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## Cognitive behavioural coaching And notes on its foundation in cognitive behavioural therapy

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### Abstract

*Even though Cognitive Behavioural Therapy is one of the most evident therapeutic approaches, there are a lack of studies outlining the differences between cognitive behavioural therapy and cognitive behavioural coaching, differences that are fundamental to understand the different levels of involvement in the process. The aim of this paper is therefore to outline the distinction between cognitive behavioural therapy and cognitive behavioural coaching. The theory behind cognitive behavioural coaching will be further detailed and an in depth explanation of the theory will follow. Next, we will describe how cognitive behavioural coaching is practiced and commonly used models is presented. Finally, we will discuss the cognitive behavioural approach in a coaching context, built around 13 statements, thereby trying to distinguish boundaries, distinctions and similarities between a cognitive behavioural approach and coaching.*

**Keywords:** *Cognitive behavioural coaching, cognitive behavioural therapy, similarities, differences*

### Introduction

The aim of this paper is to outline similarities and differences between cognitive behavioural therapy and cognitive behavioural coaching. We will provide an explanation of cognitive behavioural therapy and cognitive behavioural coachings' roots in cognitive theory. There will be a focus on the underlying assumptions of human functioning according to cognitive behavioural theory, with a focus on Negative Automatic Thoughts (NAT's), thinking errors, intermediate beliefs and core be-

liefs. This will be followed by a section describing differences and similarities between cognitive behavioural therapy and coaching. Next, we will provide a short practitioners guide on how to apply cognitive behavioural theory in a coaching context. Commonly used techniques and models will be presented with a focus on how to apply these when practicing cognitive behavioural coaching.

Even though Cognitive Behavioural Therapy is one of the most evident forms of therapies, there are only few studies outlining the differences be-

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tween cognitive behavioural therapy and cognitive behavioural coaching, even though these are fundamental to the understanding of both (David, Christea & Hofmann, 2018; Carvalho, Gaspar de Matos & Anjos, 2018). This paper therefore seeks to give an understanding of cognitive behavioural therapy in a coaching context and outline similarities and differences between the two approaches. The purpose is to support coaching psychology as a field and to contribute to more knowledge about boundaries and distinctions between coaching and therapy.

## Cognitive behavioural therapy as an approach

Cognitive Behavioural Therapy (CBT) is a therapeutic approach that combines cognitive and behavioural techniques. Behaviourism as an approach can be traced back to John Watson, who is known as the scholar who coined the term “behaviourism”, but was later influenced by other practitioners such as Hans Eysenck and Arnold Lazarus who, amongst others, began using the theory in a therapeutic context (Palmer & Williams, 2013). In the 1950’s, psychologist Alfred Adler emphasized the importance of cognitions while psychologist Albert Ellis at the same time developed Rational Emotive Behavior Therapy (REBT). During the 1980’s and 1990’s Cognitive Therapy and Behavioural Therapy became integrated, and thus Cognitive Behavioural Therapy was born (Szymanska & Palmer, 2015). Cognitive behavioural therapy thus combines both cognitive and behavioural techniques to assist the client in modify their moods and behaviour.

### Basic assumptions in CBT

Cognitive behavioural therapy has three fundamental assumptions. First, cognitive appraisals of situations can affect how the individual’s behaviour is toward the event (Ducharme, 2004). This means that the individual’s interpretation of a situation, determines how they react towards it. Secondly, it is believed to be possible to access and monitor cognitions. It thereby becomes possible to alter the cognitions if they are blocking or confines the individual (Ducharme, 2004). This means that a person can become aware of a cognition, in a specific situation, and aid the individual in altering the cognitions if it is negative (Dobson & Dozois, 2001, in Ducharme, 2004). Lastly, it is believed

that if you change the cognitions of a person, it will also change their behaviour towards a situation (Ducharme, 2004).

