and psychodynamic therapies, behaviour therapy, cognitive therapy, humanistic therapy and integrative holistic therapy (APA, “Different Approaches to Psychotherapy,” para. 2). Each enjoyed some success at its inception and together have led the industry to where it stands today. Currently, a holistic approach to psychotherapy is being embraced by the counselling community. In other words, looking at individuals as different parts of a whole within their social context, rather than only focusing on the mind or behaviour. As there are too many psychotherapies to discuss for the purpose of this thesis, one focus will be on a solution-focused approach to psychotherapy. This approach is comparable to the solution-focused life coaching approach. The following reviews the history, assumptions and key concepts of solution-focused brief therapy.

### **Solution-Focused Brief Therapy**

Solution-focused brief therapy (SFBT) has been widely adopted from the middle of the 1980s and continues to be internationally developed. De Shazer and Berg, this approach’s originators, enjoyed the collaborative process in therapy which invited contributions of ideas and findings from many other sources to continually improve SFBT (Visser, 2013, p. 15). In 1978, they founded the Milwaukee Brief Family Therapy Centre (BFTC), where the idea for SFBT evolved. The center was established “as a research and training-oriented therapy center” (de Shazer et al., 1986, p. 62). “[SFBT] originated in an interest in the inconsistencies to be found in problem behavior” (Iverson, 2002, p. 149). These inconsistencies refer to the observation that the *problem behaviour* was not present all the time. There was usually an exception to the problem being present 100% of the time which contained the seed to client’s own solution (Iverson, 2002, p. 149). They realized that clients were coming in looking for changes in their



lives and most of the focus was on the problem rather than a solution. According to Trepper, Dolan, McCollum, and Nelson (2006):

Solution-focused brief therapy is a future based, goal directed approach to brief therapy that utilizes questions designed to identify exceptions, solutions, and skills which are used both to measure the client's current level of progress towards a solution and revealed the behaviors needed to achieve or maintain further progress. (p. 134)

SFBT works on the premise that the client already has the solution needed to resolve the perceived problem. Grant (2003) summarizes this as "solution-focused therapy is a constructivist, humanistic approach that concentrates on the strengths that clients bring to therapy, and emphasizes the importance of solution construction rather than problem analysis" (p. 255). Essentially, this therapy focuses on the client as being the expert of their own life, shifting away from the idea of the psychotherapist as the expert. Trepper et al. (2006) write that de Shazer "held an abiding belief in clients' abilities to know what is best for them and to effectively plan how to get there" (p. 134). Consequently, the role of the therapist is to coach their client towards their goal by allowing the client to know their strengths and limitations relative to achieving their goal.

### **Assumptions and Key Concepts of SFBT**

According to Visser (2013), the BFCT group's "mission was to find out what worked in therapy" and to start removing elements of traditional therapy that did not work (p. 12). De Shazer and Berg also believed in the power of observation teams and the reflection these could give the therapist in developing an effective session (Stalker, Levene, & Coady, 1999, p. 470). One of the main concepts of SFBT is the belief that once clients made the appointment for therapy, a change was already starting to take place. This is a major assumption made by the

BFCT team and they found that change was occurring because clients had started to find solutions prior to their arrival at the center. From this observation, the BFCT team assumed that clients wanted to make changes and had started to find solutions prior to their arrival at the center. Another assumption SFBT makes “is the idea that solutions do not need to have a lot in common with the problem” (Stalker et al., 1999, p. 470). De Shazer et al. (1986) hypothesized that “like a skeleton key, an intervention only needs to open the way to a solution, which can be done without knowing all the details of the complaints” (p. 53). This intervention would lead the client to the solution the problem. Bannik (2007) points out that “a basic assumption in SFBT is that no problem is always there to the same extent and that in order to solve it, *not a great deal about the problem needs to be known*” (p. 88). They also noted that only a small change is necessary to be successful so the client needs only a “small and reasonable goal” (Shazer, et al., 1986, p. 54). Any movement the client made towards the goal is an improvement over doing nothing.

Clients have a desire to change. De Shazer also claimed that clients were not resistant to changing. Rather, it was their reaction to the therapist that was at the heart of lack of change (as cited in Stalker et al., 1999, p. 470). These relationships were based on what de Shazer (as cited in Stalker et al., 1999) classified into three categories: visitor relationships, complainant relationships and customer relationships (p. 470). With the visitor relationship, the clients have been either sent by someone else and the problem lies with the *other person* not the visitor, so there is little incentive to change in the beginning. With the complainant relationship, the clients see themselves as the *victims* and they are suffering due to someone else’s responsibility. In the customer relationship, the clients are not resistant to therapy and acknowledge that they are a part of the problem and want to be contributors to the solution (Bannik, 2007, p. 91).

Understanding how the client has come into therapy helps determine how therapists work with clients. SFBT works with the following key concepts: (a) looking at past successes and building on them; (b) setting clear and concise goals for the therapy; (c) looking for exceptions to the problem; (d) scaling questions (0 to 10 scale, with 10 being great) of how the client rates the week(s) preceding the present session and what prevented the client from rating it at a lower number; (e) coping questions and compliments allow the client to understand their own resources and the therapist to validate this knowledge; (f) the miracle question (Visser, 2013, p. 14). According to Visser (2013), the miracle question is the most well-known concept of SFBT as it is widely used, even by those unaware of the SFBT approach (p. 14). “The ‘miracle question’ commonly used in solution-focused therapy often stimulates creativity and the visualization of preferred future events” (Macdonald, 2007, p. 85). A therapist can ask the client: If you could have the perfect outcome to *the problem*, what would that look like? SFBT is future focused so very little time is spent on what did not work for the client, rather the client is asked to employ their imagination to visualize an improved future. Due to the future oriented outlook of SFBT, asking scaling questions guides the client to briefly look at the past in order to understand their measurement (0 – 10 scale) of the present. It is within this technique that the client can usually begin to find their own solutions towards achieving their therapeutic goal. The solution is usually found in the reason why the client does not report being at a zero. Lastly, the use of therapy treatment goals is important in that goals can help measure improvement, not only from the therapist’s perspective but more importantly from the client's point of view. A goal also keeps the clients focused on looking towards the future, and having to look within to find solutions to achieve their goal. Therapeutic goals also help the clients focus on one thing they would like to achieve from counselling.

