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Alexandra A. Jost
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learn?

ABSTRACT

This exploratory, qualitative study of social worker/coach practitioners elucidates themes about what motivates social workers to become coaches, how they integrate these roles in practice, and how this integration impacts their social work identity, adherence to professional ethics, and the types of clients they serve. The sample of 14 participants was recruited through professional listserves, social media, and a snowball technique. Key findings include that participants who integrated the role of coaching into their practices were able to connect more closely to a strengths-based and client-centered approach, feel more authentic and empowered, and make use of training in both disciplines to enhance services to clients and gain a professional edge in both fields. Most participants experienced a shift in the major focus of their work from serving clients with complex needs to integrating work with higher functioning clients who sought coaching services. Findings point to the need for more skills-based and introspective education among social workers, and support for client-centered and strengths-based approaches to social work practice. Implications for future research looking at sources of dissatisfaction and disempowerment among social workers, as well as the impact of adopting coaching practice on the field of social work, are discussed.

**SOCIAL WORKERS WHO BECOME LIFE COACHES:
WHAT DOES THE SOCIAL WORK FIELD HAVE TO LEARN?**

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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2013

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CHAPTER I

Introduction

The growth of the professional coaching field, and the increase in social workers who integrate life coaching into their practices, poses interesting questions to the field of social work (Caspi, 2005; Edelson, 2010; International Coach Federation, 2012; Pace, 2012). While no reliable statistics exist on the number of social workers who become coaches, an examination of the field and literature suggests a trend may be emerging (Biswas-Diener, 2009; Caspi, 2005; Edelson, 2012; Grodzki, 2002; Pace, 2012; Robb, 2010). In 2012, for example, a simple Google search of the words “social worker” and “Coach” yielded over 2,000,000 results, including websites marketing the services of practitioners who are social workers and life coaches and blogs highlighting the similarities and differences between the practice of clinical social work and coaching. At the same time, the International Coach Federation (ICF), the largest recognized accrediting body for the coaching field, estimated that 11.5% of the 15,800 coaches in the U.S. were also credentialed as counselors or therapists (ICF, 2012). The availability of books that offer tips for social workers and mental health professionals who want to become coaches (Auerbach, 2001; Edelson, 2010; Grodzki, 2002; Sperry, 2004), articles that address the intersections between social work or psychotherapy and coaching (Biswas-Diener, 2009; Caspi, 2005; Kilburg, 2004; Moyes, 2009; Robb, 2010; Senior, 2007; Smither, 2011), and the marketing of coach training programs geared towards therapists (Coaches Training Institute, 2012; Franklin, 2012; NASW, 2012), offer additional evidence that a trend may exist. Yet the phenomenon of

social workers who incorporate coaching into their careers is largely unexplored (Caspi, 2005). Despite the absence of statistics on the number of practicing social worker/coaches, researchers have begun to ask the question: why might licensed social workers embrace coaching or make a switch to careers in coaching (Caspi, 2005; Edelson, 2010; Pace, 2012)? Some have pointed to the increase in managed care and its resulting restrictions on clinical practice (Caspi, 2005; Edelson, 2010; Kampa-Kokesh & Anderson, 2001). Others have suggested that adopting a coaching practice—mirroring the movement of social workers into clinical private practice—might offer more freedom, prevent social worker burnout, and provide social workers with new skills to innovate their clinical practices (Biswas-Diener, 2009; Edelson, 2010; Grodzki, 2002). Yet no empirical research exists that has quantified the number of social workers who become credentialed coaches. No articles have explored empirically what motivates social workers to adopt this practice, how adopting coaching practices affect their social work identity, and how social workers integrate these two roles in practice.

The lack of exploration in this growing area of practice raises a number of questions and concerns for the field of social work. For example, there is no research that examines how coaching, a field originally designed to support elite executives (Brock, 2012; Kilburg, 1996), impacts the identity of social worker/coach practitioners who are guided by the ethical dictates and core values of the social work profession, including social justice and a focus on the most oppressed of society (National Association of Social Workers, 1997). Some have argued that coaching—a discipline that was designed to support client growth, as opposed to treating pathology—could offer significant benefits to mentally ill clients more traditionally served by social workers (Biswas-Diener, 2009; Edelson, 2010; Moran & Brady, 20010; Navalta, Goldstein, Ruegg, Perna, & Frazier, 2006; Ozaki et al., 2011; Zelvin, 2003; Timmer, Zebell,

Culver, & Urquiza, 2010). Others have called on the social work community to look more closely at the relatively unregulated field of coaching with the goal of improving upon coaching practice guidelines, credentialing processes, issues of confidentiality, and promoting evidence-based research on its efficacy (Caspi, 2005; Senior, 2007; Smither, 2011). An exploration of the subjective experiences of social worker/coaches could lead to findings that would be illustrative of the range of issues involved in a growing area of joint practice, and is meant to open the door to future studies looking at the impact of the field of coaching on the social work profession and the populations we serve.

This study sought to answer the following question: What is the experience of social workers who integrate coaching, sometimes referred to as life coaching, into their practices? Given the lack of descriptive data on social workers who become coaches, this exploratory, qualitative study of social worker/coach practitioners elucidates themes about what motivates social workers to become coaches, how they integrate the roles in practice, and how the integration impacts their social work identity, adherence to professional ethics, and the types of clients they serve. Specifically, this research will explore: (a) the motivating factors that move social workers to integrate coaching in their careers; (b) the interface between coach and social work training, including the extent to which coach training informs, supplants, integrates or conflicts with social work training (c) how practitioners integrate coaching with social work practice, including how they separate versus integrate training and professional identities, how many hours they work and with what clients they apply coaching versus social work interventions; (d) how, if at all, the adoption of a coaching practice impacts issues of worker wellbeing; and (e) the impact of coaching on the practitioner's entrepreneurial ethos.

The hope is that the study findings will serve as the basis for future study of the phenomenon of coaching among social workers, including: trends in career choice and factors associated with use of, and/or adherence to; coaching methods in practice; the value of integrating coaching methods in clinical social work curriculum; the efficacy and ethics of applying coaching to more traditional social work clients and settings; and the potential of coaching as a growing movement to influence the social work profession. Throughout the study, the terms coach and life coach are used interchangeably and their definitions are described further in the Literature Review, Chapter II.

CHAPTER II

Literature Review

To support and ground the exploration of the experience of social workers who integrate coaching into their practice, this chapter reviews existing literature on the intersections between coaching and social work. The literature review begins with an overview of the field of coaching: the definition, scope, root disciplines, and history of coaching; current trends within the field, including professionalization and credentialing efforts; and studies on coaching efficacy. Second, the literature on the integration of social work and coaching is reviewed. This section begins with an exploration of motivating factors for social workers who integrate coaching and social work practice. Following this, the literature on the efficacy of coaching methods in work with traditional social work clients is discussed, along with the issues such integration raises for the profession. A section on factors underlying social workers' decision to move into private practice is included to illuminate parallels that may exist with motivation to adopt coaching practice, which is largely carried out in private practice settings. Lastly, I explore the strengths perspective as a shared theoretical lens through which to view both the practice of coaching and the practice of social work. Throughout the chapter, I summarize current limitations of the literature and argue the need for an exploratory study of social workers who choose to coach in order to further our understanding of this phenomenon.

Coaching: An Overview

Definitions in the literature. The term “life coach,” defined as “an advisor who helps people make decisions, set and reach goals, or deal with problems,” was among the 100 new additions to Merriam-Webster’s Collegiate Dictionary in 2012 (Merriam-Webster, 2012; Pace, 2012), reflecting the rapid growth of the coaching field over the last decade (Brock, 2008; Brock, 2012; Drake, 2008; Kampa-Kokesh & Anderson, 2001; Senior, 2007; Sperry, 2008). The actual definition of coaching services, however, varies widely in the academic literature. The relative youth of the coaching field (Brock, 2008), its interdisciplinary nature (Brock, 2012; Kampa-Kokesh & Anderson, 2001), its lack of legal licensure (Brock, 2008; Grant & Cavanagh, 2004), and the ongoing debate regarding whether it can be considered a profession (Brock, 2008; Drake, 2008; Grant & Cavanaugh, 2004; Senior, 2007; Sperry, 2008) all contribute to the diversity of terminology and the absence of a uniform definition of coaching. This section briefly reviews the four major bodies of literature that use the term coach to signify a number of different professional roles and behaviors that serve different clients and require distinct training: sports, education and professional training, business and psychology. The section concludes by positing a functional definition of coaching for the purposes of this study on social worker/coaches.

First, a significant body of literature uses the term coach to denote a person who works to improve athletic performance (Brock, 2012; Kilburg, 1996). This literature examines the efficacy of specific behavioral or psychological approaches to improving the performance of athletes (Brock, 2008; Kilburg, 1996).

A second body of literature within the social sciences—particularly within the field of education—uses the term coach to signify a professional trainer or mentor who intervenes to improve problematic behaviors among a range of different client populations (Brock, 2008;

Kilburg, 1996). The scope of this second area of literature is too large for the purposes of this study, but a brief review reveals literature on: coaching teachers in the area of improving student academic performance (Lu, 2010); coaching students with ADHD to improve their executive functioning (Parker & Boutelle, 2009; Prevatt, Lampropoulos, Bowles, & Garrett, 2011; Swartz, Prevatt, & Proctor, 2005); coaching students with literacy challenges (Elish-Piper & L'Allier, 2011); and coaching to improve student behavior (Newton, Algozzine, Algozzine, Horner, & Todd, 2011). There are studies looking at the use of coaching to improve interview performance among job applicants (Maurer, Solamon, Andrews, & Troxtel, 2001), help parents interact more effectively with their children (Timmer et al., 2010), and use coaching interventions in health care settings to improve the overall health of individuals living with Type 2 Diabetes (Wolever et al., 2010). In this body of literature, similarly to the sports literature, the coach has something specific to teach and impart.

A third body of literature in the field of organizational psychology uses the term “executive coach” to refer to a consultant who works with professionals within organizations to improve their leadership and management skills (Kampa-Kokesch & Anderson, 2001; Kilburg, 1996; Kilburg, 2004; Maxwell, 2012; Senior, 2012; Sperry, 2008). Within this body of literature, significant attention is paid to the definition of an executive coach, though no one clear definition permeates (Kampa-Kokesch & Anderson, 2001). Most cited is Kilburg (1996; 2004), who has written extensively on the differences and similarities between executive coaching and psychology. Kilburg defines executive coaching as “a helping relationship formed between a client...and a consultant who uses a wide variety of behavioral techniques to help the client achieve a mutually identified set of goals to improve his/her professional performance and personal satisfaction” (1996, p. 142). This body of literature also looks at the psychology of

executive coaching (Peltier, 2001; Smither, 2011; Sperry, 2004; Sperry, 2008) and the boundaries between executive coaching and therapy (Maxwell, 2012; Price, 2009).

Over the past decade, a fourth area of literature has emerged that is aimed at the professional coach, sometimes referred to as life coach, with the goal of delineating a professional framework for the field (Brock, 2008; Grant & Cavanagh, 2004). This body of literature serves to define the practice of “coaching” and “life coaching” as a stand-alone skill set and/or profession within the broader field of psychology. Since emerging after 2000, several journals have helped promote greater clarity on the definition of coaching, including: *International Coaching Psychology Review*, *International Journal of Coaching in Organizations*, *The Coaching Psychologist*, *Coaching: An International Journal of Theory, Research and Practice*, and *International Journal of Evidence Based Coaching and Mentoring*. This growing body of literature also examines the history (Brock, 2009; Brock, 2012), efficacy (Biswas-Deiner, 2008; Grant, 2003) and scope of the practice of coaching (ICF, 2012; Liljenstrand & Nebeker, 2008).

This study draws on the aforementioned literature within the field of psychology, including the subsets of organizational psychology and coaching, to define the term “coaching.” In these areas of the literature, definitions of the term coaching exhibit four common themes: coaching is strengths-based, goal-oriented, interdisciplinary, and facilitated through a collaborative relationship (Biswas-Diener, 2009; Brock, 2012; ICF, 2012; Grant & Cavanagh, 2004; Kampa-Kokesh & Anderson, 2001; Kilburg, 1996, Kilburg, 2004; Maxwell, 2012; Senior, 2012; Sperry, 2008). Biswas-Diener (2009) additionally describes that the purpose of coaching is to, “facilitate experiential learning, improve functioning and performance, often in the context of working towards specific goals” (p.544). Brock (2012), in turn, writes that, “coaching deals

with a normal population from a non-pathological perspective, is proactive and voluntary, deals with growth and change, facilitates learning and goal achievement, and is customized in a peer relationship” (p. iiv). For the purpose of this study, I use Grant and Cavanagh’s coaching definition, as cited by Brock (2008) in her grounded theory dissertation on the roots of coaching.

Grant and Cavanagh write that:

The professional coaching process is a theoretically grounded, systematic, goal-directed process designed to facilitate sustained change. It is intended to foster the on-going self-directed learning and personal growth of the coachee. Hence, the primary focus in professional coaching is on constructing solutions rather than analysing problems. Professional coaching is also distinguished by the collaborative and egalitarian, rather than authoritarian, relationship between coach and coachee; an emphasis on collaborative goal setting between the coach and coachee; and the recognition that although the coach has expertise in facilitating learning through coaching, they do not necessarily need high levels of domain-specific expertise in the coachee’s chosen area of activity. In terms of the issues with which coaching deals, professional coaching is aimed at skills development, performance enhancement and personal development with non-clinical populations; that is, individuals who do not have abnormal levels of psychopathology or acute mental health issues, (2004, p. 11).

Historical roots and theoretical underpinnings of professional coaching. While the concept of coaching can be traced to the existence of athletic coaches in Ancient Greece, the modern coaching movement, which includes executive and life coaching, is generally regarded as beginning in the 1970s (Brock, 2012). Influenced by the humanistic and transpersonal

psychology of Abraham Maslow and Carl Rogers, coaching emerged in the midst of the Human Potential Movement, gaining footing in the self-help and business communities (Brock, 2012; Kilburg, 1996). The concepts of Werner Erhard and Fernando Flores whose “est Trainings” spawned today’s Landmark Forum, offered new thinking about ways to foster individual change and maximize potential, and laid the groundwork for early schools of coaching (Brock, 2012). Likewise, executive management thinkers like Paul Drucker had begun introducing coaching concepts in the 1970s and 1980s as a way to support leaders through change (Brock, 2012). From these early roots, coaching grew in executive management circles and within the personal self-help communities. By the 1980s, 46 articles and 9 books had been written on the subject (Brock, 2012).

Thomas Leonard, Laura Whitworth and Julio Ollala, coaching leaders and trainers who became established in the 1990s, are widely credited as the founders of the professional field of coaching in the United States (Brennan, 2008; Brock, 2012). Leonard and Whitworth, both accountants by training, were exposed to Erhard’s human growth and potential trainings in the 1970s. Thomas Leonard, coined by many as the “father of coaching,” was a talented marketer who introduced coaching to many before his death in 2003. In 1992, he established Coach University, which served as a training ground for many of today’s leading experts in the field. Leonard’s Coach University provided the seed money for what later became the ICF. Whitworth established the Coaches Training Institute (CTI) in 1992; it continues as the largest coach training program in the U.S. today. A supporter of standardization and professionalization of the field, Whitworth launched the Professional and Personal Coaches Association; this organization later merged with the ICF. Finally, Ollala was instrumental in introducing coaching to business communities. The Newfield Network, established by Ollala in 1992, continues to provide a

coach training program that prepares practitioners for the ICF accreditation process (Brock, 2012; Newfield Network, 2012).

While Leonard, Whitworth and Ollala are credited with popularizing coaching within the U.S., the theoretical underpinnings of coaching have roots in psychology, and organizational psychology in particular. The clinical practice of coaching draws on psychology, including humanist psychology (Brock, 2008; Kilburg, 1996), cognitive behavioral therapy (CBT) and positive psychology (Biswas-Diener, 2009; Brock, 2009; Edelson, 2010). Peltier (2001) and Hudson (1999) write about psychodynamically-informed elements of coaching, such as object relations, countertransference, the importance of building rapport and creating self-awareness, and the mirroring of self psychology. Peterson (1996) identifies classical behavioral techniques in coaching, and Auerbach (2006) has written about its cognitive techniques such as avoiding “unproductive schemas” (p. 112), cognitive errors, distortions, and “maladaptive self-talk” (p. 113). Finally, others point to the use of linguistic theory and the focus in coaching on powerful communication as rooted in narrative theory (Edelson, 2010).

Many argue that coaching has its strongest theoretical underpinnings in humanistic-transpersonal psychology which posits that people are naturally creative, resourceful, and whole (Biswas-Diener, 2009; Brock, 2008; Edelson, 2010; Grant & Cavanagh, 2004). Therefore coaching embraces a solution and results-focused approach, rather than viewing clients through the lens of psychopathology (Biswas-Diener, 2009; Brock, 2009; Edelson, 2010; Grant & Cavanagh, 2004; Kampa-Kokesh & Anderson, 2001; Kilburg, 1996, Kilburg, 2004; Maxwell, 2012; Senior, 2012; Sperry, 2008). Influenced by postmodernism, the coaching field also underscores the importance of coaches learning from clients as integral to the process (Brock, 2008; Drake, 2008; Grant & Cavanagh, 2004; ICF, 2007; Kampa-Kokesh & Anderson, 2001;

Killburg, 1996; Liljenstrand & Nebeker, 2008; Sperry, 2008). Brock (2008) provides the most comprehensive analysis to date on the roots of the field and further confirms its interdisciplinary nature. Brock reviews literature on coaching in journals of psychology, education, business, sports, philosophy and the performing arts. She then compares the literature to the findings of a structured 15-minute online survey of 1000 coaches and individuals in related fields. She asserts that coaching is “dynamic and contextual, awareness- and choice focused, and delivered across a continuum of attributes customized to the person being coached, the coach, the context, and the specific situation” (p. vii).

Current trends and controversies in professional coaching. As Brock’s research confirms, today the practice of coaching is delivered by a range of professionals with diverse backgrounds to an equally diverse demographic of clients (2012). In this section I briefly review the scope of the modern field of coaching. I then introduce the debate within the field on efforts to professionalize the practice of coaching through standardization of the training and accreditation process and through empirical research on the efficacy of coaching (Brock, 2012; Caspi, 2008; CTI, 2012; ICF, 2012; Kampa-Kokesh & Anderson, 2012; Kilburg, 1996). Third, I review research that has examined the educational backgrounds of coaches—including backgrounds from the helping professions—and how specific professional backgrounds influence their coaching practice (Liljenstrand & Nebeker, 2008). Lastly, I review the debate within coaching journals and psychology journals about the differences between coaching and psychotherapy with a general conclusion that the fields and clinical practices indeed overlap (Kilburg, 1996; Liljenstrand & Nebeker, 2008; Maxwell, 2012; Price, 2009).

Scope of current-day professional coaching field. In lieu of an accurate description of the field in the discipline-based literature, recent efforts by professional coaching associations to

characterize the field help to provide a basic picture. In 2012, the ICF conducted a global, descriptive study of 5,415 coaches in 73 countries to obtain a snapshot of the coaching field throughout the world (ICF, 2012). The study found that there are currently 14,062 active coaches in the United States who earn a total of \$707 million per year (ICF, 2012). Worldwide, the study estimates that there are 47,500 coaches, up from an estimated 30,000 coaches identified in an ICF Study conducted in 2007 (ICF, 2012; ICF, 2007). According to statistics gathered by the ICF, the largest recognized accrediting body for the coaching field, ICF grew its North American membership from 2,122 in 1999 to 9,832 members in 2012 (ICF, 2012). Beyond the ICF, there exist some 12 additional coach associations, up from zero in 1990. In addition, some six peer-reviewed journals devoted to coaching have been published since 2001 (Brock, 2012). The Graduate School Alliance for Executive Coaching (GSAEC) established in 2004, now has nine institutional members, including Columbia University and the Massachusetts School of Professional Psychology (GSAEC, 2012).

The ICF 2012 study of coaches also provided the most extensive description to date of coaches' earnings, client foci, and modes of practice. According to the study, the average annual earning for a coach in North America is \$50,400. The findings also indicate that 85% of coaches in North America identify as "external coaches," serving individuals or organizations through a private practice. When asked about their main areas of client focus, coaches in this study indicated the following: leadership coaching (26%), life vision and enhancement coaching (14%), and executive coaching (13%). Finally, and perhaps not surprising in a study of self-identified coaches, 75% of respondents viewed coaching as a "profession", versus just 20% who viewed it as a "skill set."

