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Hidden in Plain Sight: The Active Ingredients of Executive Coaching

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Abstract

We propose that I/O psychologists who coach executives have overlooked psychotherapy outcome research as a source of information and ideas that can be used to improve our executive coaching practices. This research, based on thousands of studies and many meta-analyses, has converged on the conclusion that four ''active ingredients'' account for most of the variance in psychotherapy outcomes. We describe how this literature has identified four primary ''active ingredients'' that account for most of the variance in psychotherapy outcomes: 1) Client/extratherapeutic factors (40%), 2) The relationship or alliance (30%), 3) Placebo or hope (15%), and 4) Theory and technique (15%). Working on the assumption that psychotherapy and executive coaching are sufficiently similar to justify generalization from one domain to the other, we describe these four active ingredients at length and explore how they may be at work in the executive coaching process. We also suggest that I/O psychologists have training and experience that allows us to leverage some of these active ingredients in our executive coaching (e.g., understanding of client individual differences related to coaching outcomes). But we also have areas of weakness (e.g., building a strong working relationship with an individual client) that may need to be bolstered with additional training and development experiences.

Executive coaching is hot. In the past 15 years, what was stigma in corporate America (''You have a coach? Hmm . . .'') has become status symbol (''You don't have a coach? Hmm . . .''). Perhaps as cause or consequence of this change, executive coaching has exploded into a billion-dollar-plus industry (Stober & Grant, 2006; Valerio & Lee, 2004), the scent of money and interesting work attracting people with all kinds of backgrounds into the business of coaching.

In the halls of major corporations over the past several years, we've run into former professional football coaches with playbooks, entrepreneurial educators armed with MBTIs, communications specialists with 360s, orchestra conductors with rhythm and harmony metaphors, and spiritual gurus with transcendent wisdom, all practicing executive coaching. Retired or fired executives are also getting a piece of the action. On a recent visit to a client company, one of us was surprised to bump into another company's CFO who had been terminated the day before. His freshly printed business card announced his new job: Executive Coach. Fired one day, executive coach the next.

But the market for executive coaching is changing fast. As the current

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recession deepens and spreads, companies are exercising tighter control on executive coaching, demanding higher levels of accountability from everyone involved: sponsors, clients, and coaches. Sponsors and clients who cannot show clear business value from coaching will lose their funding. Coaches who cannot make a compelling argument for the way they work and the results they produce will be sent home. Borrowing prophetic words from our late mentor, Marvin Dunnette (1966), we predict that those relying on fad, fashion, and folderol will be gone by the end of this fiscal year.

But for the industrial–organizational (I–O) psychologist whose coaching is grounded in sound theory and rigorous research, this won't be a problem. Although the profession is in the early stages of constructing an empirical case for the effectiveness of coaching (cf. Grant, SIOP Leading Edge Consortium), we have at our immediate disposal a deep, but overlooked, pocket of relevant thinking and research in our root discipline of psychology.

Although nonpsychologists can borrow our tools (e.g., 360 assessment and personality inventories) and techniques (e.g., goal setting and feedback), they will be hard pressed to internalize and incorporate the concepts, the research base, and the perspectives that come from our education and experience as psychologists. Our discipline offers a deep understanding of how people change and how to help them do so. But we can only benefit from this body of knowledge and experience if we are willing to relax our grip on what we know best and venture into an area of psychology that makes many of us nervous: psychotherapy.

Our intention in this article is to begin a dialogue with you, our I–O colleagues who coach executives (or aspire to coach them), about how we can capitalize on decades of psychotherapy outcome research to become extraordinary coaches for our executive clients. At the same time, we can strengthen our position in a market demanding higher levels of accountability.

We can survive and flourish during these difficult times.

The Active Ingredients of Psychotherapy

Since Hans Eysenck (1952) launched his broadside attack on "talk therapies," researchers have been hard at work building a case for the effectiveness of psychotherapy. With growing demand for mental health services[1] and the ascent of managed care in the late 1980s, those paying for these services have applied increasing pressure for proof that psychotherapy is effective (cf. Asay & Lambert, 1999). Fortunately, researchers were already hard at work when this pressure hit and were able to deliver overwhelming evidence showing that psychotherapy does indeed work (Bergin & Lambert, 1978). In recent years, researchers have turned to a more sophisticated question: If therapy works, what are its active ingredients? For I–O psychologists who coach executives, that's where the treasure lies hidden.

Four factors account for almost all the systematic variance in psychotherapy outcomes (Asay & Lambert, 1999). These are the "active ingredients" that make therapy effective. They can also be called "common" factors because they are active in all effective therapeutic interventions, regardless of the theoretical orientation or techniques (e.g., psycho analytic and cognitive-behavioral) employed by the therapist. The relative importance of the four active ingredients based on variance accounted for in psychotherapy outcomes is shown

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1. During the decade between 1985 and 1995, the number of professional mental health practitioners in the United States increased by almost 275% (Miller, Hubble, & Duncan, 1996). Supply has expanded to meet growing demand for mental health services, a shift that most observers have attributed to changes in societal attitudes toward seeking and getting professional help for psychological problems or personal growth, rather than a general erosion of mental health in the United States. We believe that the boom in executive coaching may be riding this larger wave of change, but lagging it by 5–10 years.
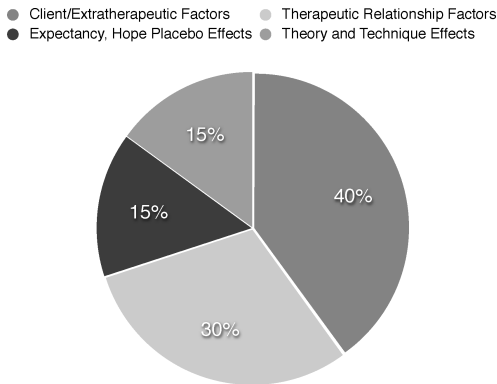
● Client/Extratherapeutic Factors   ● Therapeutic Relationship Factors
● Expectancy, Hope Placebo Effects   ● Theory and Technique Effects

Figure 1. The active ingredients of psychotherapy and the percentage of outcome variance accounted by each factor.

in Figure 1 above (after Asay & Lambert, 1999).