The first mentioned assumption is deeply rooted in cognitive theory, and states, that the individual’s perception of any given situation determines how they emotionally feel and react to it (Neenan & Palmer, 2001). It is the cognitions of the individual which is essential and the most important part, and consist of thoughts, rules, attitudes, beliefs, images or perceptions of the individual. An example of how cognitions can block for an individual, is when being afraid of the dark. You have no idea who is there and you therefore find the situation dangerous. You begin to have images of people in the dark or of you being attacked. This is also known as a “negative automatic thought” (Kingdon & Mander, 2015). They often occur without the individual being aware of having them and are therefore a very important factor which can be linked back to the part about cognitive behavioural therapy.

According to cognitive theory, human cognitions or thought patterns can be categorized in three levels. First, Negative automatic thoughts are categorized as a surface thought and are linked to the deeper levels of the human cognition (Szymanska & Palmer, 2015). Secondly, intermediate beliefs consist of rules and assumptions. These assumptions could be something like “if I make one mistake, I’ll fail at everything else”. An example of a rule could be “I must not make mistakes” (Szymanska & Palmer, 2015). Thirdly, we find the core-beliefs. The core-beliefs are normally established during the childhood of the individual and are often deep-seated and rigid. Examples of core-beliefs could be beliefs such as “I’m worthless” (Williams, Edgerton & Palmer, 2010). These core-beliefs are linked to the theory of schema which controls the individual behaviour. The definition of a schema was created by Beck, who defined it as: “*a structure for screening, coding, and evaluating the stimuli that impinge on the organism*” (Beck in Harvey (1961), in Padesky, 1994). David & Szentagotai (2006) have noted that there is a controversy regarding what the level of the cognition that are best to approach first. Ellis (1994, in Visla, Cristea, Tatar & David, 2013) argues that it is best to address the core-belief first and through this work alter the automatic thought pattern at the same time. Beck (1995, in

Visla et al., 2013) argues that you should address the automatic thought pattern first because it is much easier to change fast in the situation-specific conflict. Therefore, the core-beliefs are essential to identify for the therapist if the individual has a maladaptive core-belief.

### NAT's and thinking errors

If negative automatic thoughts (NAT's) spins out of control the individual will most likely experience some kind of anxiety if they are not controlled (Szymanska & Palmer, 2015). The higher levels of distress the person experiences, the more their thoughts become rigid, inflexible and absolute (Szymanska & Palmer, 2015). As a coping method, or safety behaviour, the individual will try to stay away from the stimuli, which causes an experience of discomfort (Szymanska & Palmer, 2015). Therefore, the person who is afraid of the dark will try to avoid the situation, which will (unwittingly) undermine their confidence, even more (Szymanska & Palmer, 2015).

One of the objectives of cognitive behavioural therapy is to identify the negative automatic thoughts. Clients normally do not focus on their thoughts, so trying to identify them will require help from a therapist. Negative automatic thoughts can also be categorized as cognitive distortions or thinking errors (Yurica & DiTomasso, 2005). Examples of these thinking errors are listed below:

- **All-or-nothing thinking**, the person is very black and white in how they evaluate a situation. It is either super good or super bad, nothing in between. The thoughts becomes rigid in this process and makes it difficult for the person to see the nuances of the situation.
- **Jumping to conclusions**, the person will read something into peoples' attitudes without having the necessary and sufficient kind of information. E.g. thinking that people do not like someone if they do not greet these persons every morning when they are waved at. Another quick conclusion is that a person thinks that other people dislike him or her, because they e.g. do not get an answer on a question.
- **Personalization** is a person's way of causal explaining everything to itself. This means that you blame everything onto yourself even though it might not be your fault.