Credentialing. Since there currently exists no professional licensing process for coaches, anyone—regardless of training—can call themselves a coach; however, there is an effort underway among industry leaders to push for more standardized accreditation procedures with the goal of professionalizing the industry of coaching (Brock, 2012; Caspi, 2008; Grant & Cavanagh, 2004; ICF, 2012; Kampa-Kokesh & Anderson, 2012; Kilburg, 1996). Currently the ICF, the International Association of Coaching (IAC), the Association for Coaching (AC), Board Certified Coach (BCC), and other international accrediting bodies all offer an accreditation for those who choose to prove, based on a certain number of hours of coach training and peer-reviewed coach practice, that they are certified or accredited coaches. The ICF is the largest accrediting agency for coaches, offering three levels of accreditation. Coaches with over 60 hours of ICF-approved training, 100 documented hours of coaching clients, and at least eight hours of supervision from a qualified mentor coach can sit for the Associate Certified Coach (ACC) oral exam. Coaches with the same training and over 500 documented hours of coaching clients can take a written exam and submit audio recordings of their coaching to become a Professional Certified Coach (PCC) or MCC (Master Certified Coach). Through the accreditation process, the ICF identifies 11 core competencies that accredited coaches must demonstrate: 1) meeting ethical guidelines and professional standards; 2) establishing the coaching agreement; 3) establishing trust and intimacy with the client; 4) coaching presence; 5) active listening; 6) powerful questioning; 7) direct communication; 8) creating awareness; 9) designing actions; 10) planning and goal setting; and 11) managing progress and accountability. To maintain accreditation, coaches must reapply every two years and conduct a certain number of continuing education and coaching mentor hours (ICF, 2012).

While more and more coaches are seeking accreditation in the U.S. and nationwide (ICF, 2012), there are still many practicing coaches who do not seek accreditation. The ICF estimates that there are 14,062 active professional coaches in the U.S. today, only 8,381 of whom are accredited (ICF, 2012). The issue of standardized coach training and accreditation continues to be a subject of debate within the coaching field: some believe that standardized accreditation is critical to the health and legitimacy of the field (ICF, 2012; Drake, 2008; Grant & Cavanagh, 2004); others believe that current accreditation procedures are not robust enough to benefit professional executive coaches (Goldrich, 2011); still others believe that since coaching is not a profession but more of an industry that draws on diverse professions, it should not necessarily require separate certification (Drake, 2008; Grant & Cavanagh, 2004). And yet a majority argue that the issue of untrained individuals who call themselves coaches is one of the key obstacles facing the coaching field in the future (Brennan, 2008; ICF, 2012; Kampa-Kokesh & Anderson, 2001). Caspi (2005), a social worker, suggests that—regardless of the coaching credential—the fact that coaches practice without a professional license raises ethical issues that the field of social work could help to address.

Ongoing discussion around the benefits of obtaining a coaching credential is partly driven by the fact that the field does not offer a professional license (Brock, 2009; Goldrich, 2011; Grant & Cavanagh, 2004). Grant and Cavanagh (2004) discuss the issues preventing coaching from being considered a stand-alone profession: a) it lacks significant barriers to entry; b) it lacks a formal shared body of knowledge; c) it lacks regulatory bodies that can “admit, discipline and sanction” members; d) it lacks a universal and enforceable code of ethics; e) it has no state-sanctioned licensing; and f) overall, while individual coaching associations like ICF have made efforts to address these issues, “coaching as an industry does not adequately meet these

standards” (p. 3). Again, the fear by many leaders in the field is that coaching will be defined by its imposters rather than by individuals, groups, and associations who have worked to improve the science and efficacy behind a specific set of skills defined as coaching (Drake, 2008; Grant & Cavanagh, 2004).

Emphasis on efficacy studies. In line with a focus on coaching accreditation and professionalization, those within the field have recently pushed for more research on the efficacy of coaching (Brock, 2012; Caspi, 2008; Kampa-Kokesh & Anderson, 2012; Kilburg, 1996; ICF, 2012). In the last few years, for example, the Institute of Coaching at McLean Hospital, affiliated with Harvard University, has launched a program in partnership with the CTI to identify the science behind coaching’s efficacy (CTI, 2012). Since launching, the Institute of Coaching has helped promote and fund numerous empirical research studies (Institute of Coaching, 2013), including: (a) studies on the ability of coaching to enhance goal striving and wellbeing (Green, Oades, & Grant, 2006; Spence & Grant, 2007); (b) a study that helps to enumerate the specific “black box” or body of knowledge that makes coaching effective (Drake, 2009); and (c) a study on the efficacy of providing life coaching to coaches-in-training, borrowing on a training model from other helping professions (Spence et al., 2008). While the efficacy of “coaching” specific populations appears in sports, psychology, education and other social service literature, it is only in the past decade that the coaching industry itself has established journals that define the profession of coaching and study the specific model and the science behind it (Brennan, 2008; Brock, 2009; Drake, 2008; Drake, 2009; Grant & Cavanagh, 2006; Maxwell, 2012; Moyes, 2009; Price, 2009; Spence et al., 2008).

Educational background and modes of practice. Descriptive research on individuals who identify as coaches repeatedly shows that coaches come from diverse professional

backgrounds (Brock, 2008; ICF, 2012; Liljenstrand & Nebeker, 2008). The recent ICF Global Study, for example, found that 11.5% of coaches in North America also identify as therapists or counselors (ICF, 2012). While reported findings did not include an analysis of the educational backgrounds of this group, the significant number who identify as therapist/counselors further confirms the value of exploratory study of social worker/coaches. The study did not examine specific educational backgrounds of coaches—for example receipt of an MSW—but did cite that 58.6% of North American coach respondents held a master’s degree or PhD, compared with 33.4% who held a bachelor’s degree and 8% who reported having no higher educational degree.

In an effort to uncover possible associations between coach training backgrounds and practice, Liljenstrand and Nebeker (2008) conducted a web-based survey with 2,231 coaches to learn about differences in titles used, types of clients served, fees charged, and coach training used among participants with different educational backgrounds. The study grouped participants’ educational backgrounds into five categories: 1) industrial/organizational psychology, 2) clinical psychology, 3) business, 4) education, and 5) a generalist group with individuals trained in numerous fields. Participants with clinical psychology or organizational psychology backgrounds were more likely to use the title “executive coach” over “personal coach” or “life coach.” Psychology-trained participants also viewed obtaining coaching credentials as less useful. Finally, participants with psychology backgrounds were more likely to serve organizations rather than individuals (56% to 46%), and were more likely to view coaching services as an extension to their other services, “such as providing organization development, human resources, and individual therapy” (2008, p.74).

While no research examines the rate of accreditation among social workers who identify as coaches, a recent study suggests that accreditation may be less popular among coaches with

psychology backgrounds, the Liljenstrand and Nebeker (2008) found that coaches with educational backgrounds in clinical psychology and industrial/organizational psychology were less likely to become credentialed as coaches and more likely to operate in a marketplace separate from other coaches. Although these findings do not explore coaches with social work training, the examination of coaches with psychotherapy training may serve as a useful reference for this study's interest in social worker/coaches.

The literature also shows that the educational background of coaches can be predictive of the type of client the coach serves (Kampa-Kokesh & Anderson, 2001; Kilburg, 1996; Liljenstrand and Nebeker, 2008). Psychodynamic training is often cited for its tremendous benefit to all coaching relationships (Kampa-Kokesh & Anderson, 2001; Kilburg, 1996), and business and leadership training is cited as important to coaches of business executives (Kampa-Kokesh & Anderson, 2001). As many within the field of coaching continue to push for uniform credentialing and training procedures, the issues of educational and professional backgrounds of coaches may become more closely scrutinized (Caspi, 2005; Liljenstrand and Nebeker, 2008).

Coaching and psychotherapy: commonalities and differences. Given the roots of coaching in the discipline of psychology, the extensive coverage of coaching in psychology journals, and the ICF estimate that more than 1 in 10 coaches identify as therapists/counselors, it comes as little surprise that researchers struggle to draw clear lines between therapy and coaching (Kilburg, 2004; Liljenstrand & Nebeker, 2008; Maxwell, 2009; Price, 2009). A recent study in the executive coaching literature looking at coaching application among professionals concludes that, "coaching has significant overlap with therapy"; the author of this study goes on to assert that coaches would benefit from therapeutic training (Price, 2009). Another study suggests that the American Psychology Association (APA) should become more involved in the

coaching accreditation process (Kampa-Kokesch & Anderson, 2001). A study of eight coaches, half of whom identified as coach/therapists, found that participants distinguished among clients with regard to their expectations of coaching versus therapy services (Maxwell, 2012).

Participants indicated that coaching clients expected support to “enhance work performance” with rapid results, while therapy clients expected “improved understanding”, “resolution of past issues”, and a slower pace (Maxwell, 2012).

In conclusion, coaching is a strengths-based, goal-oriented facilitation process that is delivered through a collaborative relationship by practitioners with diverse and interdisciplinary training. Though the origins of the field can be traced to the self-help movement and business consulting practices beginning in the 1970s, coaching has grown significantly since then and particularly in the past two decades in the U.S., expanding its reach to clients outside of the boardroom. During this time, the coaching field has pushed for universal accreditation and increased research on efficacy, and has made efforts to include coaching training within professional graduate programs in business and psychology (Brock, 2012). Despite efforts to “professionalize” the field of coaching over the past two decades, coaching does not have a universal licensure process. There remains discussion within the field regarding whether coaching can be considered a profession (Brennan, 2008; Brock, 2008; Drake, 2008; Grant & Cavanagh, 2004; ICF, 2012; Kampa-Kokesch & Anderson, 2001). In the meantime, the coaching field has more than doubled in size within the U.S. since the ICF, the field’s largest accrediting body and professional association, was launched in 1995. While coaching has extensive overlap with psychotherapy, both in terms of practitioner training and services delivered, the literature points to significant differences in the expectations of coaching and psychotherapy clients; while

coaching clients expect support around enhancing their work and rapid change, therapy clients expect greater exploration of the past and a slower pace of work.

Social Work and Coaching

Although limited in scope, the extant social work literature discussing coaching is reviewed in this section. First, I review the work of social work authors Biswas-Diener (2009) Caspi (2005), Edelson (2010), Grodzki (2002) and Zelvin (2003) who discuss the activities of social worker/coach practitioners and what motivates them to integrate coaching into their social work practice. Second, I review the empirical studies of coaching in the social work literature. This body of literature explores the efficacy of using coaching skills with clients more traditionally served by social workers (Biswas-Diener, 2009; Moran & Brady, 2010; Navalta, et al., 2006; Ozaki et al., 2011; Zelvin, 2003; Spaulding et al., 2009; Timmer et al., 2010). This section also discusses the lack of a consistent definition of coaching within social work literature and the prevailing portrayal of coaching as a skill that complements social work practice rather than substituting for it. Third, I discuss concerns raised within the social work literature on the emergence of the field of coaching and how it might impact the field of social work. Finally, I discuss the limitations of the social work literature on coaching and argue for studies that describe the practice of coaching among social workers and explore the ways in which these two professional roles are integrated in practice.

Motivation among social workers to adopt coaching practice. Despite a lack of empirical data, researchers have begun to ask why licensed social workers embrace coaching or make a switch to careers in coaching (Biswas-Diener, 2009; Caspi, 2005; Edelson, 2010; Grodzki, 2002; Zelvin, 2003). Some have pointed to the increase in managed care and resulting restrictions on clinical practice as possible motivating factors for social workers to become or

integrate life coaching in their careers (Caspi, 2005; Edelson, 2010). Others have suggested that coaching might offer more freedom, help prevent social worker burnout (Biswas-Diener, 2009; Edelson, 2010; Zelvin, 2003) or provide social workers with new skills to innovate their clinical practices (Biswas-Diener, 2009; Edelson, 2010; Grodzki, 2002; Pace, 2012). Some suggest that social workers have maintained diverse practices, including the adoption of coaching, to prevent burnout and maintain a certain level of financial security (Biswas-Diener, 2009; Edelson, 2010; Gottlieb, 2012).

Empirical literature on efficacy of coaching practice among social workers. The empirical research on coaching in the social work literature incorporates a view of coaching as an intervention or set of skills. Findings largely conclude that coaching is highly effective when used in a specific context (Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Zelvin, 2003; Spaulding et al., 2009; Timmer et al., 2010). For clients struggling to maintain recovery from addiction (Zelvin, 2003) or those working to maintain employment (Ozaki et al., 2011), for example, a focus on goal-setting and client empowerment and self-determination—all coaching approaches that overlap with social work—proved useful. For HIV positive prison inmates in transition, the peer-to-peer orientation of coaching, versus an expert-to-client orientation, offered a nonjudgmental and supportive space that allowed participants to gain confidence and a sense of their own possibility (Spaulding et al., 2009). For parents who received coaching to improve their abilities to manage child behavioral challenges, the dogged focus on skill-mastery and what works, as embodied in coaching practice approaches, proved to be empowering and effective (Moran & Brady, 2010; Timmer et al., 2010). Finally, for individuals managing job stress, coaching promoted self-efficacious coping skills that highlighted strengths, reframed negative thoughts, and introduced self determination in work/life boundaries (Biswas-Diener, 2009).

Biswas-Diener's (2009) case study of a psychotherapist using coaching techniques provides a rare example of a coaching intervention that employs 11 core competencies, required by the ICF for coaching certification (ICF, 2012). The case study illuminates how open-ended questions helped a client struggling with loss of meaning and stress at work. Through the coaching process, the client was able to identify natural strengths, reframe negative thoughts, and find strategies to harness agency and optimism (Biswas-Diener, 2009). Unfortunately, no other empirical studies in the social work literature explore the effects of employing coaching skills in such detail.

Grodzki's compilation of essays by therapists—some trained as social workers—who integrate coaching in their private practices further confirms that coaching definitions in practice are diverse and tailored to very specific client populations (2002). Thus, the lack of a streamlined or clear definition of coaching within the social work literature suggests the importance of exploration of social worker/coach perspectives on the nature of coaching as part of this study.

The use of coaching as one type of intervention among many is implied in the social work literature on coaching (Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Zelvin, 2003; Spaulding et al., 2009; Timmer et al., 2010). Timmer et al. conducted a well-designed quantitative study using an experimental design looking at the effectiveness of coaching with 73 parent/child dyads. The authors found that coaching was effective as an intervention when part of a broader continuum of additional services (2010). Similarly, in an experimental study that sought to determine whether coaching improved self-efficacy in caregivers of children at risk of neglect, life coaching techniques were found to be potentially useful and, “would be best used in conjunction with other approaches” (Moran & Brady, 2010, p.

279). These authors further found that coaching methods were not suitable for addressing environmental and long-term issues like financial stress (Moran & Brady, 2010).

Concerns about the growth of the coaching industry and its impact on social work.

While most of the existing literature views coaching as an asset or complement to social work practice (Biswas-Diener, 2009; Caspi, 2005; Edelson, 2010; Grodzki, 2002; Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Spaulding et al., 2009; Timmer et al., 2010), a few concerns have emerged. Zelvin (2003) warns, for example, that in the future social workers will compete with life coaches over the finite pool of positive, solution-focused clients. Caspi (2005) raises similar concerns about how unlicensed coaches who lack clinical training “may be engaging increasingly in activities that fall under the domain of social work practice” (p. 360). Caspi urges the field of social work to “empirically explore the current state of coaching” and “test coaching interventions empirically” (p. 361). Caspi also recommends raising awareness about the dangers of coaches practicing without mental health training and unlicensed coaches providing services to those traditionally served by social worker; he calls on social workers to consider whether integrating a coaching practice would violate the Social Work Code of Ethics (p. 361). In sum, Caspi (2005) argues for more discourse and leadership within the social work field on both the challenges and opportunities the growing field of coaching presents to the field of social work.

Inconsistency in definitions and gaps in the social work literature. To date, no empirical research in social work literature defines coaching as a separate profession; rather coaching is viewed as a type of clinical intervention (Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Zelvin, 2003; Spaulding et al., 2009; Timmer et al., 2010). Inconsistency in the definition of coaching within the social work literature contributes to the challenges involved

in understanding how social workers view the practice of coaching. In studies on the efficacy of coaching with clients more traditionally served by social workers, it is unclear which coaching interventions are being used, and whether they differ between studies. The lack of clear definition of coaching throughout current social work literature suggests that integrating coaching into clinical social work practice might mean something different to each author. It is hoped that the current study may shed light on social workers' experience with and understanding of coaching practice and its integration in their work.

There is a virtual absence of issues of race, class and ethnicity within existing social work literature on coaching, mirroring the complete absence of issues of race, class, ethnicity and other identifying factors within academic coaching journals. The detailed Biswas-Diener (2009) case study provides no identifying features of the client other than that he is a mid-level professional. Likewise, the study of the impact of coaching on HIV positive prison inmates focused primarily on an African American sample (Spaulding et al., 2009), but study findings as reported failed to explore variance in results based on race, gender identity, or other demographic characteristics.

Moreover, while no published studies were found within the social work literature that explore the issue of clients who do not respond well to coaching, there is a lack of research on the use of coaching with clients who present with a range of concerns commonly seen in mental health settings. For example, the literature does not look at strengths and limitations of coaching with clients who have been diagnosed with psychoses or borderline personality disorder, or who have complex trauma histories. The absence of such literature may be reflective of the reality that coaching practice is not employed in work with this population either because it is not felt to be effective, or because practitioners in such settings may not be motivated to utilize such

techniques; conversely, such discussion may be absent from the literature because studies of coaching practice efficacy with this population have either not been carried out or published. The absence of such studies may also suggest that coaching does not provide the breadth of interventions that clinical social work offers.

In conclusion, limited literature exists on the integration of coaching among practicing social workers. Most glaringly absent, and therefore important to this proposed study, are studies looking at the experiences of social workers who integrate coaching into their practices. Existing studies, including Biswas-Diener's qualitative single-subject design of one man struggling to find meaning at work (2009), do not delve into the thoughts and experiences of the practitioner. The literature that does discuss motivating factors for social workers who adopt coaching practices does not offer a comprehensive review of social work/coach practitioners' reasons, views and experiences of using coaching skills. Additionally, empirical studies looking at the efficacy of coaching as an intervention (Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Zelvin, 2003; Spaulding et al., 2009) offer promising information about the usefulness of this form of intervention, but failed to clarify their definition of coaching. Needed are studies exploring in greater depth social workers' motivations for, and experiences with, integrating coaching methods into their practice. In sum, available research suggests that much is still unknown about how the field of coaching has and will impact the field of social work, and even less is known about those who integrate both roles in practice.

Social Workers in Private Practice: Parallels to Coaching

This section reviews literature on motivating factors for social workers who move into private practice. Although the literature does not directly equate the move to become a coach with the move of social workers into private practice, parallels can be drawn between these

phenomena. First, nearly 85% of coaches in North America identify as “external coaches,” which means that they operate in private practice (ICF, 2012), similar to the setting of a social worker in private practice. An estimated 45% of coaches in North America are paid directly by clients and 55% rely on a third party (ICF, 2012). Second, literature on social workers in private practice reveals the complexity involved in maintaining an adherence to the core values of the social work profession (Groves & Kerson, 2011; Lord & Iudice, 2011; Perry, 2009; Seiz & Schwab, 1992), and is useful in informing an exploration of issues in adherence to social work values among social work/coach practitioners. Thirdly, there is evidence in the social work literature that personal wellbeing may be one factor leading social workers into private practice (Jayaratne, Davis-Sachs, & Chess, 1991) and this may parallel the work that suggests that becoming a coach might help to prevent social worker burnout (Biswas-Diener, 2009; Edelson, 2010; Zelvin, 2003). Fourthly, the literature notes differences in the value systems of social workers in private practice and those in agency settings (Jayaratne, Siefert & Chess; 1988; Groves & Kerson; 2011; Seiz & Schwab, 1992), also informing the exploration of issues of professional identity among social work/coach practitioners. Finally, the literature discusses how the move of social workers into private practice impacts their adherence to the NASW Code of Ethics (Lord & Iudice, 2011; Perry, 2009).

The debate on whether social workers in private practice abandon their values.

Studies exploring the issue of whether a move to private practice reflects a move away from social workers’ mission to serve the poor and underserved has yielded mixed results (Groves & Kerson, 2011; Lord & Iudice, 2011; Perry, 2009). For example, in a study of 5,973 social work graduate students in California, Perry (2009) found that “a desire to work with the poor

(i.e., economically disadvantaged populations) did not have a significantly positive impact upon a student's desire to be a clinician" (p. 62). The same study also found that the leading motivation for students who specialize in clinical work within their Master of Social Work (MSW) education is preparation for a career in private practice, and that those interested in pursuing clinical private practice were interested in applying their practice among a "wide variety of problems or populations," but not just with clients who are low-income (2009, p.64).

Similarly, a study of 1,000 NASW-member private practitioners (Lord & Iudice, 2011) found that just 11.8% of practitioners' clients used Medicaid or Medicare for payment purposes, whereas 24% of clients paid the private practitioner's full fee out of pocket. Yet the same study also found that some private practitioner social workers cater to underserved communities by offering services pro bono and at a sliding scale (Lord & Iudice, 2011). Collectively, these studies suggest that while social workers in private practice may not prioritize the needs of the most underserved clients, they also, as a group, do not abandon them.