We will define each of the ingredients to set the stage for an in-depth discussion of how they apply to the practice of executive coaching.

Client/extratherapeutic factors (40%). Characteristics of the client and his environment outside of therapy are the most powerful predictors of psychotherapy outcomes. Individual differences matter. ''Selection'' turns out to be as important in building a successful psychotherapy practice as it is in building a successful organization (Lambert & Barley, 2002, p. 27).

The therapeutic relationship (30%). The quality of the relationship between therapist and client is the second most powerful active ingredient in psychotherapy. Based on his meta-analysis, Lambert (1992) argued that the relationship accounts for 30% of the variance in outcomes. The quality and durability of the client–therapist relationship can make or break therapy (Lambert & Barley, 2002).

Expectancy, hope, and placebo effects (15%). Clients on waiting lists for therapy often improve before receiving treatment. Hope is a critical variable powered by therapists themselves and by clients who

hope or expect to improve. Those who expect to improve through therapy do better than those who don't.

Theory and techniques (15%). Hundreds of studies and meta-analyses of psychotherapy outcomes have converged on a controversial and still not fully accepted conclusion in the psychotherapy community: The power of psychotherapy to facilitate change comes primarily from factors that the various schools, theories, and techniques have in common, not from the differences between them. But there is something more subtle about theory and technique that makes a difference in psychotherapy: the resonance between the therapist's approach and the client's ''theory of change.''

Generalizing the Active Ingredients to Executive Coaching

There are important differences between psychotherapy and executive coaching (Peltier, 2001). These differences must be considered if we are to responsibly generalize the active ingredients research to executive coaching. We are not encouraging coaches without clinical or counseling training to stray over the line between coaching and therapy.

But there is a functional similarity between the two processes that warrants an exploration if we want to become better executive coaches. Both are efforts to facilitate psychological and behavioral change through the medium of a collaborative relationship between a trained professional and a motivated client. We think our colleagues in psychotherapy research and practice are ahead of us in understanding what makes these relationships work. If you are willing to entertain this assumption of functional similarity, setting aside for the moment worries about coaches doing therapy, we believe that a thoughtful application of the active ingredients has the potential to transform your executive coaching practice.

For those of you still nervous about generalizing from psychotherapy research to executive coaching, it may be comforting

to know this is already being done in medicine and education (Murphy, 1999; Scovern, 1999). Research is demonstrating that doctors and teachers who attend to the four active ingredients are getting better results with patients and students. And as experienced executive coaches ourselves, we are experimenting with these ingredients and the results are promising.

To begin the conversation, we will consider the application of each of the four active ingredients in turn. First, we will tap the psychotherapy literature to define the ingredient and then extend the definition to the executive coaching engagement. Second, we will use brief case examples from our own coaching experience to show how the ingredient can focus and organize our thinking about clients and their situations. Third, we will suggest principles for practice that we have found helpful in activating and leveraging that ingredient in our executive coaching practices.

A final note: the four active ingredients are interactive. Though we will focus on them separately for the sake of clarity, please keep in mind that they are inextricably interwoven in our work with executive clients. We are confident that these interactions will surface in your mind as you read about each ingredient.

Active Ingredient #1: Client/Extratherapeutic Factors

It's frequently more important to know what kind of patient has the disorder than what kind of disorder the patient has. (Norcross, 2002, p. 6)

As I–O psychologists trained to look for individual differences that predict performance criteria, our first reaction to this statement was "well, of course." This is an active ingredient in psychotherapy that we know how to think about, measure, and put to practical use.

The psychotherapy outcome literature speaks with one voice on the matter: What the client brings to the therapeutic engagement—personal characteristics and characteristics of her environment or social system—is the most powerful predictor of psychotherapy outcomes (e.g., symptom relief and vulnerability reduction).

If we can generalize this finding to executive coaching, we will have an opportunity to leverage our expertise in individual and organizational (or more broadly, work and social system) differences to predict or anticipate how much progress or value each of our clients is likely to get from coaching. Let's take a closer look.

In psychotherapy research, the client factors that consistently predict improvement on various outcome criteria include severity and chronicity of the problem, complexity of symptoms, motivation, acceptance of personal responsibility for change, and coping styles (Asay & Lambert, 1999).

The client's part of the 40%. It is difficult to embark on a coaching journey with an individual who has limited capacity to change. Which differences do we need to be aware of when we think about what the client brings to coaching and whether she's really ready to change? Davis and Barnett (in press) constructed a qualitative "readiness for coaching" scale. The major distinctions are motivation to change, intelligence, Conscientiousness, Openness to Experience or feedback, learning orientation, self-efficacy, and self-awareness.

