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Professional and peer life coaching and the enhancement of goal striving and well-being: An exploratory study

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Abstract

Few studies have investigated the impact of life coaching on self-regulated behavior and well-being. A limitation of past studies has been their reliance on peer rather than professional coaches. The present randomized controlled study compared peer with professional life coaching over a 10-week period with 63 participants. Results indicated that, compared to peer coachees and controls, coachees of professional coaches were more engaged in the coaching process, had greater goal commitment and progression, and greater well-being in terms of environmental mastery; other facets of well-being did not change. The results suggest that the presence of a supportive person may be a necessary but insufficient condition for enhancing goal striving and highlight the importance of expertise in coaching. Recommendations are made for future research and for using life coaching as a methodology for applied positive psychology.

Keywords: *Personal goals, professional coaching, life coaching, peer coaching, goal striving, well-being, evidenced-based coaching*

Introduction

Personal goals exert a powerful influence over how people behave and how they experience their lives (for reviews see Deci & Ryan, 2001; Emmons, 1996). Yet despite a growing body of evidence linking personal goals to a range of self-regulatory processes and psychological well-being (e.g., Brunstein, 1993; Emmons, 1996; Omodei & Wearing, 1990; Ryan, Sheldon, Kasser, & Deci, 1996), few researchers have tested their theoretical models in real-world contexts. As noted by Sheldon and colleagues (2002), this is rather surprising given the promise that personal goals appear to offer practitioners in both clinical and non-clinical settings.

Life coaching is increasingly used by people who want to attain important personal or professional goals (Grant & Greene, 2001) and enhance their well-being (Naughton, 2002). Given its goal-orientation, life coaching offers some promise to positive psychologists interested in studying goal-directed behavior and well-being. To date, however, psychologists have not played a major role in the development of this field. Rather, the public thirst for personal development has typically been satisfied by highly commercialized "pop" psychology approaches that promise much in the way of results but lack

empirical validation or theoretical grounding (Grant, 2003a).

Having a goal and owning a goal are not the same thing

Goal constructs have a prominent place in the history of psychological research. A great deal is known about the "mechanics" of goal setting and how various attributes of goals (e.g., difficulty, specificity, commitment, level of abstraction, temporal range) impact on human motivation and performance across multiple domains (for a comprehensive review see Austin & Vancouver, 1996). More recently, research attention has been directed towards questions related to why people pursue certain goals (Deci & Ryan, 2001) and how motivational orientations impact on self-regulated behavior and psychological well-being (e.g., Ryan & Connell, 1989; Sheldon & Elliot, 1999). Despite mounting evidence linking personal goals to personal growth and psychological health, surprisingly few attempts have been made to use goal setting as a means of attaining these outcomes (Sheldon, Kasser, Smith, & Share, 2002). More typically, goal setting has been used as an organizational or therapeutic tool, such as when line managers incorporate performance goals

into employee reviews (Locke, 1996), or when cognitive-behavioral therapists use goal setting to establish an exercise program with a depressed client (Kirk, 1989).

While goal setting can be effective when used in these ways, evidence suggests that personal goals are also important because they vary in the degree to which they lead a person towards adaptive functioning and psychological health. For example, Sheldon and Elliot (1998) found that subjects' reasons for pursuing particular strivings predicted goal-directed effort, goal attainment, and subjective well-being. More specifically, they found that self-regulation and well-being were greatest for those individuals who pursed their goals more for the inherent interest and enjoyment they afforded (i.e., autonomous reasons), rather than for external rewards or because of internal compulsions (i.e., controlled reasons). Thus, they concluded that "not all personal goals are personal" because goals are not always freely chosen and do not always accurately represent important aspects of the self (i.e., personal values and interests).

Such findings have lead Sheldon et al. (2002) to suggest that it may be useful for practitioners to place personal goals at the center of their interventions, citing other studies that have strongly suggested that it is not merely *having* a goal that assists individuals to do well and feel good (Lee, Sheldon, & Turban, 2003; Sheldon & Elliot, 1999), rather that one must feel *ownership* of the goal, strongly identify with it, and adopt it with a full sense of choice (Ryan et al., 1996).

Life coaching: Accelerated personal growth?

Life coaching is one intervention that focuses explicitly on the personal goals and aspirations of individuals. Definitions of life coaching vary (Whitworth, Kimsey-House, & Sandahl, 1998; Williams & Thomas, 2004). Life coaching can be understood as a "collaborative solution-focused, results-oriented process in which the coach facilitates the enhancement of life experience and goal attainment in the personal and/or professional life of normal, non-clinical clients" (Grant, 2003a, p. 253). Some key points of this definition require elaboration.