## History of Life Coaching

*A coach is someone who tells you what you don't want to hear, who has you see what you don't want to see, so you can be who you have always known you could be.*

*~ Tom Landry*

The concept of a coach and coaching has been transformed various times throughout the last century. These transformations at times overlapped with the changing values of society at the time. Stec (2012) writes that “this evolution involves four stages; from an object to a concept involving status, to a character in sport, and finally to a management concept” (p. 335). From the 1500s until the mid-1800s, the first understanding of a coach was an actual vehicle, pulled by horses and driven around by a coachman, who would take their patrons towards their desired destination. This form of travel was for society’s elite and the more opulent the coach, the more prestige was given to the owner. Once these vehicles increased in popularity, gentlemen wanted to drive the coaches. “In effect, gentlemen and admiring youth sought to be ‘coached’ by coachmen as they tried to emulate the four-hand method that was the style for managing a team effectively” (Stec, 2012, p. 338). This introduced the second transformation from an object to one of tutor and student. There was still a great disparity between the tutor and the wealthy student. However, with this evolution, the racing of coaches (vehicles) emerged. This created the overlap of a *sporting coach* to that of a *sports coach*. This idea of a sports coach is still present in today’s sporting arenas. Spec’s (2012) research illustrates this by stating that “the concept of coaching becomes firmly linked to athletic competitions via its association with [racing]” (Stec, 2012, p. 339).

In all three of the above phases, within the coach and coachee model, the power dynamics were that the coachee outranked the coach. In fact, hiring a coach was seen as a

prestige by the public due to the ability to afford this luxury. In North America, the power dynamics began to change when competition between schools necessitated the hiring of retired *professionals* to begin coaching their teams towards sporting victories in order to fill classrooms as well as stadiums, making this a financially viable career. The competition was so fierce that in the early 1900s, Harvard hired a football coach and paid him “\$7,000 a year, 30 percent more than Harvard’s best-paid professor” (Guttmann, 2007, p. 144). This performance driven transformation was the precursor to the concept of using coaching towards business performance.

An executive or business coach is seen as someone who helps management within a company perform better within the business arena. Coaching as a management concept first appears in a peer-reviewed literature piece in the 1930s (Maynard, 2006; Passmore & Fillery-Travis, 2011). Maynard (2006) writes that this research “was a study by Gorby (1937) in which senior employees working under a profit sharing plan coached newer employees on how to reduce waste and increase profits” (p. 14), essentially turning managers into performance driven coaches. This idea formed the beginning of executive coaching where the coaches were initially drawn from within an organization and later, where executive coaches would be hired from outside companies. Throughout the next several decades, there was limited research of coaching as a management concept until the 1980s where “the professional use of non-athletic, non-academic coaching began within the context of business with the first client population consisting of managers and executives” (Maynard, 2006, p. 15). Passmore and Fillery-Travis (2011) also support this and state that “the trail went cold ... and did not really start again until the 1990’s [where it showed up in] the work of writers such as Kilburg, Diedrich, Lowman and others in *Consulting Psychology*, which has blazed the trail in this area of psychology practice”

(p. 70). Stec (2012) recounts that in the 1990s, Thomas Leonard, a financial planner who found himself being sought out by his clients for more than financial matters, quit his financial planning career to become a coach and in 1992 founded Coach University (p. 344). “In 1994, he founded the International Coaching Federation (ICF), a regulatory body that certifies programs offered by universities such as Columbia University in the USA and Queen’s University in Canada” (Stec, 2012, p. 344). In their 2015 study, ICF found that “by combining the average annual income generated by coach practitioners with the number of coaches with active clients, the estimated 2015 global revenue from coaching was \$2.356 billion USD, representing a 19 percent increase over the 2011 [study]” (ICF, 2016, para. 6). This is a substantial increase in the coaching profession. Despite this amount of revenue success, life coaching still does not have strong empirical evidence as to why it works.

Evidence-based solution-focused life coaching peer reviewed research “is still in its infancy” (Visser, 2011, p. 10). There is limited literature from which to draw the evidence of its effectiveness. In fact, Grant and Cavanagh (2011) state:

There has been significant growth in the coaching literature in recent years, and the bulk of the literature on coaching is less than 10 years old. As of February 2009, there were more than 520 published scholarly papers or dissertations on coaching cited in PsycINFO, yet in the 62 years between 1937 and 1999 only 93 papers were published .... Between 2000 and February 2009, more than 360 peer-reviewed papers were published. However, of these papers, approximately 60 % have been articles, opinion papers, descriptive articles, or theoretical discussions and about 30 % empirical studies (20 % of all these have been PhD dissertations). (p. 296)

This is of importance as only 30% of the evidence-based research is using quantitative or qualitative research methods, making the rest of the literature opinion or comparison based reviews. This truly showcases the need for more evidence-based research and more is being done to establish such research practice in life coaching. In 1999, the Coaching Psychology Unit (CPU) was established at the University of Sydney with “a mission to enhance the performance, productivity, and quality of life of individuals, organizations, and the broader community through excellence in education, research, and the practice of coaching psychology” (Grant, 2016, p. 105). From this, they have produced 150 publications that include “eight randomized, controlled outcome studies and nine between-subjects or within-subjects outcome studies” (Grant, 2016, p. 106). Cavanagh, Grant, & Kemp (as cited in Grant, 2016) assert that CPU is helping to “establish an evidence-based foundation for the emerging discipline of professional coaching” (p. 106). This once again highlights the early stages of an evidence-based practice in life coaching.

### **Through a Solution-Focused Life Coaching Lens**

Life coaching has grown substantially from the 1990s to present day. It does not follow a medical model of treatment and in fact, it is not meant to treat any clients. According to Grant (2003), life coaching is “a collaborative solution-focused, result-oriented and systematic process in which the coach facilitates the enhancement of life experience and goal attainment in the personal and/or professional life of normal, nonclinical clients” (p. 254). Life coaching has its roots in people seeking support from a professional, in order to lead fulfilling lives. It is not meant to diagnose or treat mental illness and in most of the literature, the authors go out of their way to distance themselves from treatment. Williams (2003) boldly states that “coaching today embodies the superior purpose of psychology....it is not just about pathology, diagnosis, and the

treatment of human frailties” (p. 24). Because coaching does not pathologize, it “empower[s] people and help[s] them discover what they can do” leading to better mental health (Williams, 2003, p. 24). But this, ironically, would posit coaching as being better than psychotherapy when in actuality they both serve different needs for clients. Within the *modern* world, perceptions and understanding of the world are rapidly changing and “we live in a time where re-inventing oneself has become a commonplace expectation, even an ideal to effect in one’s life” (Rotenberg, 2000, p. 654). So, if individuals are not happy with their lives, life coaching will help with this re-invention. The implication is that the non-pathologizing stance of life coaches is well-suited to help clients adapt to the fast, changing world around them.