Readiness is a composite of willing and able. Imagine trying to be an effective coach without knowing your client's level of readiness. It would be like jumping off the high dive before knowing the depth of the water. As Prochaska (1999) has indicated, if we can match the methodology of our intervention to the client's stage of (readiness for) change, the process works. If we are lucky, our client has a high level of readiness. Without personal barriers to change, the client (along with his coach) can move quickly to goal setting, action planning, and experimenting with new behaviors.

With a client who has only modest ability to learn and change, we have a different challenge. Our first task may be to increase

the client's readiness through enhancing motivation, showing that change is possible, increasing Openness to feedback, or encouraging risk taking. If this most powerful active ingredient isn't strong enough, it's our job to activate it or move on.

Turning once again to the psychotherapy literature, we discover that our colleagues have tried to understand the outcome by studying the interaction between individual differences and treatment choices. It is a journey fraught with perils. Yet, research suggests that client coping style plays a moderator role in the treatment outcome (Beutler, Harwood, Alimohamed, & Malik, 2002). The authors define coping style as, ''habitual and enduring patterns of behavior that characterize the individual when confronting new or problematic situations'' (p. 147).

Using broad patterns of behavior and long-standing research on personality, they categorize individuals as either internalizers or externalizers. There is good evidence to show that interpersonal and insight-oriented therapies are most effective among internalizers, whereas symptom-focused and skill-building therapies are most effective among externalizing patients. No wonder the more introverted executive you are coaching looks for insights or new perspectives and the extraverted executive asks for something new to do or experiment with.

Extratherapeutic variables. Therapists call the second element of this ingredient, extratherapeutic. The client brings his social system, his support system, his history, and his experiences—all there for us to leverage. While therapists attend to family systems and social relationships, coaches must consider the organization's culture, business demands, and social networks. We can't change the organization's culture, but we can understand how it will or will not support change and how to use it.

The Center for Creative Leadership has made the case that individual change occurs most readily in an environment or with a manager that provides both challenge and support. The client brings

all of those elements into the process; it is our job to find them, use them, or activate them.

Extratherapeutic change means something significant happens outside of therapy—a definition that can certainly be applied to coaching. What else is our client doing in real time to find solutions or create change? The list is long. It encompasses action learning groups, self-help literature, social networks, friends, mentors, physical exercise, and online resources or interactions. If we pretend that these learning experiences have nothing to do with our coaching, we are misguided. If we can find ways to use them, we increase the power of our efforts exponentially.

The first active ingredient applied. We would all like to believe our professional magic alone produces behavioral change. We see higher impact leadership and are proud of our efforts. It is seductive to believe too much in our processes, techniques, insights, and experience. They are vital. Yet the most powerful active ingredient has little to do with our own actions and insights—that ingredient is the individual and the unique circumstances that she brings to the coaching process.

Magic occurs in psychotherapy too. Tallman and Bohart (1999) advance the premise that it is primarily the client who makes change happen. So what do we contribute as coaches? We set the stage and activate the power of the client to change. We are not the heroes, even though our country's obsession with the cult of personality influences us to believe that we are. Never forget that it is the meaning our clients make of what we do or say and their capacity to generate their own change that is magical.

As coaches we have anecdotes that illustrate the point. How many times have you by chance encountered someone whom you coached in the past and heard something like this, ''I will never forget what you told me; I have made that a hallmark of my leadership.'' We say, ''Thank you,'' and, ''Congratulations,'' then we ask, ''What was

it I said? What is it you used?'' If you are like us, the answer is frequently something you don't even remember saying. Our clients are active learners, who use what we offer and ultimately assign their own meanings. No wonder they account for 40% of the outcome.

Activating the client/extratherapeutic factor: A client example. We would challenge you to leaf through your coaching portfolios and test for the presence or absence of this active ingredient in your work with specific clients. Here is an example from ours.

In Scott's role as head of sales, he had always experienced success. However, last year he missed his numbers and blamed it on the fact that several of his top performers left the company. Scott's boss strongly suggested executive coaching to improve Scott's interpersonal skills. Offended at what he believed was remedial help, Scott approached coaching with low readiness—he didn't really want help, he was there because his boss sent him and he believed there was nothing wrong with his interpersonal skills.

It was not difficult to identify Scott as an externalizer—outgoing, fast-paced, impatient with process, and always asking what we were going to *do*. We started by working with him to articulate an outcome he would value (thereby increasing his readiness). He defined his goals as beating his revenue target and keeping his best performers. It was only logical for him to agree to allow his coach to interview his team members. Scott helped to formulate the questions for his coach to use in a qualitative 360° process. When he learned that his direct reports described him as demotivating and demeaning, it was a moment of awakening for Scott. After he got over his initial shock and anger, Scott was eager to learn what to do differently. That was when his readiness truly changed. Eventually, he was able to put new skills into action. To his surprise, he discovered they worked—at the end of the year he had exceeded his revenue targets and none of his high performers left the company. Our

coaching helped Scott mobilize his own ability to change.

Principles for practice. We offer a few guidelines in addition to those embedded in the commentary.

- Never believe it is all about you; it is the client who ultimately makes magic and makes meaning.
- Take the time to understand readiness and the personal elements that contribute to ability to learn and change.
- When needed, work with the individual to increase readiness to change.
- Terminate the coaching relationship or don't take it on in the first place if there is no way to activate this ingredient.
- Tap into the individual's networks for change and other modalities she uses to learn—like social networks, books, mentors, friends, and so forth.
- Help the client identify specific strengths and resources that he can put into action to make changes back at work.

