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# **Experiences of coaching within occupational therapy - A qualitative study**

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# Upplevelse av coaching inom arbetsterapi

## - En kvalitativ studie

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Examensarbete på kandidatnivå Våren 2017

### Abstrakt

**Bakgrund:** Internationellt sett har coaching börjat identifieras som en grundläggande kompetens för arbetsterapeutiska insatser. Arbetsterapi och coaching har en viktig gemensam nämnare vilket är möjliggörande av aktivitet. Båda discipliner fokuserar på klienten, de är så kallat klientcentrerade. **Syfte:**

Att utforska varför och hur coaching och ett coachande förhållningssätt används idag inom arbetsterapi. **Metod:** En kvalitativ studie med semistrukturerade intervjuer. Data analyserades med innehållsanalys.

**Resultat:** Tre teman synliggjordes; coaching som ett kreativt verktyg som fokuserar på potentialen, coaching ikraftsätter klienten att genomföra förändringar i livet, coaching skulle kunna vara en metod att tydliggöra och lyfta fram professionen och även att få ännu bättre effekt.

**Konklusion:** Coaching eller ett coachande förhållningssätt skulle kunna underlätta för arbetsterapeuter i strävan att bli mer klient- centrerade i sin arbetsvardag. Studien bidrar med kunskap om coaching och hur den används inom arbetsterapi för att arbeta mer klient centrerat.

### Nyckelord

arbetsterapi, coachande förhållningssätt, empowerment, klientcentrering

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# Experiences of coaching within occupational therapy

## - A qualitative study

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### Abstract

**Background:** Internationally, coaching has started to be identified as a core enablement skill within occupational therapy. Occupational therapy and coaching have one important aspect in common: enabling occupation and client centeredness. **Aim:** To explore why and how coaching and a coaching approach is used today within occupational therapy. **Method:** A qualitative design using semi-structured interviews. Data was analyzed with content analysis. **Result:** Three themes emerged: coaching as a creative tool focusing on potential, coaching empowers the client to make changes in their life, coaching could be a method to sharpening the profession and get an even better outcome. **Conclusion:** The outcome of this study indicates that the use of coaching or a coaching approach could support occupational therapists in their strive to work more client centered in their everyday work. This study contributes to the knowledge about coaching within occupational therapy.

### Keywords

coaching approach, client centered, empowerment, occupational therapy

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## Background

Occupational therapists strive to work with the considered key component, client centeredness. The profession could need a practical method to guide them in how to facilitate their client centered work especially when working with human changes in daily life. Coaching and the coaching tools could serve as a practical method for occupational therapists to use. However, research is limited about if and how occupational therapists use coaching and their experiences about using coaching as a method.

## Coaching

The word *coach* stems from the Hungarian word *kocsi szeker*, and means a wagon from Kocs. The coaching method borrows theoretical knowledge from for example psychology, education and human development, and the focus is all about releasing human potential (Townsend, Beagan, Kumas-Tan, Versnel, Iwana, et al., 2013) . There are different perspectives on coaching within the field today. According to Gjerde (2004) there are two main paths of definitions when it comes to coaching. The first perspective points out that coaching is everything a leader/coach *does* to release potential, and the second view means that coaching is one of several ways of releasing potential. In this study the second definition will be used.

A coach, can symbolically be seen as a vehicle transporting humans from one place to another, from the way a person lives his life today to where /how he would like to live his life tomorrow. The coach is what the transformation demands (Berg, 2007). Within the coaching method there are several models that describe the coaching process. The GROW model, that John Whitmore (2002) created is a four step model where you start by asking the client for the goal and at the second step the coach and the client explore how it is now, the reality. The third step, named options, is to define the different alternatives of solving the client's dilemma or challenge. The fourth and last step is about the time limit and resource control and also how the client can find motivation to go through with his/her plan, describes as when, who, will. To add on, the opinions go even more in diametrical opposites when it comes to "who" is managing the coaching. An advisor, a guide, a mentor, a consultant and a coach are all mentioned. Also the word co-active coaching appears in the literature, as well as expert coaching, process coaching and transformational coaching. Gjerde (2004) build her

philosophy on co-active coaching. She defined coaching as a form of communication that benefits action and learning on a personal and professional level through raising awareness, challenge and motivate.

