


Academic Paper

Lost the 'Bounce in Your Bungee': A Grounded Theory study into Compassion Fatigue and Burnout in the Coaching Profession

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Abstract

This article addresses the lack of empirical, peer-reviewed research on compassion fatigue and burnout in coaches. Semi-structured interviews, with 13 diverse professional coaches from around the world were analysed using Constructivist Grounded Theory. Four main themes emerged: Ideal/Valued Coach as Self, Navigating the Experience of Compassion Fatigue and Burnout, Retrospective Recognition and Recovery (Integrated Self as Coach). These findings highlight the need for Coach Care to be integral to professional practice, with implications for the wider coaching profession, accreditation bodies and other helping professions. Future exploratory research is needed.

Keywords

burnout, coaching, compassion fatigue, coach care

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Introduction

Little research has been carried out into the negative effects that coaching has on practitioners (Schermyly and Graßmann 2019), this article specifically examines Compassion Fatigue (Cf) and Burnout as a phenomenon in coaches. Research demonstrating the prevalence of Cf and Burnout in other helping professions exists (Clifford 2014), and empirical papers in the coaching arena have been called for (Bachkirova 2015). Although concerns remain about the applicability of psychological research to coaching, the application is a pragmatic approach (Smither 2011), as coaching interventions were adopted from these other disciplines (Cox 2013).

The researcher, through personal experience and informally shared narratives with peers, was curious to discover more about the phenomena of Cf and Burnout in coaching. This paper outlines the main elements of the current literature, research question, design, and methodological

approach, summarising key findings, and discussion of the theoretical model created as a result, with limitations and implications for practice.

Literature Review

A broad net has been cast to define and synthesise the concepts and research of Cf and Burnout, investigating their relationship, and relating this understanding to the coaching profession.

Compassion can be defined as caring about the suffering of others, whilst feeling a desire to relieve it (OED 2010). This desire to help leads to exhaustion in the “care-taker”; fatigue so profound it’s understood to be an unavoidable casualty of the desire to help (Figley 1995). Cf occurs with “prolonged exposure of stressors, whilst being unable to lighten the load” (Figley 2011:253). These stressors leading to Cf can be singular and stacked. Single stressors include physical, life, environmental, financial or professional (illness, grief, becoming a carer, moving, losing a client, too many clients) and can have a huge impact on coaches (Palmer & Cooper, 2013). Multiple concurrent stressors can be devastating to health and wellbeing (Guthier, Dormann, & Voelkle, 2020).

Neuroscientist and founder of *Polyvagal Theory*, Porges (2009) suggests such stressors trigger and mobilise our sympathetic nervous system. Through this Polyvagal lens, Cf and Burnout could be viewed as stress responses: Cf, as a *sympathetic response (fight/flight state)*, supporting mobilisation behaviours, leading the practitioner to become tired of coaching. Continuing to coach might lead to Burnout, seen as a *dorsal vagal response (freeze state)*, engaging defensive immobilisation behaviours of shutdown: which would lead to the inability to coach. Criticised as lacking empirical evidence for the timeline or origin of the nervous system elements (Grossman and Taylor 2007), this is still a useful model to work with.

Long associated with medical and therapeutic professions, Cf can be experienced as a sense of depletion on a physical, emotional and spiritual level, whilst helping people who are in high levels of emotional and/or physical distress (Clifford 2014), not necessarily confined to the work domain. Social neuroscientists suggest Cf may be a misnomer and it’s *Empathy* that fatigues in caregivers, not compassion (Singer and Klimecki 2014). Whilst acknowledging this linguistic and conceptual ambiguity, compassion remains a fundamental element of coaching (Boyatzis, Smith, and Beveridge 2013). Neuroscience research suggests that *mirror neurons* form the biological basis of compassion and affective empathic response (Rizzolatti and Craighero 2004): in witnessing others’ emotional pain we experience it ourselves (Glaser 2014). It would seem reasonable, as coaches may work with the ‘*worried well*’ (Leonard and Laursen 1998), that could increase their risk of experiencing Cf, which, if unrecognised, could lead to burnout, a term coined by American psychologist Herbert Freudenberger in the 1970s and defined here as:

A psychological state resulting from chronic prolonged exposure to work-related stress (WHO 2019), characterised as *fatigue, detachment, cynicism, and ineffectiveness/lack of accomplishment* (Maslach and Leiter 2016).