What motivates social workers to move into private practice. The literature indicates that social workers in private practice may experience a tension between personal and altruistic values. For example, a study comparing the values of social workers in private practice with those of social workers in agency settings found many opposing value systems between these groups (Seiz & Schwab, 1992). Whereas those in private practice valued entrepreneurship and psychotherapy most highly, those in agency settings valued social/welfare action most highly. Private practitioners placed greater value on autonomy than did social workers in agency settings, and private practitioners valued psychologically-oriented clinical work more than agency practitioners, who valued "helping the poor" over "helping people with psychological problems" (1992, p. 330). This finding was confirmed by Perry (2009) who found that for social workers in

private practice, aspirations for self-expression and personal growth outweighed the “desire to make important contributions to individuals and society” (p.61). Similarly, a study of 30 private practitioners found that clinicians abandoned their commitment to case management in practice, despite acknowledgment that these interventions can be critical to client wellbeing (Groves & Kerson, 2011). The study subjects were more likely to identify as therapists than as social workers; they also viewed the social support interventions as “uninteresting” and “time-consuming” (2011, p.223). Although not conclusive, these findings suggests limits to the altruism of social workers in private practice, suggesting as well that they may place a higher value on their own autonomy, entrepreneurship and psychologically-informed work over social justice work and helping the poor. Significantly, the literature also suggests that social workers are motivated to move into private practice to be more independent, be able to work with clients in creative ways, to serve a broader range of clients, and to focus on therapeutic interventions (Groves & Kerson; 2011; Jayaratne et al., 1988; Levin, 1976; Lord & Iudice, 2011; Perry, 2009; Seiz & Schwab, 1992).

Move into private practice as a way to address burnout. There is a significant literature discussing social workers’ move into private practice as an effort to improve wellbeing and decrease burnout (Jayaratne et al., 1991; Schwartz, Tiamiyu & Dwyer, 2007). A study conducted in 1991, comparing overall wellbeing of NASW members in private practice with that of members in agency settings, found that those in private practice reported “fewer psychological and health strains...higher levels of performance...and felt better about their life circumstances” (Jayaratne et al., 1991, p. 227). In another qualitative study of 676 social workers in both private practice and public agency practice, researchers used Snyder’s *Hope Scale*, and found hope scores were highest and burnout lowest among social workers in private practice (Schwartz et al.,

2007). Using a quantitative questionnaire mailed to 1,200 mostly White (93%) and female (81%) social workers working in both agency and private practice across the country, Schwartz et al. (2007) looked at the correlation between instilling hope—defined as goal-directed, success-oriented work—and burnout. They found that hope scores were highest and burnout rates lowest among older social workers in private practice who also reported having more hopeful clients; whereas, the more years spent in a public agency setting, the lower the hope scores of clinicians and clients, and the higher the burnout rates.

A report by NASW in 1991 indicated that 61.3% of NASW members identified as working in the private sector (NASW, 1991 as cited in Perry, 2009), whereas an NASW report in May 2010 indicates that only 16.4% of NASW members identifies as being in private practice (NASW, 2010, as cited in Lord & Iudice, 2012). While this decline may reflect a trend away from membership in NASW among social workers in private practice (Lord & Iudice, 2012), it also could be a reflection of the economy, managed care practices and payments (Keefe & Hall, 1998; Perry, 2009), or even the low value placed on private practice by social worker educators (Lord & Iudice, 2012; Perry, 2009). This possible trend away from entering private practice among social workers may prove interesting to this proposed study of social workers who choose to integrate coaching in their practices. Are these workers viewing coaching as an alternative to private practice, a complement, or something altogether different?

Ethical issues in social work private practice. Finally, the literature that examines adherence to the NASW Code of Ethics among social workers in private practice informs this study's inquiry into ethical questions that may be raised by social workers who integrate coaching in their practices (Caspi, 2005). The Lord and Iudice (2011) study of 1,000 NASW members in private practice examined how clinicians tracked outcomes and used evidence-based

practices, whether or not they used supervision, and to what extent they pursued social justice activities while in private practice. The study found that more than half of the respondents (62.9%) used evidence-based practice, but only 28% tracked outcomes in their work with clients. While less than half of the respondents (46%) reported using supervision, it was unclear whether they might informally consult with others as a replacement for formal supervision. Finally, the study found that just 37% of respondents engaged in social justice pursuits, although authors suggested that this lower rate might be an indication of a broader decline in volunteer work among all social workers. While this study does not offer conclusive data on adherence to the Code of Ethics among social workers in private practice, it provides a useful framework for guiding discussion of the current study findings.

In sum, this section reviewed the literature on motivation and experiences of social workers who move into private practice in an effort to shed light on potential motivating factors for social workers who become life coaches. This brief review suggests that, among other motivating factors, social workers may move into private practice in an effort to have greater autonomy and freedom over the service they provide to clients (Levin, 1976; Lord & Iudice, 2012; Perry, 2009; Seiz & Schwab, 1992). As a result, a tension may exist between private practitioners' personal desires to work creatively and entrepreneurially and their adherence to social work values of serving the most underserved among us (Groves & Kerson; 2011; Jayaratne et al., 1988; Levin, 1976; Lord & Iudice, 2011; Perry, 2009; Seiz & Schwab, 1992). Likewise, issues of burnout within agency settings may motivate social workers to move into private practice with the goal of achieving greater personal wellbeing (Jayaratne et al., 1991; Schwartz et al., 2007).

The Strengths Perspective: Bridging the Field of Coaching and Social Work Practice

While the literature varies on what constitutes the root disciplines of the field of coaching, many argue that coaching has its strongest underpinnings in humanistic-transpersonal psychology that embraces a strengths-based and solution-focused approach to client interactions (Brock, 2008; Biswas-Diener, 2009; Edelson, 2010). The notion of people as naturally creative, resourceful and whole parallels the assumptions underlying strengths-based models in clinical social work. The strengths perspective suggests that a focus on clients' strengths and resources, rather than on deficits, can help empower them and move them forward (Cowger, 1994; Greene, Lee & Hoffpauir, 2005; McMillen, Morris, & Sherraden, 2004; Saleebey, 1996). Since the strength perspective undergirds both the field of coaching and the field of social work, I use it as a lens through which to view the current study findings. As a result, this section notes the seminal writings on the strengths perspective, highlighting its origin and major tenets.

Literature on the strengths perspective in social work emerged in the 1990s (Cowger, 1994; McQuaide & Ehrenreich, 1997; Saleebey, 1996). Discussion of client strengths may have been partially a reaction to the "treatment, dysfunction, and therapy metaphors" (Cowger, 1994, p. 262) or the "obsession with pathology" (Saleebey, 1996 p. 297) that saturated U.S. culture and the helping professions more specifically. Those writing about the strengths perspective asked social workers to challenge the idea that individuals who had been traumatized, neglected or abused would inevitably become incapacitated or a victim of their life experiences (Cowger, 1994; Saleebey, 1996). This approach does not call for a denial of the real troubles that clients may face; rather, "one should not deny the verdict (diagnosis or assessment) but should defy the sentence" (Saleebey, 1996, p.303). Social workers have a unique role to help individuals realize

their own strengths and capacities and help them to connect with the broader resources within their communities (Cowger, 1994; Saleebey, 1996).

Similarly, just as literature on coaching highlights the collaborative nature of the coach/client relationships (Biswas-Diener, 2009; Brock, 2008, Drake, 2008; ICF, 2007; Kampa-Kokesh & Anderson, 2001; Kilburg, 1996; Sperry, 2008; Liljenstrand & Nebeker, 2008), literature on the strengths-based approach in social work highlights the collaborative nature of the social worker/client relationship and the importance of the client being able to name their own situation (Saleebey, 1996). In this way, the strengths-based approach is intertwined with empowerment and constructivist theories (Cowger, 1996; McMillen et al., 2004; Saleebey, 1996). Empowerment theory focuses on the use of strengths and creativity to take control over one's life and reach goals (Browne, 1995; Greene et al., 2005). Constructivist theory posits that all known truths in the world are created through social interaction that involves the senses and language (Efran, Lukens, & Lukens, 1990; Greene et al., 2005). Constructivist theory in clinical practice refutes the idea that there is just one set of language to identify client situations, such as the mental health lexicon or medical model of reporting (Saleebey, 1996). Instead, constructivists posit the importance of letting clients use their language and the resulting co-creation of meaning between client and clinician (Greene et al., 2005). Gergen (1999) describes how in these co-constructed client and clinician dialogues, "change, growth and new understandings are fostered" (p. 148).

Interestingly, there are some differences within the coaching and social work literature on the purpose of a strengths-based approach. For example, Cowger (1994) argues that the strengths-based approach in social work is particularly important with mandated or involuntary clients. Given these clients' lack of power, helping them connect with their own possibilities and

their dreams for the future is key to their empowerment and eventual recovery (Cowger, 1996). The concept of an involuntary client is absent from the coaching literature; this would make sense given the origins of coaching as a service or intervention provided to professionals who have deliberately sought help with the goal of enhancing their performance (Biswas-Diener, 2009; Brock, 2012; Edelson, 2010; Kampa-Kokesh & Anderson, 2001; Kilburg, 1996). Likewise, while the strengths-based approach in social work goes beyond the individual to acknowledge that “empowerment and self determination are dependent not only on people making choices, but also on people having available choices to make” (Cowger, 1994, p. 263), environmental factors that might impede growth or empowerment are largely ignored within the coaching literature.

In sum, elements of the strengths-based approach, or strengths perspective, in social work, which integrates empowerment and constructivist theories, resemble the focus in coaching on facilitation, collaboration, creative dialogue, and use of the client’s language (Brock, 2008; Edelson, 2010). Both fields employ a perspective that views the client as an equal and believes in the client’s own unique capacity to rise above and overcome. For the purpose of this study, it is important to explore how social worker/coaches understand the strengths-based approach within social work practice and coaching: Are they aware of similarities and differences? Does coach training help support the existing strengths-based approach from social work or transform it? And what—if any—conflicts emerge between the application of the strengths-based perspective in coaching and the application of this perspective within social work practice?

Summary

In summary, this literature review has explored the history, growth and recent effort to professionalize the coaching field. As well, the theoretical similarities and differences between

coaching and the field of psychology and social work, initial evidence for coaching being integrated in social work practice, and literature on social workers in private practice as a parallel for this study on social worker/coaches are also discussed. The review clarifies that coaching utilizes a strengths-based, goal-oriented facilitation process that has extensive overlap with psychotherapy and social work; yet practitioners in one study reported that coaching clients expect support around enhancing their work and rapid change, whereas psychotherapy clients expect greater exploration of the past and a slower pace. Likewise, while the strengths perspective undergirds both coaching and social work, the field of coaching has historically maintained a focus on enhancing the performance of professionals, whereas the social work field focuses on empowering underserved populations and addressing external social systems through social justice pursuits. Despite these differences in the two fields, the literature suggests that coaching can be an effective intervention among clients more traditionally served by social workers. Yet it appears that most discussions on coaching in the social work literature fail to view it as a separate profession, viewing it, instead, as a set of skills that are effective when used as part of a broader continuum. Finally, social workers who go into private practice are motivated by the pursuit of independence, wellbeing, entrepreneurship and creativity, and this appears to parallel initial hypotheses about why social workers might integrate coaching (Biswas-Diener, 2009; Edelson, 2010; Zelvin, 2003).

While the literature confirms that some social workers are integrating coaching skills into their practices and proposes some hypotheses for why that might be, no research has explored these questions directly with social work/coach practitioners. This study, therefore, seeks to elucidate practitioners' own views about what motivates them to become coaches, how

they integrate the roles in practice, and how the integration impacts their social work identity, issues of ethics, and the types of clients they serve.

CHAPTER III

Methodology

This section reviews the research methods of this qualitative, exploratory study of the subjective experiences social workers who choose to integrate coaching into their practice. First, I review the study design and reasons for the decision to use an exploratory, qualitative approach to understand the subjective experiences of social worker/coaches. Second, I describe the recruitment methods, including a decision to alter the original inclusion criterion in response to research gathered during the recruitment process. Third, I describe the data collection process and efforts to protect the identity of participants and ensure validity of the data. Fourth, the sample characteristics are briefly described. Finally, I discuss how the data was analyzed.

Study Design and Sample Recruitment

Given the lack of data on social worker/coaches within the literature, this study used qualitative research methods to “tap the deeper meaning...and generate theoretically richer observations” (Rubin & Babbie, 2013, p. 40) about the experiences of social workers who choose to become coaches. This exploratory, qualitative approach sought to build a basic conceptualization to pave the way for future studies on the phenomenon of social workers who choose to integrate coaching into their practices (Rubin & Babbie, 2013).

The proposed study population was masters-trained social workers (MSWs) who were either integrating coaching into their current practice or had moved entirely into the field of coaching. Criteria for inclusion in the study were as follows: having an MSW degree; currently

practicing at least part-time as a social worker in the U.S.; having practiced for at least two years as an MSW social worker; having at least 60 hours of coach training and 100 hours of practice coaching clients, or having worked as a coach for at least two years with over 1000 hours of practice coaching clients. Originally, the inclusion criteria required participants to have begun a coaching certification process or received coaching certification with the International Coach Federation (ICF), the Coach Training Institute (CTI), the International Coaching Association (IAC), the Association for Coaches (AC), or as a Board Certified Coach (BCC). This original inclusion criterion was meant to strengthen the validity of study findings by limiting participation to individuals whose coaching practice was recognized by an independent body, thereby ensuring an equal comparison among social worker/coach participants. However, after 40 days of recruitment using the approach outlined below, it became necessary to alter the criteria—removing the certification process criteria—in order to generate a sufficient number of participants for the study sample. This recruitment experience may suggest that a limited number of social workers who choose to train as coaches and integrate it in their practices go on to become credentialed as coaches, and this is discussed further in the final chapter.

This study used a non-probability, convenience sample, recruited by means of snowball method and via posting on social media and professional listserves, to recruit a sample of 14 social worker/coaches. Prior to recruitment, approval for the study and the safeguards made to ensure that it met all ethical standards were obtained from the Smith College School for Social Work Human Subjects Review (HSR) Committee (Appendix B). In an effort to achieve the greatest possible diversity within the sample, I began recruitment by sending out announcements to more than 11,500 individuals who were on the listserves of the Greater Washington Society of Clinical Social Workers, the American Association for Psychoanalysis in Clinical Social Work

(AAPCSW), and Social Work World (Appendix C), and the Association of Coaching, the Co-Active Coaching Network Training Ideas, Coach 2 Coach, and the New Coach Connection (Appendix D). In addition, I posted the same announcements (Appendix C and D) on my personal Facebook and Linked In pages, as well as the Linked In pages of 1) the Clinical Social Work Association, 2) NASW, 3) Social Work Network, 4) Professional Life Coaches Network; Coaches for Diversity and Equality, 5) the Coaching Zone, 6) Mental Health and Private Practice Marketing and Management, 7) the International Coach Federation and 8) Co-Active Coaching. Collectively, the Linked In groups had over 87,319 members. Finally, I posted the same recruitment announcements (Appendix C and D) on the Facebook pages of the ICF, ICF DC, the Association of Black Social Workers Metro DC Chapter, (NABSW), NASW DC Metro Chapter, NASW Michigan, NASW CA, NASW NY, NASW MA, and NASW OH. My hope was that posting on these multiple listserves and social media hubs would provide the most diverse sample in terms of geography, race, age, gender and other identifying information.

Three weeks after posting announcements on listserves and professional and social media sites, I re-posted the announcements (Appendix C and D) on all of the sites listed above and additionally employed a snowball technique to aid in recruitment efforts. I sent an email (Appendix E) to eight social workers and/or coaching authors, trainers, and speakers who were either known to me personally through professional networks or who had been identified through the literature review. I asked these eight individuals to do any or all of the following: (a) participate in the study (provided they met the inclusion criteria); (b) forward an announcement about the study to their networks (Appendix F); (c) send me contact information for individuals who might either be recruited as potential participants and/or who could be requested to provide introduction to other potential participants; and (d) provide their insights regarding the most

promising networks or other venues for recruitment of a diverse sample via snowball. This method yielded a total of 4 participants. Finally, two weeks after the second round of posting, I again posted recruitment announcements (Appendix C and D) on previously identified sites.

Forty days following the beginning of recruitment efforts, only 7 participants who met the inclusion criteria had contacted the researcher, while another seven individuals who met all criteria except having a coach credential, had contacted the researcher with interest in the study. In an effort to generate a larger pool of potential participants, the inclusion criteria were amended, with approval by the Human Subjects Review Committee, to remove the credentialing criteria and instead define a coach as someone who had at least 60 hours of coach training and 100 hours of practice coaching clients, or had worked as a coach for at least two years with over 1000 hours of practice coaching clients. This change allowed the additional seven individuals who had expressed interest in the study prior to the amended inclusion criteria to participate, bringing the total sample to 14. Of the final sample selected, 4 participants had been recruited by means of snowball, 2 had learned about the study via an announcement on a listserv and 8 had learned about the study via an announcement on LinkedIn.

The researcher responded to those who emailed to inquire about the study with additional information confirming inclusionary and exclusionary criteria (Appendix G) and attaching the Informed Consent Form (Appendix H). Participants were asked to confirm that they met the participant criteria by reviewing the Informed Consent Form, signing it and sending the signed consent form back either as a scanned email attachment or via snail mail. Those who had returned their signed forms via email were later contacted by the researcher and requested to send a signed copy of the Informed Consent Form via snail mail, in keeping with the methods approved by the Smith College School of Social Work Human Subjects Review Committee. The

Informed Consent Form (Appendix H) clarified the goal of the research study, reviewed the inclusion and exclusion criteria, and clarified that participants would be participating in an up to one-hour phone interview on their experience as a social worker/coach. It also reviewed the minimal risks of participation, the efforts being made by the researcher to protect the participant's confidentiality, and the voluntary nature of the study. Finally, participants learned that they could choose not to answer any questions in the study and that they could withdraw from the study at anytime, up to and including March 31, 2013.

Risks and benefits of participation. The Informed Consent Form (Appendix H) explained risks and benefits to participants. Minimal risk consisted in the possibility of experiencing mild discomfort associated with reflection on issues related to professional ethics and/or the impact on clients of integrating coaching practice. Benefits to participants included the opportunity to reflect on and gain greater understanding about their career decisions, professional identity, and the impact of coaching on social work practice. Participants also benefited by contributing to professional knowledge in the fields of social work and coaching regarding the nature of joint social work/coaching practice, the impact of joint practice on both practitioners and clients served, the promotion of greater understanding of coaching within the social work community, and the identification of questions for further study.

Data Collection

Throughout the data collection process, efforts were made to protect the confidentiality of participants, reduce the risk and maximize the ease and benefits of participation. All interviews were carried out by telephone and all were recorded by encrypted and password-protected www.SaveYourCall.com software. The interview guide (Appendix A) consisted of 13 open-ended questions asking about participants' experience of integrating coaching into their practices,

and 8 demographic questions collecting data on participant age, race/ethnicity, gender, years of social work and coaching practice, region of the country in which they practice, current employment status, and income range). Areas of exploration in the 13 open-ended questions included: (a) factors that have motivated participants to integrate coaching in their careers; (b) participants' views on the integration of coaching and social work education; and (c) participants' views on the integration of these two disciplines in practice, including the impact on clients, issues of professional identity, and sense of wellbeing, and adherence to professional ethics. Questions regarding income and employment status (part-time or full-time) were included among the eight demographic questions because the literature suggests that coaching practice may be adopted for financial gain (Biswas-Diener, 2009; Edelson, 2010). Since coaching is an emerging field and this study explored a possible trend of social workers integrating coaching, it asked about the number of years that practitioners have been practicing as social workers and how long ago they either began the coaching credentialing process or how long since they became a credentialed coach. Additional demographic data sought, including age, race/ethnicity, gender, and geography was felt to inform future exploration of demographic trends in this emerging area of joint practice.

While this study was not anonymous, the researcher maintained the security and confidentiality of the data throughout the process. First, early in the data analysis process the researcher replaced participant names with numbers to identify specific interviews. Second, the informed consent forms that included identifying information were kept separate from the transcribed data with identifying information removed in a locked location. Third, all audio files were transcribed in privacy. Fourth, while data analysis included pulling from the descriptive interviews of participants, quotes did not have identifying information on participants. Likewise,

participant data is presented as a group; individual participant data is not highlighted in a way that would give identity away. Finally, the interviews were recorded by www.SaveYourCall.com software, where the audio data was encrypted and password-protected. The signed informed consent forms, transcriptions, and audio of phone recordings are being stored in a password-protected hard drive within a locked office for three years, as stipulated by Federal Guidelines. If the data is needed for longer than three years, it will continue to be stored in a password-protected hard drive within a locked office; otherwise, the informed consent forms, transcriptions, and audio of phone recordings will be destroyed.

Sample Characteristics

The study consisted of 14 participants, of which 12 were female and 2 were male. Of the final sample, 4 participants were recruited through the snowball sampling approach and 10 responded to postings on diverse listserves and social media sites. All 14 participants identified their race as white/Caucasian. Participant ages ranged from 40 to 66 with an average age of 52 and a median age of 53. The sample was experienced, with an average of 23 years of practice as social workers (range=13 to 43 years) and an average of 8 years of experience as a coach (range=1 to 17 years). A majority of participants (n=11) had worked as social workers in an agency setting, 8 of which were nonprofit and 3 of which were EAP settings. Three participants had worked as social worker/psychotherapists in private practice before integrating coaching. Additional sample characteristics are discussed in detail in Chapter IV.

Data Analysis

Data from interviews were transcribed by the author and analyzed using a process of open coding and classification that allowed me to identify themes (Rubin & Babbie, 2013). Transcribed content was reviewed multiple times to identify repeating themes such as how

participants maintained clear boundaries between their social work and coaching services and how participants valued the concrete skills and experience-based approach of coach training. These themes were marked as they emerged in each line of the interview. Through this process, outlying themes from specific interviews were also noted. Later, all the themes identified in individual interviews were reviewed to identify broader themes such as how coaching served as a panacea to a range of personal and professional problems for participants and how participants were motivated to adopt coaching in response to specific experiences as social workers. A color was assigned to each of these broader themes and previously identified themes in individual interview transcripts were then shaded according to the color of their broader theme. Lastly, illustrative quotations were cut and pasted into categories based on the broader themes. The final product was an Excel spreadsheet that consisted of broader themes and sub-themes and the specific quotations and interview excerpts that fell under each.