First, coaching describes a collaborative relationship formed between a coach and a client (the "coachee") for the purpose of attaining personal development outcomes that are valued by the coachee. The articulation and clarification of personal goals is, therefore, central to the coaching process and these goals are generally set to stretch an individual's current capacities (Grant & Greene, 2001). Second, coaching is dialogue based but action oriented. That is, it involves both "talking and doing". Coaches seek to accelerate goal attainment by helping individuals

develop *and* implement solutions to the ongoing challenges faced during goal striving. Most importantly, emphasis is placed upon the role of the coach as the facilitator (rather than the provider) of these solutions, with solution-focused techniques widely used as a means of assisting clients tap into their personal strengths and resources (Berg & Szabo, 2005).

Finally, although clinical psychology has helped to shape the development of various coaching practice models (e.g., Berg & Szabo, 2005; Grant, 2003b), coaching is less concerned with unraveling problems and exploring past emotional pain than it is with building solutions and promoting optimal functioning. As such, it has a non-clinical orientation and works best with clients who are capable of engaging in (what are often) robust examinations of personal and professional functioning (Cavanagh, 2005). This orientation is reflected in the catch-cry of the life coaching industry: Coaching is not therapy and does not deal with clinical issues (Cavanagh & Grant, 2004). However, the boundaries between life coaching, with non-clinical populations, and therapeutic interventions, which attempt to deal with mental health issues, are not unambiguous. There is concern that some people presenting for life coaching may have mental health problems and may be looking to life coaching as a means of alleviating depression or anxiety (Green, Oades, & Grant, 2006). Thus it is important that life-coaching clients are screened for mental health problems and, if necessary, referred to appropriate specialized help.

Life coaching: Applied positive psychology

To date, few attempts have been made to elevate life coaching above its common perception of "new age self-indulgence, or as simple goal setting around the mundane . . . aspects of private life" (Cavanagh & Grant, 2004, p. 8). As such, conceptual links between life coaching and psychological theory have yet to be developed and, for many, this disconnection seriously undermines the credibility of the life coaching industry. Simply put, life-coaching practice has run well ahead of related theory and research. Anecdotal reports suggest that this, along with the high degree of commercialization and hyperbole that surrounds the industry (Grant, 2003a), has created considerable ambivalence towards the life coaching industry.

This ambivalence is unfortunate, however, as evidenced-based life coaching seems uniquely placed to make significant contributions to the positive psychology agenda (see Seligman & Csikszentmihalyi, 2000). That is, life coaching seeks to optimize personal functioning across multiple

domains of life via a personalized, professional relationship focused on the personal goals of individuals. As such, coaches have a unique platform from which to deliver user-friendly psychology in the service of becoming, say, a better parent, a more effective leader, or a more successful artist. In guiding these important pursuits, life coaches help others get the most out of themselves and their lives, by drawing out and building upon individual strengths and virtues. Viewed in this light, life coaching can rightly claim to represent ''positive psychology in action''. However, as suggested earlier, questions related to the efficacy and beneficial effects of life coaching have yet to receive much attention and only a few studies have yet been reported in the literature.

Early life coaching research

While it has been widely claimed that life coaching leads to greater personal goal attainment and enhanced well-being (e.g., Fortgang, 1998), little empirical evidence exists to support such claims (Grant, 2003a; Green et al., 2006). Nonetheless, an extensive body of research clearly indicates that well-being is positively impacted when individuals attain goals that accurately reflect their core values and developing interests (Deci & Ryan, 2001). Building upon such research, Grant (2003a) conducted the first formal study of life coaching with 20 postgraduate students who participated in a group life-coaching program over a 10-week period. After attending a 1-day workshop and setting themselves three personal goals, participants attended a series of peer-group coaching sessions facilitated by a coach who provided support, encouragement, and basic training in a variety of cognitive-behavioral, solution-focused coaching (CB-SFC) techniques (such as cognitive restructuring and self-monitoring). Results indicated that participation in the program was associated with significantly higher levels of goal attainment, along with improvements in metacognitive processing (self-reflection and insight) and mental health (lower depression, stress, and anxiety). One notable finding from this study was that life coaching appeared to induce a movement away from ruminative patterns of self-reflection that might impede goal progression and toward reflective processes more supportive of goal attainment.