### **Client centered work and occupational therapy**

There are wide on-going patient centered movements within health care globally today. Occupational Therapists (OT) strive to work client centered and has long considered client centeredness as a key component for OT practice. Primarily OT's choose to use the term client centered instead of patient centered to identify recipients of OT interventions. Other terms used were patient, student or residents depending on the setting. Occupational therapists have to be part of the discussion around client centered approach, both for the sake of demonstrating the effects of occupational interventions, but also to be an important part of the new approach and relation to patients/clients that wants to be actively engaged and in charge of their medical intervention or change process when they come to a consultation within the health care system or elsewhere (Mroz, Pitonyak, Fogelberg & Leland, 2015; Whalley Hammell, 2015). Client centered practice and self-management when it comes to the growing client group of patients living with chronic illnesses is also a well-discussed theme, with the aim of shaping empowered, well-informed and self-aware clients. These clients could challenge the health system and occupational therapists and their approach used when working with daily life issues and different challenges that these clients face (Hammel, Finlayson & Lee, 2015).

The Canadian Model of Occupational Performance (CMOP) is an important model for occupational therapists (Townsend, 2002). When the model was developed the model promoted the collaboration between the occupational therapists and the clients to meet the clients' needs and abilities to reach desired occupational goals in their daily life. This is the heart of client centered practice in occupational therapy which follows the philosophy of respect for and also partnership with the clients who are engaging in any type of occupational therapy services. The term enablement refers to processes of guiding, facilitating, education, prompting, listening, encouraging, reflecting, collaborating and coaching people so that organizations, teams, groups or individuals can have the opportunity to participate in designing and shaping their own lives (Townsend, 2002). The emphasis is on enabling occupation with clients rather than to actually do things for the client and hence strengthen the client by letting him/her experience his/her own potential and capability (Townsend et al.,

2013). Performance is a result of the relationship between persons, environment and occupation over a person's lifespan, and refers to the ability to choose, organize and to fully perform and do for the person meaningful occupations. The model developed further to Canadian Model of Occupational Performance and Engagement (CMOP-E) (Polatajko, Davis, Steward, Cantin, Amoroso, et al., 2013), focusing even more on the meaning in occupation for the client to be considered engaged in occupation rather than just performing occupation. When CMOP-E is used together with the Canadian Model of Client-Centred Enablement (CMCE) (Townsend et al., 2013) which highlights coaching as a core enablement skill among others of occupational therapists, the client-centeredness is strengthened. However, research about if and how occupational therapists use coaching and what experiences they have of using coaching as a method in their profession, is scarce. This knowledge is needed to develop the profession further in meeting our clients in different ways to enable occupation.

### **Coaching and occupational therapy**

Coaching is highly client centered and fosters self-directed learning, reflection of your own strengths, values and meaning in daily life. Coaching draws on other enablement skills such as engaging others, listening to the clients' voices and meanings (Townsend et al., 2013). Occupational therapy and coaching have an important factor in common: enablement of occupation and focusing the client. Erlandsson and Persson (2014) raise that the perspective of occupational therapists today often is in the hands of the medical science perspective and therefore re-introduce occupational therapists as experts in human activity with a knowledge base from occupational science. Dimensions such as life balance, sustainability, ecopation and existentialism are highlighted as an important part of the OT's repertoire of interventions. Those wider perspectives are also often used within the coaching method and its tools, adding great value for the client to focus on what he/she thinks is important.

Another model within occupational therapy is the Kawa Model (Iwama, 2012). A model created by occupational therapists to be used when working with client/patients in a different international or organizational context. The theory is focusing on metaphors, especially the picture of life as a river (Kawa is river in Japanese). Talking to a client about the metaphor of life as a river means that the client can tell about where and how the river starts and end, what is happening during the way, the tempo/pace and size, what the shores look like and where the river is heading. It is a way of talking about goals, the here and now situation and milestones on the way. The Kawa Model is also focused on respecting and taking the cultural differences

into account when working with individuals and their goals. The OT's role is to ask questions, to guide during the conversation and also to give feedback – very much like in the methods of coaching. Thus, it seems as coaching could be a useful method for occupational therapists to use to work more client-centered and empowering the client.

Coaching is used more widely today within occupational therapy (Kessler & Graham, 2015). Research found about occupational therapists using coaching is however limited. Internationally, coaching has recently started to be identified as a core enablement skill when it comes to occupational therapists (Kessler & Graham, 2015; Townsend et al., 2013). To be able to use this method there is a need for training before the OT's meet their clients.

Kessler and Graham (2015) performed a literature review to investigate the effects of coaching within occupational therapy. They concluded from 11 different occupational intervention studies where coaching had been used, that the evidence of effectiveness of coaching was promising, but the study designs were vulnerable and had small sample sizes. The majority of the identified studies (64%) aimed for improve outcomes for children through parent coaching. Coaching was also used with adults, for instance with stroke and stress. Most interventions were designed to work with an individual face-to-face approach. Further, Kohjoogh, Rassafiani, Dunn, Hosseini and Akbarfahimi (2016), reported in a literature review about occupational performance coaching that there is a need for more studies in the field of coaching as a practical method and skill within occupational therapy. Hence, it seems as research about how and why coaching is used by occupational therapists today, their experiences including the benefits and drawbacks from using coaching, is needed. The research within this field is very scarce.