Chapter IV

Findings

This chapter presents the findings of qualitative interviews with 14 participants who had received their MSWs and practiced as social workers and had then moved to integrate coaching into their practice. The analysis of data from transcribed interviews with 14 participants, each lasting approximately 60 minutes, yielded many consistent themes that both reflect and add to the extant literature on social worker/coaches. First, this chapter describes the sample demographics, including participants' identifying characteristics, types of social work and coaching practices, income, and hours worked. Next, the presentation of qualitative data from the interviews is organized into six broad themes, including: (a) coaching as the answer: the yearning for personal meaning and discovering coaching as an answer; (b) coaching as a way out: how participants' feel confined by their social work experience and discover coaching as a way out; (c) separating the practices: how participants create clear separations between their coaching and social work services; (d) coaching as a transformative practice: how coaching skills are integrated and change the practitioner's social work practice; (e) multiple identities, shared values: how the integration of coaching helps practitioners embody multiple professional identities and view coaching and social work values as one in the same; and (f) taking the best from both: how dual practitioners incorporate elements of both social work education and coach training in their practices. Within each of the six large themes, I highlight three to five prominent sub-themes, many of which support the data from this literature review and identify

themes for future study on this growing area of joint practice. The implication of these themes for further inquiry in the area of social work and coaching joint practice is articulated further in Chapter V.

Sample Characteristics

Demographics. Data was collected on participants' age, gender, race, ethnicity, and region (see Table 1). The study sample was notable for its lack of racial diversity. All 14 participants identified their race as White/Caucasian, two of which also identified their race as Caucasian/Jewish; one half of the participants (n=7) identified their ethnicity as Jewish or secular Jewish; 5 identified their ethnicity as American or European-American, 1 identified as Israeli-American, and 1 identified as Anglo-Canadian. Of the 14 participants, 12 were female and 2 were male. Participant ages ranged from 40 to 66 with an average age of 52 and a median of 53. Half of the sample (n=7) was in their 40s, while the remaining half were 57 or older. While all but two participants described their coaching work as occurring all over the country and internationally via telephone, there was some diversity in participant location: 4 participants were based in the Northeast or Mid-Atlantic, 3 in the South, 2 from the West, 4 from the Midwest, and 1 from Canada.

Years worked and type of social workers/coaches. Data was also collected on the number of years worked as a social worker, area/field of practice, years worked as a coach, and type of coach. As seen in Table 1, the sample was experienced, with an average of 23 years of practice as social workers and a range of 13 to 43 years of experience. Participants had an average of 8 years of experience as a coach with a range from 1 to 17 years. A majority of participants (n=11) had worked as social workers in an agency setting of which 8 were nonprofit and 3 were EAP settings, and 3 participants had worked as social worker/psychotherapists in

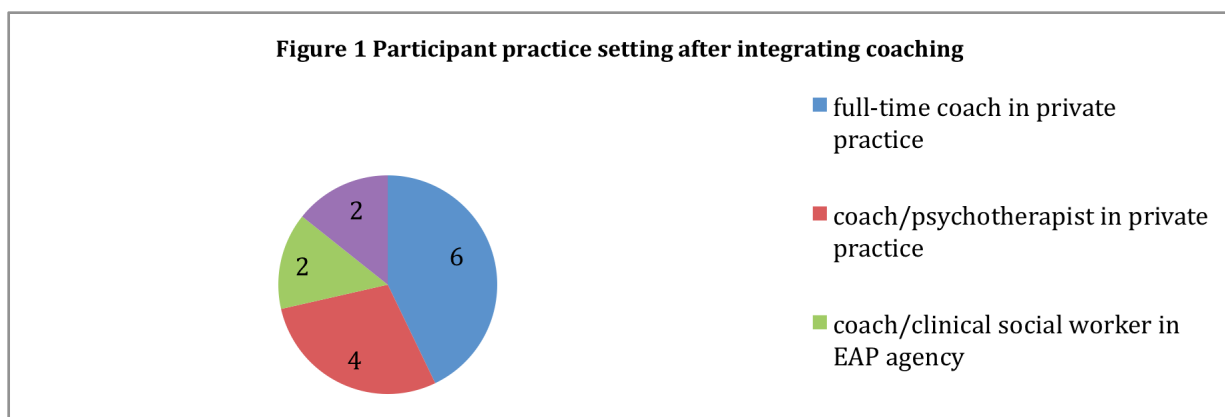
private practice before integrating coaching. Upon entering the field of coaching, 9 identified as life coaches, 3 identified as life and executive coaches, and 2 identified as executive coaches.

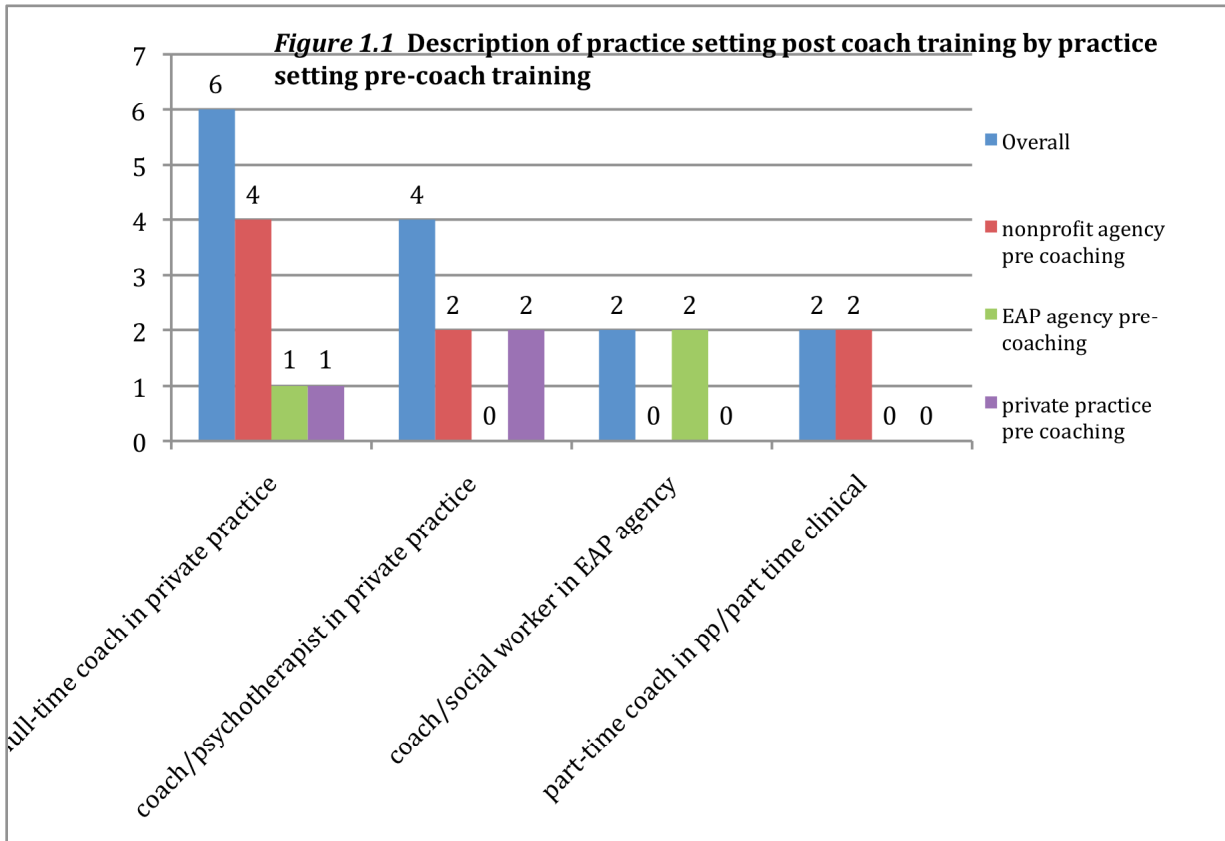
Among those providing life-coaching services, 4 had a specialty in treating clients with ADHD.

Characteristics	m	range
Age	52	40-66
Years worked as social worker	23	13-43
Years worked as coach	8	1-17
Gender	n	%
Female	12	86.0%
Male	2	14.0%
Race		
White	14	100.0%
Ethnicity		
Jewish/secular Jewish	7	50.0%
American	3	21.0%
European American	1	7.0%
Non Hispanic	1	7.0%
Israeli/American	1	7.0%
Anglo-Canadian	1	7.0%
Region based		
Mid-Atlantic/Northeast	4	28.5%
Midwest	4	28.5%
South	3	21.0%
West	2	14.5%
Canada	1	7.0%
Practice setting (pre-coaching)		
Nonprofit agency	8	57.0%
EAP agency	3	21.5%
Private practice	3	21.5%
Type of coach		
Life coach	9	64.0%
Life coach/executive coach	3	21.5%
Executive coach	2	14.5%
ADHD specialty	4	28.5%
Write, teach, train, speak	5	36.0%

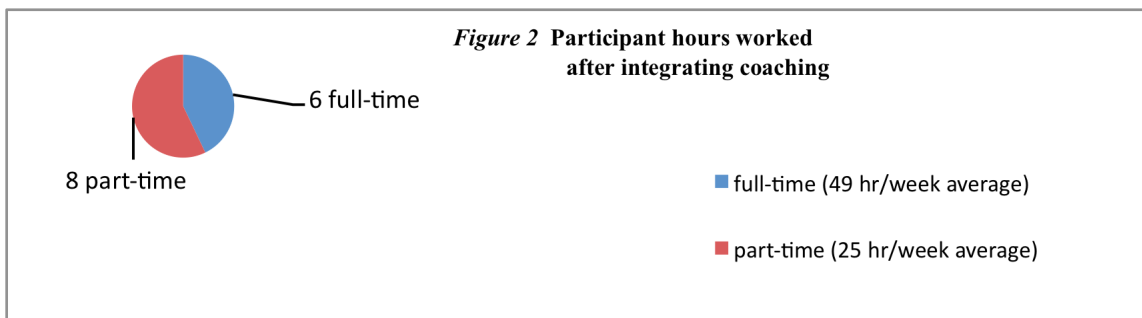
Among all participants, 5 actively engaged in writing, teaching and speaking as part of their coaching identity and professional role.

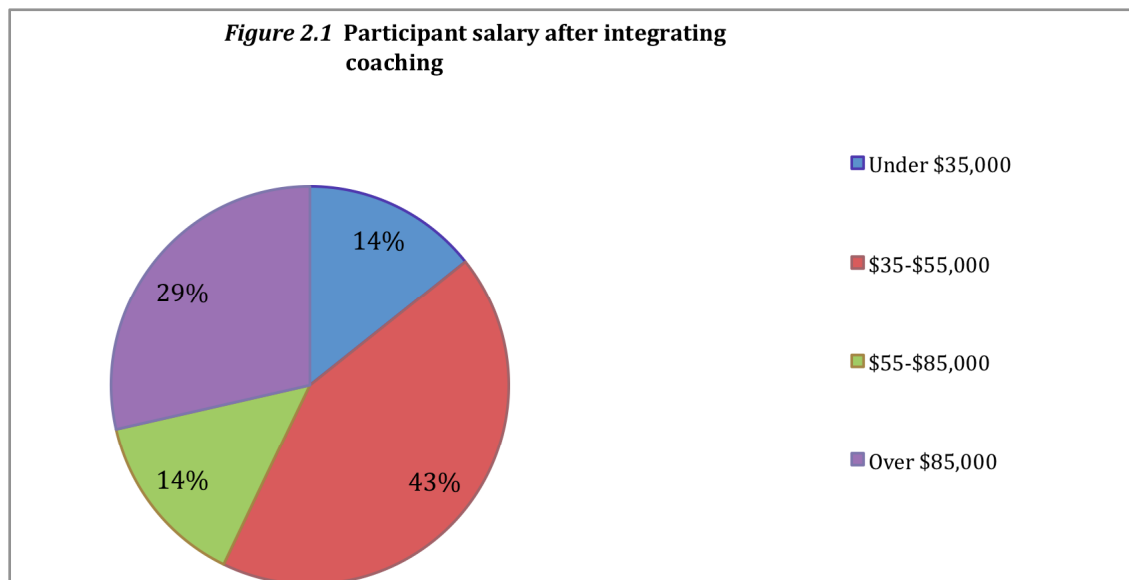
Type of work as a social worker/coach after integrating coaching. Figure 1 and Figure 1.1 show the four distinct groups within the sample based on the type of work in which participants were engaged after integrating coaching into their practice. The largest group (n=6) consisted of participants who worked as full-time coaches in private practice, no longer practicing as social workers. Within this group, before integrating coaching, 5 participants had worked as social workers in agency settings (4 as clinicians and 1 as a nonprofit executive) and 1 had previously worked as a social worker in private practice. The next largest group (n=4) consisted of practitioners who provided both coaching and psychotherapy in private practice. Before integrating coaching, 2 of the psychotherapist/coaches had worked as psychotherapists in private practice; and 2 of the psychotherapist/coaches had worked as agency-based social workers. The third group included 2 practitioners who integrated coaching and clinical social work within their jobs as EAP employees. The fourth and final group consisted of 2 participants who maintained part-time work as clinical social workers in nonprofit agency settings while also practicing as coaches in private practice; before integrating coaching, both of these 2 practitioners had worked full time in nonprofit agency settings.





Finances and Hours Worked. Data was collected on hours worked and the salary of participants. Figure 2 illustrates participant hours after integrating coaching, with a majority (n=8) working an average of 25 hours per week, and the remainder (n=6) working an average of 49 or more hours per week. In terms of salary, Figure 2.1 shows that 2 participants made under \$35,000 per year, 6 made between \$35,000 and \$55,000 per year, 2 made between \$55,000 and \$85,000 per year and 4 made over \$85,000 per year.





Changes in hours and salary. Participants were also asked a qualitative question on how hours and salary may have changed since integrated coaching. Responses to this question fell into one of several thematic areas. With regard to how hours have changed since integrating coaching into their practice, 6 of the 14 participants (43%) stated that they work fewer hours. The 5 participants (37.5%) who indicating working about the same number of hours, also discussed having much more flexibility and control over their hours. The remaining 4 participants (28.5%) indicated working more hours since integrating coaching. These participants describe being more motivated to work longer hours and enjoying the flexibility and control they have over their time.

Responses regarding how coaching impacted participant salaries reflected themes from existing literature; for example, 5 participants earned more after integrating coaching largely because of their work with executive clients. Four of the participants earned about the same amount after integrating coaching or were unsure how the integration of coaching had effected their salaries; and 4 participants earned less but described having unlimited earning potential and,

in some cases, an expectation that they would eventually earn more. Finally, a majority of participants (n=8) talked about how the integration of coaching provided more flexibility and control over their hours and was more valuable to them than having a salary increase.

Qualitative Findings

Coaching as the answer: the yearning for personal meaning and discovering coaching as an answer. In the following section I discuss the overarching theme of discovering coaching after a period of yearning for personal and professional meaning. The findings show that, for these participants, the new coach perspective provides an answer by offering a paradigm shift that empowers participants to be more creative, use more of their full selves in their work, create more work/life balance, and unleash their professional potential. Five salient sub-themes descriptive of participant perception of coaching further elucidate this theme.

This section will first examine the sub-theme of discovering coaching after a major life event. Second, this section examines the sub-theme of coaching as an answer to a personal and professional yearning to step more authentically into a preferred personal and professional role. A third sub-theme is that of coaching as a fundamental paradigm shift that infuses energy and, in the words of one participant, “changed my view of the world.” The fourth sub-theme is that of coaching integration as enhancing, empowering and unleashing potential. The final and fifth sub-theme is the capacity of coaching to open up specific professional doors for those who adopt this practice.

Coaching as an infusion of energy and possibility after a major life event. Of the 14 participants, half (n=7) discovered the profession of coaching and therefore engaged in coach training after a major life event. The major life events discussed included the death of a close friend or family member, divorce, marriage, an illness, and being fired or laid off. In all cases,

these events served to spur participants to look beyond their particular employment at the time to discover something that was more meaningful to them and/or more manageable, energizing and uplifting. Only 1 of the 7 participants, who had just been divorced, also spoke about discovering coaching in hopes of reaping more financial gain. Similar to other participants, these major-life-event-participants also consistently described coaching as an answer to the personal and professional challenges they were facing. One participant said, “The coaching was like, there is future. There is hope after. There is a different way to look at things and that is what the coaching has done for me personally.”

Coaching as an answer to personal and professional yearning. Most practitioners described a longing or yearning for something additional in their careers and personal lives before discovering coaching as an answer. Finding coaching answered the yearning by allowing participants to step more authentically into the personal and professional roles they aspired towards. For example, some participants talked about being attracted to coaching because it was in alignment with what they were already doing. In one participant’s words, “it just fit my personal style.” Another participant described a long journey of personal and professional soul-searching before discovering what she really wanted to do in her life. This participant found coaching as the answer after working with a coach, and in her words realizing, “Holy Cow. I want whatever she has; I love who she is—her energy, how she worked. It was so right and alive. Whatever drug she is on, I want that.” One participant spoke about looking for something that would allow her to bring in her previous business experience, which she had done before becoming a social worker; this participant shared, “I am idealistic in terms of what I expect work to be and how fulfilling I expect it to be. I think coaching—working for myself—suits me.” In

all these cases, participants spoke about how coaching allowed them to merge various different parts of themselves or, in one participant's words, have "more latitude to be yourself."

Coaching offers a paradigm shift that infuses energy and a sense of possibility into one's worldview. In further response to the yearning, participants unanimously spoke about the discovery of coaching providing a type of paradigm shift that allowed them to see themselves, the world, their personal lives, and even their clients' lives through a more positive and uplifting lens. One participant described the shift as, "Coaching has changed my view of the world—not looking at the world as serious, as pathology...it's more like, life has many possibilities." Another commented, "Coaching really helped me learn to be more optimistic in life...I was really good at getting at really difficult, deep...dark places with a client. But it did not require that I be motivational or even terribly optimistic." One participant shared, "I am more positive and more excited...I see more of what could be possible for people, versus before I think I was so stuck in the problems with the client." Participants described this paradigm shift as deeply personal and having a broad impact on all aspects of their personal and professional lives. One participant's description that, "I am not doing coaching, I am being coaching," speaks to this deep personal shift that was experienced by nearly every participant. This shift also seemed to be permanent, in that participants—regardless of how distant they were from their first discovery of coaching—spoke similarly about coaching as offering an energetic shift that impacted multiple areas of their lives and was not reversible or erodible.

Coaching helps to enhance, empower and unleash potential. Nearly all participants commented on ways that practicing coaching empowered them to integrate more aspects of themselves in their personal and professional lives, work more creatively and confidently, and create healthier work/life balance. One participant shared that, "Coaching has...made me who I

am and given me permission and the confidence and clarity to be that person.” Another said of its impact on her work as a clinician, “it has enhanced the quality of what I can provide. It’s kind of using my full self now.” There was a sense among most participants that coaching allowed them to become more flexible within their practices, including using more humor, metaphor, intuition, and appropriate self-disclosure. Participants all spoke about feeling more energized in their work since integrating coaching. It also seemed to empower participants to seek greater work/life balance. One participant shared, “I pay attention more to my own development and boundaries since coach training.” Yet another said, “I feel more alive and more committed to all the things that I am doing than I ever have before...and I do think that it is the coaching that has given me the balance.”

Coaching opens up professional doors. Participants unanimously spoke of how adopting coaching practice had opened additional professional doors. Some spoke about how their coaching credentials had given them more credibility in working with executives and professionals, and allowed them to work in corporations. Others spoke about how, in the words of one participant, coaching “enhanced the quality of what I provide.” Some participants shared how their coach training made them more valuable to their organizations, and, in some cases, allowed them to market themselves as trainers, speakers, and authors. In one participant’s words, “I think [coaching] makes me more marketable when people look me up.” Others talked about how coaching allowed them to step into an entrepreneurial side of themselves that they had not felt comfortable stepping into as social workers. One participant shared, “I found out that I love being entrepreneurial and that I wish that more social workers were entrepreneurial because I think we’d have a healthier professional.” Another participant talked about how, “coaching “allowed me to integrate [entrepreneurship] with the making a difference value.” In sum, for all

participants, adopting coaching was perceived as “opening doors” and offering participants a greater sense of empowerment in their professional lives.

In this way, the discovery of coaching and the subsequent paradigm shift seemed to solve a range of personal and professional yearnings of the study participants. Coaching answered a longing for meaning—either following a major life event or after a search for greater professional value. The discovery of coaching gave participants license to be more creative, confident, and empowered in their personal and professional lives. Participants talked about this paradigm shift as seeing the world differently. A new sense of limitless possibility seemed to fuel an unleashing of their professional potential and allowed participants to integrate their personal and professional beings in a more fluid way.