In a follow-up study, Green et al. (2006) tested the same CB-SFC program, with the addition of a community sample ($n = 56$), a wait-list control group, and a 12-month longitudinal design. After setting one specific personal goal at an initial 1-day workshop, participants attended 8 weekly coaching sessions and worked in peer coaching dyads, guided by a trained instructor and a variety of coaching aides. Results indicated that coachees reported significantly

higher goal attainment, positive affect, hope, and psychological well-being (including autonomy and environmental mastery) and significantly lower negative affect.

Peer coaching

Peer coaching has also been studied for its utility in more specific domains, with somewhat mixed results. For example, fortnightly peer coaching has been found to be a useful framework for supporting the learning and development of managers (Ladyshewsky & Varey, 2005). Using qualitative methods, peer coaching was found to not only strengthen knowledge frameworks and broaden individual perspectives, the experience of coaching and being coached also seemed to enhance self-reflection and help managers identify areas in need of skills development (e.g., listening skills).

In contrast, Sue-Chan and Latham (2004) reported that the effectiveness of managerial coaching appears to depend heavily on the expertise of the coach. Over two studies it was found that peer coaches were perceived to possess less expertise and be less credible than an external coach, with coaching satisfaction and performance outcomes lower for the peer coachees. This finding suggests there may be some key characteristics of coaches (such as training or familiarity) that are highly influential in determining the success of life coaching. The purpose of this study is to further examine this issue.

The current study

Life coaching is not typically conducted by peer-group coaches. Rather, it is usually conducted by a professionally trained coach who meets (one-on-one) with a client to engage in regular goal-focused conversations (at weekly or fortnightly intervals). As such, the present study was interested to investigate life coaching using a design and methods that would (as accurately as possible) reflect the realities of ''real world'' coaching practice. More specifically, we were interested to determine whether professional life coaching is more effective than peer-group coaching for enhancing goal striving and well-being. Given this unique feature of the research, the study was exploratory in nature and interested in examining two basic questions:

(1) Is professional coaching more effective than peer coaching for enhancing goal striving (as measured by goal progression and goal commitment)?
(2) Does life coaching enhance the subjective and psychological well-being of individuals?

Answers to such questions are of importance to both researchers and practitioners. Not only would they

speak to general questions related to the efficacy of life coaching per se, they would also be helpful for deciding between alternative coaching formulations. For example, although peer coaching might be a cost effective alternative to one-on-one professional coaching (and therefore more desirable), it may not be as beneficial. If so, an important cost–impact trade-off may need to be considered when designing and implementing coaching programs.

Method

Participants

After responding to local media advertisements and registering their interest in the life-coaching program, 84 respondents completed a packet of pre-program questionnaires. To reduce the likelihood that clinical issues might arise during coaching, mental health screening was conducted using the Brief Symptoms Inventory (BSI; Derogatis, 1993). The criterion for exclusion was set at 2 standard deviations above the mean on the Global Severity Index, or on any two subscales (i.e., a score of >70). At this level, 21 people (25%) were deemed to be ineligible and offered a clinical referral. Characteristics of the final sample ($n = 63$) are shown in Table I.

Procedure

Upon completion of the pre-program screening, participants were invited to attend an information night, at which the first author outlined the program and answered any questions. Once informed consent had been provided, participants were directed to a computer and asked to complete a set of pre-coaching (Time 1) questionnaires that had been posted on a departmental Internet site. Due to a lack of familiarity with computers, two participants requested pencil and paper copies of the questionnaires. Immediately following the information night, participants where randomly assigned to either the professional coaching, peer coaching, or control conditions. Notification of group allocation was provided by e-mail or telephone, along with a timetable of coaching session dates, times, and venues for all participants in the two coaching conditions. At the end of the coaching period

(Time 2), participants were asked to complete another set of questionnaires (repeated Time 1 measures) via the same departmental Internet site. This allowed participants to complete the questions remotely, via their personal computers, with only one participant requesting a pencil and paper copy.

Cognitive-behavioral, solution-focused coaching

The programs reported here are underpinned by a cognitive-behavioral, solution-focused coaching framework (CB-SFC; Grant, 2003b). According to this approach, goal attainment is best facilitated by understanding the reciprocal relationships that exist between thoughts, feelings, behavior, and the environment, and structuring these in ways that best support goal attainment. The inclusion of solution-focused techniques into this cognitive-behavioral framework helps orient coaching towards personal strengths and solution construction, rather than problem analysis (Grant, 2003b).

