

# Personal Development of Coaches in Training: Qualitative Exploration and Scoping Review

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# Chapter One: Introducing the research

## Introduction

### *Choice of projects*

This account provides an explanation of, and introduction to the choice of projects undertaken and submitted for the award of M.Phil. The two submissions fulfill the requirements of the qualification and include a research project and literature review on the relevant area. They represent a broader area of study on the personal development of the coach in general and the experience of health and wellness coaches in particular, with a view to understanding more about their development needs and subsequent recommendations for the design of training programmes. This area is relatively unexplored for all coaches and as is often the case, raises more questions than provides definitive answers.

I embarked on this area of study some years ago when my curiosity was piqued by reports from students I was teaching, about their experience during health and wellness coach training and how they felt they had changed on a personal level. My project consisted of two pieces of work. The first was a qualitative study with interviews of a small sample of self-selected students who indicated that they had experienced personal positive change during training; the second, a review bringing together literature that could illuminate what had been found in connection with the area of personal development of the coach and the health and wellness coach in particular. As I was entering into a previously under-researched field, I felt that interviewing a small sample of students would be the best place to gather information about their experience. Subsequently, I felt a scoping review would identify research on the topic of personal development of coaches in general, thus adding to a knowledge base upon which further research could be built. The aim was to increase our understanding of the needs of the coach outside of their professional skill training.

### *My background*

To provide background, I trained as a Sports Scientist with many years as a student undertaking Bachelors then Masters degrees followed by working as an educator in the field of physical health and fitness. My personal experience of learning about an area I loved, was a positive one and I became more fulfilled by increasing my knowledge of theoretical concepts of physical fitness, how to achieve it and how to help others do the same. However, after many years in the fitness industry, I began to realise that we were not taking into consideration many

aspects of behaviour change – what it took to make difficult changes and the numerous factors that played a part in success or failure; how people’s thinking played as big a part in what they did or didn’t do.

I furthered my study in the area of counselling, looking for some insight into the mental aspect of behaviour change and eventually discovered the new field of health and wellness coaching (HWC). A journey of transformation began as I learnt how to take a different approach to helping people change their lifestyle behaviours and learnt that there was a more effective and rewarding way to work. I have devoted the last 15 years to learning how to coach people in the field of health and wellness and how to train others to do the same. I set up a training organisation with a small, passionate team of people, and we have now trained over four thousand people in health and wellness coaching skills. During the course of this work, I was aware that I underwent my own personal journey and experienced both professional and personal growth.

This laid the foundation for my interest in this project. As our training grew in depth, I became intrigued by what our students were saying about how it had affected their lives. They were echoing what I had experienced myself - that learning to work in this way had a very big personal impact that went beyond learning a new skill set. The two pieces of work included in this submission were aimed at gaining an understanding of how the training could impact those who undertook it. In order to understand the status of this new and emerging industry of HWC, a brief history follows.

### ***Health and Wellness Coaching***

HWC is a relatively new field. It has emerged from the need to create more effective interventions for enabling lifestyle change to combat the rapidly growing prevalence of chronic illness, premature death from lifestyle related factors and recurring reports of stress-related conditions - leading to lowered life satisfaction. Conventional, medically-oriented approaches to supporting lifestyle change by providing advice are limited in their effectiveness. (Kelly & Barker, 2016). In contrast, HWC is a whole-person approach to supporting the overall wellbeing of individuals (Yocum & Lawson, 2019) that seeks to restore autonomy and encourages client self-responsibility (Frates & Moore, 2013).

With a growing awareness of the need for more health and wellness coaches to support often-overburdened health professionals, HWC training programmes have expanded in number. Enrollment in programmes has grown with the number of graduating coaches increasing rapidly. Internet searches for HWC training programmes today result in numerous listings, whereas 15 years ago, only a handful of programmes existed.

Assuming that positive change is the desired outcome of HWC, client outcomes have been the focus of most research to date. The suggestion that this training could potentially create change in the students is one that I felt warranted further investigation.

The two projects, although independent of each other, serve to collate what is known about the coach's "journey" in training outside of professional skill development, and to deepen my understanding of what could occur. Several key points came out of my research that can be summarized as follows.

First, professional and personal development are hard to separate as one affects the other. Second, there is value in exploring what aspect of the training influences the personal experiences of the student and how their background and reason for doing the training may well play a part. Third, the suggestion that training providers could potentially be spending so much time on teaching skill development and structure that they neglect the student's personal development, which could have bearing on the effectiveness of their work, was noteworthy. Finally, the implication that, as the field of HWC is relatively new and under-explored, the nature of the work of health and wellness coaches may require them to have a personal dedication to health and wellness, was significant. In addition to this need, those coming from a previous health background (where giving advice was the key purpose of their work) and moving into a supportive relationship with their clients may face further challenges in redefining their role. The move from adviser to coach involves placing responsibility more firmly in the hands of the clients and can necessitate a significant shift in power distribution.

Once again, the pilot study and the broader literature review work together to provide a better understanding of what the field of coaching says about personal development needs of the student coach - what form it takes and what contributes to it. As a practitioner and educator, my interest was drawn to these areas as I realised that by determining what processes contributed to personal change, we could improve our programmes. From a training perspective, this work has potentially highlighted the need for training providers to focus on offering personal development and self-experiential learning alongside professional skill development. The work submitted suggests that there is an opportunity for further exploration of the questions of what personal development needs exist for coaches in general. At the same time, there may be value in determining whether health and wellness coaches have distinct and specific requirements to ensure their training journey results in producing professionals who can take on the important work of supporting the community in essential lifestyle improvements. I plan on taking my research further to follow up with a broader

investigation to explore the experience of students from other HWC training programmes of a similar standard to discover whether their reports back up what I have recorded to date.

## References

- Atad, O., & Grant, A.M. (2020). How does coach training change coaches-in-training? Differential effects for novice vs. experienced 'skilled helpers'. *Coaching: An International Journal of Theory, Research and Practice*, 1(17).
- Cosgrove, F. L., Corrie, S., & Wolever, R. Q. (2021). An exploration of personal benefits reported by students of a health and wellness coach training programme. *Coaching: An International Journal of Theory, Research and Practice*. <https://doi.org/10.1080/17521882.2021.1890167>
- Frates, B., & Moore, M. (2013). Health and wellness coaching skills for lasting change. In J.M. Rippe (Ed.), *Lifestyle Medicine* (2<sup>nd</sup> ed.) pp 343-360. CRC Press.
- Grant, A. M. (2016). What constitutes evidence-based coaching?: A two-by-two framework for distinguishing strong from weak evidence for coaching. *International Journal of Evidence based Coaching and Mentoring*, 14(1), 74-85.
- Kelly, M.P. & Barker, M. (2016). Why is changing health-related behaviour so difficult? *Public Health*, 136, 109-116.
- Lombardo, C. M. (2020). An exploration of trainee's experience and the effects of the Wellcoaches training program (Unpublished doctoral dissertation). Saybrook University.
- Yocum, S., & Lawson, K. (2019) Health coaching case report: Optimising employee health and wellbeing in organisations. *The Journal of Values-Based Leadership*, (12)2 Article 8, <http://doi.org/10.225433/0733122.1266>

# **Chapter Two: An exploration of reported personal benefits experienced by graduates of a Health and Wellness Coach Training Programme**

## **Summary**

This project sought to explore the account of “personal benefits” that graduates of a health and wellness coach training programme reported having experienced as a result of the training. Qualitative analysis was deemed appropriate. Eight graduates who had completed the Wellness Coaching Australia’s Level 3 training were interviewed and asked to describe the experiences they felt had been positive in relation to the training programme. Thematic Analysis was employed to identify the major themes using an inductive approach at a semantic level with an essentialist/realist framework. The six step process described by Braun and Clarke (2006) was used. The themes that were identified were greater self-knowledge, understanding of and relationship with others, professional optimism and personal health and wellbeing with 7 or 8 codes under each theme. Participants were asked to comment on what aspect of the training they felt contributed to these reports and also provide their main reason for undertaking the training. The findings revealed a wide range of benefits that crossed both personal and professional aspects of the coach’s self. Further qualitative research is needed to identify the key training elements instrumental to these benefits and explore their implications.

## **Introduction**

Health and wellness coaching (HWC) is a relatively new profession that has emerged from the need to create more effective lifestyle change to combat the rapidly growing incidence of chronic illness, premature death from lifestyle related factors and declining mental health. Deaths from lifestyle related disease are on the increase (World Health Organisation, 2018), suggesting that the conventional medical approach to lifestyle change is not working.

“Telling” and “prescribing” change does not create lasting behaviour change. Instead, a coaching approach that restores autonomy and encourages client self-responsibility (Frates and Moore, 2013) is more promising.



Health and wellness coach training (HWCT) programmes are growing in number and gaining more attention. Enrolments in programmes have grown with reports of the number of graduating coaches increasing rapidly. (Wellcoaches, Wellness Coaching Australia, 2020) Internet searches for HWCT programmes today result in numerous listings that claim to offer training in this area, whereas ten years ago, only a handful of programmes existed.

In the UK a Health Coaches Association has been formed to represent the growing number of people working in the field and to create greater credibility for their services (<https://www.ukhca.co.uk>). Standards have been developed in the United States that allow for consistency in what the programme curricula should cover. In 2016 an initial partnership was created between the International Consortium for Health and Wellness Coaching (ICHWC) and the National Board of Medical Examiners (NBME). This led to the creation of Board Certification and the change of name of ICHWC to National Board for Health and Wellness Coaching (NBHWC - <https://nbhwc.org>) in 2019. A credentialing process is now in place for the approval of both national and international programmes with graduates being eligible to apply for National (American) Board Certification. As of the date of writing 21 programmes have been approved under the new standards with another 40-50 given “transitional approval”, pending their final application. Wellness Coaching Australia (WCA) is one of the few programmes outside of the United States that has met the stringent criteria for approval by the NBHWC, one other being based out of Singapore.

As the industry grows, a surprising phenomenon has been noted by the team of trainers at WCA. Evidence from feedback forms, together with the verbal accounts of graduate students, reveal that for many, personal benefits are being experienced as a direct result of the training. Anecdotally, this finding has also been supported by others in the industry delivering NBHWC approved training programmes (i.e. Ruth Wolever, Associate Professor of Vanderbilt Schools of Medicine and Nursing, Margaret Moore, CEO and Founder of Wellcoaches US.)<sup>1</sup>

Whether these benefits relate to the wellbeing of students is unknown and although, in a broad sense, any personal benefits are likely to have an effect on the individual's wellbeing, the difficulty around defining, describing and measuring wellbeing could cast confusion on the questions asked.

An exploration of the form that any personal benefits might take has the potential to create a better understanding of the students' experience and how these fit with my own and

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<sup>1</sup> Thanks are given to Ruth Wolever and Margaret Moore for granting permission to include their observations

others' professional knowledge from reports over the years. Future training programmes could also potentially be developed to enhance this effect.

### **Terms of Reference/Objectives and Literature Review**

The personal benefits referred to above have not been formally identified and classified, nor has the process or aspect of the training that might contribute to these. Therefore, the aim of this project was to investigate and seek to understand how a sample of graduate students from WCA explained what occurred during the course of the training that leads them to express their experience as positive. (It should be noted that the term "student" is used when referring generally to anyone studying in the field. "Graduates" refers to the cohort who have finished their training and "participants" is used when reference is made to the study sample.) A secondary area of interest was to identify those aspects of the training the participants believed contributed to this outcome. Of further interest was an exploration of connections between the participants' current situation or reason for doing the training.

The question of whether students experience personal changes when undergoing HWCT is one that has been unexplored in the literature to date. An initial literature search of PsycINFO and MedLine between the years of 2000 and 2019, yielded no research articles reporting personal positive experiences of the students by other health professional (non-coach related) training programme providers. The search included the professions of exercise physiologists, physiotherapists, health psychologists and dietitians. A search of the literature on life coaching, counselling and therapists that could be seen to be more aligned with HWC due to the conversational and relational aspects of the service provided some useful information.<sup>2</sup>

One study by Jordan, Gessnitzer and Kauffeld in 2017 looked at how career coaches might benefit from train-the-coach courses. They evaluated the effect of a five-month career coach training course on areas of the coaches' personal development and uncovered reports of improved occupational self-efficacy, goal orientation and career adaptability. Interestingly, this then had a flow on effect to the clients who exhibited "stronger increases of clients' career decision making self-efficacy during the coaching process" which the researchers suggested could be due to the coaches' role modelling behaviour.

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<sup>2</sup> Since the date of the project, two further studies have been published that have relevance, Lombardo and Atad and Grant but these were after this project was undertaken.

A second study in the field of general coach training suggested that when students coached each other, results showed benefits of increased goal attainment, reduced anxiety, increased cognitive hardiness and enhanced personal insight (Grant, 2008). Twenty-nine students in a Coaching Psychology course acted as coach and coachee during the course of their training (with no participant being coached by their own coachee). However, there was no evidence of enhancement of psychological wellbeing, perhaps because life coaching is not focused on health and wellbeing goals per se.

A third research article explored the effect of critical self-reflection during the course of life coaches' work. Specifically, Shaw and Glowacki-Dudka (2019) used a phenomenological research design with five life coaches that revealed self-reported enhancements in their coaching skills and coaching relationships, as a function of performing various self-reflection activities. The coaches also reported becoming more aware of the importance of self-care, with coaches acknowledging the value of engaging in healthy lifestyle habits such as getting enough rest, hydration, and not over-scheduling and the impact on their coaching practice when these areas were neglected. The conclusion was that critical self-reflection should not only be a tool, but potentially a core coaching competency aimed at facilitating the professional development of the coach. This echoed the assertion made by Jordan et al. (2017) that "the relevance of self-reflection in train-the-coach courses, might be one of the success factors for coach training and coaching processes" (p.136). An important point made by Shaw et al. was the coaches' view "that whatever was happening in their lives was directly correlated to their life coaching practice" (p.14).

Literature from the helping professions, also includes that of therapists who work towards improving clients' wellbeing. Kozina, Grabovari, De Stefano and Drapeau (2010) measured 20 counsellors' sense of professional confidence during the first year of a training programme and found that it increased as the training progressed. The relationship of self-efficacy to their perceived ability to perform professional duties was the focus of this study as it has such relevance in a context where proficient performance of a set of tasks is essential. The study was mainly concerned with professional growth and not personal development. However, increases in confidence could be considered a personal as well as professional benefit as it often flows into other areas of life.

The work of Bennett-Levey and Finlay-Jones (2018) explored the area of self-experiential learning in the form of personal practice with a view to therapists working in the area of Cognitive Behavioural Therapy, learning more about the personal self and possibly enhancing their skills as a secondary benefit. Although personal practice was traditionally

focused on personal therapy, recent times have seen the inclusion of meditation programmes, loving kindness and compassion programmes and self-practice/self-reflection. The aim is for therapists “to practice therapeutic strategies on themselves then reflect on the practice” (p.186). The outcomes reported included improved personal development and wellbeing, self-awareness and enhanced interpersonal beliefs, attitudes and skills. Once again, this study was looking at practicing therapists rather than trainees and the reported benefits from the personal practice referred to above are as a result of the therapists engaging in activities outside of their work, not as part of a training programme,

In summary, there is no literature directly addressing the phenomenon noted above and in the available literature, the focus is on one or more of the following elements:

- a) the training itself (Grant, 2008, Jordan et al, 2017, Kozina et al.,2010)
- b) the use of the process of self-reflection (Shaw et al., 2019, Jordan et al., 2017 )
- c) personal practice that included personal therapy, meditation programmes and self-practice/self-reflection (Bennett-Levey and Finlay-Jones, 2018).

The studies cited were not looking at students of HWCT programmes. HWCT programmes are relatively new and most of the research has focused on the effectiveness of the coaching itself on the end user – the client. Does it work? What outcomes can be achieved? However, as stated previously, there is little research on the students and graduates themselves.

## **Methodology**

As the purpose of this study was to explore the experience of students who had reported personal benefits of undertaking a HWCT programme of study with WCA at Level 3 and to better understand what these are, I felt that it was best suited to a qualitative approach due to the lack of information relating to those benefits.

It was unlikely that the information obtained could be quantitatively measured at this point and instead needed to be interpreted to truly understand the graduates’ experiences (hereinafter referred to as “participants” when referring to the sample chosen.) Qualitative research allows researchers to “explore, describe and interpret the personal and social experiences of students” (Smith, 2015, p.2). Out of this exploration, it was hoped to achieve a better understanding of what the personal benefits were, and how students describe them. A qualitative approach would allow for the free expression of ideas that originated from the participants rather than to measure pre-conceived factors that we assume occurred.

This pilot project sought to uncover themes that related to the “personal benefit” experienced by students who had completed Level 3 HWCT with WCA. Data were collected by means of individual interviews with eight such graduates. WCA Level 3 training is spread over 4-6 months and has been approved as part of a Professional Certificate that allows graduates to apply to sit for National (US) Board certification (referred to earlier). Graduates of Level 3 will have completed 80 hours of training including at least 20 hours of health and wellness coaching practice and successfully completed Levels 1 and 2 at an earlier date. As Level 3 is currently the highest level of training offered by WCA, and reports of significant change were coming from students who were undertaking or had completed this level of training, a decision was made to draw from this cohort of students for the purposes of this initial exploratory study. Key modules in the training are shown in Table 1 below.

***Table 1 – Key elements of the Level 3 HWCT programme***

▪ Skills and principles of HWC
▪ A model for change that forms the framework for their practical experience and coaching work
▪ Understanding and use of principles of positive psychology, appreciative enquiry and strengths-based coaching
▪ Assessing readiness to change
▪ Motivational Interviewing and how to work with ambivalence
▪ Theory of goalsetting and human drive
▪ Successful completion of a practical coaching session with an assessor who looks for demonstration of competencies as set out by the NBHWC.

Thematic analysis was chosen to provide the theoretical flexibility required by an exploration of the personal benefits experienced by the participant. Braun and Clarke (2006) suggest that thematic analysis is an ideal method of analysis to use when exploring an area where little research has been undertaken as it allows a comprehensive description of the entire data set, and this became the main criterion for choosing this methodology.

Interviews produce a great deal of data and require an interpretive approach. The aim is to produce themes that represent the data in an organized, collective manner while maintaining the credibility and true representation of the responses provided. Of equal importance, it is essential that the content be easily understood by people who may not be academics and who are not familiar with technical research terminology yet will benefit from the findings. It was anticipated that the findings from this study could attract interest from

many quarters and groups of people including the lay person who may wish to understand more about this potential choice of career. One of the advantages of thematic analysis is that the results can be read and understood by the educated general public (Braun and Clarke, 2006). This method of collecting and analyzing data also allowed for the generation of themes that might not have been anticipated in this unexplored area. The nature of this research project required an inductive, semantic approach as I was not drawing from existing theories or concepts and was primarily looking at what was explicitly stated. Thematic analysis is appropriate when the method used is not bounded by theory. I was not attempting to develop a theory as such but instead to use an essentialist/realist framework to identify and report themes that were evident in the data and attempt a certain level of interpretation of these themes. I did this by assuming a clear relationship between the language used to describe the participants' experience and the meaning they ascribe to it.

As explained above, thematic analysis was selected as a useful and theoretically flexible means of analyzing the data to identify the key themes arising and the patterns of meaning that could be found. Using Braun and Clarke's (2006) 6-step framework, the analysis of the data used the following structure:

1. Familiarisation with the data by reading and re-reading the transcripts
2. Generating initial codes
3. Searching for themes
4. Reviewing themes
5. Defining and naming themes
6. Preparing the report

The main interview questions elicited information from which the themes were drawn, by interpreting and making sense of what was said. This allowed me to consider participants' experiences, views and perceptions using the structure referred to above.