Presently, individuals find themselves making significant changes in their personal as well as their professional lives. Throughout most of the 20<sup>th</sup> century, people tended to stay within the same career and the divorce rate was relatively low. The nucleus of the family was generally kept together. As society evolved, the need to re-invent oneself has become a necessity to keep up with changes in personal and professional spheres. According to Fillery-Travis and Lane (2006) life coaching “takes a broader more holistic view often dealing with more intimate, personal and professional questions. This can involve the creation of a personal reflective space rather like what they call ‘therapy for the people who don’t (*sic*) need therapy’” (p. 25). But this may be crossing the boundary between being a life coach and being a therapist. Life coaches generally focus on “everyday concerns such as relationships, creativity, and parenting” (Biswas-Diener, 2009, p. 545). Managing or dealing with these *everyday concerns* supports the client in their re-invention. The coach is tasked with guiding the client in managing these everyday concerns and will usually have a theoretical framework that guides their coaching.



In order for the process of life coaching to work, coaches generally have a theoretical stance. Trained life coaches have many techniques in common, regardless of the coaching model being used. The commonalities in techniques are active listening, asking open-ended questions, reframing self-limiting beliefs and thoughts, becoming the clients' cheerleader and maintaining accountability (Biswas-Diener, 2009, p. 545). Life coaching has gathered a lot of success stories that can be found in various websites, including in the ICF website. There is still a need to research the efficacy of the different life coaching approaches. Maynard (2006) points out that "despite the lack of peer-reviewed research studies on life coaching used to direct and educate professionals on empirically sound principles in life coaching practice, a comprehensive business plan template designed specifically for life coaching can be found in the literature" (p. 33). This could be interpreted as the reason that the coaching business does not have more empirical studies. If the business plan works there is no need to validate it.

**Solution-focused life coaching.** Solution-focused life coaching has its origin in SFBT. This life coaching approach has "gained popularity in coaching over the last decade" (Visser, 2011, p. 11). "A fundamental belief in solution-focused coaching is that people are more likely to change and achieve their goals quickly when they tap into their own resources and solutions" (O'Connell, Palmer & Williams, 2013, p. 14). The underpinning principles of solution-focused life coaching are: (a) do not pathologize the client's problem, instead explore solutions; (b) the coach does not need to know or understand the problem; (c) you get a better outcome when you focus or have hope of the future; (d) change occurs in small increments rather than trying to reach for quantum leap; (e) obtain coherence: client and coach understand the desired goal and are both in agreement about the measurement and attainment of the goal; (f) look at what currently works in the client's life and use more of it, and if it is not working, do something

different; g) stop overthinking and get moving (Hicks & McCracken, 2010, p. 62; Grant, 2011, p. 100; O'Connell et al., 2013, p. 15).

In addition, solution-focused life coaching seems build strong relationships that can bring about change in a short period of time. O'Connell, Palmer and Williams (2013) reference the lasting changes clients in SFBT have achieved in three to five sessions and liken solution-focused coaching as having the same main features (p 23). During the coaching session, the coach and coachee will focus on the here and now, they will construct “clear, specific and attainable goals”, the coach will be confident, professional and establish a trusting relationship with the coachee, the coach is engaged and lastly, the coachees commit to working on their goals in between calls or meetings (O'Connell et al., 2013, p. 23). Within this coaching approach, trust must be established between the coach and coachee. It is essential that the coachees trust their coach, both to hold them accountable, and to trust the process that the coach is asking them to follow. “The coach must also trust that the coachees can use [the coachee’s] expertise to achieve their goals. Their ‘inside’ knowledge is crucial to achieving outcomes” (O'Connell et al., 2013, p. 23). Hicks and McCracken (2010) claim that solution-focused life coaching works because it is “an evidence-based approach to helping others identify and make meaningful progress toward achieving their goals” (p. 64). But the research has yet to prove this powerful statement. In fact, since solution-focused life coaching piggybacks on SFBT principles, most of the literature of this coaching approach reviews SFBT studies rather than its own.

### **Life Coaching in Popular Culture**

As previously noted, life coaching’s precursor was executive coaching. Life coaching has experienced rapid growth in the coaching sphere and it is important to note the popularity of certain famous life coaches such as Anthony Robbins and Brian Tracy. They have catapulted life

coaching in popular culture to become a *must-have* for those wanting to be successful in business and life. Senior (2007) believes that life coaching could have also grown out of the popularization of humanistic psychology in the 1950s, on which the human potential movement was founded (p. 19). It has been argued that within this movement, “it is possible to facilitate an individual’s movement towards self-actualization” (Senior, 2007, p. 19). The focus is on the development of the individual to be their *true* and *full* self.

Individuals do not live on their own and are often reacting to the sociocultural environment around them. Therefore, equally important is to understand that individuals are affected by their environment and self-actualization is not a stand-alone concept. Individuals live within the broader scope of society and culture, both of which affect self-actualization. Culture influences how individuals conceptualize their sense of self and what works with some clients does not necessarily work with others. As well, depending on how well their basic needs are met, clients will have different levels of understanding their self-actualization.

### **Literature Summary**

In this chapter, the review of the literature on the history of psychotherapy and life coaching revealed certain patterns in SFBT and solution-focused life coaching. Multiple sources were gathered to get a coherent and comprehensive understanding of potential patterns to be able to compare and contrast these approaches. Their roots are distinct and yet lead towards a common goal of supporting people into living better lives. In the following chapter, a critical analysis will be done of the literature, what is missing and how to move forward.