In the considerable literature concerning Burnout in helping professionals, causal factors are complex, including psychological, social, environmental and organisational (Brotheridge and Grandey 2002). In addition, Meta-Analysis research demonstrated personality to be related to Burnout (Alarcon, Eschleman, and Bowling 2009), with strengths, coping styles and perfectionism playing a part in the condition (de la Fuente et al. 2020). Burnout is also described as emotional, intellectual and spiritual depletion, and is more frequent among health professionals than the general population (De Hert 2020). A meta-analysis found *human service professionals* unable to deal with unrelenting, chronic demands placed upon their strength, energy, and resources and that environmental variables are a potent predictor of Burnout: time pressures, excessive workload, role

ambiguity/conflict, lack of supervisory/co-worker support, and insufficient rewards, with short-term interventions helping for up to 6-12 months (Panagioti et al. 2017). Given most of these factors present in the role of coaching, it's surprising how little research exists on Burnout in this field (Bachkirova, 2016).

Coaching is described as a helping relationship enhancing a client's wellbeing, resilience, and achievement (Green and Palmer 2019); relational practice (Haan 2008); compassionate, reflective process (Boyatzis et al. 2013). The work of a coach is dependent on their ability to be present and relate to their clients, who bring challenges that affect their whole lives (Bachkirova 2016), resulting in socioemotional and psychosocial demands known to significantly impact health and wellbeing (McKee et al. 2021). The Job Demands Resources literature suggests if a coach is unable to meet these demands or increase their resources, they're less effective in supporting their clients and will suffer themselves (Demerouti et al. 2001).

Empirical research in coaching, although growing significantly, is still considered sparse: that which does exist starts and ends with the client (Cox 2013). Training and research historically focused on skills (Gray 2011) and client goals (Locke and Latham 2019), with little focus on taking care of the coach as 'instrument' (Bachkirova 2016). Although the coaching relationship is not intentionally therapeutic, there's a danger of coaches falling into '*therapeutic*' problem-solving with clients: being close to the pain of others can be risky work (Arloski 2021).

Schermuly and Graßmann (2019) found 90% of sessions had negative effects on coaches, resulting in increased stress and impaired sleep. Cf and Burnout in coaching may be related to an imbalance of giving and receiving (Hawkins and Shohet 2017), becoming under-stimulated or bored (Kompanje 2018) and/or maintaining high levels of positivity described as "emotional labour" (Hochschild 2012).

A coach may be unwilling or unable to acknowledge this stress, due to self-deception (Bachkirova 2015) or toxic positivity (Gross and Levenson 1997), producing uncomfortable feelings such as shame, leading to denial, not seeking help, resulting in Burnout (Brown 2015). This expectation that coaches must always be their *best selves*, fully client-focused, requires significant self-regulation and energy. Even with supportive lifestyles, allowing time and space to replenish this energy, it is not infinite, Burnout occurs when these resources become exhausted (Bachkirova 2016).

Causal factors notwithstanding, interesting research on potential protective or mitigating factors to avoid, or recover from, Cf and Burnout exists (Zapf et al. 2001). These include but are not limited to, improved resilience through a strong support network (Howard and Johnson 2004), stress management and coping interventions reduced depersonalisation (Scarnera et al. 2009), with substantial literature on the impact of self-compassion/self-care interventions (Collins 2014). Strengths-based mindfulness exercises reduced symptoms and increased meaning (Krasner 2009): although meaning increases job satisfaction, it often increases job demands, leading to Burnout (Bunderson and Thompson 2009).

Another suggestion to mitigate Burnout is engagement (Britt, Castro, and Adler 2005; Maslach and Leiter 2008). However, *helper syndrome* research discovered the first sign of Burnout in psychotherapists was over-engagement: *helping as a defence*. Those who empathised profoundly, finding their work meaningful, crossed boundaries providing care for another (Schmidbauer 2011).