## **Aim**

The aim of this study was to investigate how occupational therapists describe coaching as a method within occupational therapy.

## **Research questions**

- Why is coaching used within occupational therapy? How is coaching used by OT's?
- How do the occupational therapists describe the results when using coaching with their clients?

## **Method**

### **Design**

The study had a qualitative design using semi- structured interviews. Qualitative design stems from the perspective that every human being is unique, and can be used to capture the individual's very own life experiences and interpretation of situations, thoughts, emotions and perceived health (Kristensson, 2016).

### **Informants and selection procedure**

Three informants took part in the study. The informants came from Australia, USA and Denmark. The intention was to make a selection of both Swedish occupational therapists and other countries. The author contacted three big networks: one large Swedish rehabilitation company, a coach education unit in Sweden and FSA (The Swedish Association of Occupational Therapy). However, no Swedish informants were found. The informants from other countries were searched for and found via LinkedIn and a community named "OT Coach". This community had by spring 2015, 1186 members of occupational therapists around the world. Information about the purpose of the study and a question about willingness to participate were given within the community online. Eight occupational therapists showed interest in taking part of the study. They were then contacted individually by email to confirm their participation in the study. Five informants later declined participation, due to heavy workload within the time frame of this study. Finally three informants agreed to participate in the study. Those informants were not known to the author or to each other before the study. They were all female and the average years of experience as occupational therapists were 24 years. The informants had been working with the coaching method between 8 – 15 years. The working fields they covered were rehabilitation, career coaching and leadership. All three informants worked with change processes with clients wanting to improve themselves in different ways. The focus for their coaching as occupational therapists could be for instance work-life transitions, leadership development, team development, career counseling, student mentoring, patients with chronic illness or with different programs for stress, bullying and inner blocks.

## **Data collection**

Data was collected with semi-structured interviews over Skype. The interviews were performed with an interview guide and the author used probing to deepen the subject together with the informants according to Kvale and Brinkman (2009). Data was collected at two occasions. At the first interview, one set of interview questions was used, with overarching themes capturing why, how and when using coaching as an occupational therapist. Examples of questions from interview 1: What is your career background and why did you start to use coaching? In what situations as an OT can it be a good idea to use coaching or to have a coaching approach? What are the benefits from using coaching as a tool – for you – for the client? What strategies/coaching methods are the most used by you and why?

The second interview, another set of questions was used which made it possible for the author to increase trustworthiness of the data from the first interview and clarify certain areas of the first interview. Examples of questions from interview 2: What does the expression "client centered" mean to you? In what way can you as an OT using a coaching approach, work client centered? How do you empower the client and how do you show or clarify for the client that he/she is capable? What happens in the client meeting when you use the coaching approach and the coaching tools? What are the effects and results? What are the arguments that OT's should not use coaching and a coaching approach? In what situations and assignments?

Each interview took approximately 45 minutes and were recorded by Lecture Recorder, straight into the computer. In the second set of interviews, two of the interviews were made over Skype, while the third interview was made live and was recorded into the cell phone with the application Voice Recorder Pro. After the interviews were performed, all data was transcribed verbatim.

## **Data analysis**

Qualitative content analysis was used for the analysis (Graneheim & Lundman, 2004). Content analysis focuses on the interpretation of texts, and was chosen as data analysis method. In all texts there is both manifest and latent content. Manifest content has its focus on what the text says – the obvious, visible components, while the latent content deals with interpretation of texts and the underlying meaning of the content. The analysis started with the author listening to the interviews several times. The transcribed interviews were then read several times, making notes and memos about each interview. In the next step, meaning units

were identified according to the aim of the study. In the next step, the meaning units were read several times and coded. The meaning units were read again, with its codes and started to condense into preliminary categories. An independent co-analysers familiar with content analysis read the meaning units and coded data. Then the author and the co-analysers met to discuss the codes and possible categories and themes. Thereafter, the transcripts and memos were read through again together with emerging categories and themes to check if all relevant content was captured and interpreted in such a way that no content was lost by the themes and categories.