Manualized CB-SF life coaching programs have been developed by Grant and Greene (2001) and are available from the authors of this paper upon request. The approach assists individuals to enhance goal striving by: (1) developing a future vision, (2) identifying desired outcomes, (3) establishing specific personal goals, (4) enhancing motivation by identifying strengths and building self-efficacy, (5) identifying resources and formulating action plans, (6) regularly monitoring and evaluating progress, and (7) the modification of action plans (based on the evaluation of progress). As shown in Figure 1, the monitor-evaluate-modification steps of this process constitute a "cycle" of self-regulated behaviors known to be important for successful behavior change and which form the basis of the coaching process (Grant, 2003a).

After goal setting, the role of the professional and peer coaches was to help coachees move through this self-regulatory cycle, by monitoring and evaluating their goal progression each week, and developing action plans for each coming week. To provide each life coaching session with an underlying structure and process, the Goal-Reality-Options-Wrap-up model (GROW; Landsberg, 1997) was used to provide structure for the coaching conversations for both the professional and peer coaching programs. Using the GROW model, the coaching sessions began with setting a goal (for the session), then moved on to explore current realities, before developing a range of options for action, and concluded with a wrap-up of steps and actions to be undertaken by the coachee. An outline of the GROW model is presented in Table II.

Table I. Characteristics of the final sample.

	Professional ($n = 21$)	Peer ($n = 22$)	Control ($n = 20$)	Totals ($N = 63$)
Female/male	15/6	17/5	15/5	47/16
Age	37.9	35.81	42.2	38.59
SD	10.31	9.85	10.64	10.44

Professional coaching. Participants in the professional conditions received 10 consecutive weeks of life coaching (45 minutes per session) with a professional coach trained in CB-SFC principles. All coaches were tertiary qualified in the psychology of coaching (at Masters level) and, to ensure fidelity to the CB-SFC approach, attended fortnightly supervision meetings facilitated by an experienced coach familiar with the approach but not otherwise involved in the study. In addition, coaches were also provided with a GROW session notebook that included a selection of recommended questions and core coaching models (e.g., cycle of self-regulation) that could be used as learning aides during the coaching process.

Peer coaching. Participants commenced this program by attending a 1-day workshop based on the manualized CB-SF coaching program used by Grant (2003a) and Green et al. (2006). This work-shop was designed to help participants clarify their coaching goals and establish action plans for the attainment of those goals (in line with the coaching process described above). Upon completion of the workshop, participants attended a series of 10 weekly group-based peer coaching sessions (75 minutes duration) consisting of open discussions about issues related to successful goal striving (facilitated by the first author) and 2×25 minute peer co-coaching sessions. Conducted in dyads, these peer sessions allowed each participant the opportunity to engage in a regular goal-focused conversation with a peer. To assist, all participants were provided with GROW note taking sheets, which included an array of suggested coaching questions.

Wait-list control group. Participants in this condition were informed their program would not commence for 3 months and that no action was required during this period.

Figure 1.   Generic model of self-regulation.

Measures

Goal striving. Participants were asked to generate three personal strivings, defined as ''an objective that you are typically trying to accomplish or attain'' (Emmons, 1986, p. 1060). Goal progression and goal commitment were rated for each striving using a 5-point scale ($1 =$ not at all, $5 =$ extremely) in response to the following questions: ''In the last 3 months, how successful have you been in attaining this goal?'' and ''How committed do you feel towards this striving?'' At Time 2 these items were reworded to ''In the past 10 weeks . . .'', in order to reflect the period of the coaching programs.
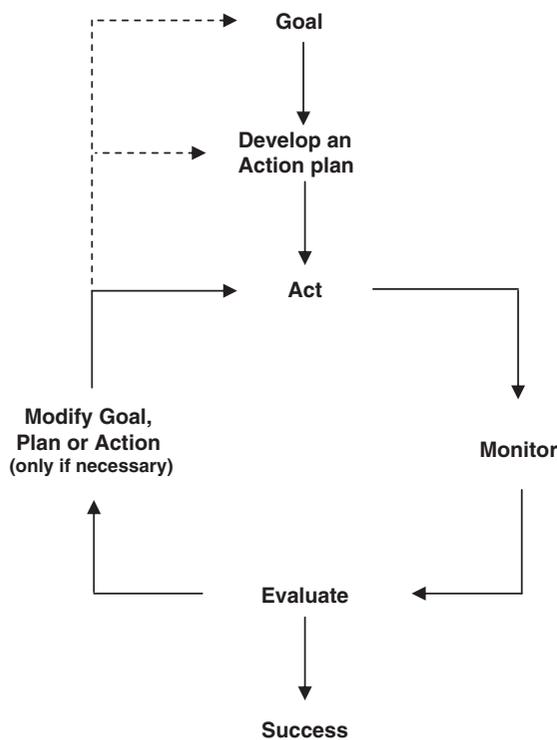
Table II. The Goal-Reality-Options-Wrap-up (GROW) model.