The coaching profession has recently embraced the therapeutic practice of supervision: it's now an accreditation prerequisite for some UK coaching bodies. Coaches, like therapists, may utilise supervision to maintain their professional competence, better serve their clients and support their own wellbeing. The 7-eyed model of supervision (Hawkins and Shohet 2017) usefully explores how coaches present themselves in their articulations (Cox 2013).

Although similarities exist between Cf and Burnout, it is generally understood that Cf has a sudden onset and, crucially, faster recovery is possible if recognised and managed early. If not addressed, it can lead to Burnout, which emerges in phases, over time, and is often a career-ender.

In conclusion, although little peer-reviewed empirical evidence on Cf exists, that which does suggests maintaining a balance of self-care and other care can be a challenge (Bachkirova, 2016). The substantial literature on Burnout suggests causal factors are multifarious (Kaschka, Korczak, and Broich 2011). Protective factors and interventions for other professions are difficult to generalise to coaching, and the limited literature on the negative impacts of coaching on practitioners suggests that more research is needed (Schermuly and Graßmann 2019).

This study's timely research suggests practitioners experiencing fatigue, feeling emotionally drained, and balancing life responsibilities, whilst also working with people experiencing distress or loss due to Covid-19 (CV-19), are at higher risk of Burnout due to Cf (BPS, 2020) and if Cf and Burnout are interdependent, can you experience one without the other? As a multi-level relational dynamic, replicated throughout a system, CV-19 could be considered a parallel process (Clutterbuck 2017): coaches experiencing the challenges of the pandemic alongside their clients, may carry an increased risk of both *Transference* and *Countertransference* (Hay 2008). This research aims to fully understand Cf and Burnout in coaches, whilst identifying protective and risk factors, for coaches to avoid, navigate or recover from these phenomena.

Methodology

Methodological Paradigm

Aligned with the researcher's epistemological, ontological position, ensuring a strong design (Mills, Bonner, and Francis 2006), qualitative, constructivist methodologies of IPA and TA were considered, although rejected for this research, due to the lack of empirical research in concepts of Cf or Burnout in coaches. Instead, Constructivist Grounded Theory (CGT) was utilised, as it's theoretically sensitive for exploring new research areas, under-researched topics and/or populations, where little knowledge exists (Atkinson, Coffey, and Delamont 2004). Researcher experience and humanity are beneficial in CGT if their role in co-creating meaning with participants is acknowledged (Charmaz 2006).

The practical nature of the CGT methodology creates a theoretical framework to realise the research question, co-constructing theory between researcher and participants, alongside the researcher's engagement with the data and interpretation of the findings (Charmaz 2014). Timing of the literature review in GT is controversial: traditionally undertaken following data analysis to retain theoretical sensitivity, and not force the data (Glaser and Strauss 1980). However, not reviewing the literature risks undermining effectiveness, particularly if the researcher is theoretically sensitive to the topic. Undertaking an initial literature review whilst maintaining theoretical sensitivity is achievable, utilising a constant comparative process (McGhee, Marland, and Atkinson 2007), and reflexive practices (Mills et al. 2006). This study's initial literature review highlighted the gap in research, held a reference frame, refined the question and facilitated the alignment of question, paradigm and considerations (Charmaz 2014).

As a sensitive topic, it was inappropriate to use focus groups for data collection. Structured interviews prohibit flexibility in response to emergent themes or pivoting the interview to ensure participant safety (Howitt and Cramer 2017). Therefore, semi-structured, online 60-90 minute interviews were undertaken, enabling constant comparison across participants, whilst allowing the interview narrative freedom to unfold. This emergent, generative, iterative nature of CGT allowed for multiple realities and dictated that the questions evolved (Charmaz 2006).