- **Over-generalization**, the person will make negative conclusions – out of proportion – on an event.
- **Fortune telling**, the person will have a negative view on the future and tell; that since something has happened once it will happen again and again in the future.
- **Emotional reasoning**, the person will start to reason from its emotional state. Therefore, if a person is anxious about the dark they might jump to the conclusion that walking in the dark is dangerous.
- **Labelling**, to use unhelpful labels to describe yourself, "I'm bad", or "I'm a loser".
- **Magnification** – blowing things bigger and out of proportion.
- **Demands**, the person can be too demanding with itself and others. It can often be found from a linguistic perspective where the person uses terms such as "I must" or "I should be able to do this" even though it might not be possible from an observers perspective (Yurica & DiTomasso, 2005; Palmer & Williams, 2013).

Overall, some of these "cognitive distortions" can be traced back to the safety behaviour, which will be activated if they are not addressed by the therapist. It is therefore important to identify which of the above thinking errors the client has before addressing how you want to handle them.

### Cognitive behavioural therapy and cognitive behavioural coaching

Before elaborating theoretical and practical aspects of cognitive behavioural therapy and cognitive behavioural coaching any further, we would like to outline some differences and similarities between the two. Cognitive behavioural coaching as a field has evolved from cognitive behavioural therapy, and are therefore based on the same understanding of human functioning. Hence, cognitive behavioural coaching cannot be said to be fundamentally different from cognitive behavioural therapy when talking about the theoretical and methodological basis.

Despite the many similarities, there are two main differences you have to take into account when differentiating between therapy and coaching in general: 1) The clientele, and 2) Coaching as being a time-limited intervention. Ducharme (2004) points out the first main difference: He argues that

cognitive behavioural therapy and cognitive behavioural coaching is used in different situations. Cognitive behavioural coaching is best applied for stress management, skill development and goal achievement whereas sessions that require more in-depth analysis of unconscious motives and conflicts, cognitive behavioural therapy should be applied (Ducharme, 2004). Like Ducharme (2004), Neenan and Palmer (2001) argues that the basic understandings of the two approaches are so much alike, that cognitive behavioural therapy is called cognitive behavioural coaching, when used with non-clinical groups. This is supported by other researchers emphasizing cognitive behavioural coaching as an approach suited for personal development, whereas cognitive behavioural therapy is more fitted for clinical disorders or subclinical problems (Carvalho, Gaspar de Matos & Anjos, 2018). The other main difference is coaching as being a shorter-term intervention than therapy. Cognitive behavioural therapy generally involves 5-20 sessions, on a weekly basis, lasting between 30 and 60 minutes, whereas cognitive behavioural coaching typically will consist of 6-8 coaching sessions, lasting between 45-60 minutes, and expands over a time period of 4-6 months (Kingdon & Mander, 2015; Williams, Edgerton & Palmer, 2010).

Similarities between cognitive behavioural coaching and cognitive behavioural therapy include goal-oriented tasks and homework, setting an agenda in each session, seeing the relationship as a collaborative process and the experimental and curious approach (Freeman & Rosenfield, 2005; Neenan, 2009). As it's the case with cognitive behavioural therapy, cognitive behavioural coaching is an approach that uses cognitive, behavioural, imaginal and problem-solving techniques to reach the individual's goal (Palmer & Szymanska, 2007). This means that all the mentioned approaches work together to improve the health of the person who is undergoing coaching. The use of cognitive behavioural coaching has been linked to improvement in overall performance, psychological resilience, increased well-being, lowering stress and removing cognitive blocks to obtain a positive change for the individual (Palmer & Szymanska, 2007; Grant, 2017).

## Cognitive behavioural coaching

In the section above, we have made a brief presentation of the theoretical background of cogni-

tive behavioural coaching, and outlined similarities and differences between cognitive behavioural therapy and cognitive behavioural coaching. The following will be a presentation of how cognitive behavioural coaching is practiced. This will be done by a further outline of the basic assumptions in cognitive behavioural coaching, with a focus on the roots in cognitive behavioural therapy. Because CBC is a very structured approach, we will then describe the structure of a series of typical coaching sessions, including the amount of sessions and the content of these. Afterwards we will present some of the commonly used models, and describe how the coach and coachee can use these through the collaborative practice that makes up cognitive behavioural coaching. Finally, we will briefly mention some of the characteristic techniques used in cognitive behavioural coaching.