Acronym	Description	Example questions
Goal	Coachee is asked to clarify what they want to achieve from each session. Determines the focus of coaching.	What do you want to achieve this session? How would you like to feel afterwards? What would be the best use of this time?
Reality	Raise awareness of present realities. Examine how current situation is impacting coachee's goals.	How have things gone in the past week? How have you handled any problems? What worked? What didn't work?
Options	Identify and assess available options. Encourage solution-focused thinking and brainstorming.	What possible options do you have? What has worked for you in the past? What haven't you tried yet that might work?
Wrap-up	Assist the coachee to determine next steps. Develop an action plan and build motivation.	What is the most important thing to do next? What might get in the way? Who might be able to support you? How will you feel when this is done?

Source: Landsberg (1997); Grant & Greene (2001).

Subjective well-being. As subjective well-being (SWB) is widely agreed to contain an affective and cognitive component (Diener, Suh, Lucas, & Smith, 1999), two measures were included to assess SWB. First, short-term affective states were measured using scales containing both positive adjectives (happy, joyful, enjoyment/fun, pleased, enthusiastic) and negative adjectives (angry, depressed/blue, anxious, frustrated, unhappy) with participants rating their experience from $1 = $ Not at all to $6 = $ Extremely so (Bradburn, 1969). Sample alphas were 0.87 (Positive Affect) and 0.85 (Negative Affect).

Second, the cognitive component of SWB was assessed with the 5-item Satisfaction with Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985). Items include: "The conditions of my life are excellent" and "So far I have gotten the important things I want in life", with participants rating their agreement on a 1 (strongly disagree) to 7 (strongly agree) scale. One of the most widely used measures of well-being, the SWLS has good psychometric properties (Diener et al., 1999). The sample alpha was 0.80.

Psychological well-being. A eudaimonic measure of well-being was obtained by having participants complete the 54-item Scales of Psychological Well-Being (SPWB; Ryff, 1989). Scored on a 6-point scale ($1 = $ strongly disagree, $6 = $ strongly agree), the SPWB measures well-being on six sub-scales: Autonomy, environmental mastery, purpose in life, personal growth, self-acceptance, and positive relations with others. Internal consistency (alpha) coefficients for the six scales range from 0.82 to 0.90 (Schmutte & Ryff, 1997). In this sample, subscale alphas ranged from 0.72 to 0.89.

Results

Coaching attendance

To obtain an objective measure of program engagement, coaching attendance was recorded for both coaching conditions. Mean attendance for the professional coachees was 9.45 sessions and for peer coachees 7.3 sessions (from a maximum of 10 sessions). An independent samples *t*-test found these means to be significantly different, $t(38) = -5.75$, $p < 0.001$. Table III presents the means and standard deviations for all dependent variables. It should be noted that 4 participants (1 professional, 2 peer, 1 control) withdrew within the first half of the coaching

Table III. Means and standard deviations for goal striving and well-being variables.

Measure		Pre-coaching			Post-coaching		
		Professional (*n* = 20)	Peer (*n* = 20)	Control (*n* = 17)	Professional (*n* = 20)	Peer (*n* = 20)	Control (*n* = 17)
Goal striving							
GP	*M*	2.3	2.3	2.2	3.2$_a$	2.7	2.3$_a$
	SD	0.9	1.2	0.6	1.0	1.0	0.8
GC	*M*	4.1	4.3	4.3	4.2$_{ab}$	3.2$_a$	3.7$_b$
	SD	0.8	0.5	0.5	0.9	1.2	0.7
Subjective well-being							
SWL	*M*	23.7	24.3	20.6	25.9	25.8	20.9
	SD	5.3	5.7	6.3	5.4	5.2	6.8
PA	*M*	23.9	25.0	22.7	24.1	24.6	22.8
	SD	4.2	3.2	4.1	4.1	3.2	3.9
NA	*M*	20.2	21.4	18.3	20.6	22.5	19.9
	SD	4.6	4.5	5.5	5.3	4.5	5.2
Psychological well-being							
AU	*M*	41.1	40.0	36.1	41.9	40.1	36.8
	SD	6.0	7.2	5.4	5.9	5.5	5.7
EM	*M*	36.9	39.5	37.3	1.3$_{ab}$	39.9$_a$	38.1$_b$
	SD	7.1	6.7	7.0	7.1	6.2	6.7
PR	*M*	44.1	43.8	43.1	43.9	44.4	42.8
	SD	7.3	5.0	8.3	7.6	4.4	8.2
PL	*M*	43.7	43.3	39.8	44.4	44.9	40.4
	SD	5.8	6.1	5.7	5.7	4.7	4.8
PG	*M*	47.3	47.3	46.4	48.2	47.6	44.9
	SD	3.4	4.1	5.2	4.4	4.2	4.3
SA	*M*	41.1	40.0	36.9	41.6	41.6	37.7
	SD	7.1	5.8	6.3	6.8	4.7	6.5