Participants' psychological safety is paramount. The researcher, an experienced trauma-aware EMCC accredited coach and Mental Health First Aider was mindful to create an ethical and safe space for participants to explore this sensitive topic. As a beginning point in the inquiry process, pilot interviews were conducted (Agee 2009), delving beneath the surface of described experience, demonstrating respect for the participant and appreciation for their participation (Charmaz, 2006). This iterative, reflexive, coach approach, led to the inclusion of a grounding exercise at the start of the interviews, with ethics approval granted by the University of East London.

Participants

Participants were recruited globally through promotion on social media, coaching groups and organisations, generating as wide-ranging and inclusive a population as possible. Purposive sampling (Moser and Korstjens 2018) recruited 20 eligible coaches, interviewing 13 experienced coaches with direct experience of the phenomena (Robinson 2014). Recruiting coaches willing to speak about their experience, within the time constraints, was challenging. Approaching coaches who had shared publicly about Cf or Burnout did not yield any participants, and neither did snowballing. (see Table 1).

Table 1: Participant Demographics

Pseudonym	Age	Gender	Ethnicity	Location	Nationality	Neurodiverse
Alex	57	Female	White	US	Norwegian	Yes (undiagnosed)
Sam	56	Female	European	Netherlands	Dutch	Yes (HSP)
Kai	48	Female	White British	Luxemburg	British	No
Kim	44	Female	Caucasian	UK	British	Yes
Suni	40	Male	Malay	UK	Singaporean	No
Morgan	46	Female	European	Germany	German	No
Tabby	40	Female	White	Saudi Arabia	Saudi British	Yes (dyslexia & dyspraxia)
Remi	49	Female	White British	UK	British	Yes (undiagnosed)
Hali	40	Female	Moroccan	UK	British	Yes (dyslexia)
Lee	40	Female	White British	UK	British	No
Rae	52	Male	White British	UK	British	No
Sari	35	Female	Middle Eastern	UK	British	Yes
Luca	48	Female	White British	UK	British	Yes (ADHD)

CGT recommends 20-30 participants for saturation, where no new categories of data are discovered (Thomson 2011). Our research population, whilst smaller, was considered appropriate and adequate, due to the richness of the resulting data (Charmaz 2014; Morse et al. 2002) and the homogeneity of the sample (Hill, 2015). This study could be considered a pilot or Grounded Theory Lite.

Analysis

Interviews were transcribed verbatim and anonymised using unisex and culturally sensitive pseudonyms, humanising participants and retaining connection during coding (Lahman et al. 2015). Each transcript was analysed before the next interview, data collection and analysis occurred in tandem as is required in GT (Glaser and Strauss 1980).

Constructing theory began at the first iteration and developed throughout each round of data collection and analysis (Mills et al. 2006). Initial line-by-line coding using gerunds (Charmaz 2006; Corbin and Strauss 2008) generated hundreds of process codes from the first few interviews.

Subsequent interviews utilised focused coding, analysing larger segments of data, using both NVivo software and paper, through reflexive processes such as voice notes, mind-mapping and memo-writing. Theoretical codes and categories were applied to *incidents*, enabling comparison across the data, highlighting patterns, themes or relationships that emerged (Glaser and Strauss 1980), leading to the creation of the theoretical model (Böhm 2004).

Analytic practices both on and off-line were utilised throughout, capturing insights, common realities, raising questions, enhancing data, and identifying new directions in theory construction. Keeping a reflexive diary reflecting on assumptions, risks and biases throughout, allowed us to avoid damaging the validity of the research (Agee 2009).

Using theoretical sampling (Charmaz, 2006), the population evolved in response to the data, including experienced coaches with varied proximity to the phenomena, as well as coaches who were also supervisors or therapists. Two participants were invited to additional interviews, when questions emerged from the data, verifying and developing the theoretical model (Charmaz 2006, 2014) recognising themselves within. Relevant literature was explored as new insights or categories emerged from the data, illuminating the collected data, and situating the research within current knowledge (Birks, Hoare, and Mills 2019).