Participants were fully aware of the purpose of the interviews and the fact that they were recorded for further analysis. Anonymity was confirmed. As noted in the Ethics Release form (Appendix 4), students signed a declaration of understanding and gave consent to being part of the study. (See Appendix 3.)

As the research was conducted initially within my own practice – an organisation delivering HWCT- few organisational restrictions applied. I had considerable flexibility in how the study was designed. As I am one of the principal trainers and assessors within the WCA programme, it was deemed to be important that participants had completed and graduated to minimize any power imbalance. If the students were awaiting an assessment that I could

potentially be conducting, this might have strongly influenced their engagement in the study. It was also deemed likely that students would volunteer to be part of the ongoing research due to the relationship with myself. However, this could have been considered an advantage in readily accessing participants. It is acknowledged that any previous relationship that had been formed with me may have influenced the description of benefits of the training - resulting from a need to comply with what they may perceive to be desired findings. It was noted also that it would have been impossible to control the influence of any 'desire to please' entirely.

As some of the participants were personally known to me the interviews were quite informally conducted with short conversation taking place both before and after the recorded section of a more general nature to promote better connection. Participants were aware of what was being asked and as they had self-identified as meeting the criteria, they seemed relaxed and comfortable in disclosing often personal details and experiences. This could be partly due to the prior relationship with the researcher. However, it was felt that it only added to the authenticity of the data. Any former relationship between myself and the participant could have influenced greater sharing and disclosure than if it did not exist.

The interviews may have had initiated sensitive discussion of a personal nature as mentioned above. Decisions regarding ethical handling of these events were made if it was felt that participants were at any risk of experiencing emotional distress. A participant's health or personal background and reason for undertaking the training could have given rise to some emotional responses to questioning. In these cases, the interview process was undertaken with particular care - taking into consideration the magnitude of their illness or life situation and the current status of either and the comfort level with which they disclosed information.

## **Project Activity**

An invitation was issued via our database of students from Level 3 WCA's training programme. An initial post was placed on a closed Facebook group for Level 3 students (210 students with 140 viewing it). The post asked for students who had "experienced a personal positive benefit" from undertaking the HWCT to volunteer to be interviewed about that topic. A response came from 22 people who were willing to be involved – a 15% response rate. They were also asked to rate the magnitude of the benefit from 0-5, with 0 being not at all, 2 somewhat beneficial and 5 being significant.

Participants were chosen from those indicating a 4 or 5 on this scale to ensure that their experience had been impactful enough for them to provide a significant description of what

they perceived to be the benefits. Several responses came from students who had not yet completed their training and they were not selected for this reason. It was explained that we were looking for graduates only at this stage. It was felt important to have a representation from male students and two were chosen to participate. Both had indicated a rating of 4 or 5. This percentage reflected the actual proportion of male to female who generally enrol in the training, and it was felt that the inclusion of both genders would give a more accurate representation of the graduates' experiences. It was also noted that all participants were white, Caucasian and although coming from varying backgrounds, they did not represent the potential diversity of students who could enrol in such programmes. Table 2 provides more information on characteristics of selected participants.

Interviews were conducted with 8 participants over the phone, using a recording software and lasted between 45 and 60 minutes. The sample size was determined in considering the homogenous nature of the group and it was felt that a sample of 8 would provide sufficient meaningful themes and information gathered would potentially reach saturation point. Smith (2015) recommends 6-10 people for a small project that uses interviews as the means of obtaining data.

***Table 2 – Participants' characteristics – age, gender, occupation, past training, reason for doing training, life circumstances***

<b>Part. No</b>	<b>Age</b>	<b>Gender</b>	<b>Professional Background</b>	<b>Reason for doing the training</b>	<b>Date training completed</b>
1	58	F	Health Science	Developing a coaching programme	May 2015
2	46	F	Nursing	Start a business	Oct 2017
3	36	F	Nursing	Left nursing to pursue lifestyle medicine	Feb 2019
4	58	M	Management	Career development	Sept 2017
5	50	F	Physiotherapy	Coaching in research	July 2017
6	47	M	Fitness Training	Upgrade qualifications	June 2015
7	53	F	Nursing	Employment	Feb 2019



8	38	F	Massage therapy	Natural adaptation to current work, wanting to extend repertoire	Nov 2018
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The following questions acted as a guide for the interviews but were not adhered to strictly and used only as a prompt when necessary, with further questions included as the interviews progressed and repeated themes became apparent. The questions were formulated with the aim of avoiding any leading or suggestive influences and designed to be a starting point for further conversation around their experiences, without pre-empting what form they might have taken. A pilot process indicated that the questions yielded helpful information and appropriate amount of engagement by the participant. The transcription of the pilot interview was therefore, included in the data. If participants veered too far from the subject matter, they were prompted to explore their experience further, in relation to the training.

1. Tell me about your experience of doing this training.
2. You indicated that you have experienced personal benefits from the training. In what ways?
3. What aspect of the programme do you feel contributed to that effect?
4. What was your reason for doing the training?
5. How do you feel (if at all) that the training has influenced your own health and wellbeing?
6. Is there anything else that you think would be helpful for me to know or that you would like to tell me?

The questions were a guide to starting the conversation about the personal positive effects of the training and to collect some information that I felt could be relevant to the study. The broad wording and open-ended structure allowed a wide range of discussion and used to keep conversation flowing and allow students to open up further by self-reflecting. Any clarification of information that was disclosed was obtained by using reflections, and not suggestions.

The interviews were transcribed verbatim and reviewed as follows. The transcripts were sent to the participants with the request to review and confirm that they were an accurate representation of their views on the topic and inviting any further information or edits as appropriate. I then set about familiarizing myself with the data by reading each of the transcripts several times and replaying the recordings to gain greater understanding of the

significance of what was said. I read and re-read the transcripts, highlighting and copying each incidence of dialogue that I felt could be a potential code, looking not only for prevalence but importance in what was said.

I subsequently created a list of benefits that I thought were important points raised by each participant and that were repeated by others. These became the codes. Initially there were 30 codes. See Appendix 1. Several codes were deleted due to a lack of support from four or more of the students and several others added with a total of 32 in the final account. As the questions asked were not entirely specific (other than when they were asked about improvements in personal wellbeing), the themes were on the whole, data driven. Upon further examination of the data, it was decided to add one more code and to expand on another as these added depth to the descriptions given by students.

The next phase involved searching for patterns between the codes to see where they combined to indicate that a theme could be recognised, I looked for relationships between codes and analysed them to see if they fit into any particular theme or sub theme, or if in fact the codes were themes themselves. I decided not to use other coders as I agreed with Braun and Clarke (2013), that as the process is so subjective, it would not add reliability or accuracy to the findings.

Upon reviewing the themes, several were broken down into separate themes with others combining to create a more cohesive picture of the data. Some were discarded or refined. The next step was to name the themes. This process described above is set out in more detail below. Once the codes were finalized, I asked students to indicate which they felt personally applied to their experience (see Appendix 3).

Although at the outset the intention was to focus on only personal positive effects, it also became apparent that certain benefits crossed over into the professional realm, yet still had a significant personal benefit. Rather than steering the conversation away from professional benefits and back to personal benefits, I encouraged expansion of conversation around professional benefits realising that the two may be intertwined. For example, the fact that a participant was able to command a higher income would be a case of professional benefit and not relevant to the focus of the current study. If the participant reported that using the model in their work gave them a greater sense of fulfillment, self-efficacy or growth overall, these would be deemed worthy of inclusion as potential themes.

## Project Findings

As stated above, participants reported benefits in both personal and professional aspects of their lives. As I was using an inductive “bottom up” approach I felt it was important to include all the key benefits that were reported as being personal, even if they appeared to be more professional in nature. Many responses referred to their future work as coaches in the health and wellness field and it would appear that the training had a great impact on their attitude to this dimension of their lives. As participants had been asked specifically whether their health and wellbeing had improved, I looked for descriptions of how this had happened; in what way and found that I needed to pull out specific behaviours as many of the responses could be seen to indirectly influence health and wellbeing, if not directly.

The patterns I identified from the data that became the final themes were:

1. Self-knowledge.
2. Understanding of, and relationship with others.
3. Professional optimism.
4. Personal health and wellness.

Table 3 shows the themes and final codes. Appendix 2 shows a graphical representation of the data. Appendix 4 records the number of participants who agreed with a code/theme. If a code is marked in italics, with no responses next to it, it was one that was added later, upon further examination of the data and felt worthy of inclusion.

***Table 3 - Final themes and codes***

<b>1. Self-knowledge</b>
Greater self-acceptance
Value identification
Awareness of strengths
Ability to use the tools and model for the purpose of becoming more self-aware
Ability to self-reflect
Sense of courage
Less defensive (dropped barriers)
Greater clarity and focus in life
<b>2. Understanding of, and relationship with others</b>
Greater connection, deeper relationships

Inspired by others, peers and clients
Increased empathy, acceptance, understanding
More considerate, mindful in actions
Awareness and acceptance of uniqueness of people
Vulnerability and trust
Improved communication with others
<b>3. Professional optimism</b>
Sense of fulfilment and purpose
More confidence in (coaching) work (Building on existing skill set/using strengths)
Recognition of missing piece "preventative" way of working with people
Thirst for more knowledge
Understanding of breadth and depth of application
Sense of excitement at new direction and possibilities of using the model
Joy (pride) of helping effectively
<b>4. Personal Health and Wellness</b>
More balance in (personal health) programme
Emotional wellbeing, hope and positivity
Improved emotional regulation
Better nutrition and/or weight loss
More meditation, time in nature
Practicing more mindfulness
Uses coaching skills and tools in personal life
Broadened understanding of holistic wellness

The theme of self-knowledge linked reports of participants’ increased understanding of themselves as people and what was important to them. They reported gaining the ability to self-reflect and in doing so, becoming more self-aware – of their strengths and of their weaknesses.

*“the coaching model gave us more of a framework to understand the things that I've done, the habits I've developed over a lifetime of my responses to stress. So, when you can develop that level of self-awareness then it's much easier to manage” (Participant 4)*

In every case but one, participants reported that they had a greater sense of what was important to them, what their values were, which seemed to give them greater clarity and focus in life generally.

*“From actually doing (the training), I really got a lot more connected with my values and what was important, where I was going to spend my time, also to a certain degree, some acceptance... not being too caught up in a particular outcome...”* (Participant 6)

*“Once I did the health and wellness coach training, it really just opened up my awareness to the understanding of making conscious decisions and being really aware of what wasn't serving me purposefully in my life, what I needed to let go of, where I needed to put my focus. What was my overall long-term vision in all realms of my life? What's the sort of person I want to be? What do I want to achieve in business? What do I want to achieve in health? What do I want to achieve in all aspects of my life? And then reverse engineer, 'Okay. What do I need to do? What are the actions I need to take day-to-day to achieve that overarching vision?' And so now I'm very aware and very mindful...”* (Participant 2)

One of the recurring responses was around the recognition that if they wanted to work in this field, students had to “walk the talk” and live in a certain way. This was identified as something that would be incorporated in their value system, going forward, if they were to coach in the health and wellness field.

*“You've got to walk the walk and talk the talk. And I need to be fully invested, engaged, and ingrained into how I'm approaching other people. It has to be at the forefront of my life and important to me for me to display and express that and get other people's engagement and trust within this process.”* (Participant 2)

*“... we are encouraged in the course to recognise that to be a really good coach, you have to be on the journey yourself. And I think that's really wise advice.”* (Participant 3)

The second theme identified was around participants' relationships and connection with other people. A benefit of the training that was reported unanimously was an improvement in communication skills that led to a deeper connection with others, in both professional and personal lives.

*“So, I think the connections that I've got with people through utilising this coaching model have been really deep and it's given me a broader understanding of how to communicate and how to relate to people on a different level.”* (Participant 2)

*“ ... greater appreciation of just listening and not having to fix or change things too, so being okay with just being an open ear and asking questions, and not feeling like you had to necessarily add things all the time. I think that’s pretty powerful in terms of how that’s impacted my relationships.”* (Participant 6)

*“ ...and so, I’ve definitely turned into a much better listener. More of a reflective listener”.* (Participant 8)

*“Just going in with an open mind and an open heart, and the biggest thing is just that active listening. And sometimes when I’ve done coaching, it’s just been listening and reflecting, and as simple as that. And it’s like people just like for the first time they’re being heard and you don’t often even have to say anything, and they walk out of (laughter) the coaching session just so inspired, and so satisfied, and so happy. And sometimes I think, “Well, I didn’t really say much. I didn’t do anything.” But I was there listening and it’s amazing how powerful that can be.”* (Participant 2)

Some of the benefits under this theme appeared to come from participants’ interactions with others, both peers and “clients”, that led to greater empathy, acceptance and understanding of others.

*“I think with the training, I’ve got a better understanding of where people could be in their lives,.... .. just giving someone else in my life or someone else in the conversation the room to have their own opinion and their own perspective of what they’re going through is this and I found a very different way of being to respect that and I think developing a lot more empathy as well.... And an acceptance of where they are and knowing that my perception of what they’re going through might be completely different to their perception of what they’re going through and that’s okay.”* (Participant 6)

*“I saw the scope of how many different people from all sorts of walks of lives and experience were coming in and doing the health coaching... from quite young people to, you know older people which I thought was really great - to have that really broad spectrum of people who were interested in becoming health coaches and from very varied and different backgrounds and experiences and motivations. So, I found that really inspiring actually to meet those people and hear their stories.. there was a lot of peer to peer learning.”*  
(Participant 1)

The participants seemed to be acknowledging that by learning to listen deeply to other people they were understanding, relating and improving connections in a much deeper level than before. Several reported improvement in specific relationships

The third theme was named professional optimism. There was a strong sense of anticipation and hope for the future which went further than simple professional development or acquisition of skills. Reports of benefits in this area revolved around greater awareness, a sense of excitement, and a deep appreciation of the value of the work they were being trained to do.

*“I can’t remember other courses that I’ve done where ... it pushed all my buttons. It really resonated and I’ve really excited about what I’ve learnt. ... about the possibilities and about what this might lead to.”* (Participant 4)

*“I can help them, but I can actually get joy from it myself.”* (Participant 7)

Several times students mentioned that they felt they were building on strengths that they already had.

*“I felt a little bit like duck to water really, in terms of how I could then use this in my work. It kind of came quite naturally to me..”* (Participant 5)

Another unanimous acknowledgment of a benefit was that it had ignited a desire to learn more.

*“And I’m sure everyone who does wellness coaching or health coaching, even if they didn’t feel it before, come out of it feeling having explored themselves a little bit through the process, come out a bit hungry for more knowledge.”* (Participant 1)

*“...and it’s really sparked an interest to do a bit more research of my own”*  
(Participant 8)

An interesting area of reported benefit was in specific health and wellness for the individual who had trained to be a coach. This theme was named personal health and wellness and it included not only behaviours but also reports of greater emotional wellbeing. Students described having a greater balance in their personal health programme, spending more time in meditation, mindfulness and nature, improved nutrition and in a few cases weight loss. The tendency to use coaching skills and tools in their personal life was admittedly a means to an

end rather than an outcome in itself, but it seemed to belong in this category. The changes that the participants were reporting in their personal health and wellbeing are frequent goals for clients of health and wellness coaches.

*“I’m sleeping a lot more now than I have ten years ago, that sort of thing. I’m trying to schedule with my wife that I get away and do some of the stuff that helps reenergise me, be it go climbing or bushwalking once in four weeks.”* (Participant 6)

*“Since doing .. the training I’ve lost 10kg. I eat better than I’ve ever eaten. I exercise. I set goals and track.”* (Participant 1)

*“It was after the training that I realised I needed to listen to myself more to know what I really needed, wanted and how to achieve that. So, I got into the practice of meditation, which is – that’s been really powerful in my life.”* (Participant 2)

These changes would depend on the individual’s situation at the time of undertaking the training and the gaps that might have existed in their personal health and wellness, but all participants reported improvements in emotional wellbeing and regulation, hope and positivity.

*“I love it. I’m so happy.”* (Participant 8)

*“(The training) ...really changed my view on my own life and what was possible... gave me a confidence I think that I could work towards things being better.”* (Participant 5)

*“I’m just finding that my life has changed in a way where I’m not just working it, I’m also living it, and it makes for a much more calmer and – a lot of people around me seem to be always running from chaos to chaos and I don’t feel like I am, which is lovely.”*  
(Participant 7)

Although an attempt has been made to separate the many “benefits’ into categories and themes, it should be noted that the crossover between them is inevitable as is summed up by one comment below.

*“You can’t separate professional from personal, and I think in that, then for me, if my job has gone well, I’m enjoying the people I work with, I’m feeling that sense of self-efficacy in my work and really feeling good about it – well, that just knocks over into life, doesn’t it?”* (Participant 5)



The question around what participants felt contributed to the positive effects produced varied results but most indicated that it was the use of the model on themselves that was the key factor. The following table shows what else was mentioned in no particular order.

***Table 4 - Elements of the training that participants felt contributed to the personal positive effect***

• Gratitude exercises
• Positive Psychology exercises
• Coaching circles
• Tracking small goals
• Support of peers
• Using tools such as Decisional Balance, Wheel of Wellness
• Strengths survey
• Structure and planning
• Passion of presenters
• The entire model
• Having to define values
• Introspection required by the course
• Learning about science of habits

## **Conclusions and recommendations**

The aim of this initial research project was to explore the nature of “personal benefits” that were being reported by students who had undertaken training in health and wellness coaching.

Several researchers have claimed that “coaching research has not focused enough on the area of the personal development of coaches who are being trained”, and that coach training should be an important element to factor into curricula (Grant, 2008, Laske, 2006). Jordan et al. (2017) felt that their research had achieved an important step forward in looking at the personal development of the coach and that this development was influenced by the actual training itself. They put forward the importance of coaches understanding that the behaviour of the coach would influence the success of the client in the same way that client variables and techniques used would; (e.g., in terms of role modelling and inspiring by example). Their results revealed that the training itself could also support the development of the coach – in

both a personal and professional sense. The question of whether these findings might have relevance to the development of HWCT programmes is obviously of great interest.

When this project was initially envisioned it was with the aim of exploring what experience the students were having that was leading to reports of the training being personally beneficial. As they were studying to be health and wellness coaches and help others with lifestyle changes with the aim of improving the clients' health and wellbeing, the question of whether students experienced personal changes in their own health and wellbeing throughout the training is one around which I had curiosity – which then raises debate on what constitutes wellbeing.

For the purpose of the current study, the focus was on identifying and exploring students' experience and see what themes developed, rather than seeking to define the construct of wellbeing. HWC focuses on helping clients achieve optimal mental and physical health. The physical dimension of wellbeing is curiously often given little attention in the literature with more emphasis being placed on more mental and emotional aspects such as life satisfaction, goal achievement, positive affect, realization of potential and self-acceptance, to name only a few that are mentioned in the studies cited above. Yet physical health often forms a large part of the changes that health and wellness coaches support their client in achieving. Whether it be diabetes, cancer, obesity or other lifestyle related illness these areas make up an important portion of health and wellness coaches' work and set this field apart from the many other helping professions. At the same time, clients frequently present with mental health issues and the scope of a coach's work would include providing support but not treatment of same. Managing stress, overwhelm, mild anxiety etc. are frequent challenges that are brought to the coaches' attention.

If we acknowledge that clients come to health and wellness coaching with many varied descriptions of desired outcomes and challenges, perhaps the experiences reported by the students are simply echoing what happens on our clients' journey to improved mental and physical health? However, it should also be noted, as mentioned above that as the interviews progressed, and responses were given to the very broad questions – “What personal benefits did you experience?”, it became apparent that the factors described encompassed more life areas than had previously been anticipated. They went beyond factors related to health and wellbeing.