Feeling confined by the structure of social work practice and viewing coaching as a way out. This section looks at the overarching theme of participants feeling boxed in by their practice of social work and finding coaching as a way out. It is important to note that only 1 participant attributed her move to adopt coaching entirely to her frustrations with the practice of social work and this participant no longer practices as a social worker. The other 13 participants cited their aggravation with various aspects of their social work practice as one among many factors, and some described a process of evolving out of the field, rather than running from it. It is also worth noting that 2 of the participants who identified as EAP social workers were actually encouraged to take coach training by their social work employers who also paid for the coach training. For these participants, the adoption of coaching was felt to have evolved naturally as part of their work as social workers rather than in reaction to a specific concern or issue with the field.

Analysis of transcribed material uncovered five salient subthemes characterizing participant feelings of dissatisfaction with the field of social work: a) tiring from work with clients who are emotionally needy or suffering from persistent mental illness or clients who require longer-term, more intensive services; b) discomfort with the medical pathology model of their social work practice and the related weight of needing to be an expert; c) frustration with the hours and/or the inflexibility of agency or private practice work; d) frustration from dealing with insurance/managed care (among the private practitioners); and e) discomfort with, as 1 participant put it, the “social work bias against business.” This section reviews these sub-themes in the order of frequency with which they were mentioned by participants.

Tired out from working with clients who are emotionally needy or suffering from persistent mental illness. A majority (n=10) of participants described feeling worn out from their social work agency or psychotherapy private practice experience of working with clients who were slow to make forward progress or were emotionally needy. One participant shared, “As much as I loved my clients—I was getting really tired. There was this one woman—very borderline. I had seen her on and off for years and years and years...But she never changed. She never got better.” Participants repeated the theme of wanting to feel like they were affecting change. Another participant who also expressed frustration with what she perceived as a lack of motivation for change among her social work clients said of her decision to adopt coaching, “I want my time to be well spent and know that I am affecting change in some sort of way.” Some participants spoke about needing to protect themselves from giving away too much of themselves by working with clients who were particularly emotionally needy. One participant shared, “My inner capacity to be present with some very, very wounded self-harming, axis-2 kinds of patients plummeted... I decided that I need a more balanced work/life. I need a

work/life that mixes different uses of self.” About working with mandated clients and those presenting with high needs, another participant stated, “I did my time.”

Across the board, participants described a level of fatigue or as one participant described, “... a heaviness in my body” as a result of the overwhelming nature of clients’ presenting problems or their previous approaches to working with clients. They expressed a longing to work with clients who were higher functioning or who showed greater capacity to engage and make forward progress. One participant described how coaching allowed her to do the kind of work she loves to do in therapy, but in a more sustainable way: “I really think honestly that coaching is not my calling. Psychotherapy is my calling...and coaching is something where I can use myself in a very meaningful way that will not...take the wind out of my sail.”

Discomfort with the medical model: not wanting to pathologize clients. Another aspect of discomfort with their social work practice experience focused on participant fatigue from approaches that they perceived pathologized clients, requiring them to feel that they needed to be an expert and “fix” clients who came to them broken. One participant shared, “It was a very pathologized model—and that did just not work for me...I felt like the clients were coming in broken and they wanted me to fix them.” Participants repeatedly expressed their feelings of discomfort with the practice of pathologizing for the purpose of diagnosing or because, as one participant put it, clients were already entering the agency and “defining themselves as troubled.” On the flip side, participants reveled in how coaching allowed them to, in one participant’s description, “swim in this sea of possibility” with clients. Another participant said, “Coaching is so much more fun than therapy...So for me I can have a full day of therapy, and I am exhausted at the end of the day. I can have a full day of coaching and I am energized by the end of the day.”

Likewise, participants talked about adopting the peer or partner model of coaching as a relief from the medical expert/patient model that some practiced as social workers. One participant said, “We are more like partners and I am helping my clients find the answers for themselves.” Another participant talked about how the peer or partner model of coaching helped her reconnect with the social work value of self-determination; she shared, “social work says we...believe in self-determination and empowerment, but really as a social worker you don’t practice that.” Again, many described a fundamental dislike of the pathologizing practice within the medical model of social work. This social work practice model left them low on energy and stuck focusing on clients’ problems. On the other hand, as one participant shared:

A coach has been trained to understand that they are not the expert in someone else’s life; that the person you are meeting with is the actual true expert in their life. As a coach you help them figure out ways they know the answers and help them get out of their own way.

Frustration with the hours and/or inflexibility of agency or private practice work. The experience of working too many hours, frustration with mismanaged agencies, or feeling overwhelmed by a private practice workload were also factors that pushed some to integrate coaching. A few participants talked about having to work longer hours in agency settings than had been originally promised. In response, they sought with coaching more control over their hours and a less overwhelming schedule. One participant described it as, “I did my time. And now I want to be able to sustain myself.” Others spoke about wanting to practice in their own way without the mandate of a particular supervisor or agency model. One participant shared:

I am at a stage in my career where my ethical sense is that I want to be able to use all the modalities, all the tools that I can that I think work, and the

problem with being part of an organization... is that you come under someone else's funding and their model.

Not only the amount of hours, but the inflexibility of those hours, as well as the perception that agency guidelines prevented them from freely utilizing all modalities and elements of their training, contributed to participants' decision to embrace coaching. Another participant who had moved from a robust psychotherapy private practice to a mixed psychotherapy and coaching practice talked about loving the new flexibility since integrating coaching, stating:

I have amazing variety in my life. I get to see clients; I get to teach; I get to present; I get to write; I get to do some consulting. I just have a very wonderful balance, and I am overall working fewer hours than I was when I was just doing private practice.

Exhaustion from interactions with insurance and managed care. Participants who were working as psychotherapists in private practice before adopting coaching all discussed varied aspects of their frustration with insurance companies and how this frustration motivated them, in part, to integrate coaching. Interaction with insurance companies was the primary motivator for one participant who shared that, "Everything around me was going up, but they continued to pay so poorly. And it wasn't just the pay. It was the frustration of dealing with insurance companies." Participants described being owed thousands of dollars in reimbursement for their services that they expected they would never receive from insurance companies. They shared the frustration of needing to spend hours on the phone to facilitate the reimbursement process. Even after integrating coaching into their practices and continuing to accept insurance reimbursement for psychotherapy clients, some participants talked about wanting to cease all

future interaction with insurance companies. “I am going to go off the last panel that I am on. I can’t take it anymore...all the rigmarole.”

Discomfort with social work bias against making money. Finally, some participants spoke about their frustration with a perceived social work stance of being “anti-business” or against making a profit. Aspects of this theme are echoed in the discussion of participants’ thoughts about entrepreneurship and social work, discussed below. Deserving of mention in this section, however, are participants’ perceptions of an anti-profit stance in social work as contributing to their decision to adopt coaching. One participant who currently works primarily as an executive coach said:

One of the problems with the social work profession is that it is just against profit. When I was there, there was a core around we are all supposed to be Mother Teresa...For a group of people who claim that they are here to treat people well and that they are just here to provide good services, I have seen some of the most barbaric things happen in social work agencies.

Other participants discussed the challenge they experienced as social workers charging an appropriate rate for their service due either to a sense that their services were not worthy enough or that, as social workers, they were expected to "give it away." Upon integrating coaching into her social work practice, one participant shared, “I am not giving myself away anymore...I like coaching in that way. In the coaching community it seems acceptable to charge, you know, whatever you think you are worth.”

In sum, this section has examined the range of frustrations that participants experienced with social work practice and that contributed to their decision to adopt a coaching practice. The

elements of social work practice discussed—working with clients who are emotionally needy or suffering from persistent mental illness, working within a medical pathology-focused model and expert/client model, working inflexible hours, interacting with insurance, and feeling like their social work experience was anti-business—are explored further in the section below on internal identity and public image.

Separating the practices: how participants create clear separations between their coaching and social work services. This section discusses the subthemes connected to the process of separating professional roles in practice among the 8 active coach/clinical social worker practitioners in this sample (Figure 2). With one exception, these participants talked about fastidious separation between coaching and therapy services. Clients were contracted either for coaching or for therapy, and this could not change; if coach clients were assessed as requiring psychotherapy, they would be referred out, and if psychotherapy clients were assessed as benefitting from coaching services, they would likewise be referred out. The one outlying participant described an experience of offering a combination of clinical social work and coaching interventions to clients who contracted with her as a psychotherapist/coach in private practice. This section looks at two subthemes within the broader theme of separating the professional roles of social work and coaching: first, it looks at how dual practitioners create boundaries and clear separations between their social work and coaching work; second, it reviews how dual practitioners determine who will receive coaching versus who will receive more traditional clinical social work, including the view among participants that coaching can be seen as one very specific type of intervention whereas social work interventions offer a greater variety that can better meet the needs of a broader range of clients.

The boundaries and separations created by dual practitioners. Among the 8 dual practitioners, most indicated their practice of maintaining very clear boundaries between their coaching and clinical social work services. The 4 coach/psychotherapists who offer both coaching and therapy services spoke about offering whichever of the two services (coaching or psychotherapy) the client requested, but also carrying out an initial assessment to ensure that the requested service was appropriate for the types of concerns presented. After determining which service the client would receive, the coach/psychotherapist would draw up a clear contract: “I make it clear in whatever the client signs—the consent form or the contract of coaching—whether it is coaching or counseling.” As part of the contracting process with clients, many participants talked about clarifying the differences between coaching and therapy. For example one participant said:

There is a section in my written agreement on therapy versus coaching, and it gives a brief definition of therapy that outlines some of the basic difference and ... then states that...as the coach, I will not be your therapist.

Most participants felt strongly that whatever initial contract they made with a client should not change; as one participant shared, “you have to keep them separate legally and ethically. You cannot turn a therapy client into a coaching client and you cannot turn a coaching client into a therapy client.” Within the EAP setting, the choice of coaching or psychotherapy was also clearly delineated with clients and determined through a formal assessment process.

Nearly all dual practitioners spoke about the importance of keeping their services separate in order to maintain ethics and protect their LICSW credential, which some were

fearful of losing if they mixed up the services offered by an LICSW with the services offered by a coach. In fact, 1 of the 2 dual practitioners who was an agency clinical social worker part time and a coach in private practice part time shared, “I am choosing to do clinical [social] work through a separate agency just to help keep the boundaries clear.” Another participant who provides both coaching and psychotherapy in private practice said of the separation:

When I have a coaching client that has issues that are more emotional, I will refer them to a colleague for therapy. And when I have a patient in therapy who needs coaching, I will refer them to someone else for coaching. I don't do both with the same person.

How dual practitioners determine who receives coaching versus who receives more traditional social work. Consistent themes emerged from participants' description of the process of assessment involving determination of appropriate services. First, practitioners talked about determinations involving work with clients with untreated mental health diagnoses versus those who were otherwise healthy but felt “stuck” in their lives. As one participant described, “Therapy is for medically related issues and coaching is usually for personal growth, performance.” Second, practitioners differentiated between individuals who evidenced specific behaviors they wished to change, or action steps they wanted, and clients who one participant described as “more vulnerable,” and/or those who expressed a desire to gain greater insights into their emotions or conflicted relationships. One participant described this divide by saying, “With coaching, you really stretch people. So it's just a really different style. And that's why for some people like a psychotherapy client who is really vulnerable, it's not welcome and it's just not appropriate.” Another participant described how the relationship and interaction was different in

coaching than in therapy, saying that there “was not an analytic third in coaching.” She went on to say:

There is a difference in meaning making. It’s sort of like I am not making meaning with my coaching clients. I am helping them to discover and to implement strategies and new habits and new ways of being in the world and helping them discover things for themselves.

The 4 dual practitioners who were coach/psychotherapists in private practice also spoke about providing the service the client came in requesting, yet also doing some assessment and ensuring that there was clear collaboration in the decision. One dual practitioner shared this process of arriving at the decision to provide psychotherapy but with a coaching approach:

I had somebody that came in for psychotherapy last year that was in a very vulnerable place in terms of their job—was having a lot of depression that was affecting their job. This is an example of someone that could have used psychotherapy for depression, but could also have used psychotherapy with a kind of life coaching approach to stop acting out at work. And I simply asked her: which approach she would prefer. And she said, I have been in treatment for depression at other times for many years, I am on an anti-depressant, I know I am depressed. But what I could really use your help with is my tendency to act out. So she helped define that contract.

Coaching interventions as one specific type along the much broader continuum of interventions offered by social workers. There was also broad agreement among these participants regarding the relative inflexibility of coaching, whereas participants described clinical social work as allowing one to do a combination of different things, including applying

“a coaching approach,” depending on what the client needs. Through this lens, coaching takes its place along the broader continuum of therapeutic interventions and is best suited to individuals who are in a goal-setting stage and ready to take action. An EAP dual practitioner shared how she liked to use the coaching approach within short-term therapy “to help [clients] identify their goals, what are their obstacles, what do they want to do.” Another participant shared, “I think social work sees [coaching] as a style. It’s a style of mentoring and it’s probably something that social workers have done forever. So I think it actually fits really well in social work.” Yet another woman shared, “I am really clear that I have a lot of skill sets as a psychotherapist and a coaching approach is just one of those styles.” Finally, one woman summed it up nicely saying, “Clinical work is more flexible. Coaching is all action; social work is both sitting in the past and moving forward.” In this way, nearly all practitioners spoke about using coaching interventions with therapy clients when appropriate; however, they talked about refraining from using therapeutic interventions with coaching clients out of respect for ethical boundaries.

In conclusion, a number of trends emerged on how dual practitioners separate coaching and social work in practice. All but 1 participant described a detailed process of how they separate their coaching and social work practices through a collaborative process with the client—never providing both coaching and therapy to the same client, and referring out when the boundary between coaching and therapy changed or became unclear. Participants agreed that coaching was ideal for clients who had insight around their needs, were ready to identify specific goals, and were motivated to take forward action. While practitioners made clear that a “coaching approach” could be a part of psychotherapy when clients are ready for it, they also acknowledged that psychotherapy offers a broader range of interventions to support more

vulnerable clients who are looking for greater understanding, insight around complex emotions or interpersonal conflict, or more exploration of the past. Alternatively, coaching offers a very specific type of intervention. Participants agree that if coaching clients who are mentally unwell, they needed to be receiving therapy from another practitioner—not their coach who also may have a therapy practice.

Coaching as a transformative practice: how coaching skills are integrated and change the practitioner’s social work practice. This section looks at how the integration of coaching skills shifted the social work practice of the 8 participants who continued to work as social workers (see Figure 2.2). While the specific professional roles and services delivered tended to be clearly delineated and separated, all 8 dual practitioners spoke about frequently using coaching interventions within their social work practices. Just as the above section described coaching as offering a paradigm shift that answered a range of different personal and professional issues, this section reviews participants’ perceptions of the ways that coaching transformed their social work practice. As participants shared the specific and ever-changing ways that coaching has transformed their social work practices, it became clear that participants wanted more platforms within their day-to-day work as joint practitioners to discuss the unique ethical issues, boundaries, and logistics that arise as dual practitioners. In the meantime, this section looks at three significant subthemes of coaching as a transformative practice, including: integration of coaching and participants’ decisions regarding work with a range of client populations; coaching integration and increased focus on strengths, goals, and specific action steps with clients; and gaining a professional edge after integrating coaching, including the experience of greater success in marketing their services and increased capacity to provide services to clients with complex needs.

Working with people who are “ready to move forward”. While participants discussed keeping a clear separation between their coaching and psychotherapy services and client contracts, all of the 8 dual practitioners acknowledged bringing their coach skills into their therapy sessions, and this seemed to correlate with their tendency to work with therapy clients who were less emotionally needy, or whose persistent mental illness was less severe, than they had before; these were clients who, in the words of one participant, “are ready to move forward in their lives.” As discussed above, some participants actively sought clients who were “more high-functioning” or who they assessed to be motivated to engage in therapy out of a reaction to experiences of exhaustion from working with clients who were emotionally needy or suffering from persistent mental illness. One participant described working with fewer clients who were, “falling off a cliff.” Another participant guessed that her integration of coach skills within her therapy practice also changed the clients who wanted to work with her, leading to her “attract more of ...a worried well clientele, instead of deeply neurotic or even character disordered.” Most participants were clear that they were actively seeking clients who were higher functioning and more prepared to make changes; yet 2 of the 8 dual practitioners reported not necessarily setting forth to attract such clients to their services, but rather feeling that they were more attractive to clients who were higher-functioning or motivated, as a result of marketing their coaching approach to therapy.

Being more positive, action- and goal-oriented with therapy clients. Related to the issue above, participants talked about how after integrating coaching, they became more results-focused, more positive, and more “action oriented” with therapy clients. One participant described, “being very directive and interactive.” Another participant shared, “I think I am more positive. I am more practical, more action-oriented with my clients. I look at their strengths

more than I did before, versus focusing on problems.” Yet others talked about moving away from the role of therapist as expert and instead drawing out answers from their clients by using coaching questions and the peer-to-peer model. One participant who had worked as a clinical supervisor in an agency before integrating coaching said, “I am less [likely] to rush to, ‘I think you should do this’ and I am more, ‘what do you think would be helpful; well if you did know, and you could solve this problem yourself, what would you do?’” In sum, all participants talked about using elements of coaching in their therapy practice, particularly when clients were ready to move forward or make behavioral changes.

Not abandoning clients with the highest needs after integrating coaching. Despite what appeared to be a strong trend towards working with higher-functioning clients after integrating coaching, 5 of the 8 dual practitioners continued to maintain some work with clients with higher-needs, both as coaches and therapists. One of the dual practitioners who worked part-time in an agency setting as a therapist shared that she chose to work in an agency so that she could provide therapy to uninsured clients, which she knew she would not be able to do if she worked as a therapist in private practice. Another dual-practitioner who provided both social work and coaching services in private practice, spoke about providing coaching to a homeless woman. This client had not been able to benefit from previous experiences in therapy, but was able to make great gains through the coaching. This participant shared of her client who was homeless:

She wasn't suicidal. But she said this is it for me. I've got to really try to pull my life together. So she didn't want therapy – been there done that. Wasn't helpful because every time she saw a therapist, the therapist would look for some kind of pathology and she would run away. Well, so I worked with her around the

concrete things she could do... she ended up moving to the west coast and she started a yoga practice, and she is a photographer and she has a home.

Again, while there was a trend towards working with clients who had the capacity for greater insight or were more motivated to set goals and take action, this trend did not signify that participants stopped working with clients with higher needs or who were underserved or who were suffering from persistent mental illness.

The dual practitioner's edge. Whether marketing their services to coaching clients or to clients receiving psychotherapeutic services, most participants felt that they were more attractive to clients as a result of their dual practice orientations. For example, participants shared that their coaching clients seemed to like that they also had a background in therapy. About clients seeking coaching services, one participant shared, "People are more comfortable that I have a background in therapy; it makes them feel more comfortable." This belief was echoed by others. For example, another participant said, "I found that a lot of the coaching clients... seek me out because I have the psychotherapy background, because they say that I am going to have a deeper understanding than other people." Participants felt that this went both ways and that therapy clients were also more attracted because of their coaching background. One participant shared, "A lot of [clients] tell me that they hire me because they see that I am more action-oriented. I think it makes me more marketable when people look me up." Again, participants shared a strong belief that their dual backgrounds helped them attract clients and gain a professional edge.

Professional edge to successfully serve coaching clients with more complex presenting concerns. In addition to making them more marketable, participants also talked about ways that their dual background and training in social work and coaching helped them serve coach clients with more complex presenting concerns and also prepared them to know when to refer out

coaching clients in need of mental health therapy. For example, 4 of the participants indicated that they were coaching ADHD clients or adolescent clients, both client “niches” that require additional training; practitioners pointed to their social work background as allowing them to work with these “complex” coaching clients. Others spoke about coaching clients who, in one participant’s words, had “active clinical issues for which they are getting some kind of medication and therapy.” Many described feeling better equipped to maintain the boundaries between coaching and therapy and therefore in a better position, professionally, to collaborate with a coaching clients’ therapist. For example, one participant said:

I think I have some particular advantages because I am a licensed clinician, and I understand a lot of the formal assessments that therapists and psychologists do—both in terms of reading them and understanding them, and even coordinating with them.

Likewise, a number of participants shared how they were more highly skilled at assessing a clinical issue that was not appropriate for coaching. A few participants, for example, shared that they had “rescued” coaching colleagues who had experienced difficulty knowing how to proceed with a client who needed referral to a mental health expert. In sum, dual practitioners felt strongly that they had an edge with both coaching and therapy clients because of their dual identities and dual backgrounds and training. Both of these issues are explored further in the sections below on identity and education.

In conclusion, the integration of coaching transformed the dual practitioners’ practices in significant ways. First, practitioners described both seeking out and attracting more therapy clients who they described as “ready to take action” and move forward”, contrasting these with more vulnerable clients who needed more time to surface unconscious thoughts and emotions.

They also found themselves being more active, goal-oriented and strengths-focused with their therapy clients after integrating coaching. Though there was a trend towards working with higher-functioning clients, a majority of dual practitioners continued to work with clients with higher needs from time to time, including using coaching-approaches with these clients. Finally, after integrating their coaching backgrounds, practitioners felt they had an edge with both coaching and therapy clients. This edge allowed them to attract more clients, work with more complex coaching clients, and better identify mental health issues when coaching, which allowed them to refer out and maintain clearer boundaries. In sum, integrating coaching played a transformative role in practitioner's social work practices, which will be discussed further in Chapter V.