## **Ethical considerations**

Written information about the study was mailed to the informants, both through the open invitation in the LinkedIn group OT Coach and then in a personal email. Informed consent was supplied. The informants were not known to the author before this study started, therefore the author do not consider any risks of having influenced the validity of the data collection more than any author would have done. The informants were not known to each other either. One benefit that the informants saw and described when they took part in this study, was to have the opportunity to reflect and to be able to more clear express their view of coaching and also to be known to the network OT Coach. Drawbacks could have been that one or more have had negative experiences of using coaching in client meetings, then the result would have been different. If so, the interviews could have evoked difficult emotions for the informants, which was considered as a risk by the author. However, the benefits from doing this study i.e. gaining knowledge about coaching within occupational therapy, was considered larger than the potential risks. In the beginning of the Skype meeting, before the actual interview started and the recorder was switched on, oral information about the study and research purpose was given and what was expected of the informants. Data was stored at a safe place and the informants were informed that data and records should be deleted after the study was finished. They were also informed that they could drop out of the study at any time. All informants were promised to get an example of the study after the examination.

## Results

The results from this study showed that the informants' experiences of coaching in their work as occupational therapists contained a lot of similarities and common thoughts. The analysis resulted in three main themes and their categories: coaching as a creative tool focusing on potential, coaching empowers the client to make changes in their lives, coaching could be a method to sharpening the profession and get an even better outcome (see Table1).

Table 1. *Main themes and categories in the results.*

<b>Coaching as a creative tool focusing on potential</b> <i>- From focusing problems to believing that people are experts on their own lives.</i>
<b>Coaching empowers the client to make changes in their life</b> <i>- More client centered than ever while clarifying gaps and enabling goals.</i> <i>- Benefits.</i>
<b>Coaching could be a method to sharpening the profession and get an even better outcome</b> <i>- New arenas for OT where coaching could be useful</i>

### **Coaching as a creative tool focusing on potential**

The informants described that one reason to why they started with coaching was a frustration about not helping their clients as well as they wished for and a feeling of not dealing with the complete perspective of the client. They searched for some kind of complimentary method. The informants experienced that coaching gave them a method to work with the clients in a more efficient and human way. The tools in the method gave them a feeling of that they could use the potential of OT competence better and also to be both inspiring and creative again together with their clients. The structure of coaching helped the clients to prioritize and to be able to come forward. Forward could mean in a change process or adapt to a new situation. They described giving the client a toolbox that was perceived as giving them a great gift. It could be a model that helped the client to make good decisions and make the complicated

things simpler, by taking on a new perspective and also look with clear eyes on daily activities. Homework between the sessions is a way for the client to test the tools and new strategies in a practical way in daily life, to reflect and to analyse.

The coaching toolbox for this was described as consisting of listening, asking constructive questions, empowering by being really present and focused, giving feedback that strengthened the client. These tools could be used in a creative way and clarified and helped out with structure and prioritizing in daily life. The coaching toolbox was compared to the OT toolbox, such as environmental adjustments, technical aids and training of new strategies. All of the tools had to do with manage life in a better way and empowering the clients. One of the informants described the feeling of comfort and luxury:

*“The coaching questions are great and it is a luxury to be able to use the coaching tools. To slow down, to be listened to without being interrupted help to make better decisions and to be aware of themselves. Coaching is a lovely reminder of what is important and where the client sees himself/herself need to be. It works as a sorting tool and a tool to prioritize in life”.*

The informants talked about trusting the clients’ abilities and believing that people are experts on their own lives and what they truly value in life and to let the patients evaluate themselves. The informants thought that it was important to remember that the client had made a lot of decisions in life already, and could probably make some new ones.

#### *From focusing problems to believing that people are experts on their own lives*

The informants described that they had experienced that it seemed hard for the OT’s “*not to solve the problem for the client*” and highlighted the importance of OT’s to have courage enough to start lifting all focus from evidence based practice and focus more on humanity and to use their social skills. This was seen as making the patient/client comfortable and reduce fear and bitterness in order to create a friendly and trustful meeting, so the OT had acceptance to actually continue on with the work with the client. The importance of shifting the power focus from the OT to the client was expressed by one informant:

*“It is all about the client and his/her agenda and what he/she wants to achieve...not about your professional judgment...”*

Another informant highlighted how she had changed her perspective when starting to coach:

*“ All these years I have made problem lists and now I have a completely different perspective that helps the patients and empowers them... and that is a remarkable difference when someone give the permission to – I am there as a guide, not to fix their problem. That also makes me much more efficient in my job”.*

### **Coaching empowers the client to make changes in their life**

The informants described that by being focused on the client, the client experienced being empowered. The coaching method promoted that the questions about life and situations the client struggled with often were answered by the patient himself/herself during therapy. This phenomenon occurred by making sure that the client felt listened to, competent and very much a part, or in charge of the plan or strategy, in for example the rehabilitation process. The informants described how they were listening to the clients' stories and what the client wanted to accomplish. The informants meant that the coaching toolbox is excellent strategies empowering the client to enable occupation in their life. They explained that this is a method to use in the meeting with the client, where you slow down and really listen to the client, using powerful questions and to give constructive feedback to see if an occupational therapy intervention can be at help. If the client thinks so, after the information from the occupational therapist about a possible effect is given, then you have the permission to actually do the intervention. The informants described that this method was a great way of avoiding defense mechanisms.