As I had chosen only to interview students who identified themselves as having had a “personal benefit” it could be argued that this study could be limited in that I was looking purely at the positive effects of the training and not what potential negative effects could exist.

As the aim of the study is to learn more about the nature of the benefits reported by students, it would fall outside its scope to examine the negative effects. Instead I am merely attempting to understand how the positive effects occur and the way students experience this phenomenon.

Demand characteristics are inherent in the study which called for participants to identify themselves as having experienced a “personal positive effect” – something which they would have understood was desirable for the researcher who also happened to be the principal of the training organisation. This was unavoidable as the study sought to explore those benefits, not confirm that they exist. The sampling was intentionally purposive.

The enthusiasm with which graduating students often emerge from a programme of study could have contributed to a “placebo” effect which results from their belief in the programme they have recently completed, rather than the programme itself. However, Table 2 shows that students had completed their training at different times with varying gaps between completion and interviews.

The secondary question of what contributed to these personal positive experiences was explored in part by the information in Table 5. Although participants were asked to comment on what aspects of the programme they felt contributed to the personal positive benefit it was not the main focus of the project, but rather a secondary question. Therefore, it was decided to take it forward as a question to ask in the bigger research project.

Similarly, the circumstances of the participants and reason for undertaking the training may well have great significance in future projects but for now, it was of interest to note that participants ranged in age from 36-58 and responses indicated that they were looking to add to their skill set or make a change in their career. It is also significant that participants were white, Caucasian and therefore, could not represent a wide diversity of cultural backgrounds.

HWC has a double focus and skill set. Coaches need to have a good working knowledge of principles of health and wellbeing – both mental and physical together with an ability to use coaching skills to support behavior change. This necessitates a comprehensive curriculum of study with learning activities aimed at helping students understand the experience of the client. To do this they are asked to undertake peer to peer coaching combined with many self-reflective exercises. Students follow the model that they are trained to apply with their clients and are encouraged to work towards creating improved health and wellbeing in their personal lives. It is hypothesized that this requirement may contribute in some part to their experience of personal positive benefit which would mimic the experience of a client being coached by a health and wellness coach, possibly in terms of health behavior change.

The ability to hold “coaching conversations” and the connection that is experienced in the coaching circle activities is frequently mentioned in students’ anecdotal reports as being hugely rewarding and personally satisfying. Together these elements of the training may well be the variables that produce the positive outcomes. The experience of being coached may be a significant factor in achieving these benefits.

The question of whether health and wellness professionals need to “walk the talk” was considered by Tribole (2015) who suggested that dietetic students and practitioners, ‘can’t take a client any further than they have come themselves because they will subconsciously put up blinders’. This comment may have relevance to students in health and wellness coaching and point towards the desirability of them going on their own journey of improvement in personal as well as professional development.

Similarly, Margaret Moore, a pioneer in this field, wrote that, “a coach’s integrity depends on walking the walk, continually growing and learning, and, even better, to model thriving” (Moore, 2016, p.173). This supports the view that health and wellness coaches may need not only to be able to support others in their journey towards improved wellbeing, but to live the experience of working towards optimal health and wellness on a personal level. Perhaps their personal experience during health and wellness coach training might also play a part in their ability to coach clients effectively at the end of their training.

### ***Recommendations for further research***

This project was limited to information provided by a small sample of former students. Their responses, together with the paucity of literature around this topic, suggest that further research could reveal a more complete picture. As noted earlier, additional questions emerge from the findings of this project and could include:

- Is this effect reproducible in other HWCT programmes other than that delivered by WCA?
- Do graduates of other health professional qualifications experience benefits related to the work they are being trained to do – was this a phenomenon that occurred more regularly than I realized?
- Could this possibly be a unique effect of HWCT or are similar trends seen in other coach training programmes? (A further search of the literature may reveal more on this.)
- What part does the age, background, and situation of the student play in their experience? (Note the age range of 36-58 in the current project. Could the level of maturity and life experience influence their experience?)
- Is it only a handful of students who gain the benefits described?

More extensive research using a larger sample of programmes may reveal at least the answer to the latter two questions. Further research may also determine the answers to the remaining questions as well as explore what actually contributes to these positive effects and how this information can be used to design programmes that not only produce competent health and wellness coaches, but enhance the lives of the students.

The other issue this study may raise is to highlight what health and wellness coaching actually aims to achieve. Coaches tend to assume that clients seek our coaching for support in adopting new health behaviours to achieve improved wellbeing and although this will continue to play a large part in the justification for the profession, we might widen our view of the potential outcomes that can be achieved by people when they begin to question their values, their purpose in life and identify their unique strengths. What the students are reporting in these interviews may well act as a lens through which we can view a much broader potential in terms of positive outcomes for our clients. Further exploration may support these findings or shed light on more wide-ranging effect of the training on the people who choose to work in this field. The findings from this study may ignite interest and form the focus for future research.

## References

- Australian Institute of Health and Welfare. (2014). Australia's health 2014: The 14th biennial welfare report of the Australian Institute of Health and Welfare.
- Bennett-Levy, J. & Finlay-Jones, A. (2018) The role of personal practice in therapist skill development: a model to guide therapists, educators, supervisors and researchers, *Cognitive Behaviour Therapy*, 47:3, 185-205, DOI: [10.1080/16506073.2018.1434678](https://doi.org/10.1080/16506073.2018.1434678)
- Bradburn, N. (1969). *The structure of psychological well-being*. Chicago: Aldine.
- Braun, V. & Clark, V. (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2). 77-101. ISSN1478-0887
- De Haan, E. (2008). *Relational Coaching*. West Sussex, England: John Wiley & Sons
- Diener, E. (2009). Subjective well-being. In E. Diener (Ed.), *The Science of Well-being* (pp. 11–58): New York: Springer.
- Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235. doi:10.5502/ijw.v2i3.4
- Drummond, D., Hare, S. (2012) . Dieticians and eating disorders. *Canadian Journal of Dietetic Practice and Research*, 73(2) Summer
- Frates, B., & Moore, M. (2013). Health and wellness coaching skills for lasting change. In J.M. Rippe (Ed.), *Lifestyle Medicine* (2<sup>nd</sup> ed.) pp. 343-360): New York: CRC Press.
- Grant, A.M. (2008). Personal life coaching for coaches-in-training enhances goal attainment, insight and learning, *Coaching: An International Journal of Theory, Research and Practice*, (1)1, 54-70. DOI: 10.1080;17521880701878141
- Guest, G. Macqueen, K.M, & Namey, E.E. (2012). *Introduction to Applied Thematic Analysis*. Sage Publications Inc.
- Houston, C.A., Bassler, E., St. Germain, A. (2015) Ethical considerations when students experience an active eating disorder during their dietetic training. *Journal of the Academy of Nutrition and Dietetics* 115(10), 1715-1717. New York: Wolters Kluwer

- Jordan, S., Gessnitzer, S. & Kauffeld, S. (2017) Develop yourself, develop others? How coaches and clients benefit from train-the-coach courses, *Coaching: An International Journal of Theory, Research and Practice*, (10)2 pp 125-139, DOI: 10.1080/17521882.2017.1330353
- Keyes, C. (2009). The nature and importance of positive mental health in America's adolescents. In Gilman, R., Huebner, E., & Furlong, M. (Eds.). *Handbook of Positive Psychology in Schools*. New York: Routledge.
- Kobau, R., Snizek, J., Zack, M., Lucas, R., & Burns, A. (2010). Well-being assessment: An evaluation of well-being scales for public health and population estimates of well-being among US adults. *Applied Psychology: Health and Wellbeing*, 2(3), 272-297.
- Kozina, K., Grabovari, N., De Stefano, J., & Drapeau, M. (2010). Measuring changes in counsellor self-efficacy: Further validation and implications for training and supervision. *The Clinical Supervisor*, (29)2, 117-127, DOI:10.1080/07325223.2010.517483
- Moore, M., Jackson, E., & Tschannen-Moran, B. (2016). *Coaching Psychology Manual* (2<sup>nd</sup> ed). Philadelphia: Wolters Kluwer.
- Norcross, J. & Lambert, M. (2010). Evidence-based therapy relationships. In J. Norcross (Ed.), *Evidence-based Therapy Relationships* pp 1-4. Rockville, MD: Substance Abuse and Mental Health Services Administration
- Pollard, E., & Lee, P. (2003). Child well-being: a systematic review of the literature. *Social Indicators Research*, 61(1), 9–78. <http://dx.doi.org/>
- Rogers, C. (1961). *On Becoming a Person*. Boston: Houghton Mifflin.
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57, 1069–1081. <http://dx.doi.org/10.1037/0022-3514.57.6.1069>
- Seligman, M. E. P. (2002). Positive psychology, positive prevention, and positive therapy. In Snyder, C. R., & Lopez, S. (Eds.). *Handbook of Positive Psychology* (pp. 3–13). New York: Oxford University Press.
- Seligman, M. E. P. (2011). *Flourish – A new Understanding of Happiness and Well-being – and how to achieve them*. London: Nicholas Brealey Publishing
- Shaw, L. and Glowacki-Dudka, M. (2019) The experience of critical self-reflection by life coaches: a phenomenological study. *Coaching: An International Journal of Theory, Research and Practice*, 12(2)
- Shin, D., & Johnson, D. (1978). Avowed happiness as an overall assessment of the quality of life. *Social Indicators Research*, 5(1), 475–492. <http://dx.doi.org/10.1007/BF00352944>

Smith, (2015). *Qualitative Psychology: A Practical Guide to Research Methods* (3<sup>rd</sup> ed.) Thousand Oaks, CA: Sage Publications

Tribole, E. & Elyse Resch, E. (2012). *Intuitive Eating: A Revolutionary Program that works*. New York, NY: St. Martin's Griffin.

World Health Organisation (2018) <http://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>



## Appendix 1 - Initial Codes with Potential Themes

Greater connection

Increased empathy, acceptance, understanding

More confidence in (coaching) work

Emotional wellbeing, hope and positivity

Improved emotional regulation

Inspired by others, peers and clients

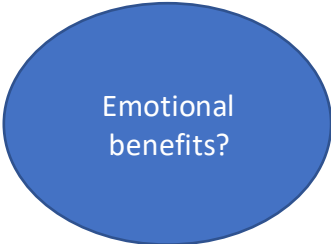
Sense of courage

Sense of fulfilment and purpose

Vulnerability and trust

Sense of excitement at new direction and possibilities of using the model

Joy (pride) of helping effectivity



Emotional  
benefits?

Greater self-acceptance

Less defensive (dropped barriers)

Ability to self-reflect

<sup>3</sup>Awareness and acceptance of uniqueness of people

Broadened understanding of holistic wellness

Awareness of strengths

Value identification

Recognition that have to walk the talk

Ability to use the tools and model for the purpose of becoming more self-aware

Recognition of missing piece "preventative" way of working with people

Uses coaching skills and tools in personal life

Improved communication skills

More meditation, time in nature

Better nutrition and/or weight loss

More balance in (personal health) programme

Building on existing skill set/using strengths

Practicing more mindfulness



Cognitive  
benefits?

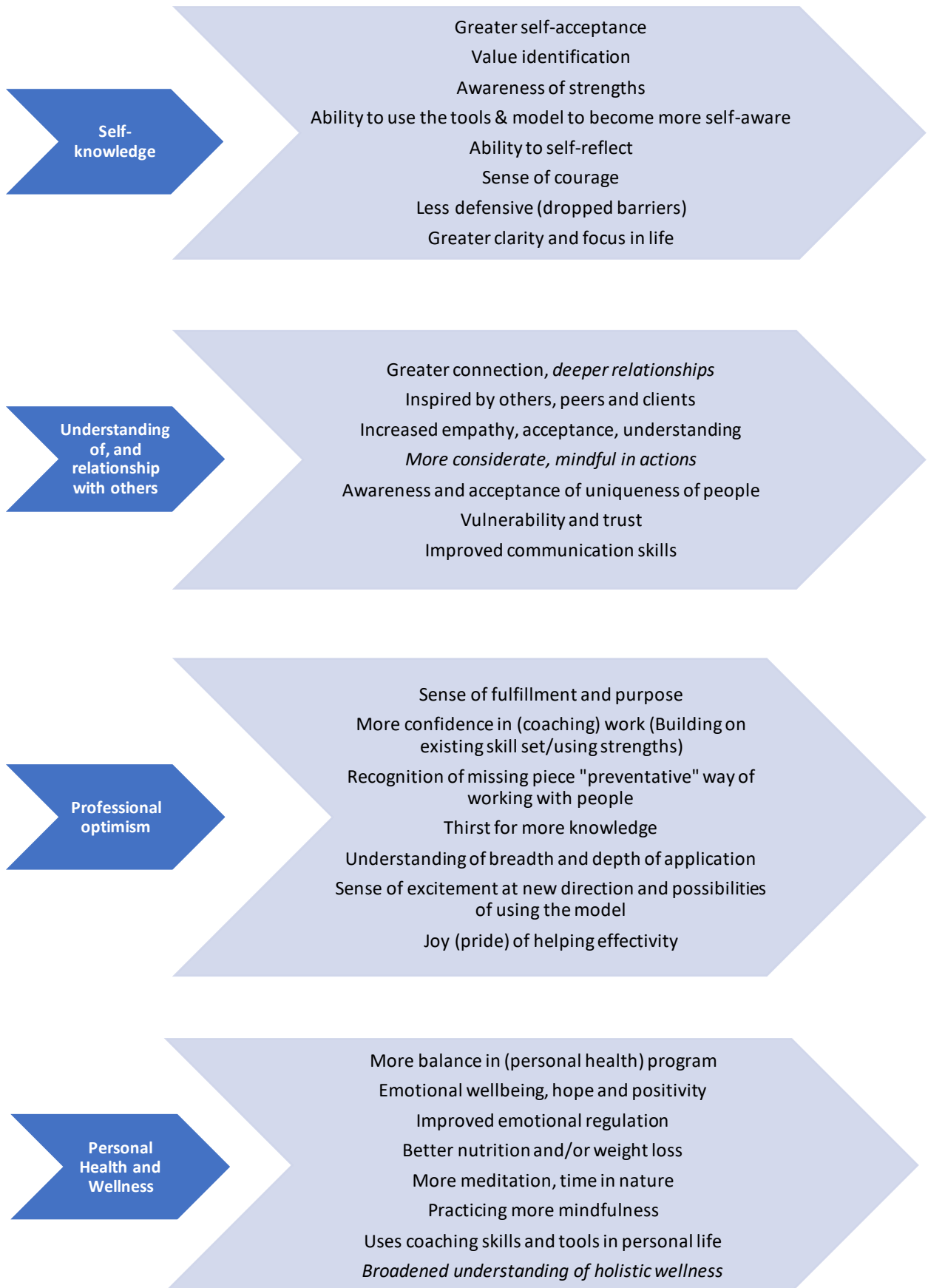


Behavioural  
benefits?

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<sup>3</sup> Those in red were later discarded as not being representative of the group

## Appendix 2 – Final themes and codes



### Appendix 3 - Participants' confirmation of benefit that related to them

Participant	8	1	2	3	4	5	6	7	total
Self-knowledge									
Greater self-acceptance	X	X		X		X	X		5
Value identification	X	X	X	X	X	X	X		7
Awareness of strengths	X	X	X	X	X	X	X	X	8
Ability to use the tools and model for the purpose of becoming more self-aware	X	X	X	X	X	X		X	7
Ability to self-reflect	X	X	X	X	X	X	X		7
Sense of courage	X	X		X		X		X	5
Less defensive (dropped barriers)	X	X							2
Understanding of, and relationship with others									
Greater connection, deeper relationships	X	X	X		X	X			5
Inspired by others, peers and clients	X	X		X		X			4
Increased empathy, acceptance, understanding	X	X	X		X	X	X		6
More considerate, mindful in actions									
Awareness and acceptance of uniqueness of people	X	X	X	X	X	X			6
Vulnerability and trust	X	X	X			X			4
Improved communication with others	X	X	X	X	X	X	X	X	8
Professional optimism									
Sense of fulfilment and purpose	X	X		X	X	X			5
More confidence in (coaching) work	X	X	X	X	X	X	X	X	8
Recognition of missing piece "preventative" way of working with people	X	X	X		X				4
Thirst for more knowledge	x	X	x	X	X	X	X	X	8
Understanding of breadth and depth of application	X	X	X		X	X			5
Sense of excitement at new direction and possibilities of using the model	X	X	X	X	X	X		X	7
Joy (pride) of helping effectivity	X	X	X			X			4
Greater clarity and focus (in life)									
Recognition that have to walk the talk	X	X	X	X	X	X	X		7
Building on existing skill set/using strengths (this was combined with more confidence in coaching work in final analysis)	X	X		X	X	x	X	X	7
Personal health and wellness									
More balance in (personal health) programme	X	X	x	X	X	X	X		7
Emotional wellbeing, hope and positivity	X	X	X	X	X	X	X	X	8
Improved emotional regulation	X	X		X		X			4
Better nutrition and/or weight loss	X	X	X		X	X			5

More meditation, time in nature	X	X	X			X	X		5
Practicing more mindfulness	x	X			X	X	X		5
Uses coaching skills and tools in personal life	X	X	X	X	X	X	X	X	8
Broadened understanding of holistic wellness	X	X	X		X	X	X		6

## **Appendix 4 – Permission letter**

CANTERBURY CHRIST CHURCH UNIVERSITY

PhD PROFESSIONAL PRACTICE

SMALL SCALE RESEARCH PROJECT

NAME OF PROJECT: AN EXPLORATION OF PERSONAL BENEFITS  
REPORTED BY STUDENTS UNDERTAKING HEALTH AND WELLNESS COACH  
TRAINING

NAME OF RESEARCHER: Fiona Cosgrove

Thank you for being willing to be considered as a participant in the above research project.

I will provide a bit of background to this project and its place in my overall research. I will then give you a full understanding of the expectations around your role so you can make an informed decision whether you wish to proceed or not. If you do, please sign the attached permission form and return it to me

### **Background of the Project**

Health and Wellness Coach training has emerged in recent years as a new approach that puts the responsibility for lifestyle change firmly back in the hands of the client, empowers them to make their choices and create a change path. The coach provides facilitative, affirming support and partners with their clients to ensure a higher likelihood of success in what can be a difficult journey.

Over the years of offering the training, Faculty Members have received reports from students of their experiencing positive, personal benefits which they attribute to the training, and this has set the wheels in motion for the current research project.

The questions I will attempt to answer are:

- What form do these personal benefits take?
- What elements of the training are responsible for this occurrence?
- Do a student's life circumstances influence their experience in any

way?

- Does a student's reason for undertaking the training influence their experience in any way?
- How can we build on those elements to heighten this impact on students?

### **Initial Pilot Project**

I first plan to meet with a small group of students individually who have identified themselves as fulfilling the criteria of believing they have experienced a positive effect from the training.

I will be looking for the themes that arise out of our conversation, in an attempt to better understand what conditions contribute to the reported personal positive benefit of the student.

I will not be measuring changes in wellbeing or other area of change, rather exploring the information that students provide with the view of taking this to a broader population and seeing if these reported effects are widespread across students in other health and wellness coach training programmes.

In order to properly examine the information provided, I will be asking for permission to record our interviews for the purposes of data analysis. Your details will remain anonymous unless I request specific permission to reveal certain aspects at a later date should it be deemed relevant and in keeping with the methodology used. Unless this is given anonymity will be protected. The interviews will take somewhere between 45 minutes and an hour and depending on your location, they will be conducted either face to face or by skype/zoom platforms. The recordings will be retained for a period of ten years.