### Basic assumptions in cognitive behavioural coaching

The focus in cognitive behavioural coaching is on helping clients overcome practical problems, and to deal with psychological or emotional blocks that are preventing the coachee to reach their goals (Palmer & Szymanska, 2007). This is the same as in cognitive behavioural therapy. Hence, this is a very goal-directed coaching approach and is for that reason time-limited, since the focus is on here-and-now problems and not on the past or in depth childhood dilemmas (Neenan & Palmer, 2001; Grant, 2005).

The focal point in this coaching approach is the problems that are preventing the coachee in reaching his or her goal: The coach will throughout the coaching sessions be focused on the coachees' skills and abilities to solve these problems. Therefore, a basic premise of cognitive behavioural coaching is that the coachee has underdeveloped problem-solving skills or is not using their skills adequately, and therefore the coaching sessions will work to improve and aims to further develop these skills (Palmer & Williams, 2013). In cognitive behavioural coaching the coachees' get help with their problem-solving skills, but at the same time they are also helped to become aware of which of their thoughts and beliefs that are interfering with their performance and are getting in the way of them achieving their goals (Palmer & Szymanska, 2007). In this way, cognitive behavioural therapy and cognitive behavioural coaching are very similar:

The assumption is, that these negative automatic thoughts and the underlying core beliefs will determine the coachees' reaction to a given situation. The belief is, that these NAT's and underlying core beliefs occurs and functions as psychological and emotional blocks, that are interfering with performance and preventing the coachees from reaching goals.

This is important because the coachee becomes aware of the mechanisms blocking him or her. It is intended to make the coachee able to solve problems on their own when future problems arise, and in a way become their own coach (Neenan & Palmer, 2001). This is the future perspective of cognitive behavioural coaching, where the aim is that coachees' will use the awareness of blockage and improved problem-solving skills to handle new upcoming problems, and overcome these and reach their goals without help from a coach (Palmer & Williams, 2013; Neenan & Palmer, 2001). Therefore, it is also important that the coach do not give the coachee the answers to the problems, because in that way the coachee will never be able to learn for him- or herself. Instead, the coach's role is to help the coachee reach their own solutions and answers to their problems through guided discovery (Padesky, 1994). It is a collaborative process, where the coach guides but at the same time let the coachee do the work (Carvalho, Gaspar de Matos & Anjos, 2018). A basic premise for this collaborative process to be successful is that the coachee is committed and willing to work hard. The coachee needs to understand and accept this before the coaching sessions start, otherwise it will be a waste of time, since the coach cannot make the changes happen on his own (Palmer & Szymanska, 2007; Neenan & Palmer, 2001).

To sum up, the overall goals of cognitive behavioural coaching, is to help the coachee deal with his or her problems, achieve goals and adjust thinking errors such as the negative automatic thoughts. Furthermore, it has a future perspective, where the goal for the coachee is to learn strategies and then be able to coach themselves when future problems will arise (Williams, Edgerton & Palmer, 2010).

### How to structure sessions in cognitive behavioural coaching

A typical agreement on coaching will consist of 6-8 coaching sessions with the duration per session of approximately 45-60 minutes but sometimes up

to 120 minutes, over a period of 4-6 months (Williams, Edgerton & Palmer, 2010).

In the first two sessions, the work will be about case conceptualisation, where it is clarified why the coachee is seeking help and what they hope to accomplish (Williams, Edgerton & Palmer, 2010). In this way, it is clear early on in the process, which goal coach and coachee are headed for. It also contributes to the establishment of the collaborative relationship between the coach and the coachee, which is essential in this type of coaching (Cavalhar, Gaspar de Matos & Anjos, 2018).