Discussion of Findings

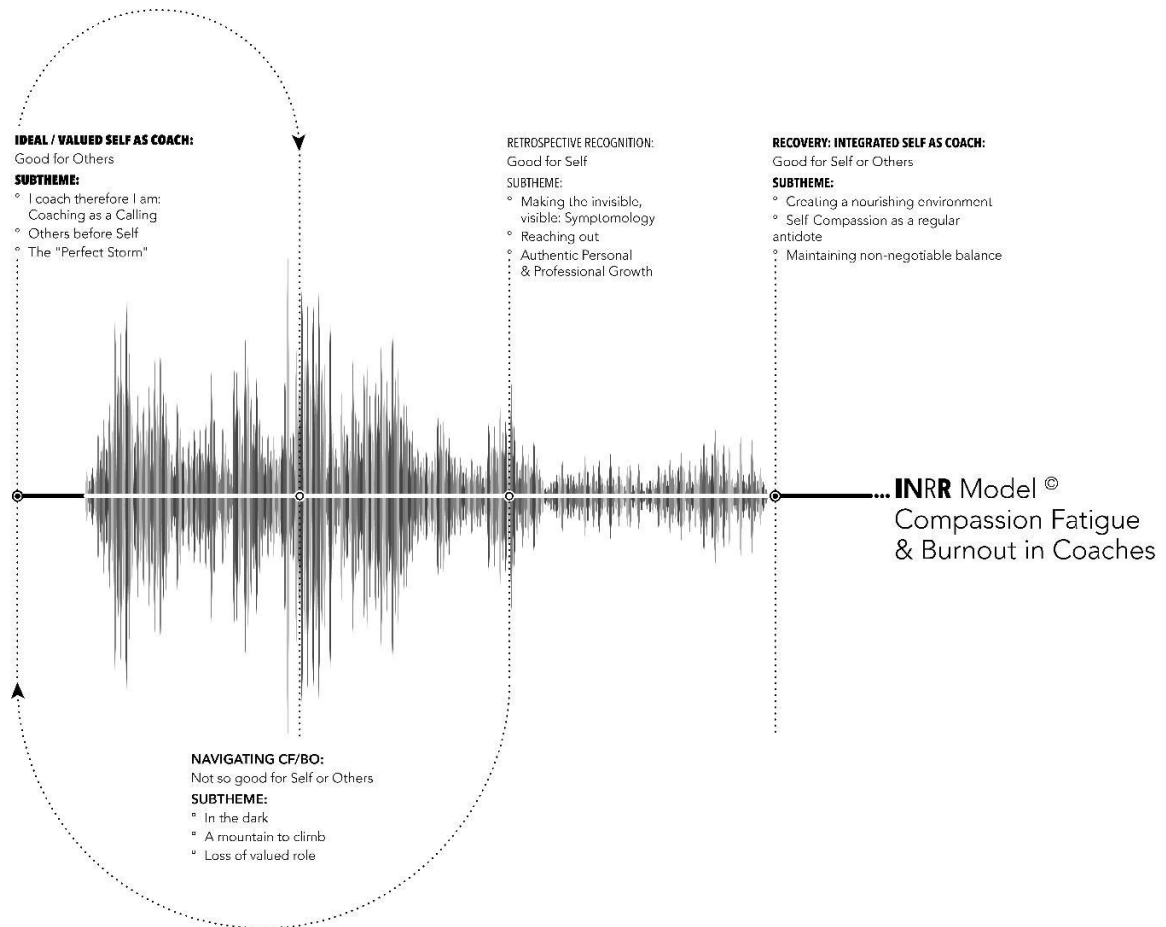
The results and discussion are presented together, as is common with other published CGT papers (Eniola 2017). The emergent themes are presented in tabulation (see Table 2), followed by a theoretical model (Figure 1), and an in-depth discussion. The analysis generated four main themes; Ideal/Valued Self as Coach; Navigating the Experience of Cf and Burnout; Retrospective Recognition; and Recovery: Integrated Self as Coach. Contained in each main theme, are three descriptive subthemes.