The aim will eventually be to present the research along with the data collected in all parts of the study in appropriate contexts, academic and professional, through publications, conference presentations, teaching and so on. I will provide written findings from this research to all students on request.

### **Declaration by the research participant**

Based on the information provided, I confirm that I am willing to participate in this study. I have read and am satisfied with the arrangements as set out above and any questions have been answered to my satisfaction.

- I am participating by choice and may withdraw at any stage in the process

- I agree that extracts from my interview may be anonymously quoted in the study and possible further writing - with the guarantee that I will not at any time be identified by name title or specific geographic location
- I agree to the recording and transcribing of the interview

Signature of participant:

Date

Researcher's signature:

Date:

## Appendix 5 – Ethics form

### Ethics Release Form for Work-Based Projects

All candidates are required to complete this Ethics Release Form and to submit it to their Learning Advisor and then to PDF prior to commencing the investigation. Please note the following:

- You must demonstrate an understanding of ethical considerations central to planning and conducting your research.
- Approval to carry out research does not exempt you from the specific approval from institutions within which you may be planning to conduct the research, e.g. organisations; hospitals etc.

Please answer all of the following questions:

1. Has a research proposal been completed and submitted to the program Advisor?  
Yes      No\*
2. Will the research involve either or both of the following:
  - a] A survey of human participants  
Yes\*      No
  - b] Intervention with a cohort of human participants, and/or an evaluation of outcome of an intervention?  
Yes\*      No
3. Is there any risk of physical or psychological harm to participants (in either a control or experimental group)?  
Yes\*      No
4. Will all participants receive an information sheet describing the aims, procedure and possible risks, in easily understood language? (Attach a copy of the participant's information sheet)  
Yes      No\*
5. Will any person's treatment or care be in any way prejudiced if they choose not to participate in the study?  
Yes\*      No



6. Will all participants be required to sign a consent form, stating that they understand the purpose of the study and possible risks, i.e. will informed consent be given?

Yes                      No\*

7. Can participants freely withdraw from the study at any stage without risk or harm of prejudice?

Yes                      No\*

8. Will the study involve working with or studying minors (i.e. <16 years)?

Yes\*                      No

- if yes, will signed parental consent be obtained?

Yes                      No

9. Are any questions or procedures likely to be considered in any way offensive or indecent?

Yes                      No\*

10. Will all necessary steps be taken to protect the privacy of participants and the need for anonymity?

Yes                      No\*

- Is there provision for the safe-keeping of video/audio recordings of participants?

Yes                      No

11. If applicable, is there provision for de-briefing participants after the intervention or study?

Yes                      No

12. If psychometric instruments are to be employed, will their use be controlled and supervised by a qualified psychologist?

Yes                      No\*

13. If you have placed an X in any of the items marked \*, please provide further information on a separate sheet.

Candidate's Name: .....Fiona Cosgrove.....

Learning Advisors: .....Sarah Corrie.....

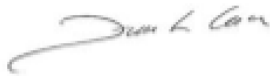
Programme: .....PHD in Professional

practice.....

Title of Research Project: ..... **AN EXPLORATION OF POSITIVE EFFECTS  
REPORTED BY STUDENTS UNDERTAKING HEALTH AND WELLNESS COACH  
TRAINING**

.....

.....



Signature of Candidate: .....

.....



Signature of Academic Advisor:

Signature of 2nd Advisor:.....

Date: .....

Any further comments:

Response to questions with an Asterix:

2a) and 2b)

The project will consist of a series of individual interviews with eight students to allow for the free expression of ideas that originate from the students rather than to measure pre-conceived factors that we assume occur.

The questions that will act as a guide for the interviews. However, these will not be adhered to strictly, and only used as a prompt if necessary.

1. Tell me about your experience of doing this training?
2. You indicated that you have experienced personal positive benefits from the training. In what ways?
3. How do you feel (if at all) that the training has influenced your own health and wellbeing?
4. How could the training have given you an even greater personal positive benefit?
5. Is there anything else that you think it would be helpful for me to know or that you would like to tell me?

2b) Although the study is not an outcome evaluation study it will be concerned with accessing, and asking participants to reflect upon, the personal impacts of the training programme.

9. None of the questions are likely to be deemed offensive or indecent. See above.

# **Chapter Three: Personal Development of Coach Trainees: A Scoping Review**

## **Summary**

Very little research exists around coach trainee experience in health and wellness coach training (HWCT). This scoping review summarises what is known about the experience of trainees in coach training programmes in any field including HWCT. It aims to answer the questions of what is known about the personal change of coach trainees during training, what factors contribute to those changes, what the literature says about the need for coaches to develop in certain ways and how they can do this, and whether trainees in health and wellness coach training have unique personal developmental needs.

PsycINFO, EBESCOhost, Web of Science, EBESCO, CCU Journals and Google Scholar were searched for relevant studies and were chosen for review based on specific inclusion criteria. The search identified 25 papers of interest. The review includes reports from research that identified particular practices that contributed to positive outcomes as well as articles that recommended the specific pursuit of health and wellness alongside personal growth for health and wellness coaches. The review suggested that personal development was as important as professional development and various positive outcomes had been reported. Methodological considerations are also presented. Further research into the specific experience of health and wellness coach trainees and a consideration of the factors that influence any positive changes would provide valuable information to those responsible for designing such training.

## **Introduction**

The objective of this literature review was to summarise what is known about the experience of students who undertake coach training programmes. The main area of interest was health and wellness coach training (HWCT), however, as this is a relatively new industry, it was likely that limited research will be found relating to that specific group of coach trainees. Therefore, the broader area of coach training was investigated.

With the coaching industry growing rapidly and health and wellness coaching (HWC) taking its place alongside more traditional coaching modalities, the experience of coach trainees is an important but relatively ignored question in this new and emerging area of literature. As coaches will be working with clients to create positive intentional change (Atad & Grant, 2020) it is of interest to understand the experience of the coach trainee and the changes that they experience during training, and in particular, what positive changes they may report. HWC is focused on creating lifestyle change and this may have an effect on coaches working in the field that differs from those in more general practice.

### ***Why the topic lends itself to a scoping review***

Given the purpose of this paper, a scoping review was deemed appropriate to answer these broader questions around what is known about, and what contributed to, personal changes of coach trainees across a variety of coaching programmes. Scoping reviews can be used to meet different objectives including examining the characteristics of evidence on a topic and summarising findings from a body of knowledge that is heterogenous in nature (Tricco et al., 2018). As no specific work appears to have been done on the experience of HWCT, a scoping review allowed identification of the types of evidence that were available in the field of coaching overall and how that research was conducted. The findings then revealed several factors that were related to the questions being asked, which then generated additional questions to explore in the literature. A scoping review served the purpose of identifying where knowledge gaps existed and what might generate further research (Arksey and O'Malley, 2005). As the review would be spread over a fairly broad area of literature with several diverse elements, and no single or precise question was being asked, a scoping review presented as the best choice. Information that sheds light on experiences reported by trainees in varied coach certification programmes was included and a consolidation of the findings that may have been reported using a wide range of methodologies.

## ***The growth and need for Health and Wellness Coaching***

The growth of many lifestyle-related illnesses and the increasing incidence of mental health issues that are adversely affecting the quality of life of so many people has highlighted the growing need for support of health and wellness for the population at large (World Health Organisation, 2018). The recent pandemic (COVID-19) has further shone light on the heightened risk of living with chronic conditions, (Centers for Disease Control and Prevention, 2021; Australian Government Department of Health, 2021) yet change does not occur easily in these complex times and people are struggling to create the level of wellness they desire (Prochaska and Prochaska, 2016). The pandemic has created urgency around the need for increased support for people living through these unique times.

HWC has emerged from the need to create more effective interventions for enabling lifestyle change to combat the rapidly growing prevalence of chronic illness, premature death from lifestyle related factors and recurring reports of stress-related conditions, referred to above. HWC aims to fill a gap in the professional services that are available to many but seem to be failing in producing lasting change (Frates and Moore, 2013). This field of coaching has been created from the intersection of two industries – ‘wellness’ and ‘coaching.’ People who were initially drawn to it were often either coaches with a strong interest in wellness, or health and wellness professionals who saw benefit in learning the skills of coaching (Arloski, 2007). HWC is a whole-person approach supporting the overall wellbeing of individuals (Yocum and Lawson, 2019) that seeks to restore autonomy, encourages client self-responsibility (Frates and Moore, 2013) and is delivered sometimes as an adjunctive treatment, but often as an independent intervention. HWCT teaches participants to collaborate and support clients in lifestyle behaviour change. Motivational interviewing is a key element in this training and HWCT is often delivered under that banner.

HWC is undergoing a process to seek better public recognition with the formation of professional associations (UK Health Coaches Association, (<https://www.ukhca.co.uk>) and Health Coaches Australia and New Zealand Association (<https://hcanza.org>). There is a growing base of literature and graduate level programmes of study that qualify it to become a profession in its own right (Brock and Brock, 2012; NBHWC, 2019; Wolever et al., 2016). In partnership with the National Board of Medical Examiners (NBME) (<https://www.nbme.org>), the National Board for Health and Wellness Coaching (NBHWC) (<https://nbhwc.org>) offers approval for eligible training programmes and Board Certification examinations for graduates of those programmes.

Coaching has been shown to produce positive results for the clients being coached in many settings – e.g. educational, organizational and healthcare (Grant, 2016a). HWC has a growing amount of literature reflecting its usefulness in many varied situations (Huffman, 2010; Mettler et al., 2014; National Health Service, 2014, Olsen, 2014; Sforzo et al., 2017; 2019). Determining whether coach trainees experience change, and how they experience that change, is the focus of this paper. The limited amount of literature on coach trainee experience has produced optimistic findings with reports from coach trainees in training programmes suggesting that they have undergone positive change during the course of their training (Atad and Grant, 2020; Cosgrove et al., 2021; Lombardo, 2020). The time seems right to discover what those changes are, what contributes to them and how this knowledge can be used to improve future training programmes.

### ***The experiences of other helping professionals***

Given the limited literature on the experience of HWC trainees, studies on training in other healthcare and helping professions may provide useful information. This literature includes research on the training of those who aim to maintain or promote physical health and those who focus on mental health.

Research has shown that medical students and psychology graduate students struggle with experiences related to their training that include burnout, compassion fatigue, associated anxiety, depression and even suicidal thoughts (Dyrbye et al., 2006; Ishak et al., 2013; Peluso et al., 2011, Rummell, 2015; Smith and Moss, 2009). When students from nine different allied health professions were questioned, they reported a high prevalence of moderate or greater depression, anxiety and stress with associated unhealthy habits such as diet choice leading to compromised physical health (Almhdawi et al; 2018).

In an attempt to find more positive findings, a search for “wellbeing of health professionals” resulted in 86 articles. It would appear from a scan of the abstracts that the majority of these focus on a lack of wellbeing (Kreitzer and Klatt, 2017; McAllister and McKinnon, 2009; McCann et al., 2013). Negative student experiences in the health and helping professions would seem to be related to time pressures, workload, having multiple roles and emotional issues (Lambert et al., 2004; Lim et al., 2011). Lack of resilience in maintaining personal and professional wellbeing was a contributing factor to their lack of wellbeing (McCann et al., 2013).

Literature that focuses on the role of therapists and counsellors often argues for the need to improve the wellness of the professions in their work and in their training (Baker, 2003; Lawson et al., 2007). Kumary and Baker (2008) suggested that counsellors are vulnerable to

burn out and stress due to the nature of their work and that trainee counsellors could be even more at risk, with compassion fatigue, vicarious trauma and burnout often caused by neglecting their own self-care and balance. Counsellors and coaches both work to support positive change in their clients yet they may not be subject to the same pressures during their respective training. Perhaps there are differences in the training of counsellors and coaches that explain this.

### ***Differences between coaching and therapy or counselling***

In the early years, a great deal of confusion and lack of clear definition existed around the field of coaching; more specifically, what coaching consisted of and what coaches did that was different to the work of counsellors or therapists (Clutterbuck, 2010; Grant, 2016a; Passmore and Fillery-Travis, 2011). It could be that coach training programmes varied to such an extent that it would have been difficult to assess whether the experience of trainees in any of the professions differed in any way. A need for a better understanding of the role of coaches prompted a series of articles attempting to compare and contrast the work of the fields (Bluckert, 2005; Jordan and Livingstone, 2013; Maxwell, 2009). Bluckert (2005) attempted to highlight similarities and differences between the professions of coaching and therapy. He stated that coaching tended to focus on moving people forward and therapy on resolving past issues - sometimes pathological – but noted that this was a general statement and not always the case, depending on the type of therapy and experience of the coach. He added that a common belief was that clients who came to coaching tended to be highly functioning whereas therapy existed for those with painful unresolved issues which he felt was misleading as exceptions exist in both cases (Bluckert, 2005). Coaching clients may well have stress or depression and clients in therapy may often present for many reasons including self-exploration or professional development (Grant, 2011, p.88). However, it would be fair to say that many more clients would present to therapy with clinical issues than a coach would normally see (Hart et al., 2001).

The skillsets of coaches and therapists differ primarily due to the need for therapists to work with clients who may have suffered distressing or disturbing events in the past. Reports of trauma or abuse may be acknowledged but not explored by coaches who do not work solely in the realm of mental health (although improvements in mental wellbeing may be a goal of the coaching journey). Therapists train for many years whereas most coach training programmes are shorter. Health and wellness coaches may at times work in a similar environment and with similar populations as a health psychologist, however, the latter will often concentrate on assessing and creating treatment plans (Wolever, 2018) whereas health and wellness coaches will focus on supporting behaviour change.



In a coaching relationship, the client carries the responsibility for decision making and the coach supports them. The coach does not wear the mantle of expert - advising, prescribing, healing pain or educating and instead, the primary focus is on creating strategies that can be actioned to achieve specific goals (Moore et al., 2016 p.2). This is by no means a complete description of the differences but suffice to say, the training of both will be directed at the population and situations they will be working with. Two general assumptions that can be made are that therapists' training will go deeper and cover more problematic issues than a coach would come across. In addition, therapists will more often carry a level of responsibility that coaches are not expected to carry (Hart et al., 2001) due to the nature of therapist's work which is often diagnostic and prescriptive.

Coaching fills a unique place in the helping professions and operates under slightly different principles and framework to other modalities of support and facilitation of positive client change. Coaches partner with clients and honour them as being the expert in their own lives, while allowing them to identify and voice their preferred outcomes - they may collaborate with other professionals (in the case of HWC), but do not diagnose or advise. Instead, coaches co-create solutions and let the client choose the direction of change (Jordan and Livingstone, 2013; Wolever, 2018).

### ***Personal development needs of coaches***

The issue of whether this influences how coaches develop during, and after training, and whether they need specific areas of growth to optimally perform their role indicates a need for further exploration to address these questions. This review will attempt to summarise what has been covered to date with a focus on the role of personal development, whilst acknowledging that this often takes place simultaneously with professional development. The integration of personal experiences into professional development is inevitable and it is helpful to consider both as they will influence our reactions, both inside and outside of our work (Neuhaus, 2011).

It has been noted earlier that the research on coach trainee experience is relatively limited yet gaining more interest. Often the focus of the literature has been on professional development and its impact on coach effectiveness. The personal change or experience of coach trainees has been reported as a secondary outcome in various studies (Grant, 2008; Ickes and McMullen, 2016; Lombardo, 2020). The majority of the papers centre around coach trainees, yet some work sheds light on the key practices that have been shown to support qualified coaches' personal growth and development and these have been referred to as they add value to this investigation.

## **Definition of terms**

A variety of terms are used in the literature being reviewed, with many having similar, although slightly differing meanings. “Appendix A” sets out the various definitions and overlaps in commonly used terms and phrases.

## **Summary and Aims**

The purpose of this review is to explore the literature and seek to answer the following questions:

- What are the documented personal changes or experiences of trainees in various coach training programmes?
- What factors have been found to contribute to these personal changes or experience of the trainees?
- What developmental needs do coach trainees have in general, to optimally support their clients?
- What are the potentially unique requirements for the development of a health and wellness coach?

## **Methods**

The methodology for this scoping review was based on the framework set out by Arksey and O’Malley (2006) and included the following five steps:

- a) Identify the research question
- b) Identify relevant studies
- c) Study selection
- d) Charting the data
- e) Collate, summarise, and report the results

## ***Protocol***

The protocol was drafted using the Preferred Reporting Items for Systematic Reviews and Meta-analysis Protocols Extension for Scoping Reviews (PRISMA-ScR) (Tricco et al., 2018). A review protocol can be obtained from the author upon request.

## ***Eligibility criteria***

Peer-reviewed journal papers were included if they were published between 2000 and 2021, written in English and reported on the experience of trainees who were undergoing, or who had completed a coach training programme. As the literature was limited, it was considered of value to include studies relating to training programmes of varying lengths and

include all types of coach training. Although the main focus was on personal change or development, studies were also included if they mentioned personal experience.

Papers were excluded if they did not fit into the conceptual framework of the study, focused on sports or athletic training or other specific sport skill where coaches are used, and definitions and way of working were not in line with coaching descriptions provided above. They were also excluded if the focus was on the result of coaching on the client rather than the experience of the coach trainee. Similarly, studies that focused purely on coaching skill acquisition were excluded.

### ***Information source***

Electronic searches were conducted between November, 2020 and June, 2021 using the databases of PsycINFO, EBSCOhost, Web of Science, EBESCO, CCCU Journals and Google Scholar. Two journals were selected for their relevance and searched using specific terms. These were Coaching: An International Journal of Theory, Research and Practice and Global Advances in Health and Medicine.

The databases were selected as being comprehensive and chosen for their notable quality, extensiveness and relevance. The search query consisted of the terms, Health and wellness coaches, Coaches, Coaching Psychologist, Coach-in-training, Trainee, Student, in combination with Training programmes, Education, Experience of trainees, Student experience, Personal change, Personal development, Personal growth.

Journal titles were initially screened and then abstracts read to narrow the large number of results down to the most relevant papers. Particular attention was given to papers that described what element of the training programme had produced reported positive change. Interviews and opinion pieces were also included if they appeared in peer-reviewed journals.

The reference list of articles was searched, and further articles obtained that had not appeared in the original searches conducted.

“Appendix B” provides an overview of the latest search of PsycINFO on 17<sup>th</sup> March, 2021.

“Appendix C(i)” includes details of author, title, coaching modality, length of programme, sample size, country the study took place in, key outcomes, elements of the programme attributed to those outcomes.

“Appendix C(ii)” provides details of papers reporting on specific elements of the programme that were deemed influential to positive experience.

“Appendix C(iii)” provides details of papers that focus on journey of health and wellness coaches in training.

## Results

The studies covered a variety of situations and a wide range of differing factors which made any kind of comprehensive summary difficult. Disparity existed in:

- The area of the coach training (life, executive, career, health etc.).
- The length of the training – ranged from a two-hour introductory workshop run in an industry-based setting, to a full qualification where graduates obtained a Master's degree in Coaching Psychology.
- The background of the participants.
- The format and content of the training.
- Size of sample.

The purpose of the studies also differed considerably in terms of what they set out to discover – most allowed the participants to express their experiences in their own words and others used pre-determined criteria (chosen by the researcher) with pre and post-test measures. Pre-determined criteria were assessed qualitatively or quantitatively or with a mixed-method design. Other distinctions included whether the study aimed to explore a specific aspect of the training and what influence it had on the outcome. By definition, investigation of subjective experience can only rely on self-report outcomes with no objective verification.