In the next sessions (2-6), the focus will essentially be about achieving the goal, and there will be in-between session tasks (homework) that will contribute to this achievement. A new session will always begin with a follow up on how the coachee has accomplished the in-between session task, and the session will always end with negotiating a new in-between session task for next time. If an emotional or psychological block emerges and hinders the goal reaching process it will be dealt with, so that the coachee can return to focus on achieving the goal (Freeman & Rosenfield, 2005; Palmer & Szymanska, 2007).

The coaching endeavour typically ends after 6-8 sessions with an evaluation of all the coaching sessions and the coachees' progress (Williams, Edgerton & Palmer, 2010).

### Models and techniques used in cognitive behavioural coaching

Coaching psychology in general is favour of using models (Spaten, Imer & Palmer, 2012). One of the explanations of this could be that coaching, as mentioned earlier in this paper, is a shorter and more goal-directed form of intervention than therapy. Models therefore functions as a handy hands-on tool to structure the short and goal-focused sessions. These models are not only used as a tool to maintain structure in the coaching sessions, but are worked through and filled out by the coach and coachee in a collaborative process. This further supports the collaborative relationship, which as previously emphasized is an essential part of cognitive behavioural coaching (Palmer & Szymanska, 2007). In this way, the coachee is an active part in planning and structuring their own series of coaching sessions, and the coachee will throughout the process be able to glance at the models and see where in the process he or she is in achieving

the goal. The models work as tools for the coachee to reach the best possible and most realistic solutions to their problems in a systematic and structured way (Neenan & Palmer, 2001).

Below, we will rather short present three of the main models used in cognitive behavioural coaching, respectively the SPACE model, the PRACTICE model and the ABCDEF model. All the names of these models form an acronym, which makes it easier for the practitioner to remember each step (Spaten et al., 2012).

### The SPACE model

The SPACE model was developed by Nick Edgerton and is often used as an educational tool to show the coachee how five different modalities interact with each other, interfere with the coachees' performance, and therefore might get in the way of them achieving their goals (Edgerton & Palmer, 2005; Williams, Edgerton & Palmer, 2010, p. 42). The five reciprocal and interacting modalities that constitute the SPACE model is:

- Social context
- Physiology
- Action
- Cognitions
- Emotions

By showing the coachee a graph of how these five modalities interact with each other, the coachee will come to understand how these are reciprocal and connected and how they might trigger each other. This is easier explained with an example, so let us consider a coachee that suffers from exam anxiety. To start from a random end, the Social context will be the exam and the Cognition will be the coachees' perception of the exam as something unpleasant and frightening. Because of this negative evaluation of the situation, the person's anxiety will be triggered, which will be the Emotional modality in the model. This will then again trigger the Physiological modality where the person will start sweating and the heart will start beating faster because of the emotional reaction of anxiety. This might lead the person to be unrestful and start pacing around the place, which further enhance the state and model wise it is the last connected modality, Action.

The above example makes it possible to show the client how the modalities are reciprocally connected and how e.g. the thoughts about the situa-

tion might trigger the anxiety reaction. This model is often used in the early stages of coaching, because it gives the coachee an understanding of how thoughts and perception of the situation might be blocking him or her from achieving the goals. This understanding is important for the further coaching sessions, because it makes it easier to work with the goal, when the coachee now understands how the modalities functions.

### The PRACTICE model

The second model we would like to present, is the PRACTICE model. The PRACTICE model is developed by Stephen Palmer and consists of seven steps with the purpose of generating concrete, possible solutions to a given problem (Palmer, 2008). The solution-focused purpose makes it a good tool to use when a coachee arrives to coaching with a very specific problem they need to solve. The seven steps of the PRACTICE-model makes it possible to identify the most feasible solution to a particular problem (Spaten et al., 2012). As mentioned above these models functions as tools for the coachee and the coach and creates an overview for both, thereby providing a very structured and systematic way of generating possible solutions in collaboration (Neenan & Palmer, 2001).