### *Chapter 3: Critical Analysis*

#### **Introduction**

This chapter incorporates a critical analysis of the literature review conducted in Chapter two. The critical analysis will be broken down as follows: (a) compare and contrast study of psychotherapy and life coaching; (b) employment of the lens of solution-focused brief therapy and solution-focused life coaching; and (c) to identify the gap between the two disciplines. Psychotherapy and life coaching appear to have grown out of individual's desire to lead a better life. Throughout the last century, many of North American societal norms started to be shaken to their foundations. This fluidity meant change, and with these changes, many faced psychological distress. Two factors appear to be the key changes to North American society that may have contributed this change:

1. The veterans who came back from 20<sup>th</sup> century wars
2. The cultural shift in male and female roles

Many helping professions arose as an answer to this societal change. The development of psychotherapy and life coaching, although sometimes interwoven, bears some similarities resulting as they are from the cultural shifts of the 20<sup>th</sup> century. Both of their beginnings are a response to the different time periods as well as a reaction to what was happening within society.

#### **Psychotherapy and Life Coaching**

##### **Historical Similarities**

The historical building blocks that formed psychotherapy and life coaching were similar. The foundational goals are that “they both seek to help the individual” (Williams, 2003, p. 21). Their premise is for people to live healthier and fuller lives. However, both had difficulty in gaining acceptance as reliable methods for supporting clients and have taken a fairly long time to

become accepted by the general public. Psychotherapy and coaching as people management practices have evolved several times, most notably in the 20<sup>th</sup> century.

Early in its history, psychotherapy was seen as the dominion of psychiatry, an off-shoot of medicine. However, psychotherapy *exploded* after WWII. “Following World War II, the psychotherapy marketplace would change dramatically, as professional psychology would flourish and psychiatry would lose its dominion over psychotherapy practice” (Cautin, 2011, p. 4). Life coaching and/or coaching as a people management concept also took some time before exploding as an industry. “The coaching industry, and particularly life coaching, has grown substantially since at least 1998” (Grant, 2003, p. 254). It took both disciplines almost 60 years, psychotherapy from the 1890s to 1950s and life coaching from 1930s to 1990s, to become accepted in mainstream society. Life coaching seemed to follow in the historical footsteps of psychotherapy. If this is the case, life coaching could have the advantage in growth potential as it piggybacks on psychotherapy. However, up to now, it appears that the discipline of life coaching will continue to evolve alongside psychotherapy, and researchers do not need to look at the latter’s past to gain insight into life coaching’s future.

Life coaching is also seen as an off-shoot of psychology and the personal development field which itself has had many contributions from the field of psychology (Grant, 2003, p. 254). Currently, these two disciplines are quite widely accepted. In fact, Norcross et al. (2011) state that “the number of professions conducting psychotherapy increases steadily. Recent entries hail from life coaches and executive coaches” (p. 745). But it must be remembered that life coaching is not psychotherapy and did not originally posit itself as part of the mental health field. Life coaching is seen as a performance enhancer. In contrast, psychotherapy, from its inception,

posited itself as a way to *help* clients understand and get relief from their suffering through treatment.

### **Different Schools of Thought**

In both fields, the theoretical stance is the premise of why and how the theory works. These different schools of thought encompass how practitioners in either psychotherapy or life coaching chose to practice. The history of psychotherapy is divided into “schools of thought, starting with Freud, and the dissident views of some of his followers, followed only later by newer methods such as cognitive–behavioral and interpersonal therapy” (Paris, 2013, p. 100). Life coaching has followed a similar path. It is also divided into different schools of thought. “Like many other emerging disciplines, coaching has struggled with problems of definition” (Ives, 2008, p. 100). It is as if there is a constant push and pull as people decide which direction to take in trying to make life coaching more consistent in its practice. As noted in Chapter two, in either psychotherapy or life coaching, the approaches professionals use are grouped according to theory. For the sake of comparison, SFBT and solution-focused life coaching were reviewed. Cavanagh and Grant (2014) assert that “like many of the recognized approaches to coaching, the SF approach has its roots in therapy” (p. 52). Both are solution-focused rather than problem-solving focused; meaning neither the therapist nor the coach wants to know much about the history of the problem.

The focus is on the future. “The solution-focused approach posits that coaches [or therapists] should spend most of the time asking questions that elicit thoughts from the [client] about *how* to best attain their goals, rather than asking ‘why’ questions that explore causality” (Grant & O’Connor, 2010, p. 103). This approach to either psychotherapy or life coaching does not look at the past to understand the present behaviour of the client. This could be the reason the

solution-focused approach works well in both settings. But what would be more challenging and practical to discern in the client's mind is the actual difference between SFBT and solution-focused life coaching.

### **Differences**

Life coaching is not psychotherapy nor should it be perceived as a different form of psychotherapy. There is a great deal of overlap between psychotherapy and life coaching. “[One of] the most important trends in the coaching profession has been an increased synthesis with psychology” (Biswas-Diener, 2009, p. 545). However, as Williams (2003) points out, “therapy is about recovering and uncovering, while coaching is about discovering” (p. 25). According to this latter statement, therapists focus on the clients' pasts to support them in gaining understanding of how their past affects their present and how, if they do not link the past to the present, their future may be in peril. Psychotherapy rose out of a medical model as a way to cure the client. In sharp contrast, within the paradigm of life coaching, clients are seen as discovering their full potential. Life coaching rose out of the human potential movement as a way lead a fulfilled life. The human potential movement is in part credited to Carl Roger's “monumental book, ‘Client Centered Therapy’, which shifted counseling and therapy to a relationship in which the client was assumed to have the ability to change and grow” (Williams, 2003, p. 23). According to Williams (2003), “this shift in perspective was the precursor to what today is called coaching” (p. 23). This fits in with the idea in the solution-focused approach that the client already has the willingness to change.

### **Psychotherapy or Life Coaching**

Despite the goal of life coaching, a lack of understanding or fusing the mental health field with coaching can do a lot of harm to the client. Psychotherapists train to understand the client's

psychological suffering whereas the life coach is more concerned about goal attainment. This is not to say that the therapist is not concerned with the client's goals, but it forms a part of the relationship, not the whole of it.

Williams (2003) separates life coaching into four different groups:

1. Coaches with therapy backgrounds
2. Coaches without therapy backgrounds
3. Clients needing therapy, but seeking to avoid the *stigma* of therapy by being coached
4. Legitimate coaching client with therapeutic needs (p. 32)

The four groups have potential dangers for the coach that do not apply to the therapist. The following gives an example of a possible life coaching scenario.