The search results were screened for relevance and additional references followed up from specific papers. In total, 25 articles all appearing in peer-reviewed journals between the years of 2007 to 2021 were included in this review with an additional four papers cited in the final section. For the purpose of this review, the literature has been divided into three areas. The first section includes studies that report specific trainee outcomes attributed to a coach training programme. The second section includes articles that focus on the effects of a specific element of the programme in terms of coach trainee experience. The third reports on what a selection of authors have recommended to enhance personal development of HWC trainees and the importance of this aspect in the work of a coach.

### ***1. What specific changes did coach trainees experience?***

Of the 12 studies reviewed that focused on specific outcomes, four focused on HWC (Collins et al., 2018; Cosgrove et al., 2021; Lombardo, 2020., Wiley et al., 2012). Two studies looked at trainees in a cognitive behavioural coaching programme (Atad and Grant, 2020; David and Cobeanu, 2016). Two studies focused on leadership or business coaching programmes (Leggett and James, 2016; Sannamari, 2008). Educational settings were the basis for three studies (Barr and Nieuwerburgh, 2015; McCusker and Welply, 2020; Nieuwerburg

and Tong, 2012) and one study investigated the impact of a career coach training programme (Jordan et al., 2017).

### ***Health and Wellness Coach training***

Of the four studies that looked at the effects of HWCT on the coach trainees, two interviewed graduates from programmes that had approval from the NBHWC for eligibility for Board Certification. Both studies involved interviews with eight graduates and asked open-ended questions about their experience. The study by Lombardo (2020) interviewed only graduates who were working with patients with diabetes and who had completed Wellcoaches' 18-week training in the US. The participants were either healthcare workers or diabetes nurses. Cosgrove et al., 2021<sup>4</sup> interviewed eight graduates from Wellness Coaching Australia's Level 3 programme<sup>5</sup> who came from diverse backgrounds (some outside of the health professions) and looked purely at the personal experience of the graduates. The study by Lombardo (2020) on the other hand, had the primary aim of discovering the impact on their professional ability, with a secondary focus on the personal outcomes. Interestingly, there were strong similarities in the themes reported by participants. Cosgrove et al. (2021) explored "personal positive benefits" reported by the participants and identified the themes of "personal health and wellness", "self-knowledge" "relationships and connection with others" and "professional optimism".

The question of what contributed to the findings in Cosgrove et al. (2021) revealed factors that included positive psychology exercises, coaching circles, variety of tools that were introduced, defining values and introspection required by coach trainees, the support of peers, passion of presenters, learning about the science of habits and the entire model taught.

The secondary question in the study by Lombardo (2020) looked at what "personal wellness outcomes" were experienced by coach trainees. The themes of "self-compassion", "mindfulness/meditation", "vision and goal achievement", "job satisfaction" and "impact on relationships" were identified. These were attributed to the expectation of course providers that coach trainees would work towards their own wellness vision during the length of the training. The overlap between what coach trainees report in the two studies is apparent and it is significant that, despite the lack of commonality in the background of trainees, location and collaboration, the findings have much in common. These two exploratory, small scale studies suggest the need for further investigation into the experience of HWC trainees with a broader

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<sup>4</sup> The writer is one of the authors of this study

<sup>5</sup> Level 3 coaching programme is the coaching component approved by NBHWC for eligibility for Board Certification and run by Wellness Coaching Australia

sample and wider range of training programmes at the same level of these two NBHWC approved certifications.

Two other studies lend limited support to the findings of Lombardo (2020) and Cosgrove et al. (2021). Wiley et al. (2012) surveyed 10 healthcare practitioners who participated in a one-day workshop that was based on motivational interviewing (an integral component of health coach training). Interviews were conducted both prior to the workshop, and four weeks after training. Together with the anticipated outcomes of improved work performance, participants described feeling less stressed, more mindful and at ease in life.

Collins et al. (2018) looked at the perceived personal benefits of 269 trainees following a six-day health coach training course run in eight Veteran Health Administration (VHA) centres across the United States. This study used a pre-post intervention group only and a follow-up two months after course delivery. Responses were received from fewer than half the participants at follow-up and the focus was on individual-level changes together with organisational-level changes. Authors suggested respondents “perceived positive changes within themselves”, which included cultivating “a mindful approach”, “mindful eating, sitting and walking”. The size of this study gives it added weight despite the loss of participants at follow-up. The detailed themes reported were very much centred around professional coaching capabilities and improvements in organisational culture.

The first two studies described in this section used trainees from programmes accredited with the NBHWC which required a curriculum that met specific criteria in terms of volume and delivery of content and ranged from 16-18 weeks of study. Both used a small sample of trainees and the data was self-reported: in one case, by semi-structured interview (Cosgrove et al., 2021) and in the second, (Lombardo, 2020) by semi-structured interview and questionnaire. Further investigation of coach trainees experience in similar programmes run by varying organisations would be needed to establish generalisation and learn more about how the individuals experienced change and what element of the programme they attributed to that change. The limitations of self-reported data from a small sample of trainees suggest that these findings can only be taken as an indication of what may be the experience of a proportion of trainees and in no way can we assume greater reproducibility and generalisability.

The second two studies, although quite different in terms of sample size, aimed to uncover the professional benefits of the training. Separating professional and personal changes is one of the biggest challenges when attempting to look at change through the lens of personal experience and there are many instances where they overlap. For example, improved self-efficacy around work performance may be perceived as a professional change or a personal

change. In addition, the length of the training should also be considered as impactful personal change is more likely with a longer involvement in the education process than a brief period of study. In the latter two cases, the training was either a one-day workshop (Wiley, 2012) or a six-day course (Collins et al., 2018). Despite the length of the training in these studies, and their focus on professional benefits they do provide some support of the notion of personal change alongside enhanced performance.

All four studies were qualitative and gave participants the opportunity to describe and report their changes experienced in their own words. The study designs were exploratory and made measurement of the impact impractical; therefore, any comparison would be problematic. While the amount of research in this area is limited and cannot be relied on to draw any firm conclusions on whether the training created personal change for trainees that could be generalised in other programmes, the findings of all four studies suggest that this is an area that warrants further research.

### ***Other modalities of Coach training***

#### **Studies using qualitative or mixed-method design**

Coach training programmes may have many different areas of focus outside of health and wellness. Due to the limited amount of research in this area, they are considered together. The following five papers contribute to the evidence gathered by asking trainees open questions to describe their experiences, rather than measuring pre-determined criteria as the subsequent studies chose to do. The findings of this first group of studies should be considered with the acknowledgement of the fact that most use a small sample and data is all by self-report, together with the limitations that the methodology inherently has, such as exaggeration or the various biases that may affect the results.

A coach development programme was the area of focus for Leggett and James (2016) who felt that little attention had been given to the possible benefits a coach might experience from being part of this training. The coaches came from a variety of industry sectors and professional backgrounds and the training did not adhere to one specific coaching model, instead teaching a broad range of approaches. The question, “What was the impact of the coach training?” gave participants the opportunity to describe benefits that covered both personal and professional aspects of their lives. Researchers interviewed 24 coach trainees and found that the benefits included a greater level of confidence in areas other than their coaching role in the organisation. This study supports the suggestion that the training benefits extend beyond the primary purpose of the training itself and puts forward recommendations regarding what

aspects of the training produced these findings, which will be referred to later. The length of the training programme was not disclosed.

In a very different setting, Van Nieuwerburgh and Tong (2013) used a mixed-methods approach to investigate the effects on secondary school student coaches who were trained to coach their peers. They conducted a quantitative assessment of the training impact on the coaches' attitudes to learning and the coaches' academic performance. Both were shown to improve. A semi-structured interview asked for coaches' perceptions of the experience of the coaching course and the impact the coaching had on their studying skills, behaviour at school and relationships at school. Most respondents reported positive impressions of the programme and enhanced learning - including learning about themselves. Increased emotional intelligence, self-confidence and improved communication were also identified as benefits of the programme. It should be noted that the results were based on a combination of the experience of the coach training and of being a coach. It would be difficult to argue that one was distinct from the other and therefore, this study contributes to the positive evidence that coach training can produce benefits for the trainee.

Two further studies used a qualitative approach to determine the outcome of coach training. Both were conducted in educational settings with the coach trainees coming from the teaching profession. One explored teachers' experience of a two-hour introductory coach training workshop (Barr and Nieuwerburgh, 2015) and the other looked at the perceptions of the participants in a 130-hour training programme held across five countries. Exploration of personal experience or change of trainees was not included. Instead, the interviews produced only information on how they would use the new skills in their work. Significantly, Barr and Nieuwerburgh (2015) attempted to report on five teachers' experience of undertaking the training and the findings documented their appreciation for the ability to learn with others, having time to think and reflect, yet failed to reveal any personal development. The second study (McCusker and Welply, 2020), while ambitious in its size and span, reported purely on competencies. As this was the aim of that study, it delivered on its purpose. It seemed that an opportunity may have been missed to explore the personal experience of the coach trainees. The question was raised by the authors as to whether the values of coaching, with its focus on interpersonal communication may not be appropriate for a school context that places a high value on performance.

One final paper using a qualitative methodology design was in the field of business coaching where Sannamari (2008) set out to examine whether a specific coach training certification developed the students' self-awareness. The study interviewed seven coaches who



were finishing or had completed the nine-month training programme and used a semi-structured approach. The study investigated whether the training increased self-awareness and responses indicated that this was the case. A further question was posed – “Did you change during the training?” Results showed that only 50% of the group reported having experienced change, yet all participants reported they had “learnt new things about themselves”. All but one reported increased self-awareness which can be considered an element of personal change. Three influencing factors that were highlighted more than others included use of a personality framework known as the Enneagram (Berkers, n.d.), the support of the group and the role of the head trainer. (The Enneagram categorises people into nine types, depending on their motivations, fears, and internal dynamics and attempts to understand people by virtue of these core emotions.)

### **Quantitative studies**

The evidence for positive outcomes from coach training programmes grows when the following four quantitative research studies are reviewed. These studies mainly measured pre-determined criteria rather than using an open-ended question approach, which allowed focus on selected criteria that self-reports of benefits may not have revealed. Conversely, this prevented the discovery of information that may have been disclosed on a more open approach.

Atad and Grant (2020) addressed the specific question of what personal changes trainee life coaches went through during their training programme. The group of 149 participants had completed one academic year of training and some came from a previous therapeutic background whereas others did not. The study used a pre-post design and was taken over a three-year period (three courses) using a selection of validated scales. The findings revealed significant increases in satisfaction with life, mindfulness, solution-focused thinking, self-insight and a need for self-reflection. This study suggested that both personal and professional changes could occur on a deep level and raised awareness of the need to understand what changes coach trainees experience, to enable continued improvement of coach training and development programmes. The researchers proposed that anecdotal reports of this occurrence needed to be investigated and suggested that coach trainees should be made aware of the possibility of these personal changes happening.

A study by Jordan, Gessnitzer and Kauffeld (2017) looked at how 57 individuals benefited from a train-the-coach course. They evaluated the effect of five months of career coach training on areas of the coaches’ personal development and uncovered reports of improved occupational self-efficacy, goal orientation and career adaptability. Once again, these findings were the result of a specific outcome measure which was intended to report on

professional development, while noting that improvements in self efficacy cross over into both professional and personal domains. This study suggested that the coach training could contribute to the personal development of the trainee, in particular in the area in which the coach training was directed. In other words, it is possible that the coach can benefit in the same areas as the person they are coaching.

The question of personal development of the trainee coach was of interest in a study by David and Cobeanu (2016). They investigated the effectiveness of a personal development component within a training course of cognitive-behavioural coaching on 88 coaches-in-training, all of whom held a Bachelor's or Master's degree in Psychology. These researchers looked specifically on whether the personal development component in training resulted in improvement in emotional regulation abilities and the impact of this on work performance. Using a mixed-method approach, findings showed that participants' emotion-regulation skills did improve along with work performance and a reduction in the level of depressed mood. These results add to the evidence that personal development can have an impact on the personal self of the coach. It was noted that other quality of life measures might have produced some interesting information, however, the objective of the study was purely to measure the change in emotional resilience after completing a coach training programme which incorporated a personal development aspect. This is a significant finding due to the potential for emotional regulation to positively affect wellbeing and as such, be classified as a central life skill.

The evidence for coach trainees experiencing growth in either personal or professional domains as well as potential shifts in their wellbeing is limited and covers a wide range of factors that make generalisability impossible. The variety of methods used make it difficult to draw any conclusions about the precise outcome, or size of impact of any outcome, for each group, training programme or model of coaching taught. All studies cited used self-report as a means of collecting evidence and sample sizes in the majority of studies were small. Given the nature of the questions explored relating to personal change, any other method of determining outcomes would be very difficult as interpersonal changes cannot be easily observed and many of the questions required a subjective response. The findings from these studies are preliminary and more rigorous evaluation is warranted in the future. The wide range of backgrounds, education, age, professional experience and length of coach training, would all prevent any firm conclusions being drawn. Nonetheless, results do suggest that changes may occur as a result of coach training that could be unique to the coaching profession. Further research looking at how specific variables such as population and length and type of coaching

training affect the experience of coach trainees will provide more insight into how these factors interrelate.

## ***2. Studies that explored a specific element of the training and the part it played in outcomes***

The second section of this review highlighted a specific element of the training and its contribution to coach trainee experience. This section included 12 research studies; one from training in the field of life coaching (Shaw and Glowacki-Dudka, 2018) and three in coaching psychology trainees, (Grant, 2008; Ntsikwe, 2016; Short et al., 2010). One study, set in a health setting, investigated the effects of peer coaching on health coach trainees (Ickes and McMullen, 2016) and another recognised the personal journey of coaches from their initial training through their career (Hullinger and DiGirolama, 2020). The final study focused on the use of formulation as a framework for monitoring and evaluation of self-care of the coach (Corrie and Kovacs, 2021). The remaining papers in this section were commentary on one or more of the areas identified as being influential in personal change (Bachkirova, 2016; Drake, 2011; Moore and Koning, 2016; Spence and Grant, 2007; Stokes and Merrick, 2018).

The findings of the studies in the previous section reported primarily on the outcomes of the coach training but also included suggested factors that had contributed to those positive outcomes. It was felt of value to include papers in this review that focused on an element of training referred to in the studies above. The following papers were included by virtue of their specific relevance to the question at hand rather than a comprehensive search on each term which would potentially become separate scoping reviews. It should be noted that these papers were identified from the references on the initial reports of outcomes from specific research. The studies will be presented according to the aspect of training on which the study focused.

### ***Coaching the coach trainee***

The value of peer coaching being used in various settings outside of coach training has been explored in the literature (Almhdawi, 2018; Ickes and McMullen, 2016; Swarbrick et al, 2016), yet limited work has been done on the question of whether coach trainees benefit from being coached during the training programmes. According to Grant (2008), Ladyshevsky (2010) and Short et al. (2010), peer coaching can have potential value when this type of experiential learning is added to, or forms part of a coach training programme. Spence and Grant (2007) found that coach trainees benefited more by being coached by professional coaches, rather than peer coaches in terms of goal attainment. This is not a surprising finding

due to the difference in professional ability of the two groups. Literature on peer coaching can be found in many professions and used for various reasons, with some differences in its delivery. Studies have produced a range of results and can be difficult to compare once again, due to the heterogenous nature of the studies, yet provide useful information in determining potential value of this process.

Peer coaching has been used within the teaching profession for some years (Zwart et al., 2007) and is endorsed by the UK Department of Education (DfEE, 2001), however, the process had more in common with mentoring than coaching due to the nature of the interaction and short amount of, or lack of training of the peer coach. Similarly, peer coaching has been used in the health professions to facilitate learning (Ladyshevsky, 2010). Evidence exists to suggest that peer coaching that is based on a more collaborative relationship can provide benefits to the coach as well as the coachee (Ladyshevsky, 2006; Laske, 2006). The level of training (if any) the peer coach has in delivering coaching, would likely affect the quality of the experience. In many cases it would appear that this is not an integral part of the intervention (Ladyshevsky, 2010).

Two of the studies focused on what effect peer coaching had on the trainees as they learnt to become coaches. Short et al. (2010) looked at the experience of 32 third year undergraduate psychology students who all had coach training over a 12-week period. The study looked at three outcomes – psychological distress and interpersonal problems (measured as one) and satisfaction with the peer coaching intervention which consisted of five sessions. Results showed that the peer coaching group had less increase in psychological distress during a stressful period than the control group experienced. Although no participants described the coaching as having been “very effective”, 72% found it to be “quite effective” or “moderately effective”. The study provides limited support for the use of peer coaching by students who receive training over an extended period of time (12 weeks) and delivered to their peers. It did not, however, investigate the effect on student wellbeing or even the experience of the coach. Although there is evidence to suggest that professional coaching is more effective for coach trainees than peer coaching (Spence and Grant, 2007), this does not negate the value of peer coaching and also ignores the potential for the student providing the coaching themselves to experience benefits from this form of experiential learning.

A study in the field of life coach training looked at the effects of mandatory peer coaching with trainees coaching each other over a 10-12 week period as part of the programme (Grant, 2008). The programme was a Master’s level Coaching Psychology degree, and the 29 subjects came from a variety of backgrounds. The study was focused on measuring change in

a specific area, yet qualitative data was collected by asking participants to write about how they benefited from the (personal) coaching programme. Results suggested that trainees experienced benefits of increased goal attainment, reduced anxiety, increased cognitive hardiness and enhanced personal insight. Although findings support the suggestion that coach trainees can experience personal benefits, mandatory participation was seen by some as a negative aspect, and this raises the question of whether coach trainees might respond differently to a voluntary coaching programme. On the other hand, it has been proposed that coach trainees who are not willing to have personal coaching are unlikely to understand the position of the client (Bachkirova, 2016). Interestingly, psychological wellbeing did not appear to improve, and it was suggested that a “goal-focused” coaching programme may not facilitate this element of self-development. It would appear that peer coaching could have value in enhancing the experience of coach training provided the peer coaches have received sufficient training to work as such and the programme is introduced in a way that prevents participants from feeling coerced into the coachee role.

Whether the coaching is delivered by peer coaches or professionally trained coaches, several authors argue strongly for the need for coaches to be coached as they learn and work in the field. Bachkirova (2016) and Hawkins and Smith (2013) supported this as an important part of self-development.

Stokes and Merrick (2018) explored the area of coaches being coached and noted that little importance had been placed on this element of coach development. They surveyed 80 coaches and found that only 28% of them were being coached, whereas 56% of them believed that being coached should be part of their development.

Further research into the experience of coach trainees included an exploration of the impact on health promotion students who were trained and acted as health coaches (Ickes and McMullen, 2016). The students then took part in a lifestyle modification programme held on campus, delivering health coaching to students with obesity. The area of interest lay in what effect this integrated experiential learning element would have on the students who received the training and then coached others. Results showed increases in self-efficacy in using the skill set and increased knowledge, yet no reports of personal change were recorded. These findings suggest that the experience of acting as a coach during their training has some value in increasing self-efficacy – perhaps an unsurprising outcome.

## ***Reflective practice***

As a contrast, what is often a solitary practice, the role of self-reflection has been put forward as being essential for developing coaches (Drake, 2011; Jepson, 2016). The terms “reflection” and “self-reflection” and “critical self-reflection” are often used interchangeably and for the purpose of this review, are considered as one. The model of critical self-reflection originates in adult learning theory and is relevant to the coaching context (Dewey, 1910; Schon, 1983). Being able to continually question, adapt and seek opportunities for growth are key elements in the development of a coach and often occur as a result of self-reflection (Grant, 2008, 2011; Leggett and James, 2016; Passmore and Fillery-Travis, 2011; Shaw and Glowacki-Dudka, 2018). Nonetheless, it is notably missing from the list of competencies developed by the International Coaching Federation (2019) which focus more on “in the moment” abilities. Reflective practice involves considering any beliefs or prior knowledge in the light of what has caused them to arise and the influence these may have on the situation at hand (Dewey, 1910; Schon, 1983). Leggett and James (2016) suggest that new coaches be encouraged to adopt a structured reflective process where their practice is examined, discussed and a greater understanding of certain situations can be achieved.