Active Ingredient #2: The Relationship

It's the relationship, stupid! (Norcross, 2002)

The client's abilities, motivational readiness, and life circumstances are the most powerful predictors of change in psychotherapy. Tallman and Bohart (1999, p. 95) assert: ''70% of why therapy works goes to the client and 30% to the therapist.'' (p. 95). How the client makes use of what happens in therapy is more important than what the therapist does.

But the therapist and the process of therapy do make a difference. Clients do better with therapy than they would without it. Seventy to 80% of outpatients show significant benefits from a wide range of therapies and techniques.

So there's something about therapy that helps clients go beyond what they can accomplish on their own. And that

something is the client–therapist relationship. Although Lambert's (1992) meta-analysis gave 30% of the variance in psychotherapy outcomes to the relationship, Wampold (2001) raised the stakes even higher, claiming that the relationship accounts for 54% of the variance in the impact of therapy. That is seven times more than the variance accounted for by theory or technique! Imagine: This is the equivalent of saying that your relationship with your doctor is seven times more important to your recovery than the medicine she prescribes.

Although executive coaching and therapy relationships operate at different emotional depths, we believe the client–coach relationship is critical to any engagement. It goes far beyond simply providing content expertise (e.g., market segmentation and business models) or didactic advice (e.g., how to design a leadership team retreat). It is the vehicle through which the coach activates the client's ability and willingness to change. It is also a specialized, focused kind of working relationship. Just being ''good with people'' is not enough.

Client involvement. Most commentators would agree that an effective psychotherapy relationship is one that promotes and sustains the active involvement of the client. Most simply, this means that the client stands ready to (a) invest time and energy in the process; (b) do the work of therapy even when it becomes difficult; and (c) take personal responsibility for transferring what is learned into action for change.

If you've ever had a hard time getting traction with an executive client, you have a visceral understanding of the importance of client involvement in coaching. The problem behind that lack of involvement may be that the relationship never got off the ground in the first place or broke down en route.

Therapeutic alliance. Bordin (1976) has argued persuasively that the most effective therapy relationship is a working alliance based on collaboration and consensus. He defines the ''alliance'' in terms of three elements: goals, tasks, and bonds.

In a strong, productive therapeutic alliance, there is mutual agreement about the goals of therapy and about the tasks necessary to achieving those goals. There is also a positive, affective bond between client and therapist. Failure to establish a ''just good enough'' alliance[2] in the early going of the therapy process is predictive of early or premature termination.

The alliance is dynamic. Agreements and bonds flex and change over the course of treatment. The most effective therapists pay close attention to these changes as therapy progresses, addressing and repairing breakdowns as quickly as possible. The time window between the third and fifth sessions appears to be critical. If the alliance has not solidified in all three dimensions by that time, early termination is more likely and the prognosis for a good outcome becomes more unfavorable.

Coaching alliance. This thinking provides a powerful focus for executive coaching. To be most helpful, we must attend to the process of building a working alliance with the client right from the start of the engagement. We must focus on goals and topics that are important to him. We must approach his issues in a way that makes sense to him. And we must be prepared to renegotiate these goals and tasks in response to inevitable changes in the client, his situation, and in our relationship.

Equally important, we must forge an affective bond with the client. Though the process of bonding sounds mysterious, there is a vast and fascinating psychotherapy literature on the client–therapist bond that can inform and guide our work on this aspect of the coaching alliance. For example, there is strong evidence that the

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2. Early client reactions to the alliance can be too positive. These reactions give rise to expectations that are unrealistic and unachievable. When confronted with necessary but emotionally difficult challenges in therapy, the client's evaluation of the alliance may swing back the other way. This creates a rupture in the relationship that may have been avoided by the therapist setting more realistic expectations at the start. We will return to this issue in the section on the third active ingredient in therapy and coaching: hope.

strength of the bond depends heavily on the therapist's ability to express—to the client's satisfaction—warmth, understanding, and acceptance (Najavits & Strupp, 1994).

These findings raise great questions for coaches: How do my clients feel about our relationship? Do they feel heard, understood, and respected? Do they think we are working on the right things in a way that makes sense to them? Am I consistently positive in our interactions? Am I aware of times when I get negative with the client? Am I intentional and skillful in cultivating a strong, resilient alliance with the client? Am I interested in the relationship dimension of executive coaching or is that too soft for me?

Tailoring the alliance to the client. Beyond the fundamentals of building the alliance, it is clear that extraordinary therapists customize their approach to the styles and preferences of their clients. The most effective therapy is tailored, no one size fits all.

For example, although it is clear that expressing empathy is important to building and strengthening the alliance, clients have different levels of preference and tolerance for expressions of feeling, understanding, and support. What one client perceives as a helpful empathic response may feel invasive or alien to another (Norcross, 2002).

This may be even more true in executive coaching, in which clients can be very sensitive about excursions into their personal worlds. This presents us with a dilemma and a challenge. First, to build an effective coaching alliance, we must read and respond with a level of empathy that communicates understanding and strengthens the affective bond with the client. Second, we must do so without crossing into emotional territory that we are unprepared to handle with skill and responsibility. The ability to walk that line is one element in the fine art of executive coaching. Because it is critical to building and maintaining the alliance, it is a skill we must be continually refining.