Multiple identities, shared values: how the integration of coaching helps practitioners embody multiple professional identities. The data on participant professional identity—both internal and public—suggests that issues of identity and the related issue of professional values are highly personal, complex and in a constant state of flux. Yet, despite the inherent complexity of identity issues, a number of relevant subthemes emerged. First, a deep commitment was evidenced on the part of participants to issues of professional licensure as well as ethical values in social work, namely, protecting confidentiality, and maintaining clear boundaries. Second, a majority of participants were largely disconnected from their identity as a social worker before they learned about coaching. Third, a small group of participants maintained strong internal attachments to their social work identity despite using other identities and labels publicly. Fourth, participants credit coaching with allowing them to step into a multiplicity of identities that suit them better than either social worker or coach alone. Fifth and

finally, participants evidenced a lack of insight about ways that social work values and coaching values might differ.

Unwavering commitment to the ethical values and the licensing requirements of the social work profession. The data illustrates that all participants privileged their social work background over their coaching training within the arena of values and ethics; participants also held the licensing requirements of the profession in high regard. One woman shared, “I have not seen coaches be able to articulate [ethics and boundaries] as well as the mental health-based coaches.” Yet another said, “Social work values and ethics are stricter...I can’t not follow social work values, and I wouldn’t not follow them...they are infused in my life.” Even among participants who were no longer practicing as social workers nor identifying publicly with their social work background, there was an appreciation for the high bar that is set in the profession in the areas of confidentiality, avoidance of dual relationships, and as one participant stated, “stricter boundaries.” While participants acknowledged that dual relationships and more informal boundaries are the norm within the coaching field, the majority (n=12) did not agree with that value and instead followed the guidelines they had learned as clinical social workers. Many shared that they liked the fact that social work offered a professional license and bristled at the knowledge that some coaches are practicing without a credential and without formal training. One participant summed up the view of most, sharing:

I actually think that my [social work] training has instilled so many values and so rooted values that I love, because it is so important to me. Like my colleague who is just a coach will break confidentiality and do things that I think are inappropriate and develop relationships that are not good relationships with her clients.

Feeling disconnected from their identity as a social worker. The second most resounding theme that emerged on issues of identity was that a majority of participants (n=9) felt disconnected from the field of social work before they discovered coaching. The first experience, which was common among participants who had moved entirely into a coaching practice (n=6), was an appreciation of their social work education and the credibility that “MSW” or “LICSW” offered, but an otherwise complete disconnection from the term or field of social work. One participant shared, “The only piece right now that I can say that I use in terms of my MSW is the fact that I have it on my business card—partly because that just gives me credibility.” Another participant described the relationship to social work as, “I am not particularly proud to be a social worker. I am also not embarrassed to be a social worker. It happens to be where I got my training.” Yet another participant described the disconnection from an identity as a social worker as, “I am not a big fan of the field of social work...I find it far too vague.”

The second experience of feeling disconnected from their identity as a social worker was common for 6 participants who identified as therapists or psychotherapists rather than as social workers before they integrated coaching. These 6 participants shared statements like, “I was never identified very much with being a social worker. I was identified more with being a psychotherapist,” or, “I don’t really identify myself so much as a social worker. I have my licensed clinical social work. I think I identify myself...more as a therapist.” Within this group who identified more as psychotherapists than as social workers, there was also an appreciation for the credibility afforded by the MSW degree as well as a valuing of their education; the latter is discussed in greater detail below. In sum, other than the credibility they gained from their education, this group seemed otherwise disinclined to identify publicly as social workers and

were also more likely to personally identify as psychotherapists or mental health therapists rather than as social workers.

Those with a personal attachment to their social work identity and the profession. A smaller group of 5 participants—all dual practitioners—identified personally as social workers, even after integrating coaching, yet also used other labels such as coach/psychotherapist when communicating their professional identity publicly. This group was largely characterized by a connection to the social work values and by the belief that social work was a profession, whereas coaching was not. Because of this, some described how for them personally their social work professional identity was more powerful than their coaching identity: “I am a biased social worker—I have been a social worker all my life and I am going to remain a social worker.” Another participant said, “I am a clinical social worker that is using fun, amazing, enlightening coaching skills. But still, I like the stability, the licensing. I like the ethics. I like that [social work] is a profession that is responsible.” Within this group, there was a sense that they were social workers who were integrating coaching as one approach within their broader social work identity. As one participant described, “I am a clinical social worker that was trained to help people and the coaching is just like another continuing education tool that I have in my hat.” Yet even among this group who privileged their social work professional identity, most shared that they also used their coaching identity or therapist identity in public. Some participants reflected that the social work label had little meaning or lacked clarity to outsiders. One participant summed it up saying, “I think [the coaching label] is more appealing to some people...but for me it is more appealing that I am a clinical social worker.”

Multiplicity and fluidity of identities that coaching helps to enable. Regardless of their public use of the labels “social worker” or “coach” or “psychotherapist,” all 14 participants

described a personal connection to a multiplicity of professional identities; and most commented on how integrating coaching enabled a more holistic and fluid internal identity formation than had been possible when practicing only as a social worker. For example, one participant talked about how coaching allowed her to blend her mental health and business identities in a way that felt freeing. Similarly, two others talked about how discovering coaching allowed them to step into their personal identity as social entrepreneurs, which fit them better. Numerous participants who identified publicly as psychotherapist/life coaches talked about feeling empowered to use different labels among different audiences as a result of gaining a more fluid understanding of their internal identities; for example, many felt that their LICSW offered greater credibility outside of the coaching community, but that the “life coach” label offered less stigma or was “less threatening” when attracting clients. One participant shared:

I think [coaching] just helps remove the stigma...if you are dealing with people who are high functioning and they don't have a diagnosis per se, I think that using a coaching model may help people feel more comfortable with reaching out.

Most participants—especially those who had three or less years of experience coaching—shared that their identities are always shifting and that their internal identity sometimes differs from their public image. These findings suggest that those who integrate coaching may already be primed to have multiple professional identities or feel limited by the social worker or psychotherapist identity alone. The data also suggests that identity among this sample is difficult to pin down since it is constantly evolving, and there is frequently a distinction between internal identity and public image.

Seeing a seamless overlap of social work and coaching values. Regardless of participants' specific identities, all shared a belief that the fields of social work and coaching

share the same values of “making people better” and “making a difference” in people’s lives. For example, one participant shared, “a lot of the values are similar...confidentiality, honoring the clients where the need to be.” Participants described seamlessness between the two professions because of these shared values. One participant shared that coaching, “highlights the values of social work, where we are really looking at the individual as their own expert in their own life.” Another participant spoke about how coaching “has helped, I think really taking a client centered approach.”

In fact, regardless of whether they privileged their internal identity as a coach, as a social worker, as a social entrepreneur or as a therapist/coach, most participants spoke about how adopting coaching supported and even invigorated some of their original social work values. One participant who was working as an executive coach shared how when working with corporate leaders he “looks for solutions that will benefit everyone.” Others talked about offering a sliding scale fee, volunteering, and generally seeking clients with greater financial needs. Another coach integrated her social work values indirectly:

I always had the vision that I see myself being a change agent, but a change agent for higher functioning adults, and the people that I draw and attract and work with are the people that are often working with underprivileged populations and are really doing important work in the world. And I feel that I am supporting them in doing that work in the world.

In sum, participants generally spoke confidently about a seamless overlap between coaching and social work values and their ability to continue to honor their social work values even as they integrated coaching.

Lack of insight about possible gaps between social work and coaching values. Despite the different historical roots of coaching and social work and their traditionally different client bases, only one participant talked about a value mismatch between the field of coaching and social work. In fact, when asked the question: “In what ways, if at all, has your identity as a social worker and/or your connection to the value base of the profession changed since integrating coaching skills?”, 5 participants were not sure what the question meant and required additional probes to formulate a response. When the researcher provided the probe: “Some are aligned with the social work value of helping the most underserved in society, whereas coaching has historically supported professionals,” just one participant identified with a conflict between these values, articulating a wish that “all people could get free coaching.” As mentioned above, the general lack of insight about value gaps between the fields may be because of participants’ ability to merge their social work values of doing good, helping others and putting the client first with their coaching values. Yet, this finding could also point to a possible lack of insight among this sample or a tendency among this sample not to privilege the social work values of helping the most needy or underserved in society.

In sum, the findings on practitioner identity illustrate five salient subthemes that will be discussed further in Chapter V and may present pivot points for future studies on this emerging area of joint social work and coaching practice. First, data shows that all participants—regardless of the professional label they identify with publicly—share a deep commitment to the ethical values of the social work profession. Second, 9 of 14 of participants already felt personally and publicly disconnected from their social work identity before they learned about coaching, citing a frustrating with the vagueness of the social work brand or a closer identification with another identity such as a psychotherapist. Third, the 3 participants who

remained personally attached to their social work identity, despite using other labels like coach or therapist in the public, felt comforted by the credibility of the social work profession. Fourth, the adoption of coaching allowed some participants to more comfortably inhabit a multiplicity of identities. And finally, participants exhibited a lack of insight about possible gaps between social work and coaching values, which will be explored more in Chapter V.

What dual practice reveals about the strengths and the deficiencies in social work and coach education. As participants reflected on their experience of their social work education and their coach training, most of them indicated great appreciation in having had access to both, with additional findings regarding their perceptions of differences and similarities in each. In answer to the question: “How was your coach training similar to or different from your MSW training?” and at other points in the interview, participants voiced the following: a) all practitioners expressed their wish that their MSW education could have provided more of the hands-on, experiential, skills- and tool-based training that they experienced in their coach trainings, instead of what participants characterized as a preponderance of theoretical training that did not connect with actual clinical practice; b) some practitioners felt that coach training was too simplistic and even, as one participant voiced, “irresponsible” in its failure to train coaches to handle possible mental health or ethical issues that could arise in practice; c) many talked about how coach training required introspective self-work that was very empowering and useful in the field; and d) finally, there was some discussion of how both social work and coach education failed to prepare people adequately to manage their own businesses. Each of these findings is discussed in greater detail below.

Benefits of the experiential, concrete, skills and tool-based training of coaching and critique of the theoretical approach of MSW graduate school. The findings showed broad

agreement among participants that the experiential skills and tool-based nature of coach training was an improvement upon the more theoretical approach of MSW graduate school. Participants described feeling more confident after gaining “concrete” skills in coach training, and wishing that they had more of that in their social work education so that they could have entered the social work field with a “tool box.” One participant shared what many others mirrored, “When I came to coaching, they identified skills: acknowledging, validating, brainstorming. They identified all of these skills that I knew existed, but no one had taken the time in social work school to explain specific skills.” In addition to naming and providing specific tools, participants liked the experiential, practice-based and hands-on approach of coach training. One participant shared, “We actually did more practicing and role playing than I ever did in social work school.” This positive response to the coach training was true even among those who began coach training with a belief that it was “an inferior field” and not a profession. This participant summed up what so many participants shared:

In coaching it’s much more connected. You are in the class, you are coaching each other, you are learning stuff, and then you are practicing it right then and there. And that’s the way I teach it. And the social workers that I teach it to love that approach because it makes it very concrete.

While most appreciated their MSW, there was broad critique of the classroom-based, theoretical instruction, and participants tended to appreciate their field-based MSW education much more than classroom time. One participant shared: “In social work school there was not always a connection between what we learned in the classroom and what we were doing in the field. You had to sew that together in your own way.” Many voiced that the classroom learning was sometimes too vague and not sufficiently applied in the field. Instead, many valued their

field training and supervision. A participant shared, “I had amazing supervisors and amazing field work supervisors.” On the other hand, a few participants shared that coach training provided better supervision than social work school because of the focus on tape-recording sessions and receiving live feedback versus the indirect nature of process recordings, which are used in social work training. A participant said, “I got better supervision in coaching than I ever did in social work school. They would listen to my calls and nobody ever listened to my therapy sessions.”

Oversimplification and even irresponsibility of coach training. Despite unanimous agreement around the benefits of coach training, 5 participants shared their criticism that coach training is too simplistic, in one participant’s words, “insensitive to good behavioral practices,” and does not adequately prepare students for the range of mental health and behavioral issues that may come up in practice as coaches. One participant, for example, shared a critique that coach training did not offer “a broad enough understanding of human behavior” and therefore might not prepare coaches to understand “the deeper kinds of chemically-based, family-based, historically-based kinds of issues” that might be leading people into coaching. Upon reflection, another participant shared the experience of “having to rescue a number of [coaches]” who got stuck in situations with clients who needed to be referred to a mental health specialist but the coaches, in the practitioner’s words again, “didn’t necessarily know how to differentiate.” One participant summed up the critique of the coach training by saying, “For somebody who is already a social worker or in the field, it is great because it gives you great, concrete, amazing tools. But for those who are not in the profession, it’s just not good training.” Another shared that coach trainers are, “sending untrained people out to the field without giving them tools.”

Lauding the introspective work of coach training. Another area of broad agreement among participants was their appreciation for the introspective “self-focused” work required in coach training. Many shared that their social work education had not required that they be in therapy or work on themselves at the same time that they prepared to work on others. On the other hand, participants described the coach training as “invigorating.” “It’s unbelievable personal growth,” many participants echoed. And participants clearly felt that the personal work made them better therapists and coaches. One woman shared, “coach training really demanded more personal reflection than the MSW training—which sounds kind of weird, but it does.” Another said, “With coaching, they tell you to get your own coach and they also tell you to really push you to look at yourself.” In sum, participants felt positively about the personal work they were required to do in coaching and did not feel that social work education placed as much emphasis on self-study.

Appreciation of the breadth of the social work training. Despite critique of vagueness of the classroom-based social work education, some participants shared their appreciation of the breadth of the training in broader social issues, human behavior, and, again, an appreciation of the social work ethics. One participant shared, “As a social worker, you learn about class, about the law, about addiction...trauma...and just about the broad spectrum of our society and how it all shakes down.” A few other participants shared that their MSW education had given them a broader understanding of issues such as race, class, culture, addiction, and basic theory of human behavior. In addition, as described more in issues of identity, many appreciated the depth of social work training around issues of ethics, such as confidentiality and boundaries.

Both educations fail to teach about business. Finally, a handful of participants shared that they did not think either educations, in one participant’s words, “do a good enough job

teaching the students how to start a business.” While findings suggest that participants perceived coach trainings as offering basic education on the importance and challenges of being a business owner, no participant felt that either education gave them the marketing, accounting, and other business skills that they have had to learn in order to run their own businesses as coaches/therapist/clinical social workers. This finding is meaningful since all but one participant was working at least part-time in private practice. Among the participants there seemed to be three viewpoints: the first camp said that they were entrepreneurial before adopting a coaching practice and that it may have been a reason why coaching ended up being a good fit; a second camp described discovering that they were entrepreneurial or business-minded after embracing coaching; and a third camp identified as not being very “business minded” and really struggling to make that transition from an agency-based social work position to a position as a coach and/or therapist in private practice. For this last group in particular, the failure of both social work and coach training to address starting a business presented a major hurdle in practice.

In summary, regarding the area of education, participants offered rich information about the strength and deficiencies of social work education and coach training. Participants were in broad agreement about the benefits of the concrete, skills-based nature of coach training and its structure of experiential, live, practice-based learning. All participants would like to see more of this approach in social work school. Likewise, participants appreciated the focus in coach training on the personal growth and personal reflection of students. On the other hand, some participants warned that coach training was too simplistic and did not prepare students for the range of social or behavioral health issues that could arise in practice. These same participants lauded social work school’s ability to prepare students to manage any number of complex issues that might arise in practice. They spoke about social work school preparing students to maintain

confidentiality and identity when referrals are needed to mental health experts, as well as the strength of the MSW education in preparing students to understand broader social issues of class, race or addiction, for example. Finally, some participants shared a critique of both social work education and coach training in their failure to educate students on starting their own business.

The future: a hope for greater integration and communication between the fields of social work and coaching. At the end of interviews, participants were asked if there was anything else they wanted to share about their experience as social worker/coaches. Six participants shared their hopes for greater communication and integration between the fields of coaching and social work in the following areas: first, a number of participants shared their confusion regarding whether or not their NASW chapter recognizes coaching as a legitimate social work intervention, while others shared how their NASW chapter had just recently identified coaching as a legitimate intervention or sub-set of the social work profession. Others shared their sentiment that social workers would make ideal coaches and their hope that more social workers would explore and integrate coach training. Finally, one participant expressed concern that the social work field would miss an opportunity to embrace the field of coaching and therefore lose out to a field like psychology that has already started to embrace and study coaching interventions. This participant summed it up by saying, “I think there is a huge future for coaching in social work that has yet to be explored...if we do not claim it, other professions will.”

Findings Chapter Conclusion

In conclusion, this chapter has reviewed the sample characteristics and qualitative findings of interviews with 14 participants who had received their MSWs and practiced as social workers and then moved to integrate coaching into their practices. The rich qualitative data was

presented in six major themes: (a) the yearning for personal meaning and discovering coaching as an answer; (b) how participants' feel confined by their social work experience and discover coaching as a way out; (c) creating clear separations between their coaching and social work services; (d) how coaching skills are integrated and transform the practitioner's social work practice; (e) multiple identities, shared values: how the integration of coaching helps practitioners embody multiple professional identities and view coaching and social work values as one in the same; and (f) how dual practitioners take the best from both social work and coach trainings. These six salient themes are discussed and explored further in Discussion Chapter V.

CHAPTER V

Discussion

This study sought to understand the experiences of social workers who have integrated coaching into their practices. Given the absence of studies looking at this phenomenon, the goal for this exploratory study was to elucidate themes about what motivates social workers to become coaches, how they integrate the role of coach in practice, and how the integration impacts their social work identity, issues of ethics, and the types of clients they serve. The hope was that the findings could guide future study of the phenomenon of coaching among social workers by raising questions regarding motivating factors for social workers who integrate coaching. In addition, it was hoped that the study would offer insight into the various ways that the growing field of coaching might impact the social work profession—including social work curriculum and practice in social work settings—and of the potential of such integration to strengthen both fields of practice, benefitting practitioners as well as the clients that they serve.

This chapter will highlight the key study findings and draw implications from findings for social work practice, policy and research. Key findings of the study will first be compared with those of the extant literature. The strengths perspective, undergirding both areas of practice, will be applied as a lens through which to view study findings. Limitations of the study will then be discussed, followed by study implications.

Key Findings

Lack of racial diversity in sample. Despite recruitment efforts involving postings of announcements on numerous professional websites with diverse membership, the study sample was racially homogenous (White/Caucasian). This raises questions about recruitment methods as well as the relative diversity among practitioners in this area of joint social work/coach practice. Methodological contributions to this study limitation will be discussed in greater detail later on in this chapter. Yet the findings of this small exploratory study cannot easily be generalized to a larger group. Therefore, these initial findings deserve greater exploration and study, including possible larger-scale survey of individuals who identify as social worker/coaches to more accurately assess the demographic makeup of the emerging group of social work/coaches. After assessing more accurately the demographic makeup, future research could explore factors contributing to the relative diversity that exists among this cohort of practitioners.

Integrating coaching reconnects participants to a strengths-based, client-centered approach. Study findings show that integrating coaching helped participants realign or even connect for the first time to a strengths-based and client-centered approach to practice. The strengths perspective, which undergirds both social work and coaching practice, suggests that a focus on clients' strengths and resources, rather than on deficits, can help empower them and move them forward (Cowger, 1994; Green, Lee & Hoffpauir, 2005; McMillen, Morris & Sherraden, 2004; Saleebey, 1996). This literature recommends the use of a strengths-based approach to help individuals realize their own strengths and capacities and help them to connect with the broader resources within their communities (Cowger, 1994; Saleebey, 1996). Yet this study found that practitioners underutilized this strengths-based and client-centered approach

until they integrated coaching. This section further examines the elements of this finding, including: a) how participants experienced social work practice primarily through the lens of pathology; b) participant perceptions of the integration of coaching reinvigorating strengths-based and client-centered approaches to practice; c) participant thoughts about coaching as providing a balance to their social work practice, perceived as overly focused on problems and pain; and d) the impact of coaching integration on practitioners' interest and/or capacity to work with the presenting problems of complex need.

Practitioners see their social work practice through a lens of pathology. This study found that a majority of participants perceived their social work practice as utilizing a medical model or a pathology-focused approach. Participants talked about feeling the need to focus on problems for the purpose of diagnosing clients and getting reimbursed for insurance. They also spoke about feeling a need to “fix” clients who defined themselves as broken, or perceived themselves as powerless upon entering the social work agency or private practice setting. Likewise, participants spoke about how heavy and tiring a pathologizing approach felt; they described feeling the challenge and responsibility of needing to be an expert rather than helping the client to become their own expert in their lives. This study finding does not align with current literature on the strength-based approach in social work, which argues that the strengths-based approach in social work is particularly important with mandated or involuntary clients (Browne, 2005; Cowger, 1994). According to this perspective, given these clients' lack of power, helping them connect with their own possibilities and their dreams for the future is key to their empowerment and eventual recovery (Cowger, 1996). Yet participants repeatedly shared the experience of not using a strengths-focused approach in their social work practices until after they discovered and took coach training. As one study participant shared, “social work says

we...believe in self-determination and empowerment, but really as a social worker you don't practice that."