**Scenario 1.** A coach with a therapy background has a client who does not complete any action steps for several coaching sessions. Using the solution-focused life coaching approach, the coach and the client understand the goal and are in agreement as to how the coach and the client will know when the goal is attained. The client then proceeds to miss action steps. In life coaching, the life coach does not explore *why* the client is not completing actions steps, instead asks questions that focus on solutions. If a step is missed, a good question to ask could be: how can you, the client, get back into integrity with yourself so that you can either change the next step or complete the agreed upon one? The wording of this question does not ask for a reason as to why the action step was missed, instead, it focuses the client on their own accountability. The client's accountability within this scenario is to take ownership of not completing the step without justification or excuses. Williams (2003) points out that "a therapist may add coaching skills to his or her practice, but a coach never engages in therapy" (p. 28). A therapist adding



another skillset to their therapeutic practice already has the foundation to understand psychological distress. In contrast, a coach who has only been trained as a coach, may not have the same understanding and can cause psychological harm to their client. The coach who does not appreciate the potential therapeutic implications at play may be tempted to turn the session into a therapy session which is generally not recommended. This is in direct contrast to Norcross et al.'s (2011) belief that life coaching is entering into the psychotherapy field (p. 745). Life coaching is still in the midst of forming its philosophy and as pointed out previously, struggles with defining itself.

Coaches without a therapy background may not understand the actual difference between psychotherapy and life coaching, and inadvertently cross this boundary. This can be harmful to the very person the coach is trying to assist. "Without a clear understanding of the differences between therapy and coaching, the potential exists for the client to present therapeutic symptoms, and the untrained coach to fall into the trap of treatment without the benefit of professional training and licensing" (Williams, 2003, p. 29). Cavanagh (2005) gives an example of this as:

**Scenario 2.** One example of where coaching may cause harm is the case of depressed clients. Coaching involves goal-setting, often using stretch goals. However, depressed clients face significant difficulties in initiating and maintaining goal-directed behaviour. The coach can unknowingly encourage them to set goals beyond their current capability – indeed, such clients may seek to set such goals unprompted, hoping this will help them overcome their lack of energy and motivation. Failure to achieve these goals can further entrench a sense of despair and hopelessness, and these clients can leave coaching significantly worse off. If their depression and hopelessness are severe enough, failure in coaching could even be life-threatening. (p. 22).

Also, clients who do not want the stigma associated with psychotherapy, may seek a life coach as a way to deal with their problems. This can present a challenge to the life coach as there is a caveat for the coach not to diagnose or pathologize. Although the client believes it may be an easier way to deal with therapeutic problems, there exists the possibility that the life coach may not recognize the mental health symptoms or risks and could potentially harm the client (Williams, 2003, p. 31).

### **The Solution-Focused Approach**

During the literature review of Chapter two, there were key concepts underpinning the solution-focused approach in psychotherapy and life coaching. The similarity between these two disciplines is that both, the therapist and life coach, seek to co-create clear and concise goals with the client. It is important that both the helper and the client know and understand the goal and how its attainment will be measured. SFBT and solution-focused life coaching focus on the future and little to no attention is paid to anything that happened in the past. The *miracle* question supports both disciplines in looking towards the future. Both value the client's understanding of their own strengths. In addition, both counsel their clients to continue doing what has been successful up to now. Lastly, both do not need to know or understand the origins of the problem in order to work with the client towards goal attainment.

The difference is that solution-focused life coaching does not pathologize. Some coaches, however, will have training and are alert to some potential mental health concerns. These usually tend to be coaches with proper training and experience. Trained coaches generally have a good awareness of the different mood disorders, such as depression and anxiety, that can support them in their decision to work with a client (Cavanagh, 2005, p. 23).

## Relationship Building

There appears to be a similarity in the client/psychotherapist or coach relationship. Williams (2003) states that “they both seek to support the individual” (p. 21). “They both involve two people working together, a client ... and a therapist or coach” (Rotenberg, 2000, p. 655). The services they offered are delivered in similar ways “through ‘face-to-face’ or phone sessions....both work to take a person from the place they are now, to a place they want to be” (Williams, 2003, p. 21). The relationship that is developed by either the psychotherapist or the coach is paramount to the client’s success. Lambert and Barley (2001) reviewed the importance of the client-therapist relationship and found 30% of positive client outcome was due solely to the relationship (p. 358). The other factors were 15% due to the therapeutic techniques, 15% due to expectancy and 40% was due to client changes outside of therapy (Lambert & Barley, 2001, p. 358). As for life coaching, Wales (2002) states that “the quality of the relationship is crucial to the outcome, providing the container, stimulus and support for the changes that result from coaching” (p. 282). Stelter (2014) discusses other similarities within therapeutic and coaching relationships, as they have “common factors” (p. 50). He argues that:

There is research evidence that the presence of such factors as empathy, positive attention and congruence/authenticity on the part of the therapist have a crucial impact on the client’s benefit from therapy. Despite the lack of research evidence in the coaching field, the kinship between psychotherapy and coaching may justify the assumption that ‘common factors’ also apply to coaching. (p. 50)

Due to the close ties between psychotherapy and life coaching, even if these *common factors* are assumptions, the life coach must also build a relationship with the client based on understanding the client’s struggles with the goal. The life coach will also want to be fully present with the

client as well as be authentic in the support that is offered to the client. One way the psychotherapist and the life coach develop this relationship is by continually creating verbal exchanges to solidify the relationship. Stelter (2014) believes that during a coaching session, the dialogue between the coach and the client is “a process of relational knowledge production and [is] an opportunity for the coachee to acquire greater self-comprehension and self-insight; something that is achieved exactly through the verbal discourses that the coach and coachee are mutually involved in” (p. 49). Likewise, a therapist will support a client in acquiring self-comprehension and self-insight by asking relevant questions that lead the client to understand their cognitive dissonance. Cognitive dissonance occurs when there is a mismatch between what the client is feeling, doing and saying. Part of creating strong relationships is to build a safe environment where, for instance, the therapist or life coach may ask probing questions that support the client in activating their own sense of agency.