AU = autonomy, EM = environmental mastery, GC = goal commitment, GP = goal progression, NA = negative affect, PA = positive affect, PG = personal growth, PL = purpose in life, PR = positive relations with others, SA = self-acceptance, SWL = satisfaction with life.
Note: Post-coaching means with the same subscripts (a, b) denote statistically significant group x time interactions revealed in planned comparisons ($p < 0.05$).

period and 2 control participants were non-contactable at Time 2. As such, statistical analysis was conducted on data from 57 participants.

Data was analysed using a 3×2 mixed design analysis of variance (MANOVA) consisting of one between-subjects factor (group) and one within-subjects factor (time). Also, in order to explore differential change by condition, a priori comparisons were conducted on (1) professional versus peer, (2) professional versus control, and (3) peer versus control, with an additional contrast comparing (4) coaching (i.e., professional and peer) versus control. A significance level of 0.05 was set for all tests.

Analysis of goal progression data revealed a significant main effect of time, $F(1, 54) = 6.73$, $p < 0.01$, but not group or the group $\times$ time (pre-post) interaction, although this did approach significance, $p = 0.07$. The more specific contrast analyses did, however, reveal a significant group $\times$ time (pre-post) interaction for professional versus control, $F(1, 54) = 5.41$, $p < 0.05$, indicating that the professional group made substantial progress towards their goals during the coaching period relative to the control group (as shown in Figure 2). No such effect was observed for the peer-coaching group.

When this analysis was repeated for goal commitment, a significant group $\times$ time interaction was found, $F(2, 54) = 7.03$, $p < 0.01$, along with a main effect for time, $F(1, 54) = 15.21$, $p < 0.001$, but not group. Contrast analyses revealed a significant group $\times$ time (pre-post) interactions were found for both professional versus peer, $F(1, 54) = 13.93$, $p < 0.001$, and professional versus control, $F(1, 54) = 4.45$, $p < 0.05$. This indicates that professional coaching was more effective in helping coachees maintain their level of goal commitment over time, relative to peer and control participants whose commitment decreased across the coaching period.

Finally, in order to control for the influence of coaching session attendance on goal striving, these analyses were repeated using the number of sessions attended as a covariate. After controlling for this difference, the goal commitment interaction effect disappeared (at the 0.05 level) and was only marginally significant, $p = 0.06$. This indicates that the goal commitment of peer coachees was positively impacted by regular attendance at coaching sessions. However, the analysis of covariance did not show any change from the initial findings for goal progression.

Well-being

Coaching appeared to have minimal impact on the mental health of participants. Although both coaching groups reported post-coaching increases for most of the well-being variables, the only variable to show differential change by condition was environmental mastery. That is, significant group $\times$ time (pre-post) interactions were found for professional versus peer, $F(1, 52) = 7.04$, $p < 0.01$, and professional versus control, $F(1, 52) = 4.89$, $p < 0.05$. The peer versus control interaction was not significant.

Discussion

This pilot study set out to investigate two general questions:

(1) *Is professional life coaching more effective than peer life coaching in enhancing the goal progression and goal commitment of coachees*? The results of this study suggest that professional coaching was indeed superior to peer coaching. Not only did the professionally coached participants attend significantly more coaching sessions than peer coached participants (suggesting a greater level of engagement), this group also reported significantly greater post-coaching goal progression (compared to the control group) and greater goal commitment than both the peer and control conditions. In contrast, peer coachees did not significantly differ from the control group on post-coaching goal progression. In addition, their level of goal commitment significantly decreased.