The PRACTICE model must be understood as a practical problem-solving and solution-focused model (Williams, Edgerton & Palmer, 2010; Spaten et al., 2012) and contains the following seven steps:

- 1 **Problem identification** - where you specify the problem the client would like to solve,
- 2 **Realistic** – development of relevant goals - where you figure out what the client would like to achieve,
- 3 **Alternative solutions generated** - where you reflect on the possible solutions to the problem,
- 4 **Consideration of consequences** - where you rate how feasible you find the different solutions,
- 5 **Target the most feasible solution(s)** - where you chose the solution that is most achievable,
- 6 **Implementation of Chosen solution(s)** - where you discuss how you will implement the chosen solution,
- 7 **Evaluation**, where you evaluate on the process and how successful you think the chosen solution will be (Palmer, 2007).

The process of going through all the seven steps is done with only one problem at a time. So let us say that the coachee has more problems that he or she would like to solve, then step 1-6 concerning one problem is completed before the move to the next ones. When step 1-6 are worked through regarding all the coachees' problems then the whole process is evaluated. This might seem a little rigorous, but it is simply to keep focus on one problem at a time and find a solution to this particular problem (Palmer & Szymanska, 2007). It could be argued that the process is rigid without any room for creativity in the generating of solutions. This claim has been rejected by Neenan & Palmer (2001), who says that it in fact will promote creativity but in a structured and systematic way.

Since the model consists of seven steps, there are other similar models available, which also seeks solutions to a problem, but with fewer steps. These are especially used when more rapid processing of a problem is needed, and can be used if you are short on time, and for that reason cannot complete the seven steps of the PRACTICE model (Neenan & Palmer, 2001).

If the coachee is stuck on one of the steps in the PRACTICE model because of e.g. an emotional reaction or other psychological block, then you can use the ABCDEF model to overcome this blockage (Palmer & Szymanska, 2007). After having used the ABCDEF model and overcome the blockage, you return to the step the coachee originally was stuck on in the PRACTICE-model and continue from there (Palmer & Szymanska, 2007). This exact scenario shows how different models supplement each other and can be used at the same time and in combination with each other.

### THE ABCDEF model

As mentioned above the ABCDEF model is most commonly used to deal with emotional blockage (Williams, Edgerton & Palmer, 2010). It is often used alongside the PRACTICE model, because it does not make sense to keep working with the problem-solving model when the client is upset, because the process will not move forward (Neenan & Palmer, 2001). Instead, the problem-solving process is paused for a moment, and it is tried to resolve the emotional blockage by use of the ABCDEF model. When the emotional blockage is reduced, then it is possible to return to the problem and implement the solution (Neenan & Palmer, 2001).

Dr. Albert Ellis (1991) developed the original ABC model. Additional letters have later on been added to the model, and it is now known as the ABCDEF model (Williams, Edgerton & Palmer, 2010). The model is used to discover and deal with a person's blockage to entail change and consists of the following six steps:

- **Activating event** - which means the event that activates this emotional block the client is experiencing.
- **Beliefs about A** - the way the client perceives the event: These beliefs will often be illogical and irrational.
- **Consequences of these illogical and irrational beliefs about the specific event** (Ellis, 1991).

Above is the original model developed by Albert Ellis, which was then extended with DEF, which represents the more practical way of dealing with the described emotional blockage:

- **Disputation and modification of the unhelpful beliefs** - where you directly work with modifying these irrational and illogical beliefs that was identified in B.
- **Effective new approach to deal with the activating event**: The client works on an application of a new approach; with the intention to deal with the event that triggered the emotional blockage to begin with.
- **Future focus on personal or work goals** - which is an evaluation of what the coachee has learned from the ABCDE, and how this can be used in a future perspective (Williams, Edgerton & Palmer, 2010).

To sum up, this model is useful to make the coachee aware of the fact that it is their own thoughts and beliefs about the situation that triggers the emotional reaction and serves as a blockage, and therefore gives them a chance to modify these beliefs and by the end of it overcome their blockage (Palmer & Szymanska, 2007).