Coaches must be prepared to flex and adapt to the relationship styles and preferences of executive clients if they want a vital alliance. As any seasoned executive coach knows, some clients are not very adept at forming positive, open relationships with others. They come out of the gate with hostility, arrogance, or suspicion, whether it's with a colleague or a coach. It may be exactly why their boss recommended they hire a coach.

The executive coach who is intimidated or irritated by such behavior will have a hard time building an alliance with the client. But a coach who can manage her reactivity to a prickly client with composure and patience may be able to develop a highly productive, even transformative, alliance.

The client's view is pivotal. There is ample evidence that the quality of the alliance predicts outcomes. But it is important to note—as we have already hinted—that it is client ratings of the alliance (rather than therapist or observer ratings) that have the most predictive power. Great therapists appear to be cognizant of this fact. They make it a regular practice to check in with the client about his evaluation of the state of the alliance. We think this practice makes good sense for executive coaches as well and have begun to incorporate brief, regular alliance assessments in our own work with clients.

If we are shy about talking with our clients about the process of coaching (i.e., the alliance and relationship), we risk not hearing about concerns that may be weakening or even dissolving the alliance. By being on the alert for alliance problems, the coach can identify breakdowns earlier, work to repair them, and maintain or even strengthen the alliance.

Activating the relationship factor: A client example. This client and his coach had worked together for over 2 years. Their primary goal during this time had been to help the client become a stronger, more visible leadership presence with his peers and in his own organization. Because things were going well for the client, they mutually agreed to take a break from the coaching

process, with the understanding that the client was free to call anytime should he need consultation or help.

After a year, the client called and asked the coach to come in for a coaching session. They met and the client spent most of 2 hours bringing the coach up-to-date on what was happening in his business and career progression. At the end of the meeting, they talked about new goals and how to work on them (tasks). The bond between them seemed as strong and positive as ever. They scheduled another session for the following week.

Three days later, the coach billed the client for the first meeting. The client responded with outrage, claiming that there had been no coaching done in the meeting, that he had done all the work. When the coach saw the flaming e-mail, he realized that the alliance had ruptured, and that repair was the prerequisite to doing any more good work together.

Although the coach thought that he had good reasons for billing the client for the meeting, he realized that the two of them had not talked about the rules of engagement for restarting the coaching process. So rather than burning down the alliance by insisting that it was appropriate for him to have billed for the restart meeting, the coach arranged a call with the client. He then explained the reasoning behind his bill, but also apologized for failing to make a clear contract for reengagement with the client. He cancelled the bill.

The client thanked the coach and accepted his apology. He also apologized for coming on so strong in protesting the bill. A week later, they met and put together a new contract for coaching. They each talked about how much they valued their work together. They agreed that their relationship seemed even stronger after being tested in this way. Most important, they proceeded to do more good work for the client.

Principles for practice. The psychotherapy literature on the relationship and the alliance is rich with ideas for coaching

that space does not permit us to explore here. We highly recommend Norcross's (2002) book: ''*Psychotherapy Relationships That Work.*'' There you will find excellent thinking and research on elements that affect the alliance and outcomes; elements we have barely touched on here (e.g., resistance, positive regard, attachment style, and self-disclosure). For now, we offer you the following principles for practice.

With new clients:

- Make building the alliance a high priority right from the start.
- Organize your thinking and interaction with the client around establishing the three elements of the alliance: goals, tasks, and bonds.
- Set the client's expectation that you will have regular conversations about the relationship itself and how it's working for them. Then follow up and ask them for their evaluation of the elements of the alliance.

With existing clients:

- Take stock of the quality and strength of your alliances; ask yourself how the state of the alliance is affecting progress in each engagement and what you can do to improve each relationship.
- Assess your own strengths and weaknesses in building client alliances; where are your opportunities for improvement?
- Recognize that you are half the equation in an alliance. You can't be effective when distracted, anxious, fatigued, or unprepared. Take care of yourself to be a more effective partner.

Active Ingredient #3: Expectancy, Hope, and Placebo Effects

Hope is both the earliest and the most indispensable virtue inherent in the state of being alive. (Erikson, 1964)

Physicians and drug companies have long worried about the influence of placebos. Beecher's article ''The Powerful Placebo'' (Beecher, 1955) showed how the patient's belief that she was receiving an effective treatment and the patient's psychological qualities both strongly influenced recovery and healing. Webster's defines placebo as a ''prescription intended to humor or satisfy'' or ''an innocuous or inert medication given as a pacifier to a control group.'' But a placebo is more than a pacifier, more than something that just ''humors'' the patient. Medical research has proven that placebos activate hope and create expectations for a positive outcome.

What does psychotherapy research teach us? Remember that this ingredient accounts for 15% of the final results of psychotherapy (Asay & Lambert, 1999). Numerous studies (Snyder, Michael, & Cheavens, 1999) have shown that a substantial portion of client improvement occurs within the first 3–4 weeks of treatment. Even half of clients who simply make an appointment and wait for a first session report improvement in their symptoms or sense of well being. Frank and Frank (1991) from their research on placebos in psychotherapy believe that placebos are effective because they mobilize a client's expectation of improvement.

Expectation of improvement is a cognitive variable—I think or believe I will improve (Snyder et al., 1999). Hope relates to how an individual thinks about his goals. Does he see several workable routes to his goal (pathways thinking) and does he believe he has the ability to begin movement down one or more of those routes (agency thinking)? Remember the children's story about the little engine that could? It is a prime example of agency thinking: ''I think I can, I think I can, I think I can.''