However, there appears to be a void in the life coaching literature acknowledging the power dynamics present within the coach/client relationship. The type of relationship that is being created by a therapist or a coach, although similar in nature, serves a different purpose. A life coach is building a relationship of trust in order to support clients towards goal attainment. The path towards goal attainment is where clients can reflect and grow. In contrast, a psychotherapist creates a relationship of trust to support clients in therapeutic healing. Pope and Vasquez (2016) state that psychotherapists “study human behavior and the factors that affect motivation, decision, and action. [Psychotherapists] learn methods to bring about change” (p. 61). Therefore, clients trust that psychotherapists know how to help them. This giving of trust results in a power dynamic within the therapy session, whether intended or not: the client perceives the therapist as the *helper*. A therapist must be aware of this power differential. “The

power differential is inherent in psychotherapy” (Pope & Vasquez, 2016, p. 63). As Pope and Vasquez (2016) note, “a defining attribute of the professional is the recognition, understanding, and careful handling of the considerable power- and the personal responsibility for that power- inherent in the role” (p. 63). Therapists position themselves as professionals in their field which leads to certain expectation by their clients. What seems to be missing in the life coaching relationship is the acknowledgement that this differential also exists. The coach/client relationship stresses goal attainment more so than addressing factors such as power dynamics that exist within the relationship. Acknowledging the power dynamic within the relationship is significant because as Pope and Vasquez (2016) state, “both the individual client and society recognize the diverse powers of the professional role and place their trust in [the professional] to use those powers to help – never to harm or exploit” (p. 63). This power differential certainly exists in the coach-coachee relationship and a coach may influence the client in enhancing their life or in making harmful or destructive choices. it can be destructive. The coach must ensure that the client makes choices based on their own situation, not that of the coach. “The role of the coach is to stimulate ideas and action and to ensure that the goals are consistent with the client’s main life values an (*sic*) interests, rather than working on helping the client to adjust her values and beliefs” (Ives, 2008, p. 102).

In psychotherapy, the therapist is trained to understand the process of transference and countertransference in the therapeutic relationship. Transference is when “clients transfer feelings, attachments, or styles of relationship associated with figures from their past, such as parents, onto the therapist” (Pope & Vasquez, 2016, p. 62). Countertransference is the same process happening to therapists where they transfer these feeling onto their clients. The possible danger in not understanding this process, for the life coach and even the therapist, is that they

will miss something of importance that the client is conveying. When not understood, it can potentially distort the relationship.

### **Evidence-Based Practice**

As noted in Chapter two, life coaching is at the infancy of developing its evidence-based approach. Within the life coaching field, there has been some debate about the meaning behind evidence-based practice. An evidence-based approach is rooted in the research practice of conducting double-blind studies to find efficacy of whatever was being tested or measured at the time. But because life coaches do not consider themselves psychotherapists, they believe that “coaching engagements are not considered medical interventions that follow prescribed regimes” (Grant, 2016, p. 75). There was limited research done in life coaching and most of the evidence that proved efficacy derived from personal success stories. Perhaps because the practice of life coaching is not seen through a medical lens, but rather seen as a business, there was no drive to have an evidence-based practice. The field of life coaching is at its infancy in conducting research to understand how and why it works.

### **Professional Standards**

#### **Ethics**

*The first step in the evolution of ethics is a sense of solidarity with other human beings.*

*~ Albert Schweitzer*

A pressing issue that emerged, and that both disciplines have in common, is the necessity for mandatory ethical guidelines. In BC, several regulatory bodies exist that guide the conduct of psychotherapists. Some examples of these in BC are the College of Psychologists of British Columbia, the BC Association of Clinical Counsellors or the Canadian Counselling and Psychotherapy Association. These provide ethical guidelines and expectations for certified

therapists when serving the public. Similarly, life coaches can receive accreditation through the International Coaching Federation (ICF) in order to become a Certified Coach or through the Association of Coaching to receive accreditation for professional coaching. Currently, in BC, individuals pursuing either professional practice do not have to become a member of any of the above mentioned regulatory bodies. However, both fields seek legitimacy by having regulatory entities validate their professionalism. They also seek to standardize the practice of psychotherapy and life coaching to ensure the ethical protection of their clients. As R. Sommers-Flanagan and Sommers-Flanagan (2006) stated:

Both ethics and morals refer to behaviors that some collective of human beings has agreed to be good, or right ways of being. Ethics tends to be the term used when professionals of some sort describe how ‘good’ practitioners behave. Morals tends (*sic*) to be the term used more generally to describe good or right human behavior. (p. 4)

Having ethical standards and guidelines sets a foundation for these fields in how they deliver service to their clients.

### **Professional Accountability**

In psychotherapy, a registered therapist is accountable to the clients and their “therapeutic welfare”, a professional board and the public. The limits of confidentiality include harm to self, harm to others and harm to a child (Rotenberg, 2000, p. 655). In those cases, the therapist is legally obligated to report threats to the potentially affected parties. In life coaching, the coach is similarly accountable to the client, including confidentiality. “The professional standards are different [from psychotherapy], however, in that there are few generally agreed upon professional standards for coaching” (Rotenberg, 2000, p. 655). The risk Passmore (2009) warns about is that “coaching with its facilitative approach is seen as a low risk activity compared with

other consulting activities” (p. 7). This may explain why there is little regulation in life coaching as it is seen as a low risk activity. Perhaps this also explains why there is less agreement on a code of ethics for coaching. An argument can be made that coaching is, in fact, a risky activity because the coach can cause harm to a client by unintentionally facilitating the client into a goal that could harm their mental state as noted in the example about clients with depression. The coach can miss the signs of depression and/or in not understanding the severity of the depression, facilitate the client into a feeling of despair leading to serious consequences for the client.

In BC, FACTBC has been lobbying the government to ensure that all therapists require accreditation in order to protect the public and the therapist. Sorfin and Collett (2017) wrote that “in B.C., anyone can call himself/herself a counsellor and begin billing patients. There is no disciplinary body to set standards and regulate behaviour” (para. 3). FACTBC has been working toward this goal for the past 20 years. Grigg (2016) sums up this effort by affirming:

A college protects British Columbians from harm while promoting availability and high standards. A college will set a code of ethics and standards of practice. It can issue orders, hold hearings, do audits, hold inspections and compel the cooperation of anyone claiming to be a counselling therapist. It can investigate complaints and mete out disciplinary measures. (para. 12)

In Canada, Ontario, Quebec, Nova Scotia and New Brunswick require mandatory regulation. In the USA, all states require regulation. BC and other provinces continue to work towards changing the system of voluntary regulation.