These results imply that merely engaging in regular goal-focused conversations with a peer is insufficient for successful goal striving. Somewhat
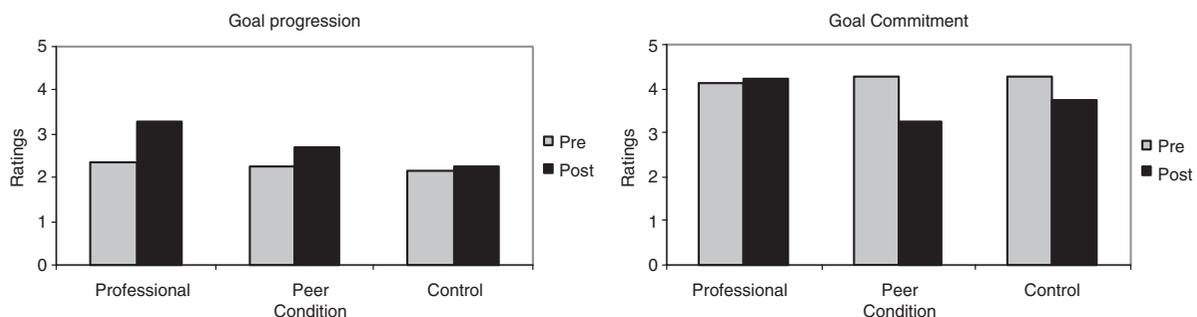
Figure 2. Pre-post coaching means for goal striving variables.

reflective of earlier findings highlighting the importance of perceived expertise to coach credibility (Sue-Chan & Latham, 2004), our data suggests the coaching process is greatly enhanced when it is directed by a professional who is trained in the principles of behavior change and possessing the skills required to build an effective coaching relationship. In contrast, peer coaching relationships may not be adequate for successfully handling the many obstacles and challenges that are encountered by individuals when striving towards a goal (e.g., ambivalence, negative self-talk, perceived lack of resources). If so, peer coachees may find it more difficult to maintain their motivation and become less engaged in the coaching process over time. This interpretation is supported by the goal commitment and coaching attendance data.

(2) *Does life coaching enhance the subjective and psychological well-being of individuals?* In contrast to the results reported by Grant (2003a) and Green et al. (2006), life coaching had a minimal impact on the well-being of participants in this study. Although both coaching conditions reported Time 2 increases for several subjective and psychological well-being variables, the only significant result was observed for environmental mastery, with the professional coachees reporting significant increases compared to both the peer coaching and control groups. This result makes sense as environmental mastery is a dimension of psychological well-being that reflects the perception that one is resourceful and able to effectively manage one's surrounding world (Ryff, 1989). As such, increases in this variable should correspond with increases in goal progression (as reported earlier), as feeling more competent is known to translate into more effective action (Maddux, 2002).

While the minimal impact of life coaching on well-being was surprising, it may be partly explained by the design of the study. First, the current intervention was goal-focused rather than targeted at enhancing well-being, and other coaching interventions specifically targeted at increasing well-being may have an effect where this intervention did not. Second, by screening for mental health problems and excluding individuals with elevated levels of psychopathology from participation, this sample is likely to have been a relatively ''happy'' group. If so, participants may have been unable to reflect increases in well-being, as their already elevated scores could have created a ceiling effect.

Mental health screening

There is good reason to recommend the continued use of mental health screening in life coaching research, despite the possibility that such screening may reduce the chances of detecting statistically significant effects. Although life coaching seeks to assist individuals to move towards optimal levels of personal functioning, evidence from both this study and Green et al. (2006) suggests that life coaching may be attracting individuals with serious mental health concerns. In the present study, 25% of the initial pool of volunteers reported elevated levels of psychopathology (as measured by the BSI), whereas Green and colleagues (2006) reported that over half of their volunteers (52%) fell into this category. Such findings are important because they suggest that life coaching is being perceived as a ''socially acceptable'' form of therapy, less tainted by the stigma of therapy or counseling.

According to Spence, Cavanagh, and Grant (2006), this possibility is alarming because the robustness of a life coaching approach might only serve to exacerbate pre-existing clinical symptomatology in individuals seeking relief from such conditions (e.g., depression). Given that most commercial coach training schools devote little (if any) attention to the identification and referral of mental health issues in coaching (Grant & O'Hara, 2006), it is doubtful whether coaches are adequately prepared for discharging their duty of care obligations towards clients (Spence et al., 2006). Thus, caution should be exercised when conducting research into life coaching programs. We recommend that researchers: (1) use a valid and reliable clinical instrument (such as the BSI) to screen participants prior to the commencement of coaching, (2) develop a referral procedure for individuals requiring clinical assistance, and (3) only use coaches who understand the potential for mental health issues to emerge in coaching and have training in the identification of such issues.