The integration of coaching re-invigorates the social work strengths perspective and client-centered approach. It was only after taking coach training that participants indicated that they had begun utilizing the strengths-perspective and client-centered approach. In fact, participants talked about how coaching made them more positive, optimistic, and forward-focused with their social work clients. This finding is supported by literature that posits that coaching can offer significant benefits to clients with mental illness who are traditionally served by social workers (Biswas-Diener, 2009; Edelson, 2010; Moran & Brady, 20010; Navalta et al., 2006; Ozaki et al., 2011; Shafer et al., 2003; Spaulding et al., 2009; Timmer et al., 2010). The literature may also support this study's finding that the strengths perspective was more actively used by participants within the practice of coaching than the practice of social work. While the social work literature covers many different perspectives and approaches to the practice, the coaching literature heavily focuses on how it embraces a solutions- and results-focused approach, rather than viewing clients through the lens of psychopathology (Biswas-Diener, 2009; Brock, 2009; Edelson, 2010; Grant & Cavanagh, 2004; Kampa-Kokesh & Anderson, 2001; Kilburg, 1996, Kilburg, 2004; Maxwell, 2012; Senior, 2012; Sperry, 2008).

The practice of coaching as a balance to the pathology model of social work. All participants discussed how the integration of coaching allowed them to shift their practice away from what they perceived as an over-emphasis on client problems towards greater focus on client solutions—as well as a shift away from feeling that they needed to “fix” broken clients to believing that their clients had the capacity to find their own solutions to their problems. While there is ample mention in social work literature on a client-centered and strengths-based

perspective (Cowger, 1994; Green et al., 2005; McMillen et al., 2004; Saleebey, 1996), the diagnostic requirements of managed care, the real environmental problems faced by social work clients, and the emphasis on evidence-based practice with client experience of trauma and mental illness, introduce additional perspectives that may overtake the strengths approach in social work practice. For the study participants, coaching helped re-balance their work with clients; for example, they spoke about how they became more respectful of their client's unique strengths, rather than focusing on problems. This finding is partially supported by the literature indicating that coaching is one type of intervention among many within social work; while a coaching approach alone might not be sufficient to address all the complex needs of some social work clients, an infusion of a coaching approach can be very empowering when used as a part of a broader continuum of interventions (Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Shafer et al., 2003; Spaulding et al., 2009; Timmer et al., 2010).

Participants' evolution away from working with clients who were emotionally needy or suffering from persistent mental illness. The study also found that practitioners tended to work less with clients who they described as emotionally needy or persistently mentally ill after they integrated coaching practice. This raises interesting questions about whether a coaching approach fails to support these clients. What study participants described as an evolution away from working with the neediest clients—either out of a lack of desire or simply a process of attracting different clients because of their coaching approach—is partially addressed in the literature on social workers' move into private practice. In this literature, studies suggest that social workers in private practice may not prioritize the needs of the most underserved clients (Groves & Kerson, 2011; Lord & Iudice, 2011; Perry, 2009). While there may be some overlap between the underserved and the population that is emotionally needy or suffering from

persistent mental illness, the question of whether the integration of coaching may contribute to a similar shift in client population is not clearly addressed in available literature. In the social work literature, the strengths perspective is discussed as an effective approach with underserved and high-needs populations because of its capacity to empower. Yet findings indicating a possible shift away from working with clients who are emotionally needy or suffering from persistent mental illness raise questions as to whether the strengths perspective utilized in coaching practice differs from the use of this perspective in social work, or whether employing a strengths-based approach in coaching practice is instrumental in workers' shift away from these clients.

In sum, this study found that the integration of coaching allowed participants to connect or re-invigorate a client-centered, strengths-based approach to treatment that was absent in their social work practice. This finding raises questions about whether traditional social work practice is losing touch with the strengths-based approach and how this might impact issues such as practitioner fatigue and client outcomes. Also, the findings suggest that coach training and its focus on the client-centered and strengths-based approach may be empowering, energizing and re-balancing for social work practitioners who have become overly focused on a medical model that privileges client problems and deficits. At the same time, the finding that most social worker/coaches moved away from working with clients who are emotionally needy or clients who are suffering from persistent mental illness after integrating coaching raises additional questions about whether coaching or the use of a strengths perspective fail to adequately meet the treatment needs of these clients. These questions deserve further inquiry.

Integrating coaching allows participants to become professionally empowered. This section looks at participants' perception that integrating coaching allowed them to step into new

professional roles and ultimately feel more authentic and empowered than they had when they were social workers. Features of this professional empowerment included the ability to integrate more aspects of themselves in their personal and professional lives, work more creatively and confidently, and create healthier work/life balance. This section further examines possible factors contributing to this finding, including participant relative sense of empowerment as social workers and the particular attributes of coaching to which they referred. This finding will also be discussed in the context of the literature on social workers and private practice.

Dissatisfied or disempowered from social work field before integrating coaching. With one exception of a practitioner who integrated coaching within her job as an EAP social worker, all study participants described feeling either dissatisfied with elements of the social work profession, disconnected from the field of social work, or confined by their experience as social workers in a way that was professionally disempowering. Specifically findings indicated that participants felt worn out by their work with vulnerable clients who they perceived as requiring more intensive, longer-term services, were uncomfortable with the disease pathology model of their social work practice, were frustrated with the hours and/or the inflexibility of agency or private practice work as well as their interaction with insurance/managed care, and were uncomfortable with, as one participant put it, the “social work bias against business.”

The extant literature on coaching and social work supports these findings. First, some literature suggests that coaching might offer more freedom and help prevent social worker burnout (Biswas-Diener, 2009; Edelson, 2010; Shafer et al., 2009). The literature also suggests that an increase in managed care and its resulting restrictions on clinical practice might be a motivating factor for social workers to become or integrate life coaching into their careers (Caspi, 2005; Edelson, 2010). Finally, the social work literature on practitioners’ move into private

practice offers further support for these findings, suggesting that issues of burnout within agency settings may motivate social workers to move into private practice with the goal of achieving greater personal wellbeing (Jayaratne et al., 1991; Schwartz et al., 2007). This finding raises important questions about the long-term sustainability of social work practice among some practitioners and the potential contribution of further research looking at current issues of dissatisfaction, disconnection and disempowerment within the field and the relative contribution of the field of coaching in addressing this problem.

Coaching as an empowering practice: merging creativity and entrepreneurial orientation with social work values. In contrast to their experiences as social workers, participants expressed feeling energized through the integration of coaching to approach their work with a creativity and sense of authenticity previously unavailable to them. In one practitioner's words, integrating coaching "has enhanced the quality of what I can provide. It's kind of using my full self now." Others described how integrating coaching allowed them to merge an entrepreneurial orientation with the social work value of helping others; this merger, they felt, opened professional doors into executive coaching, teaching, writing and public speaking. This finding is consistent with literature that says coaching might offer more freedom, prevent social worker burnout, and provide social workers with new skills to innovate their clinical practices (Biswas-Diener, 2009; Edelson, 2010; Grodzki, 2002). Likewise, it parallels literature on social workers' move into private practice, which suggests that private practice can offer greater autonomy and freedom over the service they provide to clients (Levin, 1976; Lord & Iudice, 2012; Perry, 2009; Seiz & Schwab, 1992).

Adoption of coaching practice and continuing work with vulnerable clients. Study participants described working less with clients who were emotionally needy or suffering from

persistent mental illness, after integrating coaching into their practices. The literature on social workers in private practice partially supports this finding, showing that there may be a tension between private practitioners' personal desires to work creatively and entrepreneurially and their adherence to social work values of serving the most underserved among us (Groves & Kerson; 2011; Jayaratne et al., 1988; Levin, 1976; Lord & Iudice, 2011; Perry, 2009; Seiz & Schwab, 1992). For example, a study comparing the values of social workers in private practice and social workers in agency settings found that those in private practice valued entrepreneurship and psychotherapy most highly whereas those in agency settings valued social action and social welfare most highly (Seiz & Schwab, 1992). At the same time, this qualitative study found that some dual social work/coach practitioners continue to work with clients who are emotionally needy, underserved, or suffering from persistent mental illness after integrating coaching, and this is also supported by literature on how social workers have integrated diverse practices, including the adoption of coaching, to prevent burnout (Biswas-Diener, 2009; Edelson, 2010; Gottlieb, 2012). This alternative view suggests that coaching may help balance and then sustain practitioners to continue to work with clients who are more emotionally needy, underserved, suffering from persistent mental illness or who require longer-term, intensive services.

In sum, the findings indicate that participants experienced the integration of coaching as leading to a greater sense of professional empowerment. Specific experiences, including working with clients who are emotionally needy and suffering from persistent mental illness, the medical model, the inflexibility of agency practice, managed care, and an anti-profit tradition, were offered by participants as contributing factors to their feelings of dissatisfaction and disempowerment. Participants identified the integration of coaching practice as a step toward addressing these issues, additionally empowering them as practitioners in a multiplicity of roles,

and making possible a more flexible and creative practice that helped to sustain them. Despite these benefits, the finding that a majority of participants moved away from work with vulnerable clients following the integration of coaching practice, raises a question as to whether such feelings of self-empowerment are associated, for these and other practitioners, with work with a less emotionally needy population; alternatively, there is also evidence that integrating coaching may help sustain some practitioners in part-time work with populations that are more emotionally needy, underserved or suffering from persistent mental illness.

Dual practitioners take the best of social work and coach training: insights for improvement in professional education. Participants indicated making use of what they considered the best of both social work education and coach training, arguably, therefore, gaining a professional edge in both fields. Discussion of this finding first looks more closely at the types of coaching skills that were most highly valued among participants, drawing implications for social work education. Second, the discussion looks similarly at valued components of social work education among participants. Third, participants' appreciation for the legitimacy afforded by the MSW degree and social work licensing, particularly in view of the lack of such legitimacy afforded by coaching practice, is also discussed. The findings suggest that additional training in areas traditionally covered by social work graduate programs could enrich coach training programs, whether or not the process of gaining licensure proceeds in this field. Finally, also notable is the participants' view that neither social work nor coach training provided support in starting up a business, which raises questions about the value of including such training in MSW curricula and coach programs in the future.

The concrete skills training of coaching: lessons for social work educators.

Participants felt strongly that the concrete, practical, skills-based aspect of coach training offered

many benefits, including an emphasis on experiential, live, practice-based learning. As one practitioner said, “When I came to coaching, they identified skills: acknowledging, validating, brainstorming. They identified all of these skills that I knew existed, but no one had taken the time in social work school to explain specific skills.” All study participants wished that there had been more of this skills-based approach in their social work program, where they did not feel they gained specific clinical intervention skills or direct, consistent feedback in practice. Despite gaining much through their field work experience, practitioners also commented that the live-nature of coach training versus the indirect social work process of process recordings was much more useful for them in practice.

Personal, introspective work of coach training: lessons for social work educators. The other resounding area of support for coach training among participants was its focus on introspective work, which participants indicated encouraged them to identify more as equals with their clients rather than as detached, objective, experts. Again, participants described being almost transformed by the personal work they were required to do in coaching and did not feel that social work education placed as much emphasis on self-study. In one participant’s word, “It’s unbelievable personal growth.” Participants repeatedly described how this work made them better people, therapists and coaches. This finding raises the question of whether the introspective work included in coach training should become a standard part of the MSW degree program. Perhaps, in this area, the coach training module has something to offer MSW educators.

Depth of an MSW Education: Theories of human behavior, mental illness, substance abuse, etc. While all participants praised their coach training, a majority also highlighted the value of the depth of theory they gleaned from their social work educations. Most notably,

participants appreciated theoretical education in the areas of human behavior, mental illness and issues of substance abuse. This was true whether or not participants had continued to work in a social work role. Practitioners shared how this in-depth theoretical training prepared them to manage client complexity, whereas most felt that the coach training was too simplistic to prepare practitioners to adequately manage the types of scenarios that occur even in executive coaching settings. This finding is supported in coaching literature that talks about the crossover between coaching and therapy in practice and suggests that psychodynamic training (traditionally part of many MSW educations) is beneficial to all coaching relationships (Kampa-Kokesh & Anderson, 2001; Kilburg, 1996).

Breadth of an MSW Education: Education of person in society, and complex issues of social justice. A smaller group of participants (n=6) praised the breadth of their social work education—including study of racial and ethnic inequality, person in environment, and the social justice values of the social work profession. These trainings, along with field education, exposed participants to the range of human needs and issues that are experienced in the real world and they valued this complexity over the more simplistic approach of coach training that does not explore how broader social issues can impact the coaching encounter. In one participant's words, "As a social worker, you learn about class, about the law, about addiction...trauma...and just about the broad spectrum of our society and how it all shakes down." This finding may suggest that coach training could include modules that address issues such as race, class and gender inequality; alternatively, the finding may show an area of strength within the current MSW education.

Value placed by participants on the ethical foundation of the profession and the legitimacy offered in the masters-level social work degree. Study participants appreciated the

professional legitimacy of their MSW degree. All participants maintained their professional credential (MSW or LICSW) on their marketing materials, regardless of whether they had ceased their previous social work practice. On a related note, participants privileged their social work identity over their coaching identity within the arena of ethics. The findings show that while participants acknowledged that dual relationships and more informal boundaries are the norm within the coaching field, the majority (n=12) did not agree with this practice and instead followed the ethical guidelines of the profession. This finding is supported in the literature that suggests that the social work community could play a role in improving coaching practice guidelines, licensure processes, and issues of confidentiality (Caspi, 2005; Senior, 2007; Smither, 2011). While this study did not focus on participant views about the coach credentialing process, the fact that half (n=7) of participants did not have an ICF coaching credential may support findings from an earlier study by Liljenstrand & Nebeker (2008) indicating that coaches with educational backgrounds in clinical psychology and industrial/organizational psychology were less likely to become credentialed as coaches. It is possible that social work/coach practitioners are similarly less motivated to obtain a coach credential, relying instead on their MSW degree or clinical license, which they view as providing them greater professional legitimacy.

In conclusion, an important and strong finding of this study is that participants reported gaining a professional edge by making the best use of both their MSW and coach training, thereby gaining access to a range of different professional settings and retaining a capacity to manage the care of more complex clients. The findings suggest that coach training has something to teach MSW educators about skills-based training that encourages direct, live feedback from supervisors. Likewise, participant appreciation for the emphasis in coach training on self-exploration and introspection may offer ideas for practice curriculum development in

social work education. Practitioners were also clear that the professional credibility and strong ethical foundation of the social work profession were superior to that found in coach training and practice. Likewise, participants appreciated the depth and breath of their social work education, which allowed them to gain a greater understanding of psychology and other theories of human behavior, mental illness, substance abuse, and the complex social and environmental issues that impact all people.

Study Limitations and Strengths

Though a qualitative, exploratory design was best suited to a study of the phenomenon of social workers who integrate coaching into their practices, the sample size and methods used introduced some noteworthy limitations. First, given a sample size of 14 participants, the findings are not easily generalizable to a larger population. Instead, future studies are needed to test the hypotheses that emerged and the implications that are described below. Second, since both coaching and clinical social work are practiced in a dyadic relationship between practitioner and client, the absence of analysis of client experience limits the data. Thirdly, the qualitative approach highlights the inevitable biases of the researcher. In this case, I am a white, upper-middle class professional who worked in social justice for 10 years as a campaign and public relations professional before becoming a credentialed coach and then beginning to pursue my degree as an MSW. I bring my own biases about the value of the coaching and social work professions, their intersections, divergences, and what they both mean to my own identity and my work with a broad range of clients. These biases affect every step of the research process, including the interview process and, in particular, the analysis and coding of the data; the latter process was informed by my values, unique educational experiences, personal interests, and my internal taxonomy. As a result, I have attempted to ground my qualitative analysis in relevant

literature and reflect on my biases using the reflective self model defined by Miehl & Moffat (2009) throughout the process.

Despite limitations of this study's qualitative methods, this deep but narrow approach to understanding the experience of social workers who integrate coaching is critical to laying the groundwork for future studies on the impact of the field of coaching on the social work profession. As a result of this exploratory study, for example, future areas of study could include: trends in career choice and factors associated with use of, and/or adherence to coaching methods in practice; the relative value of integrating coaching methods in clinical social work curriculum; the efficacy and ethics of applying coaching methods in different practice settings and with a range of clients; and the potential of coaching as a growing movement to influence the social work profession. In sum, given the potential growth of this area of joint practice, this exploratory, qualitative study was designed to introduce themes and hypotheses that may guide social work practice, policy and future studies.

Implications for Social Work Practice, Policy, and Research

Study findings in this growing area of joint practice have implications for social work practice and policy and suggest several areas for future study. First, this section discusses how coach training might be used to reconnect social work practitioners to a client-centered, strengths-based approach, which may be getting lost within current social work practice. Second, it discusses implications for social work policy. Specifically, it suggests that the field of social work advocate for: (a) more skills-based and introspective trainings; (b) a reduction in the medical, pathology model and increased funding for client-centered and strengths-based approaches to social work practice; and (c) increased resources for practitioners who are working with clients who are emotionally needy or suffering from persistent mental illness to better

sustain them. It also suggests the field of social work: (a) offer greater support and guidance for social workers who also practice as coaches; and (b) more effectively communicate the field's purpose and identity to both the clients it serves and external audiences. Third, this section raises several areas for future research based on the findings, including: (a) research on the potential benefits for the field of social work in adopting the field of coaching and how this might be accomplished; (b) research on the long-term sustainability of current social work practice and the issues of dissatisfaction, disconnection, and disempowerment within the field; and (c) research on the ways that the growing field of coaching may impact the field of social work and the clients it serves. Finally, this section highlights implications from the findings for the field of coaching.

Implications for practice. This study's findings suggest that coach training could help social work practitioners re-connect to strengths-based, client-centered approaches to practice. This also supports evidence about the benefits of coaching interventions among more traditional social work clients, (Moran & Brady, 2010; Navalta et al., 2006; Ozaki et al., 2011; Shafer et al., 2003; Spaulding et al., 2009; Timmer et al., 2010).

As the phenomenon of social workers who integrate coaching continues, these findings suggest that the field of social work could do more to support and guide those who choose to become dual social work/coach practitioners. This study's findings support the work of others who posit that social workers are uniquely qualified to work as coaches (Caspi, 2005; Edelson, 2010, Pace, 2012); thus as the field of coaching expands, it would be important for social workers to learn more about the professional opportunities the field may present. NASW, for example, could offer more coach training, promote coaching within social work conferences, and create platforms for dual practitioners to share best practices. Likewise, state social work boards

could offer clear guidance about how the practice of coaching differs from clinical social work and what dual practitioners need to do in practice to ensure they protect their LICSW licenses. This study, for example, illustrated that social work/coach practitioners are unsure how their social work licensing board would view integration of coaching into their practices—an issue that requires more discussion and clarity from NASW and state social work licensing boards.

Implications for Policy. Study findings suggest that social work practitioners have much to gain from the concrete, experiential coach training. The finding calls for social work educators to consider including more skills-based and introspective trainings into BSW, MSW and continuing education programs, and indicates that the coach training model could be applied to provide more hands-on skills training to social work practitioners.

The fatigue experienced by study participants from an over-reliance on the medical, pathology model suggests that the field should do more to support funding for client-centered and strengths-based approaches to practice. Not only could this decrease practitioner fatigue, but it might also offer benefits to social work clients based on the ample literature on the benefits of a client-centered and strengths-based approach (Cowger, 1994; Green, Lee, & Hoffpauir, 2005; McMillen, Morris, & Sherraden, 2004; Saleebey, 1996). In sum, this finding calls for further efforts by social work advocates and policy-makers to challenge the pathology-driven requirements of insurance reimbursement and identify new financial streams to support strengths-based models of practice.

The findings that practitioners were motivated to adopt coaching out of a fatigue from working with clients who are emotionally needy or who are suffering from persistent mental illness suggests that more resources are needed to sustain these practitioners. In particular, policies are needed to protect practitioners from fatigue when there is limited change in client

outcomes. This could include better assessment of client progress, more resources for practitioner supervision, and higher reimbursements for certain types of emotionally-needy clients, including those dealing with complex trauma, those with diagnosed personality disorder,, or those with substance abuse disorders.

Finally, findings indicate practitioner frustration with the field of social work's ability to communicate its value and purpose to the outside world. One participant shared a belief that the field of social work is too broad, saying that "the field tries to train everyone to try to be able to do everything and it doesn't do it well." Likewise, the finding that participants did not believe the social worker brand was effective when marketing their services to clients suggests that the field could do more to communicate its purpose and value. Otherwise, the term "social worker" may be used less and less, as these findings indicate, and eventually lose its meaning to external audiences.

Implications for research. Study findings support the literature that calls for more research on how the field of social work, and social work practitioners, could benefit from embracing the practice of coaching (Caspi, 2005; Edelson, 2010; Pace, 2012). In 2010, NASW Press commissioned Edelson to write *Value Based Coaching* (2010) to explore the crossover between coaching and social work and the specific ways that social workers could apply the craft of coaching. Increasingly, NASW has embraced coach training as a CEU for social workers. In December, 2012, *NASW News* ran an article on how coaching could make a good career transition for social workers (Pace, 2012), which was later critiqued in a letter to the editor that argued social work, "would lose sight of their mission to help underprivileged people" if it embraced the field of coaching (Foster, 2013). This study's finding on the seamless overlap between the values of social and the values of coaching is supported in the literature (Edelson,

2010; Pace, 2012), but also challenged (Foster, 2013), and ultimately deserves more exploration. There is still little mention of coaching or even a clear definition of coaching within social work literature or in social work master's programs. Again, findings suggest a need for more research on a range of issues focused on the ways in which social workers could benefit from integrating coaching.