In life coaching, ICF promotes the need for regulation. “The development of codes of ethics and practice are crucial to the development of a profession” (Dexter, Dexter & Irving, 2011, p. 152). ICF’s (n.d.) website has an area that discusses reasons to become a member. They



have identified four main reasons to join: enhanced credibility, a local and global connection, lifelong learning and professional development, and cutting-edge insights (ICF, Value of Membership, para. 1). The site also discusses ethical standards and core competencies that their members should practice. However, there does not appear to be a unified movement towards mandatory regulation. A possible reason for this is that ICF is an international professional board which may make it difficult to reach consensus regarding ethical and legal ramifications for local jurisdictions. As it is international, there may also be issues with standardizing the practice of life coaching due to cultural beliefs and acceptance by the public. This may leave the clients vulnerable to negligence or abuse.

### **Summary**

Psychotherapy and life coaching are both professions that support the individual to live a richer and fuller life. While this is true for both, there are differences in how each achieves their objectives. It may have taken decades for these disciplines to gain entry into mainstream society and they are here to stay. Coincidentally, the histories of each indicate that it takes approximately the same amount of time to be popularized and become accepted as legitimate *helper* practices. For those using the solution-focused approach in their practice of psychotherapy or life coaching, there are more similarities, as life coaching borrowed a fair number of concepts from SFBT. The psychotherapist/coach to client relationships also have similarities in that both emphasize the importance of the relationship towards positive outcomes for their clients.

However, there needs to be a separation between psychotherapy and life coaching. Psychotherapy is about *helping* another heal; life coaching is about *helping* the other attain goals. The lines may become blurred for therapists wanting to do both and it is easy to understand why these boundaries can get crossed. Therefore, having ethical principles to guide the

psychotherapist's or life coach's practice is essential for the success and well-being of both, the practitioner and the client. Since both disciplines are dealing with human psychology, whether recognized as doing such or not, it would protect the therapist, the life coach and most importantly the client from harm.

## Chapter 4: Discussion

### **Introduction**

This literature review reflected on various similarities and differences found between psychotherapy and life coaching and understanding the development of each of these practices to where they are today. There will be an overview highlighting the purpose of the literature review followed by a critical analysis and conclusions that have been reached based on that analysis. Throughout this chapter, the implications of the research findings are discussed along with the significance of the development of these two disciplines.

### **Brief Overview**

The literature review was conducted to find the commonalities between psychotherapy and life coaching, where they diverge, and to identify any gap within the practices. The historical foundations of psychotherapy and life coaching were reviewed to understand the context in which these two disciplines operate today. The two practices are different and as such, provide different services to clients. However, there may be some confusion as to what these differences are since they also closely resemble each other and some of the developments in life coaching have in fact come from therapeutic theories.

Psychotherapy evolved through a series of phases as a response to what was occurring in the world at the time. Around the beginning of the 20<sup>th</sup> century, the medical community ignored psychological treatments due to the fact that mental illness was seen as an ailment of the body. According to Cautin (2011) “certain aspects of psychotherapy were rooted in mind-cure and American spiritualism, both of which were incompatible with the scientific paradigms of the medical field” (p. 3). Then WWII set the stage for a change in this perspective. Veterans were

coming back with psychoses that could not be explained away by the somatic point of view, which led to the idea that the explanation of these psychoses was to be sought elsewhere.

Prior to WWII dominating the consciousness of the world, coaching was germinating as a people management concept within the business world. The idea was to enable executives to be effective managers and raise productivity. Still, during the tumultuous years that followed WWII in North America, the idea of *performance* coaching did not grow much more until the 1990s, when executive and life coaching exploded into the collective consciousness of North Americans. This type of coaching began to borrow heavily from the field of psychology in order to establish effective and efficient approaches to coaching. However, life coaching “is still searching for uniqueness in a seemingly oversubscribed (*sic*) therapeutic arena” (Senior, 2007, p. 19). While some consider that it is dangerous to have life coaches be part of the mental health field, others argue that it is already happening.

One of the ways in which these fields intersect is in the use of the same type of approaches. The approaches that were compared were the SFBT and solution-focused life coaching. Both of these approaches are seen as futuristic as they do not focus on the past, rather they look for solutions for the future. SFBT is thought to have begun out of the humanistic orientation that focused on human development which “presented positive, growth-oriented accounts of human behaviour” (Spence & Grant, 2005, p. 144). Senior (2007) speculates that life coaching similarly grew out of humanistic psychology (p. 19). This intersectionality has led both disciplines to shift the focus of the professionals being the experts to a recognition that clients have their own resources, it is a matter of guiding them to discover the solutions to any problem.

Psychotherapists and life coaches strive to build strong relationships with their clients. This *helping* type relationship is one of the main points that may create confusion for the public

the in understanding the differences. The development of the therapeutic/life coaching and client relationship shares commonalities such as one-on-one sessions, the exercise of empathy, and the building of trust. In using the solution-focused approach to psychotherapy and life coaching, the similarities are obvious as the focus is on goal attainment. Relationship building is an area of intersectionality where the intention of the relationship is subtly different. Therapy “implies that there is movement from a not so good state to a better state, which may to some extent be considered as a ‘normal’ range of responses and behaviours” (Dexter et al., 2011, p. 15). Dexter, Dexter and Irving (2011) believe that:

In coaching, there is a specific thrust towards higher levels of performance, which tends to bring with it a shift from a ‘normal’ to optimal state of being.... an individual does not have to be suffering in some way to benefit from coaching, although they may be at a transition point, while people seeking counselling will likely begin from a position of some unhappiness, dissatisfaction or suffering. (p. 15)

The public may need guidance in understanding these subtle differences as one strives to heal and the other strives to achieve goals

### **Implications for Further Research**

**A case for regulation.** Ethics are essential when dealing with individuals. They guide the practice of a psychotherapist and life coach. During the review, it became apparent that there is a need for professional standards. In the US, all states have mandatory regulatory participation for counsellors. In Canada, only some provinces have mandatory regulation. The provinces that are not mandated to regulate have entities such as FACTBC which continue to work with the provincial governments to make the case for mandatory regulation. In contrast, life coaching is in its infancy and although there are some regulatory boards, there is no international mandate

anywhere for it to become regulated. What this means to the public is that they should adopt a *buyer beware* attitude when hiring a life coach.