Coaching was also described by the informants as focusing on things that already works for the clients, while working on reaching their goals in life. By empowering the client to take control over their situation, the occupational therapist showed more respect for the client. One informant reflected about going from micro to macro-perspective like this:

*”OT’s are really trained in breaking it down in pieces for the patient...but sometimes the big picture and the question about effects when it comes to their bad habits are very powerful... questions like: how is that action bringing you closer to who you want to be? ... This let them see their behavior more clearly. It is almost like an enlighten moment”.*

One informant talked about how meaningful this way of working as an OT felt:

*“This is the essence of what I do – it is all about empowering the client. I let the client tell about his/her goals and wished situation, compare to reality here and now...then I step back and let the client describe the gap between those two scenarios...then it is so obvious how to continue...and the client really see it by himself...then the coaching continue with talking about alternatives to reach the goal, possibilities and obstacles...and the client create and design the strategy based on previous experiences – is empowered and in charge of the process”*

### *More client centered than ever while clarifying gaps and enabling goals*

The informants described that in a very simple way occupational therapists can become more client centered, for example by asking permission from the client to give advice instead of assuming that the patient/client do not know. To use coaching, the informants explained that it felt like getting back to the roots of humanism and act more client centered than ever.

The informants described that they in the beginning of a coaching session asked the client for how they wished for the situation to be or a vision of his/her future self, and then asked about how the situation was right now in reality. The occupational therapist and the client together observed the gap in between the clients wished situation/goal and how the client described the situation right now. In that gap is where the occupational therapy intervention comes in. The informants explained that they focus on giving their clients tools. The tools were for example the framework in the client meeting and that they had a goal oriented focus with the client while looking at the complete picture of the client together with the client. The informants then asked the client about the alternatives moving from point A/now to point B/goal. The informants also asked the client for good examples/experiences from earlier change situations and what the client had felt at that time. One of the informants described how she used good memories when finding strategies:

*“Just asking them for good examples when he/she managed something, and remind them of that good feeling...after that look at the strategy at that time and if that strategy is applicable in this situation”.*

One of the informants described how she got a clear vision about both occupational therapy, client centeredness and coaching when she got same time perspective:

*“When I came back to the university and decided to do the doctoral work, I saw it all... and realized what a great set of skills OT’s have. The more I read, the more I realized, that we need to get back to our roots and be more client centered. Here I realized how much we actually could use coaching. It is a way occupational therapists can make our rehab programs ...something unique...and go back to the roots of our profession and the original vision. We need to claim it back!”*

### ***Benefits of using coaching***

Data revealed knowledge about benefits of using coaching, however examples of when coaching was not so beneficial was scarce. One benefit expressed by the informants was that this method for OT’s in general could mean a much easier and beneficial way to work. To have a coaching approach helped to have a less stressful work climate, shorter rehabilitation processes and also having a better balanced work life situation for the occupational therapists themselves. One of the informants reflected about stress release and a comfortable approach as a professional:

*“... also to prevent stress for OT’s as you better know how to prioritize among the load of work...and that you are not the one to carry or fix the clients problem...and you actually get a result...”*

Another informant highlighted simplicity as a benefit:

*“Coaching questions...the bases of the bases, so to say...that was what I was missing in the beginning of my career...I think we could even shorten the rehab/training period using the coaching perspective”.*

The informants described that the client had to be willing to be coached, otherwise the method was not useful and they described that occasions for not using coaching as a method could be in a hospital environment, but that then a coaching approach and simple coaching based

questions could still be used. One of them described her view of when coaching was useful as followed:

*“A coaching approach is useful in all situations, but to use the method coaching, it takes a coachable (willing and motivated) client...I honestly can't see any situation where you can not at least use a tiny single bit of coaching approach...”*

The informants stated that coaching is confronting and honest and therefore, it is important to explain this method to the client in the very beginning of the first meeting.