Study findings offer possible areas of focus for future research on where the integration of coaching could be most beneficial within social work practice. First, all 8 participants who were working both as coaches and social workers spoke about how they were already doing coach-like interventions as social workers before taking coach training, suggesting that future research might explore to what extent the practice of coaching is already infused within the practice of social work. As well, since the recent ICF Global Study found that 11.5% of coaches in North America also identify as therapists or counselors (ICF, 2012), more research is needed on the number of credentialed coaches who trace their roots—and owe much of their training—to the field of social work. Such research could also inform future studies on the benefits of the field of social work more formally integrating coaching. Third, the use of coach-like techniques among the 4 of the study participants who were working with adolescents before they officially engaged in coach training points to a need for more research on the specific benefits of coach training among social workers specializing in adolescent care. Likewise, the use of coaching interventions among 4 practitioners who worked with clients with ADHD also implies a need for more research on the benefits of coaching for this population, traditionally served by social workers. Research on the impact of the shared practices of social work and coaching could also be expanded to include exploration of fields like counseling that share clients with the field of social work but also compete as a separate profession.

Findings pertaining to participant dissatisfaction with, and disconnection from, the field of social work, as well as occasional feelings of disempowerment, raise interesting questions about the long-term sustainability of social work practice among some practitioners. These findings supports the work of others who posit that integrating coaching may offer more freedom, prevent social worker burnout, and provide social workers with new skills to innovate their clinical practices (Biswas-Diener, 2009; Edelson, 2010; Grodzki, 2002). Future research, therefore, could explore how the field of social work could address possible issues of disconnection and dissatisfaction as well as the experience of disempowerment among certain practitioners in the field. The potential benefits of integrating coaching could be explored as a possible guide to addressing these broader problems within the social work field.

As the field of coaching expands, more research is needed to understand how it will impact the field of social work. In particular, this section calls for more research on: (a) how the field of coaching could impact clients who are emotionally-needy and suffering from persistent mental illness, traditionally served by social workers; (b) how the field of coaching may encroach on clients traditionally served by social workers; (c) how the field of coaching could take future practitioners away from the field of social work; and (d) how the lack of stigma and positive marketing of coaching could impact the field of social work.

Who will serve the most emotionally needy and underserved among us? If the trend among some practitioners away from the field of social work and into the field of coaching grows, the question will emerge: Who will serve the most emotionally needy and underserved among us? Research should be aimed at learning more about an area that was only touched on in this study: that is, to what extent is coaching practice integrated into settings that serve the most needy? To what extent does a move into coaching private practice preclude on-going work

with the most vulnerable? Research might explore if an increase in social workers becoming coaches results in a decrease in the number of practitioners who serve clients who are emotionally needy and suffering from persistent mental illness; alternatively it may explore whether and to what extent the integration of coaching serves as a protective factor that helps to sustain social work practitioners who are working with these clients. Finally, more research is needed on the efficacy of the strengths-based model, employed in coaching practice, in work with clients who are emotionally-needy and suffering from persistent mental illness.

Encroachment on services traditionally provided by social workers. The findings that some practitioners chose to use a coaching approach with clients who they might have served in their role as clinical social workers also raises questions with regard to the potential for coaching to encroach on work traditionally carried out by social workers. Research that examines the impact on social work private practitioners and EAP-based practitioners is particularly implicated by findings that indicate crossover marketing of coaching and psychotherapy services to the same clients. Since coaching services are not reimbursed by third-party insurers, the field mainly competes with those social workers in private practice or in EAP settings who are not always taking insurance, and the impact of adopting coaching practice on this group deserves further study. Likewise, as the field of coaching expands into work with populations diagnosed with ADHD, hospital-based care, and schools, the question raised by Zelvin (2005) of whether social workers will compete with life coaches over positive, solution-focused clients gains greater resonance.

Future impact on the field of social work. Finally, findings showing that 6 of the 14 participants stopped practicing social work after integrating coaching practice points to a need for research on the overall impact of growth in the field of coaching on the social work

profession in terms of the numbers, experiences, relative skills and qualities of those who remain or choose to enter the coaching field. Specifically, research might explore how fatigue from dealing with insurance companies increases motivation for practitioners to adopt coaching and ultimately move out of the field. Since NASW reports a decline within the U.S. in social workers who go into private practice (Perry, 2009), perhaps research might explore the extent to which an association exists between this decline and the rise of the coaching field; that is, are practitioners seeing coaching as an alternative to private practice, a complement or something altogether different?

Impact of stigma associated with social work versus coaching's positive brand. This study found that many practitioners utilize the coaching brand when marketing their dual services because they find it carries less societal stigma and is more positively received among some of their clients. While this study did not set out to explore issues of image with regard to social work and coaching, this finding suggests that more inquiry is warranted in this area. While participants felt that social work—including psychotherapeutic intervention—carried a stigma among certain clients, coaching did not. One participant shared, “If you are dealing with people who are high functioning and they don’t have a diagnosis per se, I think that using a coaching model may help people feel more comfortable with reaching out.” Another participant in an EAP setting shared how marketing coaching helped re-brand the EAP services offered to employees. Perhaps there are other areas where the field of coaching is replacing the field of social work because of its image and/or lack of stigma? Likewise, participants shared how marketing coaching helped them market solutions, which was popular with clients who might not have identified traditional therapy with solutions. Again, this study only offers a cursory view of this issue of the coaching versus social work brand and image. Yet, given the rise of the field of

coaching and the many ways it crosses over the social work field, more study is warranted on practitioner perceptions of the roots of stigma associated with social work and the impact of this, as well as the comparatively positive marketing associated with coaching and other counseling fields, on practice.

Implications for the field of coaching. Study findings are supported by existing literature on the potential contribution that social work has to offer the field of coaching. First, participants voiced that social work has much to teach the field of coaching in the area of ethics, including in the areas of confidentiality and dual relationships with clients, a finding that is supported in the literature (Caspi, 2005; Edelson). As the coaching field shapes its system of accreditation, social workers and the field as a whole could offer significant guidance; in fact, coaching literature already supports this idea (Kampa-Kokesch & Anderson, 2001). Second, as this study found, theoretical content on human behavior, psychodynamics, and issues such as substance abuse, as included in social work education and training, could help to guide coach training. Although coaching is not designed to treat individuals with active mental illness, literature suggests that the line between coaching and therapy is blurred in practice, and many coaches could benefit from training that could help them know, for example, when to refer clients for mental health or substance abuse services. Third, a few of the participants in this study shared how their social work training on issues of race, ethnicity, and social justice was helpful in their work as coaches; while these issues are not currently addressed in coach training, social work educators and practitioners could help design additional trainings to strengthen the capacity of the field to deal with these critical issues, significantly impacting its focus on human flourishing. Finally, as indicated in this study, the social work profession has much to offer the field of coaching as it expands into niche markets including services to more complex clients,

including clients diagnosed with ADHD, adolescents, and clients suffering from depression and/or substance abuse.

Conclusion

Key findings of this qualitative study of 14 social worker/coaches show how integrating coaching: (a) helped participants connect to a strengths-based and client-centered approach to practice; (b) may have decreased participant interest in working with clients who are emotionally needy or suffering from persistent mental illness; (c) allowed participants to step into new professional roles and ultimately feel more authentic and empowered than they had when they were social workers; and (d) allowed participants to use what they considered the best of both social work education and coach training, arguably gaining a professional edge in both fields. Implications of study findings point to the need for more skills-based and introspective education and both practice- and policy-based support for client-centered and strengths-based approaches to social work practice. Findings also argue strongly for increased support in the field for practitioners who are working with clients who are emotionally needy and suffering from persistent mental illness and for greater guidance and support for dual social work/coach practitioners. In addition, the study findings indicate areas where future research is needed, including: (a) on the benefits to the field of social work of adopting the field of coaching, (b) on the ways that the growing field of coaching may impact the field of social work—including the impact of stigma associated with social work versus coaching’s positive brand, and (c) on the issues of dissatisfaction, disconnection, and disempowerment within the social work field that may contribute to the decision by some practitioners to move into the field of coaching.

In conclusion, this study reveals important data that will help guide future research on an emerging phenomenon of joint social worker/coach practice. It highlights areas for future study,

such as the value of integrating coaching methods in clinical social work curriculum, the efficacy and ethics of applying coaching to more traditional social work clients and settings, and the potential of coaching as a growing movement to influence the social work profession.

Ultimately, increased exploration of the emerging phenomenon of social workers who integrate coaching into their practices stands to improve the field of social work and the populations we serve.

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Appendix A

Interview Guide

Qualitative Interview Themes:

- [**The motivating factors** that move social workers to integrate coaching in their careers]
- (1) What led to your decision to become a credentialed coach? [For example, anything that attracted you to the practice of coaching?]

- [**Education:** how coach training informs the clinicians' social work training (integrates, supplants, conflicts with)]
- (2) How was your coach training similar and/or different from your MSW education/training? [Probe: was it similar or different from any post-masters social work training/continuing education you may have received? In what ways is/was it similar or different?]
- (3) In what ways does/did your training as a coach impact the way you view you training to become a social worker?

- [**How they integrate** coaching with social work in practice]
- (4) How do you utilize your coach training within your professional practice? [Probe: do you separate your social work training from your coach training in practice or do you integrate them? If you integrate them, how?]
- (5) To what extent do you explain your dual professional identities to clients? [Probe: do you use a specific title to identify yourself to clients, or others?]

- [**Issues of Identity:** how the integration of coaching impacts their social work identity?]
- (6) In what ways, if at all has your identity as a social worker and/or your connection to the value base of the profession changed since integrating coaching skills?

- [**Impact on practice:** Hours worked and types of clients served (e.g., demographics, presenting concerns) and types of clients where coaching interventions are used.]
- (7) In what ways, if at all, has integrating coaching impacted your social work practice? [Probe: has it impacted the range of clients you serve? The presenting problems you address in your practice? Or, the range of clients and populations you serve?]
- (8) How do you select which clients will receive coaching versus services more traditionally aligned with your social work training? Is there a difference?
- (9) How, if at all, are the hours you work effected by your integration of coaching? [Probe: do you work longer days, different hours?]

- [**Professional Wellbeing**]
- (10) In what ways, if at all, has the integration of coaching affected your professional wellbeing? [Probe: For example, has the integration of coaching had any impact on your experience of work-related stress, or feelings of burnout?]

- [**Financial benefits or entrepreneurial ethos**]

- (11) In what ways, if at all, has integrating coaching impacted your professional salary?
- (12) Has integrating coaching made you more entrepreneurial and what has that experience been like for you? [*Probe: Are you more interested in marketing yourself? Are you more innovative? Are you more focused on financial gain and profit?*]
- [*Ethics: how coaching practice may impact issues of social work ethics*]
- (13) Has integrating coaching in your practice presented any ethical issues for you in practice?

Demographic questions:

- 1) How many years have you been a practicing social worker?
- 2) How many years have you been practicing as a coach?
- 3) How do you identify racially? Ethnically?
- 4) What is your age?
- 5) How do you identify your gender?
- 6) What region of the country do you practice in?
 - a. Northeast
 - b. South
 - c. Midwest
 - d. West
 - e. Other (Please describe)
- 7) How would you describe your employment status?
 - a. Full time (40 hours per week or more)
 - b. Part time (Between 20 hours and 39)
 - c. Less than 20 hours per week (please indicate)
- 8) How would you describe your annual salary:
 - a. \$35,000 or less,
 - b. \$35,000-\$55,000,
 - c. \$55,000-75,000 or
 - d. \$75,000 or over.

Closing question:

Is there anything that I have missed that you think would be important to share for the purposes of this study?

Appendix B

HSR Approval Letter



School for Social Work

Smith College

Northampton, Massachusetts 01063

T (413) 585-7950 F (413) 585-7994

December 11, 2012

Dear Ali,

Thank you for making the requested changes. You did a very careful, thoughtful and professional job. Your project is now approved by the Human Subjects Review Committee.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Nice job and good luck with your study!

Sincerely,

A handwritten signature in black ink that reads 'David L. Burton'. The signature is written in a cursive style with a long horizontal flourish extending to the right.

David L. Burton, M.S.W., Ph.D.

Chair, Human Subjects Review Committee

CC: Beth Lewis, Research Advisor

Appendix C

Study Announcement for Coaching Listserves and Social Media

Are you a coach or in the process of becoming a coach who also has a Masters in Social Work (MSW)? I am looking for volunteers to participate in a confidential academic study on the experiences of social workers who choose to become trained coaches and integrate coaching into their practices. Eligible volunteers will be interviewed via phone for up to one hour at a time they choose on or before March 31, 2013. For more information about the study, which I am conducting for my Masters in Social Work (MSW) thesis from Smith College School of Social Work, please contact Alexandra Jost at xxxx.

Appendix D

Study Announcement for Social Work Listserves and Social Media

Are you an MSW who has become or is in the process of becoming a coach? If so, please consider volunteering to participate in a confidential academic study on the experiences of social workers who choose to become trained coaches and integrate coaching into their practices. Eligible volunteers will be interviewed via phone for up to one hour at a time they choose on or before March 31, 2013. For more information about the study, which I am conducting for my Masters in Social Work (MSW) thesis from Smith College School of Social Work, please contact Alexandra Jost at xxxx.

Appendix E

Email Sent to Experts in the Social Work/Coaching Field for Snowball Sampling

Dear XX:

I am writing to request your help in identifying participants for a study I am conducting for my Masters in Social Work (MSW) thesis from Smith College School of Social Work on the **experiences of social workers who become credentialed coaches**. In preparation for this study, I have come across your name as a [leader/researcher] in this emerging field of joint practice, and **I am hoping you will choose to participate in this study and/or help identify potential participants through your network.**

As the field of coaching continues to expand, so too has the number of social workers who become credentialed as coaches. Yet no empirical data exists that explores the experiences of social workers who integrate coaching in their practices. To that end, this qualitative, exploratory study seeks to understand what motivates social workers to integrate coaching into their practices and to learn, among other things, how the integration of coaching impacts their social work identity, impacts issues of ethics, and affects the types of clients served. My hope is that the study will open the door to future exploration on how the field of coaching is impacting social work and the clients that social workers serve.

In order to generate this data, **I intend to conduct confidential one-hour phone interviews with up to 12-15 social worker/coaches before March 31, 2013.** For the purposes of this study, **I define a social worker/coach as an individual who:**

- Has practiced as an MSW social worker for at least two years;
- Is currently practicing at least part-time as a social worker in the U.S;
- Has completed at least 60 hours of coach training and 100 hours of practice coaching clients OR has two years of coaching practice experience and over 1000 hours of coaching clients.

I know your time is limited and I appreciate your consideration. Given your expertise in this emerging field of joint practice, I am hoping that **you will be willing to do any of the following:**

- **Participate in the study yourself;**
- **Spread the word about the study to your networks, using the attached *Study Announcement*;**
- **Suggest individuals, groups or listserves that would serve as potential sources of recruitment.**

If you are interested in participating, please contact me at xxxx or at xxxx, and I will follow up with additional information. If you believe you know of people who meet the above criteria and would be interested in participating in the study, please forward along this email and/or the brief announcement that I have attached to this email. Or, I would also appreciate learning any ideas you may have regarding venues or listserves where I might recruit potential participants?

While I cannot offer financial compensation, my hope is that participation will offer insight into participants' identities as social worker/coaches. If you have any questions or concerns about this proposed study, please do not hesitate to contact me at the email and number above.

Sincerely,

Alexandra Jost, ACC, SCSSWII

Appendix F

Study Announcement Attachment to Email Sent to Experts for Snowball Sampling

Are you a coach or in the process of becoming a coach who also has a Masters in Social Work (MSW)? If so, please consider volunteering to participate in a confidential academic study on the experiences of social workers who choose to become trained coaches and integrate coaching into their practices. The study is being conducted by Alexandra Jost a student at Smith College School for Social Work for her Masters in Social Work (MSW) thesis, Eligible participants would be interviewed by phone for up to one hour at a time.

Those who wish to participate must respond by March 31, 2013. Participants must meet the following criteria:

- Have practiced as a social worker with an MSW for at least two years;
- Is currently practicing at least part-time as a social worker in the U.S;
- Has completed at least 60 hours of coach training and 100 hours of practice coaching clients OR has two years of coaching practice experience and over 1000 hours of coaching clients.

If you are interested in participating in the study, please contact Alexandra Jost at XXXX.

Appendix G

Response to Interested Participants Confirming Inclusionary and Exclusionary Criteria

Thank you so much for your interest in participating in this study on the experience of social workers who become credentialed coaches! In order to further understand what motivates social workers to integrate coaching into their practices, I intend to conduct confidential one-hour phone interviews with up to 12-15 social worker/coaches before March 31, 2013.

You are eligible to participate in this study if you:

- Have practiced as a social worker with an MSW for at least two years;
- Are currently practicing at least part-time as a social worker in the U.S.
- Have completed at least 60 hours of coach training and 100 hours of practice coaching clients OR has two years of coaching practice experience and over 1000 hours of coaching clients.

If you think you may be eligible but have further questions about this proposed study, please do not hesitate to contact me at xxxx or at xxxx.

Otherwise, if you believe that you meet the eligibility requirements and are interested in participating in this study, **please review and sign the attached Informed Consent Form.** You may send it back to me via snail mail or if you would prefer to receive a hard copy via snail mail with a pre-stamped return envelope, please “reply” to this email requesting the Informed Consent Form and providing your mailing address.

Thank you for your time and interest.

Sincerely,

Alexandra Jost, ACC, SCSSWII

Appendix H

Informed Consent Form

Dear Participant,

My name is Alexandra Jost and I am currently a student working towards a Master in Social Work degree from Smith College School for Social Work. The goal of this research study is to further understand the experience of social workers who integrate coaching into their practice, including what motivates them to move in this direction and their perceptions of the ways in which the integration of coaching impacts their professional identity and the nature of services provided. The data from this study will be used for my MSW thesis and may be used in professional publications and presentations on this topic.

You have been invited to participate in this study because you are a practicing MSW social worker in the U.S. with at least two years of post-masters practice experience as a social worker, and you have also completed at least 60 hours of coach training and 100 hours of practice coaching clients OR you have two years of coaching practice experience and over 1000 hours of coaching clients.

If you choose to sign this informed consent and participate in the study, you are agreeing to an audio-taped interview with me for up to one hour via phone. I may seek the assistance of a professional transcriber with transcribing the taped audio recording. If used, that transcriber will sign a confidentiality pledge. The interview will consist of some demographic questions as well as open-ended questions regarding your experience of integrating coaching into your practice including the way in which this practice impacts your professional identity and the clients you serve.

Your risk of participation will be minimal. It is possible that, for some, reflecting in depth about their practice may be difficult. By participating in this study, you will be provided an opportunity to gain insight into your identity as a social worker/coach and to reflect on the impact of coaching on your social work practice. You will also be contributing to a previously unexplored area of emerging joint practice. Sharing your experiences will help both the field of social work and the field of coaching better understand how these two fields may impact each other and the clients they serve in the future. Compensation will not be provided for participation in this study.

Every possible measure will be taken to maintain confidentiality. Your responses will be kept separate from your name and other identifying information. Basic demographic information will be collected and reported in general and descriptive terms to protect your identity. All data will be stored in an electronic file that is password protected. Besides me, only the research advisor, and transcriber, if used, will have access to the data. Data will be separated from participant identification before it is shared with the research advisor or transcriber. Every precaution will be taken to ensure that comments made by participants during the interview cannot be connected to individual participants. Data will be presented as a whole unless specific quotes or vignettes are used in which case they will be carefully disguised using phrases such as “one participant said” and “another participant said”. Finally, I will store the audio file and transcription of our interview and your signed informed consent in secure, password-protected location for three years as stipulated by Federal Guidelines after which time they will be

destroyed. If I need the data beyond three years, I will continue to keep it in a secure, password-protected location, after which time I will destroy it.

Your participation in this study is completely voluntary. At any point during the interview, you may choose not to answer certain questions or stop at any point. You may choose to withdraw from the study at any point after the interview up until March 31, 2013. If you choose to withdraw from the study on or before March 31, 2013 all the data collected from our interview will be destroyed. Now or in the future, if you have any questions or concerns about your rights or the specific process of this study, you may contact me or the Chair of the Human Subjects Review Committee at Smith College School for Social Work at the email or phone listed below.

Thank you for your participation in this study.

YOUR SIGNATURE INDICATES THAT YOU HAVE READ AND UNDERSTAND THE ABOVE INFORMATION AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS, AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY. PLEASE KEEP A DUPLICATE COPY OF THIS FORM FOR YOUR RECORDS.

Signature of Participant: _____ Date: _____

Signature of Researcher: _____ Date: _____

Contact information:

Alexandra Jost

xxxx

or

Chair of the Smith College School for Social Work Human Subjects Review Committee
413-585-7974

PLEASE KEEP THE DUPLICATE COPY OF THIS AGREEMENT FOR YOUR OWN RECORDS.