Drake (2011) developed a Mastery window describing four stages in coach development that lead ultimately to a level of mastery that considers the personal maturation of the coach. He emphasised that coaching is both a science and an art and the artistry is something that cannot necessarily be regulated or assessed by standards. He stresses that a deeply reflective practice is needed to be able to integrate the knowledge that comes from the competencies that are taught and assessed to foster the maturity that will enable a coach to improve and become masterful. Drake proposed that when coaches engage in reflective practice, they gain greater awareness of their own “patterns, preferences and biases”.

A study by Ntsikwe (2016) explored the process of self-reflective practice, to understand its role and what strategies were employed by students when working towards goal attainment. Ten students who were undertaking a module in Coaching Psychology as part of a Master’s Degree in Industrial Psychology, were instructed to engage in six weeks of self-coaching as part of an experiential learning assignment. During this time they were asked to set goals and keep a personal journal reflecting on their journey towards these goals. Key findings that came out of the themes identified from personal journals were higher levels of insight and self-awareness as a result of deep personal reflection, together with goal attainment. The depth of self-reflection would depend on how well the participants knew themselves to begin with, which creates difficulty in determining the extent of any change. Improvements in

being able to identify ways of overcoming obstacles and addressing resistance were also reported. Although this study did not set out to investigate personal change in coach trainees, it did reveal to a certain degree, the value of self-reflective activities in personal development and goal attainment. One could reasonably assume that achievement of goals represents a certain level of (positive) personal change, depending on the nature of the goals which was not stated in this study. The self-coaching element of the learning assignment was again mandatory, which may have resulted in compliance being the instigator and self-reports being made in a bid to please assessors.

A study by Shaw and Glowacki-Dudka (2018) explored the effect of critical self-reflection during the course of life coaches' work. Five life coaches were asked to take part in an eight week examination of their reflective practice by completing questionnaire and journal summaries after each coaching session. At the end of the study, they were interviewed about their experience and asked how they benefitted and the value they saw in the activity. Responses revealed enhancements in their coaching skills and coaching relationships, as a function of performing various self-reflection activities. On a more personal level, the coaches also reported becoming more aware of the importance of self-care, with coaches acknowledging the value of engaging in healthy lifestyle habits such as getting enough rest, hydration, and not over-scheduling and the impact on their coaching practice when these areas were neglected. Participants noted that, although they had experience in self-assessment with mentors as part of their coach training, they had not been using a systematic method of self-evaluation before this study. All reported a sense of "slowing down" and "becoming more focused". The participants found that the self-reflection activity helped them understand their own assumptions and experience and deepen their thinking. It was noted of interest that the coaches became aware of their lack of self-care at times and how this had an influence on their coaching practice. This supports the contention that personal experience is closely related to professional practice and suggests that development in both domains must be given equal consideration. The implications for ongoing professional (and personal) development give weight to the value of formal self-reflective practices. This study did not specifically look at coach trainees but was included due to the novel practice of formal self-reflection that participants engaged in and the contribution of its value to coach development.

A final study in this section of the review took the form of a series of qualitative interviews with three groups of coaches of various levels of experience and background. The aim was to investigate the journey "through the lens of professional development, expertise and "a way of being" (Hullinger and DiGirolama, 2020). The study had relevance to this

review as it was founded on the belief that every coach's journey starts when they enter a training programme and as they work with clients, they begin their own self-exploration, often experiencing "profound shifts". Information was sought on each coach's background, their views on coaching, professional development activities, perspectives on how coaches develop and continuing education. The themes that were reported included amongst other things, the need for self-development, being open to change within themselves and engaging in reflective practice. Examples of reflective practice included a broad range of activities such as yoga, mindfulness, meditation, self-care, physical activities, spiritual practice, therapy, observing life, getting into nature, being curious and experimenting. There was a significant argument for the need for self-care which included maintaining a degree of holistic wellbeing - mental, emotional, physical and spiritual, and one suggestion was that coaches should have counselling. The term "a way of being" featured strongly in this paper and is supported by Bachkirova in 2016 who wrote of the importance of the self of the coach. This will be discussed in the next section. Appendix D provides a summary of the personal changes that were reported.

Leggett and James (2016) supported the argument for coach training programmes to encourage self-awareness and trainees gaining a deeper self-understanding, in the same way that coaches facilitate this process for their coachees.

Self-reflection has long been a recommended part of becoming and working as a therapist (Bennett-Levy and Finlay-Jones, 2018) and it has been cited as crucial for the continued growth of the coach, both during and after training (Drake, 2011; Laske, 2006). In support of this argument, Grant (2011) advocates the development of reflective practice as a core skill in the training of coaching psychology practitioners.

### ***The role of "self" in coaching***

The foregoing reports from the literature have been chosen as their findings have relevance to the changes a coach trainee may experience on a personal level. What is not yet clear is what part the personal element plays in coach development and ultimately in the coaching relationship. Is it just a matter of using a skill set or does the individuality of the coach have a large impact? The role of the coach as an individual has been addressed in depth by Bachkirova (2016) who suggested that the coach be seen as an "instrument" in the coaching process, requiring a high level of self-understanding and self-care to enable best use of this personal element that goes beyond, yet has as much impact, as skills and knowledge. The author points out that the way coaches present as individuals combines with the model of



coaching they are using to create a unique and authentic coaching experience for both coach and coachee.

Bachkirova (2016) argues that three conditions are required to enable good use of the self in the coaching process. The first is for the coach to develop their own unique philosophy of coaching that brings into play their personal values and beliefs. This can only be achieved by being coached, or in the absence of that opportunity, by self-reflection. The second condition is the self-care of the coach with the aim of preventing burn out, so often experienced in other helping professions (Corey et al., 2014). The third condition is for coaches to be aware of self-deception and attempt to minimise it, while helping clients to do the same. All three conditions could be important considerations for coach training organisations. Interestingly, other than a reference to supervision, Bachkirova does not offer suggestions for self-care.

The potential for burnout of coaches has not been addressed in the literature yet it is possible that “emotional depletion” can occur in coaches, and perhaps by means of a different process to the challenges that counsellors face. Counsellors will often deal with negative emotions of their client and their way of working requires them to spend time in helping a client explore these emotions whilst staying with them (Bachkirova, 2016). Coaches on the other hand may become depleted by having to maintain a positive stance and optimism which has been referred to as “emotional labour” (Hoschild, 2012). With this in mind, self-care of the coach trainee takes on added importance. Whether the current coach training protocols encourage the development of self and give sufficient attention to this aspect in training is an area worthy of further research. Similarly, the potential for coaches to burn out and whether they can recognise the warning signs is relatively unexplored.

A possible solution to monitoring and promoting coach wellbeing was proposed by Corrie and Kovacs (2021). They suggested that the use of formulation as a framework for supporting coaches in developing self-care practices could be a useful addition to a coach’s skillset. They argued that self-care should be recognised as a core competency in coaching and seen as a priority in coaching research, whilst recognising the limitations that might exist for inexperienced trainee coaches being capable of using formulation effectively and raising the question of how it could be taught, monitored and evaluated. If the notion of the “self” of the coach being the main instrument of coaching, as proposed by Bachkirova (2016), is acknowledged, then self-care becomes a matter of great importance and worthy of consideration by training providers.

### ***Discovering professional (and personal) identity***

Closely related to the concept of developing the “self” of a coach trainee is the establishment of a professional (and personal) identity which can be another potential challenge. This is made more complex when the following are considered. Coaching is an emerging profession and definitions are still unclear (Du Toit, 2014; Moore and Koning, 2016). Furthermore, the coach trainee often comes from a previous professional background. Leggett and James (2016) proposed that the coach trainee should be encouraged to find their “true self” particularly when many coach trainees are adding coaching to a former professional identity and are “layering” the role of coach on top of this prior identity (p. 58), noting that the transition may require a degree of attention in training. The concept of the identity of the coach has been raised by several authors (Drake, 2011; Moore and Koning, 2016).

Moore and Koning (2016) explored how we create a sense of identity when going through a period of uncertainty – in this case, they were referring to trainees in relatively long term coach training at Master's level. They state that learning will be influenced by three things – one’s personal background and experiences, perspectives of relevant others and specific experiences before and after training courses, and work or educational settings. The research reported on the narrative of four coach trainees, one of whom was the main author of that paper. Support was given to the view that the combination of the variety of personal and professional backgrounds of coach trainees and differing approaches in theory and techniques makes defining coaching difficult and therefore defining an identity more complex. Drake (2008) stressed the importance of the need for coaches to incorporate both the role of scientist-practitioner and artist and have the ability to adapt, be flexible and agile. This may then enhance their work with clients whose goals and the values they are based on, may not be measurable or predictable.

Concern has been expressed over the growth and development of structured standards and codes of practice relating to coaching practice that may lead to certain elements discussed above being given less emphasis in training (Du Toit, 2014; Laske, 2006; Hullinger and DiGirolama, 2020; Moore and Koning; 2016). It has been argued that the personal maturity and awareness of a coach require greater attention when programmes are being developed with the personal development of the coach being at the forefront (Bachkirova, 2016; Bluckert, 2005; Drake, 2011; Du Toit, 2014; Hullinger and DiGirolama, 2020; Lane and Corrie, 2006; Laske, 2006; Moore and Koning, 2016).

### ***3. Proposed specific requirements of professional/personal growth for health and wellness coaches.***

What has become evident from the review above, the question of whether HWC has requirements in coach training that meet personal development needs of a new coach who may work in the healthcare field, is as yet unanswered. HWC is a relatively new branch of coaching and as can be seen from this review, the literature around any coach trainee experience is fairly limited. The number of HWCT programmes continues to grow (Kreisberg and Mara, 2017) and leaders in the field have put forward their views on what they believe could be the unique needs of the trainees. Evidence that can inform practice, or in this case the development of training programmes, can be collected in a variety of ways. It has been argued that there is value in both empirical evidence, but also professional wisdom which is made up of experience, knowledge and judgement. Indeed, the voice of informed practitioners must continue to be heard (Grant, 2016b, p.82). In the context of this review, that voice would include coach educators. Grant (2016b) stated that a literature review would often seek the research that is evidence-based yet not give sufficient weight or attention to those papers that are written by experienced practitioners who are sharing their recommendations around a topic. This might be applied to the experience of, and recommendations for, coach training.

The final section of this literature review includes views expressed by several practitioners who report on recommendations of what should be included in HWCT. Their suggestions go beyond skill and knowledge acquisition but emphasise the importance of personal development (Arloski, 2007; Broadbear and Broadbear, 2018; Lawson, 2013; Snyder et al., 2013).

In 2018, Broadbear and Broadbear raised the issue of the unique challenges that undergraduate students in HWCT might experience, acknowledging that to become a coach in this field necessitated both personal and professional growth to acquire the complex abilities that are involved in the profession. The authors commented that trainees needed to “passionately pursue” health and wellness for themselves, yet at the same time, set this aside while allowing clients to find their own passions and goals. They claimed that the journey to becoming a health and wellness coach for undergraduates (as opposed to mature learners or post-graduate students) involved considerable challenge and personal change, and the need for scrutiny of programme design was a recommendation for future research. (Whether the requirements of training for undergraduates is different from that of more mature professionals coming from other field and previous careers is yet unknown although it is likely that some similarities will exist.) HWC appears to have an additional requirement of trainees than that

of coaching in other fields – the need to be on their own health and wellness journey; or at least “committed to living the healthiest lifestyle possible” (Arloski, 2007, p.62).

Moore (2013) refers to health and wellness coaches developing their “whole selves” by engaging in self-care. By understanding the many parts of themselves, they can then bring this to the coaching relationship and help clients develop in the same way. Once again, self-reflective practice is the means to achieve this level of understanding and growth.

In 2013, Snyder et al. interviewed leaders in the field of HWC and enquired about the need for self-awareness and personal growth of the coach and whether these attributes could (or should) be taught. The unanimous response was that coaches needed to continually challenge themselves to grow, and that necessitated a high degree of self-awareness and self-knowledge. Suggestion of methods to encourage this growth included mindfulness practice, reflective journals, self-observation, being coached and experiential learning. All agreed that coach trainees should go through the experiential process of being a client, to understand and work effectively with people around health-related goals. This echoes what has been stated earlier.

Lawson (2013) supports this claim and refers to “the need for a lifelong practice of personal development work using whatever tools, skills and resources are necessary over time”. She states that health and wellness coaches must continually “walk their talk” with their own wellbeing and in doing this, be able to support and nurture the wellbeing of others” (p.7). Lawson’s concern is that the very heart of HWC could be lost if coaches were only to focus on the core process, practices and skills. Instead, the importance of engaging in a relationship that allows healing in an atmosphere of safety is what will allow HWC to bridge the gap between a broken medical system and a “new horizon of holistic health and well-being” (p.6).

These accounts again suggest that HWCT is a complex and intricate process and programmes that look beyond the standard coaching curricula will be required in the future. Behavioural health is the main concern of health and wellness coaches who need a combination of “clearly defined knowledge and skills” (NBHWC, 2019) to support sustainable change and work in a different world to executive and life coaches. The training involves helping these coaches achieve a high level of self-awareness and personal growth similar to that recommended for all coach trainees, however, from the papers that have been reviewed, it would appear that growth might also need to include a degree of personal health and wellness.

## Discussion

This review comes from a wide range of sources covering a great variety of training programmes, methodologies and background and number of participants. The aim was to bring together current thinking of what changes a coach trainee may experience and what may contribute to these changes.

The picture that emerges from this review is one that provides support for the contention that coach trainees can, and often do, experience positive changes in themselves while learning a new skill set and growing in professional self-efficacy (Grant, 2008; Ntsikwe, 2016; Shaw and Glowacki-Dudka, 2018; Short et al., 2010). What is striking is that regardless of the type of coach training, the experiences revealed common elements of change that were reported across several studies. These recurring themes included more mindfulness practices (Atad and Grant, 2020; Collins et al., 2018; Lombardo, 2020; Wiley et al., 2012); positive impact on relationships with self and others (Cosgrove et al., 2021; Lombardo, 2020; Shaw and Glowacki-Dudka, 2018); improved personal health and wellness and awareness of the need for self-care (Cosgrove et al, 2021; Shaw and Glowacki-Dudka, 2018); greater self-knowledge and self-awareness (Atad and Grant, 2020; Cosgrove et al, 2021; Grant, 2008; Ntsikwe, 2016; Sannamari, 2008); lowered stress levels and anxiety (Grant, 2008; Wiley et al., 2012); greater level of confidence (Jordan et al., 2017; Leggett and James, 2016); job satisfaction, professional optimism and work performance (Cosgrove et al., 2021; Jordan et al., 2017; Leggett and James, 2016; Lombardo, 2020; Shaw and Glowacki-Dudka, 2018); increased emotional intelligence and regulation skills (David and Cobeanu, 2016; Van Nieuwerburgh and Tong, 2013); goal achievement (Grant, 2008; Lombardo, 2020; Ntsikwe, 2016). Personal changes that were mentioned only once included finding a new identity (Leggett and James, 2016); increased self-compassion (Lombardo, 2020); clearer vision (Lombardo, 2020); better leadership behaviour (Leggett and James, 2016); study skills (van Nieuwerburgh and Tong, 2013); improved communication skills (Van Nieuwerburgh and Tong, 2013); increases in satisfaction with life (Atad and Grant, 2020); solution-focused thinking (Atad and Grant, 2020); goal orientation (Jordan et al., 2017); career adaptability (Jordan et al., 2017), and reduction in depressed mood (David and Cobeanu, 2016). It should be noted that the geographical location of training programmes under review was very broad, with results coming from 20 different nations with virtually all continents represented, giving a degree of robustness to the evidence.

The second major finding of this scoping review is that there appears to be recurring themes around certain elements of the training programme that might contribute to these

changes. Five themes were identified as: receiving coaching, self-reflective practice, becoming more self aware, the development of the coach's self and the process of discovering a personal identity (Bachkirova, 2016; Grant, 2008; Leggett and James, 2016; Moore and Koning, 2016; Shaw and Glowacki-Dudka, 2019).

Despite the existence of some promising results, all findings must be interpreted with caution because of the inherent limitations of self-report. Significantly, the studies differed greatly in many key features. They were conducted in a broad range of countries with length of training varying from 2 hours to 9 months. This alone shines light on the varying ways that coach training is delivered and raises questions about the quality of content, end results and perhaps the need for more consistency in how coaching is taught. The different cultures would conceivably play a part in both expectations of the coach trainee and their experiences. It is fair to surmise that time spent in learning to coach would have contributed to the depth of personal change experienced. There are still many unanswered questions about the influence of differences between programme participants, as well as the quality and quantity of training mentioned above. There was little attention given to the effect of any of these factors. In addition, the impact of prior work and life experience might have significance on coach trainee experience as was shown by Atad and Grant (2020) who found that trainees with a prior background in psychotherapeutic work experienced positive change but less than those who came to the coach training programme with no therapist experience.

It became evident that several leaders in the field were concerned that the existing coach training protocol may have limitations in optimising a coach's development. This could be due to the emphasis on structure, standards and theory, with the need for flexibility and intuition and the growth of the coach as a person being neglected. It was felt that personal development should be given as much focus as professional development (Broadbear and Broadbear, 2018; Drake, 2011; Laske, 2006; Moore and Koning, 2016). It has been argued strongly that a coach's role is as much about "being" as "doing" (Bachkirova, 2016; Hullinger and DiGirolama, 2020) and the process of discovering the identity of their "true self" can be complex yet important (Leggett and James, 2016; Moore and Koning, 2016). While experiential learning is identified as being an essential part of the training for coaches, self-experiential learning would also appear to be important (Leggett and James, 2016).

The relatively new field of HWC is under-researched compared to other forms of coaching. Coach trainees could potentially require unique experiences in their training journey and the recommendations of several leaders in the field point towards this possibility (Arloski, 2007; Hullinger and Girolama, 2020). They emphasise the need for health and wellness coach

trainees to be on their own health and wellness journey and to live a life that creates optimal health. It is unclear whether expectations of training should include a focus on supporting the coach trainees' personal health and wellness behaviours or if this is something that will either occur naturally or remain the responsibility of the trainee themselves. The picture that emerges from the accounts provided above, is one of strong opportunities for HWCT providers to create programmes that incorporate a focus on the coach trainees' personal development and encourage them to live the healthiest life possible. A potential recommendation might be for one element of the programme to focus on the coach trainees' chosen areas of change in their health and wellness behaviours. The curriculum could then include opportunities for them to pursue these goals, using elements identified above – the opportunity to be coached, to engage in self-reflection, self-care and personal development that include a focus on this aspect of self. Further investigation will allow a greater understanding of the factors that influence the experience of the coach trainee and whether these aspects are being addressed. It is possible that development of coach trainees and the personal changes from which they may benefit, could be achieved by the inclusion of personal coaching, self-reflective practice, and documented self-care practices. It is likely that this will vary depending on experience, stage of life, reason for undertaking training, gender, country of origin and state of health to name a few yet unknown influential factors. Without seeking out further accounts of these experiences, it will be impossible to gain an understanding of how training programmes can be developed to provide the growth of the coach as recommended and reported in this review.