### **Coaching could be a method to sharpening the profession and get an even better outcome**

The informants described that they experienced coaching helpful not only in the actual work with the client, but also when it came to be more explicit in explaining what occupational therapists can accomplish in the client meeting and possibilities to be much more straight forward when talking about the expected results and effects of the occupational therapy interventions. The informants engaged with education and students concerning coaching reflected that they hoped the more they involved students in coaching, the more client centered they will be as occupational therapists in the future. One of the informants reflected about OT as a brand and lifted up the value and knowledge about OT:

*“To teach coaching in the OT education can both strengthen the occupational therapists in their daily work with clients and also help to prove and promote the result and effect of their work, which in the long run helps to strengthen our brand...I hope we will raise a new generation of OT's that feel a lot more confident”.*

They described that the more they promoted the results of OT interventions and what occupational therapy can offer, the better outcome for the whole health care system. That would also have an effect on the economy in society.

### ***New arenas for OT where coaching could be useful***

The informants described coaching as opening up for new arenas suitable for OT's. Coaching professionals who work with patients with for example autism, or in any part of the health sector as part of, or responsible for a team the occupational therapists could be very suited to

coach teams and individuals within when having competence in coaching. Career counseling also came up as an obvious new arena, as well as leadership development and management team development. The informants also mentioned that working at schools could be a good place for OT's to work at with coaching and make a difference. One of the informants described how the use of OT's in the school system could work:

*"In Denmark, schools take in children with a lot of both neurological, psychiatric and social problems...here the OT's could coach both the teachers and the students!"*

## **Discussion**

### **Results**

The outcome of this study indicated that the use of coaching or a coaching approach could support occupational therapists in their strive to be more client centered in their everyday work. The analysis resulted in three themes: coaching as a creative tool focusing on potential, coaching empowers the client to make changes in their lives, coaching could be a method to sharpening the profession and get an even better outcome.

The first theme in the result showed that the informants had felt a lack of a tool that could promote a practical way of working truly client centered, and therefore they began working with coaching, and they felt that this was a very suitable tool. This could be interpreted as in the line with the patient centered movement and self- management that we can see today that has been described by Mroz and colleagues (2015) and Hammell, Finlayson & Lee (2015). Coaching was seen as a creative tool focusing on potential instead of focusing on problems among the clients. This is in accordance with Gjerde (2004), who also described coaching as a method that focus on the clients potential. However in this study the informants also experienced the coaching toolbox as offering creativity in the client meeting. The informants had changed their own focus from making problem lists to working together with the client toward a common goal. The OT using coaching as a tool within occupational therapy interventions was responsible for the framework and the coaching tools and the client was the owner of the goal, how to reach the goal and the resources on the way. Working this way, the informants experienced, was more creative and human. This result could be interpreted as that coaching is a good method to use when you want to work as an occupational therapist using

the wider perspective than the medical perspective, as suggested by Erlandsson and Persson (2014). To trust that people are experts in their own lives, was a big shift in the informants own mind set and also a way of taking away the informants initial frustration about not helping their clients as well as they wished for in their early career as OT's.

The second theme in the result highlighted the power of the coaching methods as empowering the client to actual work toward his/her goal concerning daily occupation. A few occupational therapists have investigated empowerment within occupational therapy before within the area of mental health (Clark & Krupa, 2002; Hultqvist, Eklund & Leufstadius, 2015).

Empowerment is interesting to focus in matter of recovery, well-being and their processes in research today. Empowerment focuses on the people's capability and freedom to choose what they want to do in their lives. A useful definition for occupational therapy according to Whalley Hammell (2016) is The World Bank's definition of empowerment (Yeo, 2006) is the process of increasing the assets and capabilities of individuals or groups to make purposive choices and to transform those choices into desired actions and outcomes. These descriptions of how to empower the client to enable occupation and develop in life, is very much in line with Whitmore (2002) who described empowering life balance within leadership, through regular coaching sessions. The occupational therapists in this study described that they focused, together with the client, on things and activities that already worked well, using that good energy and feeling from those examples to be able to reach the larger goal with the OT intervention. All the coaching tools as listening on all levels, asking constructive questions and giving feedback, was a method that helped the client to prioritize, be an eye-opener and to make good decisions. The informants stated that the toolbox of coaching made them really present in the client meeting, and that this phenomenon itself was empowering. An additional benefit from this was that it made the client not go into defending himself/herself. These results could be interpreted as that coaching is a good method for occupational therapists since it empowers the clients to find his/her self-control and enable occupation in daily life, which is the overarching goal of occupational therapy intervention (Erlandsson & Persson, 2014; Iwama, 2012; Kielhofner, 2012). Townsend and colleagues (2013) stated that the client-centeredness is strengthened when CMOP-E is used together with CMCE. The informants in this study gave good examples of how they worked with coaching in a client-centered way. The effect of changing their attitude and the way they met the client was that their clients was much more motivated to handle his/her situation and move forward.