As shown above these three models have different foci and can therefore supplement each other (depending on the problem) during the coaching sessions. The models have two separate functions; they work as an educational tool for the coachee but they also help the coach to maintain structure in the sessions. This presentation of the models shows

how the sessions are structured on a general level, but it does not show any of the specific techniques used in the sessions and within the models. This we would like to present in the following section.

### Socratic questioning

Coaching is a shorter-term intervention than therapy; and it makes the questions asked of critical importance (Neenan, 2009). This makes Socratic questioning one of the most commonly used techniques in cognitive behavioural coaching. Socratic questioning involves a series of open-ended questions and invites the coachee to examine their difficult issues, with the aim of increasing awareness (Neenan, 2009; Williams, Edgerton & Palmer, 2010). Socratic questioning can also be used as a technique to examine the coachees' thinking and the validity of the coachees' performance interfering thoughts (PIT's) (Palmer & Williams, 2013). The questions can be about e.g. the evidence of the specific belief or to probe deeper into the logic of the coachees' thoughts, and is encouraging the coachee to take a wider view of their own situation so that other possibilities might emerge (Neenan, 2009).

Socratic questioning is especially used alongside the PRATICE model, where there is an emphasis on guided discovery (Padesky, 1994), and helping the client to figure out the solutions on their own (Spaten et al., 2012). By using Socratic questioning in this context, you guide the coachee to see more perspectives, which will help them seek out more solutions (Neenan & Palmer, 2001).

### Imagery techniques

Another group of techniques that are very characteristic for cognitive behavioural coaching is imagery techniques. Common for this group of techniques is that they require the coachee to visualise themselves in different, but specific situations (Palmer & Szymanska, 2007). There are several dissimilar types of imagery techniques and in each one it is something altered that the coachee has to visualise; for instance if the coachee is anxious about presentations, then they would be asked to visualise themselves doing a presentation and experience how this is practised both at a physical and emotional level. It is also possible to work on motivational issues by letting the coachees' visualise what would happen if they never did anything to achieve their goals (Palmer & Szymanska, 2007).

There is a whole range of possible things to achieve working with these imagery techniques. Common to them, is the procedure of the coachee imagining or visualising themselves in a specific problematic situation, and then to experience how it is and how it feels for the coachee: it aims to help the coachee to perceive the world in a new way.

### The cognitive behavioural approach in a coaching context

This article will be finalized by discussing cognitive behavioural coaching in relation to 13 core statements, made by the authors. The attempt is to further distinguish boundaries, distinctions and similarities between the cognitive behavioural approach and cognitive behavioural coaching. Each question will be answered with either a 'yes', 'no' or a 'yes and no' followed by a slightly longer explanatory answer.

#### 1 The coaching relationship builds on trust and confidentiality

Yes and no

- The yes and no answer relies on the notion that in cognitive behavioural coaching the collaborative relationship is very important, which requires a certain amount of trust. Nevertheless, the aim in the cognitive behavioural coaching is not to go in depth with the problems in the coaching sessions, so the trust aspect is not as important as it is in other approaches. Instead, the relationship in cognitive behavioural coaching builds more on mutual respect to create a good collaborative environment. Confidentiality on the other hand is important in any coach/coachee relationship no matter which approach is used.

#### 2 Wishes to understand 'unconscious motivation'

No

- In cognitive behavioural coaching, the wish is not to understand unconscious motivation in a literary sense. As shown above it does seek to understand the underlying beliefs or thoughts that interferes with the coachees' goal achievement.



**3 The coaching relation is "non-directive"**

No

- The coaching relation in cognitive behavioural coaching is directive. An example of this is the technique of using Socratic questioning; where the coach guides the coachee in the discovery process and in that way helps the coachee to reach own solutions to the problem. It is not directive in a way that the coach tells the coachee what to do, but the coach is constantly guiding the coachee towards a fruitful and useful direction.