## **Conclusion**

Initially, the purpose of this review was to focus on the effects of HWCT on trainees. Due to a paucity of work done in that field, the review was broadened to include coach training more generally. The findings highlighted the need for further research around the question of trainees' experience and specifically what unique needs, if any, health and wellness coaches have to develop fully as a coach and work with others to support them in lifestyle change. Research suggests that personal development of the coach is as important as professional development with the field of HWCT potentially having some unique requirements.

Further research into the experience of coach trainees would support the development of training programmes that not only meet professional standards and deliver measurable competencies but lead to the personal development of the coach. This would allow for effective performance of the inherently flexible, intuitive work that is required and can be most effectively provided by a coach who has maturity, self-awareness and the ability to reflect

deeply on their practice. This review has introduced some important elements of coach development which would benefit the long-term wellbeing and professional longevity of those working in the field. It is possible that health and wellness coaches may have some unique requirements in their work that necessitate greater attention in training, however, it is evident that self-care is a priority for all coaches, whatever the field they work in. These areas are receiving increased attention in the light of a universal deterioration of both physical and mental wellbeing and the demand for coaches to work to support the population at large. The needs of the coach trainee should not be neglected but instead follow the same principles of the “whole-person” approach that is being promoted so avidly in the medical field (Jonas and Rosenbaum, 2021).

## References

- Almhdawi, K.A. Kanaan, S.F., Khader, Y., Al-Hourani, Z., Almomani, F., & Nazzal, M. (2018). Study-related mental health symptoms and their correlates among allied health profession students. *Work*, 61(3), 391-401. <https://doi.org/10.3233/wor-182815>
- Arksey, H., & O'Malley, L. (2005). Scoping studies: Towards a methodological framework. *International Journal of Social Research Methodology*, 8(1), 19-32. <https://doi.org/10.1080/1364557032000119616>
- Arloski, M. (2007) *Wellness Coaching for Lasting Lifestyle Change* (p. 59). Duluth, MN: Whole Personal Associates, Inc.
- Atad, O. I., & Grant, A. M. (2020). How does coach training change coaches-in-training? Differential effects for novice vs. experienced ‘skilled helpers’. *Coaching: An International Journal of Theory, Research and Practice*, 1(17). <https://doi.org/10.1080/17521882.2019.1707246>
- Australian Government Department of Health (2021) *Coronavirus (COVID-19) advice for people with chronic health conditions* <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/advice-for-people-at-risk-of-coronavirus-covid-19/coronavirus-covid-19-advice-for-people-with-chronic-health-conditions>
- Bachkirova, T. (2016). The self of the coach: conceptualization, issues and opportunities for practitioner development. *Consulting Psychology Journal*, 68(2), 143-156. <https://doi.org/10.1037/cpb0000055>
- Bager-Charleson, S. (2014). *A reflexive approach: doing practice-based research in therapy*. 117 Sage Publications



- Baker, S. (2003). A prospective longitudinal investigation of social problem-solving appraisals on adjustment to university, stress, health, and academic motivation and performance. *Personality and Individual difference*, 35(3), 569-591
- Barr, M. & van Nieuwerburgh, C. (2015). Teachers' experiences of an introductory coaching training workshop in Scotland: An interpretative phenomenological analysis. *International Coaching Psychology Review*, 10(2), 191-204.
- Berkers, E., n.d. Enneagram Tests (free). [online] Eclectic Energies.
- Bennett-Levey, J. & Finley-Jones, A. (2018). The role of personal practice in therapist skill development: a model to guide therapists, educators, supervisors and researchers. *Cognitive Behaviour Therapy* 47(3), 185-205. <https://doi.org/10.1080/16506073.2018.1434678>
- Bennetts, C. (2003). Self-evaluation and self-perception of student learning in person-centred counselling training within a higher education setting. *British Journal of Guidance & Counselling*, 31(3), 305-323. <https://doi.org/10.1080/0306988031000147901>
- Bluckert, P. (2005). The foundations of a psychological approach to executive coaching. *Industrial and Commercial Training*, 37(4), 171-178. . <https://doi.org/10.1108/00197850510602060>
- Broadbear, J., & Broadbear, B. (2018). Novice Health and Wellness Coaches: Implication for Professional Preparation. *Pedagogy in Health Promotion*, 4(3), 178-183. . <https://doi.org/10.1177/2373379917735344>
- Brock, V. G., & Vikki G. Brock, P. (2012). Sourcebook of coaching history. CreateSpace.
- Cashman, K. (2009) *Leadership from the inside out: Becoming a leader for life*. San Francisco: Berrett-Koewhler
- Centers for Disease Control and Prevention (2021). Certain medical conditions and risk for severe COVID-19 Illness <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>
- Cheng, M.; (2015). Critical Self Reflection. *Transition Skills and Strategies* Retrieved from <https://www.enhancementthemes.ac.uk/docs/ethemes/student-transitions/critical-self-reflection.pdf> 21/6/21
- Clutterbuck, D. (2010). *Coaching reflection: the liberated coach*. Informa UK Limited. . <https://doi.org/10.1080/17521880903102308>
- Collins, D. A., Thompson, K., Atwood, K. A., Abadi, M. H., Rychener, D. L., & Simmons, L. A. (2018). Integration of Health Coaching Concepts and Skills into Clinical Practice Among VHA Providers: A Qualitative Study. *Global Advances in Health and Medicine*, 7, 2164957X18757463. <https://doi.org/10.1177/2164957X18757463>

- Corey, G., Corey, M.S., Corey, C., & Callanan, P. (2014). *Issues and ethics in the helping professions* (9<sup>th</sup> ed.). Belmont, CA: Brooks/Cole.
- Corrie, S. & Kovacs, L. (2021): Addressing the self-care needs of coaches through the use of formulation, *Coaching: An International Journal of Theory, Research and Practice*.  
<https://doi.org/10.1080/17521882.2021.1926523>
- Cosgrove, F. L., Corrie, S., & Wolever, R. Q. (2021). An exploration of personal benefits reported by students of a health and wellness coach training programme. *Coaching: An International Journal of Theory, Research and Practice*. <https://doi.org/10.1080/17521882.2021.1890167>
- David, O. A., & Cobeanu, O. (2016). Evidence-based training in cognitive-behavioural coaching: can personal development bring less distress and better performance? *British Journal of Guidance & Counselling*, 44(1), 12-25. .  
<https://doi.org/10.1080/03069885.2014.1002384>
- Dewey, J. (1910). *How we think*. Boston, MA: DC Heath.
- Drake, D.B. (2008) Finding our way home: coaching's search for identity in a new era. *Coaching: An International Journal of Theory, Research and Practice* 1(1), 16-27.  
<https://doi.org/10.1080/17521880801906099>
- Drake, D. B. (2011). What do coaches need to know? Using the Mastery Window to assess and develop expertise. *Coaching : An International Journal of Theory, Research & Practice*, 4(2), 138-155. <https://doi.org/10.1080/17521882.2011.596486>
- Dyrbye, L. N., Thomas, M. R., Huntington, J. L., Lawson, K. L., Novotny, P. J., Sloan, J. A., & Shanafelt, T. D. (2006). Personal life events and medical student burnout: A multicenter study. *Academic Medicine*, 81, 374–384. <http://dx.doi.org/10.1097/00001888-200604000-00010>
- Du Toit, A. (2014) *Making sense of coaching*. London: Sage.
- Frates, B. & Moore, M. (2013). Health and wellness coaching skills for lasting change. In J.M. Rippe (Ed.), *Lifestyle Medicine* (2<sup>nd</sup> ed.) 343-360. New York: CRC Press.
- Friedman, A. & Phillips, M. (2004) Continuing professional development: Developing a vision. *Journal of Education and Work*, 17:3, 361-376,  
<https://doi.org/10.1080/1363908042000267432>
- Grant, A. M. (2008). Personal life coaching for coaches-in-training enhances goal attainment, insight and learning. *Coaching: An International Journal of Theory, Research and Practice*, 1(1), 54-70. <https://doi.org/10.1080/17521880701878141>
- Grant, A.M. (2011) Developing an agenda for teaching coaching psychology. *International Coaching Psychology Review*, 6(1), 84-99.

- Grant, A. M. (2016a). What can Sydney tell us about coaching? Research with implications for practice from down under. *Consulting Psychology Journal*, 68(2), 105-117. <https://doi.org/10.1037/cpb0000047>.
- Grant, A. M. (2016b). What constitutes evidence-based coaching?: A two-by-two framework for distinguishing strong from weak evidence for coaching. *International Journal of Evidence based Coaching and Mentoring*, 14(1), 74-85.
- Hart, V., Blattner, J., & Leipsic, S. (2001). Coaching Versus Therapy. *Consulting Psychology Journal*, 53(4), 229-237. <https://doi.org/10.1037/1061-4087.53.4.229>
- Hawkins, P. & Smith, N. (2013) Coaching, mentoring and organisational consultancy: supervision and development. (2<sup>nd</sup> ed.) Maidenhead, Berms. UK open University press.
- Hoschild, S. (2012). *The managed heart: commercialization of human feeling*. Berkeley, CA: University of California Press.
- Huffman, M. H. (2010). Health coaching. *AAOHN Journal*, 58(6), 245-250. <https://doi.org/10.1177/216507991005800604>
- Hullinger, A. M., & Digirolamo, J. A. (2020). A professional development study: The lifelong journeys of coaches. *International Coaching Psychology Review* 15(1), 8-19.
- Ickes, M.J. & McMullen, J. (2016). Evaluation of a health coaching experiential learning collaboration with future health promotion professionals. *Pedagogy in Health Promotion*, 2(3), 161-169. <https://doi.org/10.1177/2373379916649193>
- International Coach Federation (2019). Core competencies. (Blog post). Retrieved June 23<sup>rd</sup>, 2021 from <https://coachfederation.org/core-competencies>
- Irving, J. A., & Williams, D. I. (1999). Personal growth and personal development: Concepts clarified. *British Journal of Guidance & Counseling*, 27(4), 517-526. <https://doi.org/0306-9885/99/040517-10>
- Ishak, W., Nikraves, R., Lederer, S., Perry, R., Ogunyemi, D., & Bernstein, C. (2013). Burnout in medical students: A systematic review. *The Clinical Teacher*, 10, 242–245. <http://dx.doi.org/10.1111/tct.12014>
- Jepson, Z. (2016). An investigation and analysis of the continuous professional development and coaching supervision needs of newly qualified and experienced coaches: A small-scale practitioner-based study. *Coaching: An International Journal of Theory, Research and Practice*, 9(2), 129-142. <https://doi.org/10.1080/17521882.2016.1210186>
- Jonas, W. & Rosenbaum (2021) The Case for Whole-Person Integrative Care. *Medicina* 57, 677. <https://doi.org/10.3390/medicina57070677>

- Jordan, M., & Livingstone, J. B. (2013). Coaching vs psychotherapy in health and wellness: Overlap, dissimilarities, and the potential for collaboration. *Global Advances in Health and Medicine*. 130705125817002. <https://doi.org/10.7453/gahmj.13.036>
- Jordan, M., Wolever, R. Q., Lawson, K., & Moore, M. (2015). National training and education standards for health and wellness coaching: the path to national certification. *Global Advances in Health and Medicine*, 4(3), 46-56. <https://doi.org/10.7453/gahmj.2015.039>
- Jordan, S., Gessnitzer, S., & Kauffeld, S. (2017). Develop yourself, develop others? How coaches and clients benefit from train-the-coach courses. *Coaching : An International Journal of Theory, Research & Practice*, 10(2), 125-139. <https://doi.org/10.1080/17521882.2017.1330353>
- Kreisberg, J., & Marra, R. (2017). Board certified health coaches? What integrative physicians need to know. *Integrative Medicine: A Clinician's Journal*, 16(6), 1-5 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6438087/>.
- Kreitzer, M.J.& Klatt, M. (2017) Educational innovations to foster resilience in the health professions, *Medical Teacher*, 39:2, 153-159, <https://doi.org/10.1080/0142159X.2016.1248917>
- Kumary, A., & Baker, M. (2008) Stresses reported by UK trainee counselling psychologists, *Counselling Psychology Quarterly*, 21(1), 19-28. <https://doi.org/10.1080/09515070801895626>
- Ladyshevsky, R. K. (2006). Peer coaching: A constructivist methodology for enhancing critical thinking in postgraduate business education. *Higher Education Research & Development*, 25(1), 67-84. <https://doi.org/10.1080/13600800500453196>
- Ladyshevsky, R. K. (2010). Building competency in the novice allied health professional through peer coaching. *Journal of Allied Health*, 39(2), e77. <https://www.ncbi.nlm.nih.gov/pubmed/20539925>
- Lambert, V. A., Lambert, C. E., Itano, J., Inouye, J., Kim, S., Kuniviktikul, W., ... Ito, M. (2004). Cross-cultural comparison of workplace stressors, ways of coping and demographic characteristics as predictors of physical and mental health among hospital nurses in Japan, Thailand, South Korea and the USA (Hawaii). *International Journal of Nursing Studies*, 41(6), 671-684. <http://dx.doi.org/10.1016/j.ijnurstu.2004.02.003>
- Lane, D. & Corrie, S. (2006) *The modern scientist-practitioner: A guide to practice in psychology*. London: Routledge

- Laske, O.E. (2006). From Coach Training to Coach Education: Teaching Coaching within a Comprehensively Evidence Based Framework. *International Journal of Evidence Based Coaching Mentoring*, 4(1),57. <https://doaj.org/article/a757de287f76448ab2f136468c6dd830>
- Lawson, G. (2007). Counselor wellness and impairment: A national survey. *Journal of Humanistic Counseling, Education and Development*, 46, 20-34. <http://dx.doi.org/10.1002/j.2161-1939.2007.tb00023.x>
- Lawson, K. (2013). The four pillars of health coaching: preserving the heart of a movement. *Global Advances in Health and Medicine*, 2(3), 6-8. 10.7453/gahmj.2013.038
- Leggett, R. & James, J. (2016). Exploring the benefits of a coach development process ... on the coach. *International Journal of Human Resource Development Practice, Policy and Research*, 1(2), 55–65.
- Lim, J., Hepworth, J., & Bogossian, F. (2011). A qualitative analysis of stress, uplifts and coping in the personal and professional lives of Singaporean nurses. *Journal of Advanced Nursing*, 67(5), 1022-1033. <http://dx.doi.org/10.1111/j.1365-2648.2010.05572.x>
- Lombardo, C. M. (2020). An exploration of trainee’s experience and the effects of the Wellcoaches training program (Unpublished doctoral dissertation). Saybrook University.
- McCann, C. M., Beddoe, E., McCormick, K., Huggard, P., Kedge, S., Adamson, C., & Huggard, J. (2013). Resilience in the health professions: A review of recent literature. *International Journal of Wellbeing*, 3(1), 60-81. doi:10.5502/ijw.v3i1.4
- Maxwell, A. (2009). How do business coaches experience the boundary between coaching and therapy/counselling? *Coaching: An International Journal of Theory, Research and Practice*, 2(2), 149-162. <https://doi.org/10.1080/17521880902930311>
- McAllister, M. & McKinnon, J. (2009). The importance of teaching and learning resilience in the health disciplines: A critical review of the literature. *Nurse Education Today*, 29, 371-379. <http://dx.doi.org/10.1016/j.nedt.2008.10.011>
- McCusker, S., & Welply, O. (2021). C.O.A.C.H: A cross-national study of coach training for teachers across 5 countries. *Coaching : An International Journal of Theory, Research & Practice*, 14(1), 39-61. 10.1080/17521882.2020.1735463
- Merriam-Webster.(n.d.) Merriam-Webster.com dictionary. Retrieved June 8<sup>th</sup>, 2021 from <https://merriam-webster.com/>
- Mettler, E.A., Preston, H.R., Jenkins, S.M., Lackore, K.A., Werneburg, B.L., Larson, B.G., Bradley, K.L., Warren, B.A., Olsen, K.D., Hagen, P.T., Vickers, K.S. & Clark, M. (2014). Motivational improvements for health behavior change from wellness coaching. *American Journal of Health Behavior*, 38(1), 83-91.

- Mezirow, J (2006) ) An overview of transformative learning. In P. Sutherland and J. Crowther (Eds), *Lifelong learning: Concepts and contexts* (pp 24-38): New York: Routledge
- Moore, M. (2013) Coaching the multiplicity of mind: A strengths-based model. *Global Advances in Health and Medicine*, 2(4), 78-84. <https://doi.org/10.7453/gahmj.2013.030>
- Moore, M., Jackson, E., & Tschannen-Moran, B. (2016). *Coaching Psychology Manual* (2<sup>nd</sup> ed). (p.2) Wolters Kluwer.
- Moore, L., & Koning, J. (2016). Intersubjective identity work and sensemaking of adult learners on a postgraduate coaching course: Finding the balance in a world of dynamic complexity. *Management Learning*, 47(1), 28-44. <https://doi.org/10.1177/1350507615598907>  
forward-view/.
- Naslund, M. N. (2015). Counselor education: A personal growth & personal development experience Available from ProQuest Central Student  
<https://search.proquest.com/docview/1727140607>
- National Board for Health & Wellness Coaching. Retrieved 11<sup>th</sup> June, 2021 from  
<https://nbhwc.org/about/>
- National Health Service (NHS) England (2014, October). Five year forward view. London: NHS England. Retrieved 1 July, 2020 from <https://www.england.nhs.uk/publication/nhs-five-year-forward-view/>
- Neuhaus, E.C. (2011) Becoming a cognitive-behavioral therapist: striving to integrate professional and personal development. In R.Klein, H.S. Bernard & V. Schermer (Eds.), *On becoming a psychotherapist: The personal and professional journey*. (pp. 212-44) Oxford University Press.
- Ntsikwe, Y. (2016) The role of self-reflective practice in personal goal attainment.. University of Johannesburg (South Africa).
- Olsen, J.M. (2014). Health coaching: A concept analysis. *Nursing Forum*, 49(1), 18-29.  
<https://doi.org/10.1111/nuf.12042>
- Passmore, J., & Fillery-Travis, A. (2011). A critical review of executive coaching research: A decade of progress and what's to come. *Coaching: An International Journal of Theory, Research and Practice*, 4(2), 70-88. <https://doi.org/10.1080/17521882.2011.596484>
- Peluso, D. L., Carleton, R. N., & Asmundson, G. J. (2011). Depression symptoms in Canadian psychology graduate students: Do research productivity, funding, and the academic advisory relationship play a role? *Canadian Journal of Behavioural Science*, 43, 119–127. <http://dx.doi.org/10.1037/a0022624>
- Prochaska, J.O. & Prochaska, J.M. (2016). *Changing to thrive*. Minnesota: Hazelden Publishing.