The results contribute to the knowledge about coaching in occupational therapy and gives very practical examples of the importance of taking coaching as a method for occupational therapists in to account.

The third theme showed that coaching could be a way of sharpening the profession working even more efficient, both in the everyday work with clients, but also when it comes to give structure and prioritize their own projects and make sure for a more balanced work life situation. This result is very interesting for different reasons, as shortening the rehab processes for the clients and also save the economic resources within different health organizations and units working with rehabilitation. These results have not been proposed in recent occupational therapy research before. The results have to be interpreted with caution though, since the study is based on very few informants and should be seen more like a pilot study giving inspiration to more research in the future. Possibilities of expanding to new arenas was an interesting result in the present study. In many other fields, than the health care sector, coaching is an already established method to communicate in an efficient way. Virginia Stoffel (2016), president of AOTA, expressed in her presidential address about the future for occupational therapists and asked rhetorical about how far the idea of empowerment can take us.

*”When we attract and prepare a workforce that is empowered to lead, shape, and embrace exploration and innovation, occupational therapy thrives. Are we ready to move toward a future in which, perhaps, an occupational therapy scientist is awarded the Nobel Prize? In which chief executive officer positions of major health, education, and human services organizations are held by women and men who in their earlier careers were in an occupational therapy role? In which the NIH, the Patient-Centered Outcomes Research Institute, and future research funding sources announce that 30% of their lead studies are headed by occupational therapy principal investigators? In which product developments for everyday life tools are headed by designers with a background in occupational therapy and universal design...”* (Stoffel, 2016) (pp.2)

## **Methods and limitations**

The present study was performed with a qualitative design. A qualitative method was suitable when investigating how people experience and perceive a certain situation or something they have great experience of (Kristensson, 2016). The author wanted to let the informants tell their stories and own examples of why they used coaching and how they applied the coaching method within occupational therapy. A purposeful selection of informants were made, who had extensive experience of working with coaching methods in occupational therapy settings. The present study had a small sample, and therefore the results must be interpreted with caution and should be viewed as a pilot study. However, the stories from the informants were very rich, and this ought to have strengthened the trustworthiness of this study (Lincoln & Guba, 1985; Taylor & Bogdan, 1998). If the choice of design had fallen instead on a quantitative approach, it might have given a larger sample of informants, but possible also without the depth or many details described by the informants. If there would be more studies in this field, a quantitative study might be an interesting perspective, as possibly more OT's see themselves using coaching, but without using the actual coaching toolbox.

The search for informants was initially made in three large Swedish networks where both OT's exist as well as coaches. There was no response at all in any of those networks. When asking The Swedish Association of Occupational Therapy about the situation of occupational therapists using coaching in Sweden, they did not know how many or whom of the OT's that used and worked with coaching or a coaching method, by spring 2015. Therefore the author decided to search internationally for interview candidates. The community OT Coach on LinkedIn was found and three informants were interviewed, twice over Skype. The small sample size represented within this study do however not give a true reflection on the populations of OT's using coaching.

The authors pre-understanding and previous knowledge about coaching and a coaching approach in the client work, could have affected the results. The author strove however not to let this knowledge color the interviews with the participants and used a lot of probing to deepen their descriptions during the two occasions of interviews. The author also used an independent co-analysers within the analysis for getting a deeper interpretation of the patterns within the results. The co-analysers did not have any part of the construction of the interview guide or interviews within the previous stages. This ought to have strengthened the credibility of the study. Another reflection when it comes to weakness was about writing as a single

author. It demanded the independent co-analyser to support the author in the transcription part. On the other hand, the dialogue with the co-analyser was very fruitful for the development of the study. Also those dialogues with the co-analyser might have increased dependability and confirmability. These factors increased the trustworthiness of this study (Lincoln & Guba, 1985). Another strength of this study was the quality of the interviews with the informants, as the author made the informants really explain and give examples from their long experiences and many client meetings. To do two interviews with the same informants with some time in between seemed to make the examples in the informants' answers more detailed and valid.

## Conclusion

This study shows that coaching has started to be identified as a core enablement skill within occupational therapy. The method can be of great importance for OT's that want to work in a client centered way, using empowerment as a key to inspire the client to find motivation to reach his/her goals in daily life and with the occupational therapy intervention itself.

The study also show that using coaching or a coaching approach helps the occupational therapist to change perspective from trying to solve the clients problem to affirm and empower the client to take responsibility and be in charge of the rehabilitation process (or any other change process) himself/herself, with the occupational therapist being there to listen, ask constructive questions and give feedback. The informants in this study explained that by using coaching in their daily work as occupational therapists it felt like getting back to the roots of humanism and being more client centered than ever. As an effect of using coaching as a method, the informants experienced themselves being more explicit in explaining what occupational therapists can accomplish and also being more straightforward when talking about the expected results of the OT interventions.