**4 The work is focused on here-and-now problems**

Yes

- As mentioned previously cognitive behavioural coaching does not go in depth with the problem or look for the answer in the childhood. Instead, it has a here-and-now focus on the problems but also with a futuristic element regarding how the coachee is going to handle upcoming problems in the future.

**5 Transference plays a significant role in the coaching sessions**

No

- Transference is not a phenomenon of interest in cognitive behavioural coaching where the focus is on cognition and behaviour instead.

**6 The main emphasis is on direct problem solving**

Yes

- The direct problem solving is a characteristic of cognitive behavioural coaching. An example of this is the use of the PRACTICE model, where problems are dealt with in a systematic and structured way one at a time, at that point finds a solution to the problem and then moves on to the next one.

**7 The coaching sessions are time-limited**

Yes

- As shown in the section "The structure of the sessions", cognitive behavioural coaching does not normally last for longer than 6-8 sessions. The reason for that is that this sort of coaching does not seek the depth of the problems but stays at a practical level and works on the solution of the problems instead.

**8 The coaching session has a specific and typical agenda every time**

Yes

- As shown earlier the sessions are very structured and systematic, and each session therefore has a specific and typical agenda: In cognitive behavioural coaching the most efficient way for the coachee is to solve the problems and reach its goal.

**9 The coaching relation is a significant "agent of change"**

No

- The relationship between the coach and the coachee in cognitive behavioural coaching is important, but not necessarily of great significance for the outcome. Of course, there has to be mutual respect and chemistry for the coaching sessions to work in a fruitful way and for the coachee to want to put time and energy into it – but the relationship is not a key point in cognitive behavioural coaching as it is in other schools of coaching.

**10 Deals with the problem's aetiology**

Yes and no

- As mentioned above cognitive behavioural coaching has a here-and-now focus on the problem, and for that reason it does not seek the origins to why the problem occurred. Cognitive behavioural coaching is more practical and solution oriented to what can be done to solve the problem. On the other hand, a part of the coaching is to make the coachee aware of the dissimilar beliefs and thoughts that are interfering with goal achievement, which could thereby be the origin of the problem. So the yes and no answer is because cognitive behavioural coaching has a here-and-now focus, but at the same time works on making the coachee aware of why the problem continues to interfere and maybe to know more about how it has arisen.

**11 The coaching sessions are very structured**

Yes

- The structured way of working is another characteristic of cognitive behavioural coaching: Examples are the typical agenda for each session, the use of models to structure the sessions, and homework assignments.

## 12 The homework is a significant part in the course of all coaching sessions

Yes

- As in cognitive behavioural therapy, homework or in-between session tasks is one of the fundamental pillars of cognitive behavioural coaching. This is where the coachee gets to use the strategies learned in the sessions, which will help to overcome the problems and achieve the goal. It is required, that the coachee works hard and fulfil these in-between-session tasks for the coaching to be successful.

## 13 The coaching sessions will typically work with experiments and data collection from the coachees' environment

Yes

- Behavioural experiments and "data collection from the coachees' environment" is some of the standard techniques used in cognitive behavioural coaching (Palmer & Szymanska, 2007, pp. 102, 105). These are used to make the coachee aware of the beliefs and thoughts that are interfering with their performance and therefore getting in the way of them achieving their goals.

## Rounding up

In this paper both, some of the methods and considerations needed to take into account when practicing cognitive-behavioural coaching has been presented. The main aim of cognitive-behavioural coaching is to work with the unhelpful thinking and behaviours of the client.

The importance for the coach to help the client/coachee develop new strategies and methods, are as well presented and highlighted in the paper. Some of the main coaching models used for working with the client like SPACE, ABCDEF and the PRACTICE model are furthermore put forward in this paper. These models involve some specific techniques that could be helpful in working with clients. Finally, the reader has been led through 13 points to highlight some of the similarities and differences between the cognitive behavioural approach and coaching.

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