The client's hopes or expectations are powerful. So are our own. Medical research has shown that physician expectations can be isolated and studied as an independent variable in drug trials. Numerous studies show that drug efficacy relates to the attitude of the physician who prescribes it.

In an interesting study by Luparello, Leist, Lourie, and Sweet (1970), asthma patients who were told that a dilator would open up their airways had physiological effects that were twice as great as those who were told nothing. My own belief in my client's ability to change makes a difference. Hope is not a one-way street.

As executive coaches we send constant messages to our clients. If either explicitly or implicitly we let them know they can expect successful change, we are activating this ingredient. We activate it even before we first meet a coaching client. In the coaching literature, we have often seen reference made to the credibility of the coach. Whenever we work on increasing credibility, we are actually activating our client's cognitive expectations that coaching will be effective. Suggesting that a potential client check our references is not only smart business practice, but positive references begin to instill the belief that change can occur. Maybe the reason clients seek out celebrity coaches is that these individuals activate hope.

Activating hope: A client example. Activating hope also advances the probability of change at every stage in the coaching process. If hope is the combination of pathways thinking and agency thinking then we should be constantly thinking about activating this ingredient.

Consider Tanley, the newly promoted senior vice president of marketing, who sought coaching to help her successfully make the transition to the executive level. Her CEO referred Tanley to an executive coach whom he described as having ''great insights about our business and knows what it takes to be a strong member of my team.'' Tanley's initial voicemail to the coach revealed her excitement: ''I heard about you from our CEO and I've checked you out online; can we meet to talk about your potentially coaching me?'' The coach called back immediately. Waiting a day or two to answer Tanley's enthusiastic voicemail might have put the brakes on her hope.

When Tanley and the coach first met, she immediately launched into how much difficulty she encountered in her new role. On the positive side, she loved the content of her job, thought she had a competent team who required inspiration, and had already implemented two new initiatives that were delivering results for the business. So what was wrong? She expected her new peers to welcome her and help her learn the ropes. She had expectations of what life at the top would be like, but her experiences were the exact opposite. She felt there was a certain culture or social code that existed, and she was uncertain how to break the code or enter the culture. Her peers went off to lunch together, they rarely seemed interested in her, and the points she raised in meetings were only validated when someone else voiced them. She worried about their unspoken expectations for her performance—was there some secret handshake she had missed? She was frustrated. She ruminated on what she was doing ''wrong.'' And she internalized many of her reactions and worries.

She stated that her goal was to learn whether and how to build relationships with her (all male) peers, and she wondered what messages she should read into their paying her so little attention. This is not an uncommon story for women executives at the top. It was especially challenging for Tanley because for the first time in her career she neither knew how to conceptualize the problem nor how to solve it.

The coach talked with her about the experiences of other women who have moved into their first role at the top. Using Rosabeth Moss Kanter's work on being the only one in a majority culture, Tanley's coach helped her begin to understand the dynamics that were at play. At least she found some reassurance in the experiences of others. The coach also connected her with two senior women executives who had made a successful transition. Once Tanley had grasped the situational dynamics and how she contributed to them, she saw ways she could be more effective.

They brainstormed possible actions (pathways thinking) and later role played conversations she could have with her peers under the heading of ''What do you need from me to be successful in your role, and how will you measure whether I am adding value?'' Her typical confidence that she could do it (agency thinking) kicked into gear and Tanley began to build some of the relationships she wanted. She also recharted her expectations for life at the top—what did she really want and need from peer relationships? She told the coach that their work had given her the hope and confidence that she could create effective and satisfying working relationships at this senior level.

Although coaches are not magicians, we do have some magic. We have the power to activate hope. It is a factor at our disposal at many points in the coaching process; we need to be intentional about using it.

Principles for practice. Here are some principles for activating hope with your coaching clients:

- Don't be shy about describing your capabilities or the changes you have seen individuals make in their lives through coaching. Build your credibility through storytelling and references.
- Treat hope as a cognitive variable: Consider how you are helping your client create pathways and agency thinking.
- Connect your client with others who have faced and surmounted the same issues. Others' stories are not just inspirational, they provide possible pathways.
- Consider your own hope for the client; Can you envision pathways for change and imagine the client moving down them?
- Recognize you are part of the equation. Constantly ask yourself whether you believe in your client's ability to change and your own ability to assist. If you lose faith, figure

out whether you can regain it. If not, terminate the coaching engagement.

Active Ingredient #4: Theory and Techniques

Theory, however elegant, does not matter much to the effectiveness of psychotherapy. (Duncan, Sparks, & Miller, 2006)

For the last century, psychotherapists have splintered into opposing camps, often around charismatic founders. Each school has argued that their theory, model, and techniques are more valid and effective than those of their rivals (e.g., psychodynamic versus behaviorist versus client centered, etc.). Vast amounts of energy and emotion have been invested in these debates.

Yet hundreds of studies and many meta-analyses of psychotherapy outcomes have converged on a controversial and still not fully accepted conclusion: The power of psychotherapy to facilitate change comes primarily from factors that the various schools, theories, and techniques have in common, not from the differences between them.[3] Luborsky, Singer, and Luborsky (1975). Therapy works. The differences in effectiveness between the schools and their techniques are negligible. Everybody wins.

Theory and technique are important in psychotherapy. But not for the reasons that gave rise to the "battle of the brands" among the schools of therapy (Hubble, Duncan, & Miller, 1999).