There is a need for more studies within the field of the use of coaching and a coaching approach within occupational therapy. This both to make sure that the quality of the coaching method is used in a proper way within occupational therapy and also to explore more about the effects and results.

## References

- Berg, M.E. (2007). *Coaching – att hjälpa ledare och medarbetare att lyckas*. Lund: Studentlitteratur.
- Clark, F., & Krupa, T. (2002). Reflections on empowerment in community mental health; Giving shape to an elusive idea. *Psychiatric Rehabilitation Journal*, 25, 341-349.
- Erlandsson, L-K., & Persson, D. (2014). *ValMO-modellen, ett redskap för aktivitetsbaserad arbetsterapi (1. uppl.)*. Lund: Studentlitteratur.
- Gjerde, S. (2004). *Coaching: Vad, varför, hur*. Lund: Studentlitteratur.
- Graneheim, U.H., & Lundman, B. (2004). Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. *Nurse Education Today*, 24, 105-112.
- Hammel, J., Finlayson, M., & Lee, D. (2015). An organization-centred strategy: Self-management- An evolving approach to support performance, participation and well-being. In Christiansen, C.H., Baum, C. M., & Bass-Haugen, J. (Eds.). *Occupational therapy: performance, participation and well-being*. (4<sup>th</sup> ed.)(pp. 499-512). Thorofare, SLACK Incorporated.
- Hultqvist, J., Eklund, M., & Leufstadius, C. (2015). Empowerment and occupational engagement among people with psychiatric disability. *Scandinavian Journal of Occupational Therapy*, 22, 54-61.
- Iwama, M. K. (2012). *Kawamodellen, kulturrelevant arbetsterapi*. Lund: Studentlitteratur.
- Kessler, D., & Graham, F. (2015). The use of coaching in occupational therapy: An integrative review. *Australian Occupational Therapy Journal*, 62, 160-176.

Kohjoogh, A, Rassafiani, M, Dunn, W, Hosseini S, & Akbarfahimi, N. (2016). Occupational Performance Coaching: A Descriptive Review of Literature. *New Zealand Journal of Occupational Therapy*, 63, 2, 45- 49.

Kristensson, J. (2016). *Handbok i uppsatsskrivande och forskningsmetodik för studenter inom hälso- och vårdvetenskap*. Falun: Scand Book.

Kvale, S. & Brinkmann, S. (2009). *Den kvalitativa forskningsintervjun*.

Lund: Studentlitteratur AB.

Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.

Mroz, T.M., Pitonyak, J.S., Fogelberg, D. & Leland, N.E. (2015). Client centeredness and health reform: Key issues for occupational therapy. *American Journal of Occupational Therapy*, 69, 1-8.

Polatajko, H.J., Davis, J, Steward, D., Cantin, N., Amoroso, B. et al., (2013). Specifying the domain of concern: Occupation as core. In Townsend, E.A & Polatajko, H.J. *Enabling occupation II: Advancing an occupational therapy vision for health, well-being, & justice through occupation*. (2<sup>nd</sup> Ed) (pp. 13-36).

Stoffel, V. (2016). Engagement, exploration, empowerment. *The American Journal of Occupational Therapy*, 69, 1-6.

Taylor, S. J., & Bogdan, R. (1998). *Introduction to qualitative research methods: A guidebook and resource* (3rd Ed.). New York; JohnWiley & Sons, Inc.

Townsend, E. (2002). *Enabling Occupation: An Occupational Therapy Perspective* (2<sup>nd</sup> edition). Ottawa, Ontario; CAOT Publications ACE

Townsend, E.A., Beagan, B., Kumas-Tan, Z., Versnel, J., Iwana, M., et al., (2013). Enabling: Occupational therapy's core competency. In Townsend, E.A & Polatajko, H.J. *Enabling*

*occupation II: Advancing an occupational therapy vision for health, well-being, & justice through occupation.* (2<sup>nd</sup> Ed) (pp.87-134).

Whalley Hammell, K. R. (2016). Empowerment and occupation: A new perspective. *Canadian Journal of Occupational Therapy*, 6, 1-7. DOI: 10.1177/0008417416652910.

Whitmore, J. (2002). *Ny coaching för bättre resultat*. Jönköping: Brain Books.

Yeo, R. (2006). Disability, poverty and the “new” development agenda. In B. Albert (Ed), *In or out of the mainstream? Lessons from research on disability and development co-operation*. (pp. 79-88). Leeds, UK; Disability Press.