Membership in a professional college may become mandatory for therapists in the near future in Canada, due to the awareness being drawn to the need for regulation by various advocacy groups. Although this is not an assurance, it is much more likely to happen for psychotherapists than for life coaches. It appears that little effort for further research is being made to make life coaching regulation mandatory. A recommendation would be to do a benefits analysis as to how regulating this discipline can support and protect life coaches and clients.

Not having mandatory regulation for the life coaching industry, has the potential of disastrous consequences for individuals. As mentioned in Chapter three, being unaware of ethical standards and practices, exposes the client and the coach to serious risks. Of course, this criticism is not meant for coaches who voluntarily join a professional board, as they are more likely to be aware of and follow a set of ethical guidelines. “It is argued that the market for life coaching exists *without* the public fully understanding what it is, perhaps in part influenced by an increased in media attention” (Senior, 2007, p. 21). Further research needs to be undertaken to understand the risks and benefits to clients and life coaches alike.

**Understanding historical practice.** In understanding the history of the practice of coaching as a whole, including sports and business coaching, we understand that the original development of coaching was to improve the performance of the individual. While coaching has borrowed and aligned itself with coaching psychology, its premise is clearly performance driven. This can be a positive strength and a limitation at the same time. Life coaches are seen as people who provide a limited service to the client in order for the client to improve their quality of life. But if it is performance driven only, then there might be areas, such as mental or physical health

disorders, in which the life coach cannot help the client. Likewise, psychotherapy has had defining moments in its history that have caused paradigm shifting from psychoanalysis through to holistic approaches. Using psychotherapy as an example, could serve as a source of guidance to strengthen this discipline

**Looking at stigma.** In understanding the similarities and differences between the two disciplines, there is a prevailing idea that clients may choose life coaching instead of psychotherapy due to the stigma attached to counselling. This may lead some to view life coaching as a way of doing therapy without going to a therapist, thereby avoiding any perceived stigma attached to therapy. Vaughan Smith (2006) states that “counselling and psychotherapy can carry associations with mental ill health, which similarly carries shame in our society” (p. 49). The practice of life coaching has done something right in its positive portrayal to the public as it is seen as advantageous to have a life coach evidenced by the popularity of life coaching in mainstream culture. Psychotherapy would do well to research this broad acceptance.

### **Recommendations for Further Professional and Scholarly Action**

**Empirical research is needed.** Psychotherapy has made a concerted effort to conduct evidence-based studies to incorporate into its practice. Concern for evidence-based approaches in mental health began at the onset of psychotherapy (APA Presidential Task Force on Evidence-Based Practice & APA, 2006, p. 271). Near the end of the 20<sup>th</sup> century, federal, state and provincial governments, began to seek more evidence-based approaches to try to control their spending due to concerns of rising healthcare costs (DeLeon, Kenkel, Garcia-Shelton & Vandebos, 2011, p. 48). This culminated in the APA (2006) assigning the Presidential Task Force on Evidence-Based Practice, to create guidelines for evidence-based practice that was defined as follows: “*evidence-based practice in psychology* (EBPP) is the integration of the best

available research with clinical expertise in the context of patient characteristics, culture, and preferences” (p. 271). The significance of such guidelines is the potential improvement of standards of practice and the filling in of theoretical gaps in order to show efficacy to governments and the public.

Life coaching, on the other hand, has yet to catch up to this practice as most of their evidence-based information comes from psychology. A large portion of the efficacy literature in life coaching is based on personal success stories attributed to life coaching. Currently, only 30% of the studies conducted in life coaching are evidence-based. It would benefit this field to continue to conduct peer-reviewed studies to highlight the effectiveness of coaching. However, debate is ongoing regarding the definition of evidence-based research in life coaching and as Cox states, “such [a] debate makes a significant contribution to helping coaching as a discipline not to be confined within the rigid boundaries of (say) a medical or reductionist paradigm” (as cited in Grant, 2016, p. 75). However, because of wanting to distance itself from psychotherapy, life coaching as an evidence-based practice continues to struggle in defining how to categorize or design its research (Grant, 2016, p. 82).

Life coaching may want to piggyback on psychotherapy’s established research. As those in the life coaching field move away from the scientific model of researching, they will continue to struggle in setting firm research guidelines. Maynard (2006) points out that there is quite a bit of discrepancy between evidence-based life coaching research and the pace in which the discipline is growing (p. 98). Evidence-based life coaching practice will need to catch up to the practice of life coaching. Smither (2011) makes a case to link psychotherapy research to executive coaching research and that this link serves as a guide for coaching research (p. 137). As life coaching and executive coaching serve to improve the performance of the individual, one



in the personal sphere and the other in the business world respectively, it may be advisable to make the leap to link life coaching research to psychotherapy research. Psychotherapy already has a well-established research base that can steer life coaching research. Ultimately, more research needs to be undertaken by the discipline of life coaching to provide a comprehensive evidence-based practice.

### **The Limitations of the Literature Review**

The limitations of this thesis include the limited amount of evidence-based research that was available regarding life coaching. A major component to the lack of evidence-based research is that due to its beginning stages, there are limited contributors (i.e. Williams, Grant, Cavanagh, Kilburg to name some) to life coaching research. This makes it challenging to do a full analysis to compare and contrast the two disciplines. Another limitation was the choice to focus on one theory to compare—that of a solution based approach. However, this decision seemed best in order to limit the comparison of one approach that is used in the two different disciplines.

### **Conclusion**

Psychotherapy and life coaching are different disciplines but the boundaries may be blurring. They may appear similar or even interchangeable to the public, and there are plenty of similarities between the two practices to warrant a further look. Psychotherapy has its roots planted within the medical field as a way to heal an individual. Life coaching has its roots planted in a competitive, performance-enhancing behaviour market. Although foundationally different, they both serve a somewhat similar purpose, which is to *help* people. A review of the literature of psychotherapy and life coaching serves to highlight important similarities and differences plus the need for mandatory regulation in both industries.

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