First of all, there is no such thing as theory-free or technique-free therapy. Whenever a therapist sits down to discuss a problem with a client, she brings a way of thinking about the problem: its causes, its effects, and how it can be corrected. As Frank and Frank (1991) observed: every therapist has a healing myth (i.e., a system of explanation) and a healing ritual (i.e., a series of steps leading to a cure). It doesn't seem to matter which one she uses. So why are theory and technique still regarded as active ingredients in psychotherapy? Why should we be concerned about the models and methods we use in executive coaching?

The reason is this: A therapist or coach can use theory and techniques in ways that strengthen or weaken the effects of the other three active ingredients. In executive coaching, this means using our models, methods, and tools to:

- engage and motivate the client;
- activate his strengths, resources, and sense of personal agency;
- account for helping and hindering forces in his environment;
- strengthen and sustain the alliance;
- bolster his hopes for change.

It also means avoiding the temptation to use our expertise to make the client dependent on us and our brilliance. Therapy works when the client, not the therapist, becomes the protagonist in the story. We think it's the same in executive coaching.

Here's an example. Imagine two executive coaches using the Center for Creative Leadership's Benchmarks 360 feedback instrument with their executive clients. Same tool, two coaches.

The first coach served as an HR executive for many years and has a PhD in I–O psychology. His thinking about executives and organizations tends to focus on power, conflict, competition, and dominance hierarchies. He has a solid understanding of the psychometric properties of the Benchmarks instrument, is able to explain the statistical meaning of the scores, and can quickly cut through the details of the report to determine developmental priorities for his clients. He's

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3. There are two noteworthy exceptions to this conclusion. Exposure techniques (e.g., systematic desensitization) are consistently more effective than other methods in the treatment of some anxiety-based disorders; for example, simple phobia, agoraphobia, and obsessive-compulsive disorder. Behavioral techniques are more effective than other methods in the treatment of sexual dysfunction (cf. Ogles, Anderson, & Lunnen, 1999).

a savvy, experienced guy who knows what he's talking about. Listening in on one of his Benchmarks feedback sessions, you'd hear him offering expert insights, telling stories about his own experience, and selling the client on the accuracy of his interpretation.

The second coach has never been an executive. She too, has a PhD in I–O psychology and a firm grasp on the Benchmarks instrument and report. She has coached executives for 15 years, both as a corporate insider and as a consultant. She can answer all the client's questions about the data. But rather than using the tool as a platform for sharing her insight and expertise, she uses it to engage the client in creating a unique, personal story about his strengths, weaknesses, obstacles, threats, and opportunities. She sees questions rather than answers in differences between self- and other ratings. She uses the meeting to discover how the client sees himself and others in his work system. She points out patterns in the data, not to display her expertise, but to see if they are meaningful to the client. She encourages the client by highlighting strengths and resources revealed in the report—strengths and resources he will be able to use to make change in other areas. She explains to the client how they will return to the Benchmarks report during the engagement in order to assess progress and refine goals.

It's true; We've exaggerated the differences between these two coaches to illustrate our point. But we think the point is critical. Coaches using the same model or method will be differentially effective to the extent they can use the technique to turn on the other three active ingredients. This largely means keeping the client in the driver's seat, working alongside the client rather than lording over him, and helping the client find his own reasons to be hopeful. It's not the particular model or tool that makes the difference. Nor is it the brilliant theoretical or experiential insights of the coach. It's how we engage the client to think and act on his own behalf. A

great executive coach is a midwife, not a magician.

Activating theory and technique: A client example. Charles had been named the new dean of a prestigious business school in the Midwest. A long-time faculty member at the school, Charles was highly regarded by his peers as an outstanding scholar, a capable administrator, and a trustworthy leader. His predecessor had been terminated over Christmas break in the middle of his second year on the job.

Charles contacted an executive coach for help in thinking through the challenges of his new job. The previous dean, carefully selected 2 years earlier, had been a disaster on all fronts. The faculty had staged a coup, going directly to the president of the university to demand that the dean resign or be fired. As a group, they were relieved that the dean was gone and delighted that one of their own would be the new dean.

In their initial meeting, Charles and his coach spent a full day together. They began talking about Charles's view of the job and the criteria by which he (and others) would evaluate his success. The coach asked many questions about what Charles thought had gone wrong for his predecessor and how Charles could avoid making similar mistakes.

The conversation became very interesting when Charles expressed concern that there were tough strategic and personnel decisions ahead that would put him at odds with several of the most powerful members of the faculty (who, by the way, had been leaders of the coup against the previous dean). He wondered how he would handle their resistance and opposition when decisions had to be made and the current honeymoon was over. The coach used this conversation as an opportunity to draw out and deepen Charles's thinking about the political dynamics of the school (active ingredient = extratherapeutic factors) that he had been watching and participating in for many years. Charles's view of what he was up against became much clearer as a result. In thinking about how he would

go about building political support for his agenda, Charles—when prompted—was able to identify specific skills and allies that he could put to immediate use (active ingredient = client factors).

At the end of this extended session, Charles and the coach agreed to focus their work on building strong relationships with key faculty members, particularly with those whom he expected to oppose his agenda (active ingredient = alliance goals). Charles also set an intention to meet one-on-one with each faculty member in the school during his first 45 days on the job (alliance = tasks). Finally, when asked by the coach at the end of the day how he felt about their work together, Charles said he thought the coach had taken a sincere interest in him and the tough job ahead. He said thought they could be good partners (active ingredient = alliance bond).