Limitations of the study

There were several limitations to the current study. First, although professional coaching appears to have been the more effective coaching intervention, the data only permits us to speculate on why this might have been the case. That is, we cannot say for certain that the differences between the coaching groups occurred because, say, the professional coaching sessions facilitated better planning or were more adept at dealing with unhelpful cognitions, or because the peer coachees generally felt more dissatisfaction with their peer coaching arrangements (e.g., their assigned peer coach). As such, future research would be enhanced by capturing data on the experience of coachees during coaching, along with identifying factors that impact upon important variables (such as coaching attendance). Indeed, it is likely that questions related to how coaching

has its positive effects and the factors that effect it (i.e., *process* research) will be of greater long term interest than studies merely demonstrating that coaching does have positive effects (i.e., *outcome* research) (Hersen, Michelson, & Bellack, 1984).

Second, as the goal progression data in this study was obtained using a self-report measure, it is possible that demand characteristics may have biased the results. That is, if inclusion in this study created an expectation amongst coachees that they *ought* to have made progress towards their goals, then this expectation might have resulted in over esti-mated post-coaching progression ratings. In order to remove this potential source of bias from future studies, more objective measures of goal striving would be required. One possible methodology, Goal Attainment Scaling (for a review see Kiresuk, Smith, & Cardillo, 1994), achieves greater objectivity by getting both the client and helper to agree on the client's level of goal attainment and specific goal-attainment benchmarks prior to the commencement of coaching. In so doing, clients are often encouraged to substantiate attainment ratings by referring to diaries or other monitoring systems (Schlosser, 2004), an approach that could easily be adapted to a coaching context.

Finally, the CB-SF coaching methodology used in this study is more complex and lengthy compared to the standards of conventional social psychological research. For example, coachees were encouraged to set the agenda and their own goals for each coaching session. While this approach allowed coaches to spontaneously respond to the needs of each coachee, this feature of the design may make the study difficult to replicate because the intervention was not standardized (and there are likely to have been subtle variations in how coaches worked with coachees). More importantly, any claims made about the efficacy of CB-SF coaching from this study must be tempered, as it is not known how faithfully coaches adhered to that coaching model. For this reason, future researchers may wish to concentrate on developing more structured coaching programs that can be manualized and delivered in either an individual or group-based format. Such a program might be focused around a manual that outlines the CB-SFC approach, be introduced in a workshop format (similar to the one used in this study), followed by a series of weekly sessions that are themed (e.g., "Week 2: Dealing with negative thoughts") to allow coaching conversations to remain connected to the essential elements of the CB-SF coaching.

However, we argue that this limitation can also be considered to be relative strength of the study. First, the present study has brought a measure of realism to counter the frequently over-enthusiastic claims of efficacy from the life coaching industry, and has shown that while life coaching can be effective in some areas of goal striving and well-being, it is no panacea. Second, the design of this study was chosen to accurately reflect a "real world" coaching engage-ment and as such was delivered to a community sample and conducted across a realistic timeframe (10 weeks). While we acknowledge that some standardization and simplification of these programs may be advantageous, we argue that there is a danger in taking coaching further "into the laboratory". That is, the quest for greater scientific rigor may lead coaching research to become overly "sanitized", yielding little of practical value to the field. As such, future researchers will need to carefully consider the often-competing demands of coaching research and practice.

Conclusion

Interest in the development of evidence-based coaching practice is increasing and has recently been identified as important for the long-term sustainability of professional life coaching practice (Cavanagh, Grant, & Kemp, 2005). Not surprisingly this has been accompanied by calls for research. This exploratory study represents an early attempt to answer this call.

Consistent with previous findings (Grant, 2003a; Green et al., 2006), our results suggest that engaging with others in regular goal-directed conversations is a useful thing to do. This paper extends upon previous findings and has found that coaching outcomes appear to be enhanced when coaching is provided by professional coaches. More specifically, we found that the coachees of professional coaches attended more coaching sessions than peer coachees, reported greater goal progression and environmental mastery, and maintained commitment to their goals across the coaching period (compared to peer-group coachees and a control group). As such, it appears that the presence of a supportive person may be a necessary but insufficient condition for facilitating goal attainment, and that expertise is required to successfully guide the coaching process.

We propose that life coaching is indeed an appropriate area for scientific enquiry. With a solid theoretical and evidence-base, life coaching can emerge from the often sensationalistic shadow of the pop psychology movement and into the more considered realm of behavioral science. In time, evidence-based life coaching may well prove to be an effective means of facilitating personal goal attain-ment and enhancing well-being, helping make manifest the promise of an applied positive psychology.

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