- Rummell, C. M. (2015). An exploratory study of psychology graduate student workload, health, and program satisfaction. *Professional Psychology, Research and Practice*, 46(6), 391-399. <https://doi.org/10.1037/pro0000056>
- Sannamari, L. (2008) Self-development in business coach training Case study: Certified Progress Coach ®. (Unpublished Capstone project MBA) Haaga-Helia University of Applied Sciences.
- Schon, D. (1983) *The reflective practitioner: How professionals think in action*. New York, NY: Basic Books
- Sforzo, G.A., Kaye, M.P., Todorova, I., Harenberg, S., Costello, K., Cobus-Kuo, L., Faber, A., Frates, E. & Moore, M. (2017). Compendium of the health and wellness coaching literature. *American Journal of Lifestyle Medicine*, 12(6), 434-47 <https://doi.org/10.1177/1559827617708562>
- Sforzo, G.A., Kaye, M.P., Harenberg, S., Costello, K., Cobus-Kuo, L., Rauff, E., Edman, J.S., Frates, E. & Moore, M. (2019). Compendium of health and wellness coaching: 2019 addendum. *American Journal of Lifestyle Medicine*, 1-14. <https://doi.org/10.1177/1559827619850489>
- Shaw, L., & Glowacki-Dudka, M. (2018). The experience of critical self-reflection by life coaches: A phenomenological study. *Coaching: An International Journal of Theory, Research and Practice*, 12(2), 93-109. <https://doi.org/10.1080/17521882.2018.1489869>
- Short, E., Kinman, G., & Baker, S. (2010). Evaluating the impact of a peer coaching intervention on well-being among psychology undergraduate students. *Coaching Research*, 285-296. <https://doi.org/10.1002/9781119656913.ch15>
- Smith, P. L., & Moss, S. B. (2009). Psychologist impairment: What is it, how can it be prevented, and what can be done to address it? *Clinical Psychology: Science and Practice*, 16, 1–15. <http://dx.doi.org/10.1111/j.1468-2850.2009.01137.x>
- Snyder, S. (2013). Health coaching education: A conversation with pioneers in the field. *Global Advances in Health and Medicine*, 2(3), 12-24. <https://doi.org/10.7453/gahmj.2013.018>
- Spence, G. B., & Grant, A. M. (2007). Professional and peer life coaching and the enhancement of goal striving and well-being: An exploratory study. *The Journal of Positive Psychology*, 2(3), 185-194. <https://doi.org/10.1080/17439760701228896>
- Stokes, P., & Merrick, L. (2018). Do Coaches Get Coached. European Mentoring & Coaching Council. (EMCC) Conference
- Swarbrick, M., Gill, K. J., & Pratt, C. W. (2016). Impact of peer delivered wellness coaching. *Psychiatric Rehabilitation Journal*, 39(3), 234-238.

<https://doi.org/10.1037/prj0000187>

- Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K. K., Colquhoun, H., Levac, D., Moher, D., Peters, M. D., Horsley, T., Weeks, L., Hempel, S., Akl, E. A., Chang, C., McGowan, J., Stewart, L., Hartling, L., Aldcroft, A., Wilson, M. G., Garritty, C., ... Straus, S. E. (2018). PRISMA extension for scoping reviews (PRISMA-scr): Checklist and explanation. *Annals of Internal Medicine*, 169(7), 467-473. <https://doi.org/10.7326/m18-0850>
- Van Nieuwerburgh, C., & Tong, C. (2013). Exploring the benefits of being a student coach in educational settings: A mixed-method study. *Coaching: An International Journal of Theory, Research and Practice*, 6(1), 5-24. <https://doi.org/10.1080/17521882.2012.734318>
- Wiley, E. J., Irwin, J. D., & Morrow, D. (2012). Health care practitioners' perceptions of motivational interviewing training for facilitating behaviour change among patients. *Journal of Allied Health; Washington*, 41(3), 131–139. Retrieved (n.d.) <https://www.ncbi.nlm.nih.gov/pubmed/22968775>
- Wolever, R. (2019). What is health and wellness coaching? How does it compare to health psychology? 41(1) Retrieved 2 February, 2020 from <https://div38healthpsychologist.com/2019/03/18/what-is-health-and-wellness-coaching-how-does-it-compare-to-health-psychology/>.
- Wolever, R. Q., Jordan, M., Lawson, K., & Moore, M. (2016). Advancing a new evidence-based professional in health care: job task analysis for health and wellness coaches. *BMC Health Services Research*, 16(1). <https://doi.org/10.1186/s12913-016-1465-8>
- World Health Organisation (2018). Non Communicable Diseases. <http://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>
- Yocum, S., & Lawson, K. (2019) Health coaching case report: Optimising employee health and wellbeing in organisations. *The Journal of Values-Based Leadership*, (12)2 Article 8. , <http://dx/doi.org/10.225433/0733122.1266>
- Zwart, R. C., Wubbels, T., Bergen, T. C. M., & Bolhuis, S. (2007). Experienced teacher learning within the context of reciprocal peer coaching. *Teachers and Teaching: Understanding how Teachers Learn*, 13(2), 165-187. 10.1080/13540600601152520



## Appendix A – Definition of terms

Personal change	“to make or become different”	Merriam-Webster. (n.d.).
Personal experience	How a person is “affected by something that happens”.	Merriam-Webster. (n.d.). <sup>6</sup>
Personal development	In training, the purpose is to “increase awareness of how practitioners’ own personality, behaviour and cultural values can impact decision makings and relationships at work”.	Bager-Charleson (2014)
Personal growth	a “retrospective awareness of change that is not planned but results from experience and personal development”. <sup>7</sup>	Irving and Williams (1999)
Professional development	“Emphasises activities that have the main outcome of supporting improvements in professional practice”.	Friedman and Phillips, (2014)
Reflective practice	“Examining our coaching practice, from a range of perspectives and recognising patterns and themes in our work as a coach”	Leggett and James (2016)
Critical self-reflection	“Critical self-reflection refers to the process of questioning one’s own assumption, presuppositions, and meaning perspectives”  “Involves individuals having not only an understanding of the assumptions that govern their actions but questioning their meaning and developing alternative ways of acting.”	Mezirow (2006)  Cheng et al. (2015)
Coach-in-training, coach trainees, student coaches, students	Terms that varied depending on the study in question. The choice of term used in this paper replicated where possible what was used by the researcher of the paper under review, or to enhance comprehension of the account	

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<sup>6</sup> A personal change would create a difference for the individual in a personal way. These two definitions would appear to be so similar as to negate the need to differentiate between the two

<sup>7</sup> **personal development** and **personal growth** can arguably be considered separately. Irving and Williams (1999) proposed that “development” is not a subset of “growth” but that they were intersecting terms with the main difference being that development can be planned for, whereas growth cannot. Instead, growth may happen as a result of personal development efforts. One is a retrospective term, and the other is futuristic. We can see that growth has happened (past) , and that development can be achieved (future).

## Appendix B - PsycINFO 17th March 2021

Terms used	Search results N	Papers found relevant, after duplicates discarded N
(( <b>"health coach*" or "wellness coach*"</b> ) and (student or trainee)).af	85	0
((health coach* or wellness coach*) and (training program* or education) and (experience of trainee* or student experience)).af.	9	1
(health and wellness coach training program*) and (personal change or experience)).af	2	1
"Coach training program" AND student OR trainee OR "coach-in-training" AND experience OR "Personal change" OR " personal growth" OR "personal development" -youth -addiction -church -athletics -sport	161	2
Terms searched – Coach*, trainee* and change*	23	3
coach*-in-training” AND “personal development	4	3
coach*-in-training AND personal growth	47	1
Coaching psychologists AND Personal development OR personal growth. (not students)	37	0

### Subsequent searches (27/5/21)

peer coaching and student coaches OR coach*-in-training.ab	21	0
self-reflection and student coaches OR coach*-in-training.ab	4	0
The role of self AND student coaches OR coach*-in-training.ab		

	0	
personal identity and student coaches OR coach*-in-training	1	0
professional identity and student coaches OR coach*-in-training and student coaches OR coach*-in-training	0	

**Appendix C(i) – Findings on Elements of the Programme and reported Outcome - (Presented in order of review)**

<b>Authors and title</b>	<b>Study details if not implicit in title</b>	<b>Participants and location</b>	<b>Reported outcome</b>	<b>Attributed factor</b>
Lombardo (2020) An exploration of trainees' experience and the effects of the Wellcoaches training program	Study on a specific HWCT programme. Mainly focused on professional efficacy with a secondary question on personal experience Qualitative interviews	8 healthcare workers, diabetes nurses United States	Increased self-compassion More mindfulness and meditation Vision and goal achievement Greater job satisfaction Impact on relationships	
Cosgrove et al. (2021) An exploration of personal benefits reported by students of a health and wellness coach training programme	Qualitative interviews	8 HWC graduates Australia	Personal health and wellness Self-knowledge Relationship with self and connection with others Professional optimism	Positive psychology exercises Coaching circles – peer coaching Coaching tools Passion of presenters Self-journey Learning about the science of habits
Wiley et al. (2012) Health care practitioners' perceptions of motivational interview training for facilitating behaviour change among patients	1 day training on Motivational Interviewing	10 Health care practitioners United States	Less stressed More mindful At ease	
Collins et al. (2018) Integration of health coaching concepts and skills into clinical practice among VHA providers: a qualitative study	6-day health coach training	269 health care workers United States	Perceived positive changes Mindful approach More mindful eating, sitting, and walking	

Leggett and James (2016) Exploring the Benefits of a Coach Development Process ... on the Coach	Qualitative, thematic analysis No training length or volume were stated Asked the question "What was the impact of the course?"	24 graduates from business or leadership programmes Northern England	Greater level of confidence that went beyond their coaching role in the organisation, new identity Leadership behaviour.	Self-awareness was encouraged, reflexive conversations and consideration of coach identity Role of critical self-reflective practice was key under focus
Van Nieuwerburgh and Tong, (2013) Exploring the benefits of being a student coach in educational settings: a mixed-method study.	3-day coaching skills training course. Students coaching other in education setting	25 A level students United Kingdom	Better study skills, increased emotional intelligence and improved communication skills	Four themes arose - Learning from the coach training; impact of coaching on self, impact of coaching on the coach's relationship and future range of benefits to students.
Barr and Nieuwerburgh (2015) Teachers experience of an introductory coaching training workshop in Scotland	2-hour workshop. Introductory coach training workshop. IPA	5 female teachers Scotland	Findings showed appreciation of learning with others, and reflection, having time to think	Working with a partner Being part of a group with a common goal Reflective process
McCusker and Welply (2020) C.O.A.C.H.: a cross-national study of coach training for reaches across 5 countries	130 hours of coach training C.O.A.C.H. programme	100 experienced teachers in five European countries. Italy, Lithuania, Norway, Romania, and Turkey	Very procedural and nothing asked about the experience of the coach	A question was raised whether the values of coaching are impeded by highly performative school contexts
Sannamari (2008) Self-development in business coach training.	9 month business coach training ("Certified Progress Coach") (Capstone project) Did the programme increase self-awareness in trainees?	7 (4) Graduates and (3) trainees Finland	Increased self-awareness	Enneagram Peer support Head trainer
Atad and Grant (2020) How does coach training change coaches-in-training? Differential effects for novice vs. experienced "skilled helpers	Looked at personal changes (inter and intrapersonal attributes) in tertiary institution Quantitative – used various scales to measure pre and post (start and finish of 9 months of training) previously	149 student coaches (70% women) Solution-focused cognitive behavioural coaching framework was taught. Israeli	Increases in satisfaction with life, mindfulness, solution-focused thinking, self-insight, and a need for self-reflection.	No reports of what elements of the programme influenced the changes

	used in coaching-related research.			
Jordan, Gessnitzer and Kauffeld, (2017) Develop yourself, developing others? How coaches and clients benefit from train-the-coach-courses.	3 month train the coach course. In career coaching Quantitative – scales used	57 (8 male, 49 female) university students Germany	Improved occupational self-efficacy, goal orientation, career adaptability.	No information on what elements of the programme influenced coaches' development Possible explanation put forward that self-reflection, self-practice, working with peers
David and Cobeanu (2016) Evidence-based training in cognitive-behavioural coaching: can personal development bring less distress and better performance?	Cognitive-behavioural coach training at post graduate level. One semester. Looked at emotional regulation abilities Predicted improvements in all these areas.	102 trainees from various professional background (81% female) Romania	Reduction in depressed mood, emotion regulation skills have improved along with work performance.	Investigated a personal development component of the programme

### Appendix C(ii) – Findings on Elements of Training cited as being influential to positive experience

- (Presented in order of review)

Authors and title	Study details if not implicit in title	Participants and location	Reported outcome (if applicable)	Attributed factor
Spence and Grant (2007) Professional and peer life coaching and the enhancement of goal striving and well-being: An exploratory study	Peer coaches received 1 day of training Is peer coaching helpful in training?	63 participants put into one of three groups. Received either professional life coaching or peer life coaching or in control group. Australia	Coachees benefited more by being coached by professional coaches	Experience of coach connected to better result

Short, Kinman and Baker (2010) Evaluating the impact of a peer coaching intervention on well-being amongst psychology undergraduate students	3 <sup>rd</sup> year undergraduate psychology students who did a module on coaching psychology coached each other over 5 sessions	32 students (24 females, 8 males) United Kingdom	Peer coached group had less psychological stress during stressful time. 72% found it quote effective or moderately effective	Peer coaching
Grant (2008) Personal life coaching for coaches-in-training enhances goal attainment, insight, and learning	Taking part in mandatory personal life coaching over 10-12 week period in parallel with coach training programme	29 trainees Australia	Increased goal attainment, reduced anxiety, increased cognitive hardiness and enhanced personal insight (not wellbeing!)	When students coached each other over three sessions Mandatory participation makes this study unique
Stokes and Merrick (2018) DO coaches get coached?	Asked the question of whether this is important and distinct from supervision	80 coaches surveyed Location not stated		56% believed that being coached was an important part of development. Only 28% were being coached.
Ickes and McMullen (2016) Evaluation of a health coaching experiential learning collaboration with future health promotion professionals	Trained health professionals in health coaching and then asked them to coach others. Mainly focused on professional development aspect	8 health professionals who acted as health coaches United States	Knowledge and self-efficacy were measured. Certain skills improved, others did not.	Focus was on experiential learning (peer coaching) and its value in health coach training
Drake (2011) What do coaches need to know? Using the Mastery Window to assess and develop expertise	An account of how of The Mastery Window", a coach development framework	Draws on literature in expertise development and offers a fresh perspective on coach development	Drake puts forward five challenges facing coaching and five trends that will influence the development of coaches	The immaturity of the field creates a lack of master practitioners; How to measure mastery, or even competencies, is not clear; The need for innovation; The number of programmes and

				associations can cause confusion.
Ntsikwe (2016) The role of self-reflective practice in personal goal attainment	Qualitative exploration of self-reflective practice towards goal attainment 10 reflective journals over 6 weeks thematic analysis	10 trainee industrial psychologists undertaking a module in coaching psychology	Positive factors in goal attainment are higher levels of, insight and self-awareness, identification of ways of overcoming obstacles and addressing resistance.	Facilitates appreciation of the role of self-reflective practice, primarily, journaling in attainment of goals by coaches-in-training
Shaw and Glowacki-Dudka, (2018). The experience of critical self-reflection by life coaches: a. phenomenological study	To understand the experience of critical self-reflection by life coaches for their own personal and <u>professional</u> development	5 life coaches	Themes: a supportive structure and discipline, increased self-awareness, renewed passion, tools for professional development, enhanced relationship with self and others, greater awareness of the importance of self-care, with coaches acknowledging the value of engaging in healthy lifestyle habits such as getting enough rest, hydration, and not over-scheduling and the impact on their coaching practice when these areas were neglected.	Critical self-reflection– as a function of performing various self-reflection activities.
Hullinger and DiGirolama (2020) A professional development study: The lifelong journeys of coaches	Semi-structured interviews seeking, their views on coaching, professional development activities, perspectives on how coaches develop and continuing education.	25 coaches interviewed. Australia. Canada, France, Ireland, Philippines, Singapore, South Africa, Spain, Sweden, UK and US.	Reported themes: Self-development – being a lifelong learner Engaging in reflective practice –yoga, mindfulness, meditation, self-care, physical activities, spiritual practice, therapy, observing life, being curious, experimenting Taking care of self – stay in shape, mentally, emotionally, physically or spiritually. Stay fit, meditation, getting into nature, having counselling Modelling the way for transformation – they were open to change within themselves	



Bachkirova (2016) The self of the coach: conceptualization, issues and opportunities for practitioner development	Importance of self and the need to develop and educate coaches in this way.		Does the present training regime encourage this or place too much emphasis on knowledge and skills	
Corrie and Kovacs (2021) Addressing the self-care needs of coaches through the use of formulation,	A case study of coaching using formulation as a means of reviewing and refining self-care practices	Shows potential as a process for understanding self-care needs		Question around whether it should be self-directed or supported by coach or supervisor
Moore and Koning (2016) Intersubjective identity work and sensemaking of adult learners on a postgraduate coaching course: Finding the balance in a world of dynamic complexity	Exploration of how we make sense of identity in times of dynamic uncertainty by interview	Four adult learners in post graduate coaching course and one of the authors	Heightened uncertainty increases demands on (coaching) identity work	Raises the question of limitations of existing training
Drake (2008) Finding our way home: coaching's search for identity in a new era.	Commentary on future identity of the coach	Discussed the role of knowledge and evidence and the need for a new era of coach identity	The need for coaches to be both scientist-practitioner and artist.	

**Appendix C(iii) - Papers that focus on journey of Health and Wellness Coaches in training - (Presented in order of review)**

Authors and title	Focus of paper	
Broadbear and Broadbear (2018) Novice health and wellness coaches: implication for professional preparation	Focused on undergraduate health and wellness coach trainees	The need for special support of these students who "experience a period of significant personal development"
Moore (2013)	Looked at the need for health and wellness coaches to develop their "whole selves" by engaging in self-care.	Self-reflective practice is the means to achieve this level of understanding and growth.

Coaching the multiplicity of mind: A strengths-based model.		
Snyder (2013) Health coaching education: A conversation with pioneers in the field	Question asked on importance of teaching self-awareness and growth and can they be taught?	All interviewees confirm the importance of this being a focus on training, along with personal growth
Lawson (2013) The four pillars of health coaching: preserving the heart of the movement	This editorial comments on the integrity of health coaching being maintained by following a model that defines, not a process but a way of relating to the client that was essential to maintain the “heart” of health and wellness coaching	Four pillars are described: Mindful presence Authentic communication Self-awareness Safe and sacred space

## Appendix D - Summary of Personal Changes reported

Personal Change reported	Authors
<b>Changes relating to mindfulness/self compassion</b>	
Mindfulness and mindful behaviours	Atad & Grant, 2020 Collins et al., 2018 Lombardo, 2020 Wiley et al., 2012
Greater self-knowledge and self-awareness	Atad and Grant, 2020 Cosgrove et al., 2021 Grant, 2008 Ntsikwe, 2016 Sannamari, 2008
Increased emotional intelligence and regulation skills	David and Cobeau, 2016 Van Nieuwerburgh and Tong, 2013
Increased self-compassion	Reference removed for integrity of review Lombardo, 2020
<b>Changes relating to personal health and relationship with others</b>	
Improved personal health and wellness Awareness of the need for self-care	Shaw and Glowacki-Dudka, 2018
Positive impact on relationships with self and others	Cosgrove et al., 2021 Lombardo, 2020 Shaw and Glowacki-Dudka, 2018
Improved communication skills	van Nieuwerburgh and Tong, 2013
<b>Changes relating to stress and mood</b>	
Lowered stress levels and anxiety	Grant, 2008 Wiley et al., 2012
Reduction in depressed mood	David and Cobeau, 2016

<b>Changes relating to confidence, optimism and satisfaction</b>	
Increases in life satisfaction	Atad and Grant, 2020
Greater level of confidence and job satisfaction	Jordan et al., 2017 Leggett and James, 2016
Professional optimism and work performance	Cosgrove et al., 2021 Jordan et al., 2017
<b>Changes relating to goal behaviour and skill improvement</b>	
Goal achievement	Grant, 2008 Lombardo, 2020 Ntsikwe, 2016
Clearer vision	Lombardo, 2020
Better leadership behaviour	Leggett and James, 2016
Enhanced study skills	Van Nieuwerburgh and Tong, 2013
Solution-focused thinking	Atad and Grant, 2020
Goal orientation	Jordan et al., 2017
Career adaptability	Jordan et al., 2017