Principles for practice. Here are some principles for using theory and technique to activate client strengths, understand the client's world, strengthen the alliance, and inspire hope.

- Use theory, models, tools, and tech-niques that you believe in and can deliver with competence and con-fidence. Spontaneity, creativity, and experimentation are marks of a great coach, but they must grounded in a sound rationale.
- Use your expertise on leadership and organizations to draw out and deepen the client's own theory of his situation and how he can deal with it most effectively. No matter how brilliant you are, the client will ultimately take or not take action based on his own theory. It's more important that she be right than that you be right.
- Use your expertise in individual differ-ences to help the client identify with precision the strengths she can bring to bear on the challenges ahead.
- Be confident and clear about how the coaching process will work, what it will take to make it successful, and

what kind of progress can be made with a motivated client and a strong alliance.
- On a regular basis, ask the client whether she thinks you understand and appreciate her view of her situation; that is, what she is up against, what strengths and weaknesses she has, what she needs to do to grow and improve, and how much hope she has for making the changes she wants to make.

Conclusion

Now it's time for us to invite your response to this exploration of the active ingredients of psychotherapy and their application to executive coaching. Before we turn the conversation over to you, we'll close with several thoughts that may nudge the dialogue in a productive direction.

The active ingredients are interactive in practice. Just a reminder here: Though the active ingredients of therapy or coaching can be teased apart for research or analytical purposes, they blend together in practice. As in a good recipe, their independent flavors can be detected, but it's how they work together that is most important. The case of Charles, the business school dean, illustrates this inevitable mixing of the ingredients through the coaching process.

Executive coaching and psychotherapy differ in important ways. We do not do therapy with our executive clients nor are we encouraging others to do so. But we are willing to venture into the psychotherapy literature to see what we can learn that will benefit our executive clients. In doing so, we understand that there are similarities and differences between these two helping relationships that must be taken into account as we consider whether and how to use the active ingredients in our coaching. Differences are key because they challenge our generalizability argument.

Most of these differences have been described elsewhere so we will mention only a few (cf. Peltier, 2001). For example, it's clear that the psychotherapy relationship or alliance runs at deeper levels of intimacy and emotion than does the coaching relationship. Psychotherapy clients are often low functioning and dealing with serious adjustment problems. Executive clients, by contrast, are typically high functioning, have a strong sense of agency, and are looking for growth versus remediation. How do these differences in client characteristics and goals affect the relationship and the prospect of a good outcome? We suspect the advantage goes to coaching over therapy.

As executive coaches, we also tend to meet less frequently with our clients than do psychotherapists (e.g., every 4–6 weeks versus every 1–2 weeks). Sometimes it seems as if we have to reboot the relationship at each meeting. How does this affect the dynamics of the alliance and its impact on progress toward client goals? We think that, all things being equal, this makes the coaching relationship more challenging. But it also may reinforce the client's sense of responsibility for making changes where they count—back on the job.

There is also a strong trend toward using e-mail, text messaging, and video conference calls in coaching. We suspect this trend is not as strong in psychotherapy. So, it is important to think about how to build and sustain the alliance with a remote client. How much of the work can be done remotely and asynchronously without eroding this active ingredient of relationship?

And one last difference to consider: As coaches we may be better positioned than psychotherapists to engage and activate supportive forces in the client's work environment (e.g., her manager, direct reports, or other senior leaders). Except for couples or family therapy, this would seem to be an advantage for coaches on active ingredient #1, the extratherapeutic factors.

Leveraging our strengths, bolstering our weaknesses. I–O psychologists have specific training and skills that give us the potential to be great coaches. We appreciate and know how to measure individual differences that can predict useful performance and attitudinal criteria. We know how to precisely define such criteria (cf. Hough & Oswald, 2008). We understand how to motivate behavior change through goal setting, feedback, and performance management. We have a rich perspective on executive jobs and their organizational context. These competencies provide us with a robust portfolio for activating all four of the active ingredients of coaching.

For those of us who do not have training in creating and maintaining strong one-to-one relationships with clients, there is development work to do. Except for those of us who have expanded our I–O training to include clinical or counseling skills, we are not professionally well-prepared to do the work of building relationships that are centered on the unique and often highly personal challenges of an individual. Our training tends to be more variable-centric than person-centric. We're more comfortable with people on paper than with people in person.

But there's hope for us. There is evidence that extraordinary psychotherapists—those with the best results, who are able to develop and maintain strong therapeutic relationships—are not born or made in graduate school, they are relentlessly self-upgrading (Miller, Hubble, & Duncan, 2007). They engage continuously in a special kind of self-development: deliberative practice (Ericsson, 2006). Goal setting, measurement, and feedback processes that I–O psychologists understand very well lie at the heart of this active, highly focused form of practice.

For example, following the deliberative practice approach, Miller et al. (2007) have created simple rating forms capturing and tracking the primary elements of the alliance (i.e., goals, tasks, and bonds) over the course of a client engagement and

across clients. These forms are completed by the client at the end of each therapy session. The data are used by the therapist to identify and repair relationship problems as they emerge. The results so far are encouraging. Therapists using this approach are improving both the quality of alliances and outcomes with their clients.

Deliberative practice can be easily adapted to executive coaching. We have begun incorporating these ideas into our coaching and the early returns are promising. Great coaches are constantly learning, and psychotherapy has a great deal to offer. We encourage you to check out the outstanding work by Miller et al. (2007) and Ericsson (2006) for details. We've been inspired by their commitment to excellence; we believe you will be too.

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