Table 2: INRR Model (pronounced Inner) Main themes and subthemes

Theme	Subtheme	Participants	Incidence Overall
1. Ideal/Valued Self as Coach: Good for Others	I coach therefore I am; Coaching as a Calling	13	64
	Others before Self	12	31
	The "perfect storm"	13	68
2. Navigating CF/BO: Not so good for Self or Others	In the dark	9	40
	A mountain to climb	12	85
	Loss of valued role	11	50
3. Retrospective Recognition: Good for Self	Making the invisible, visible: Symptomology	13	358
	Reaching out	13	68
	Authentic Personal & Professional Growth	13	69
4. Recovery: Integrated Self as Coach - Good for Self & Others	Creating a Nourishing Environment	12	148
	Self-Compassion as a regular antidote	12	100
	Maintaining Non-negotiable Balance	12	89

The four main themes identified both the narrative and timeline of participant experience, encapsulated by a sense of before and after, with recovery emerging as a dynamic, non-linear component, represented as dotted arrows on the visual model below.

Figure 1: Visual Model of the emergent themes and subthemes, illustrating the sense of participants moving from overwhelm, chaos and discord to balance, space and harmony.



Theme 1: Ideal/Valued Self as Coach ‘Good for Others’

Participants described investing significant time, money and energy in becoming and remaining highly skilled coaches: developing diverse toolkits, doing their best for their clients and making a difference. They demonstrate high levels of enthusiasm, passion and engagement, in what is often an “intoxicating” 2nd career and that being a coach was a “good fit”, aligned with their values, strengths, skills, and background. This theme was expressed through three subthemes.

I coach therefore I am: Coaching as a Calling. This first subtheme highlights the pervading sense that coaching is an integral part of one’s identity: it’s not what you do but who you are. It can be synthesised in this regard as *Coaching as a Calling*.

This is my life's purpose. This is what I do. This is what I love doing. Hali

This “golden thread” of *Coaching as a Calling* was a tale of two virtues, light and dark, whereby the very strengths and skills that these conscientious coaches held dear, making them excellent practitioners, were overextended. Participants reported transitioning from enthusiasm to exhaustion; patience to frustration; caring to resentment; a love of learning to being unable to maintain focus, ultimately moving from compassion satisfaction to compassion fatigue; and resilience to Burnout.

This sense of light and dark may be further understood through the lens of Jungian *shadow*. Becoming conscious of these less visible, and often less desirable elements of the psyche,

requires considerable effort. Interviewees acknowledged their resistance to these darker aspects of their experience such as “resentment”. It may also be viewed through the universal symbolism of archetypes, the caregiver wishing to be of service, giving their “whole selves” without retaining some sense of self, containing both their strengths and weaknesses (Jung 1972; Myss 2013).

Without awareness of their *Coach Shadow* or consideration of the risks working in such a high-contact profession may pose, they may undertake the “deep work” of coaching with a passionate intensity, without caring for themselves. Despite the lack of research, coaches are not immune to becoming emotionally depleted (Bachkirova 2016).

The literature on *Career as Calling* suggests that Burnout is prevalent within helping professions, as the sector attracts those moved to take care of the emotional, psychological, or physical problems of other people (Bunderson and Thompson 2009). Burnout could be a challenge for those ‘called’ to become coaches, in terms of how they view their work (Wrzesniewski et al. 2013) and the impact on their wellbeing.

Others before Self. For this next subtheme interviewees described being the “go-to person” in their lives. This *Others before Self* focus is often historic:

Culturally, I grew up in a family whereby you help others before you help yourself. Sari

An unexpected finding of this research is that despite most participants being in regular supervision, it did not circumvent Cf or Burnout. However, it did appear to be a significant element of both navigation and recovery from this space. A common focus within supervision was increasing value for their clients and their systems, rather than the coach’s wellbeing, revealing a potential “collusion” of self and others in this regard.

... because I am very competent, I told [my supervisor] I was doing OK, so they assumed I was doing OK. Remi

Is this self-presentation as self-promotion at work here, convincing peers/supervisors that they are worthy and competent, by sharing only positive elements of their practice with others (Jones and Pittman 1982) perhaps a barrier for coaches to engage in honest, vulnerable conversations required to avoid the pitfalls of Cf or Burnout?

The “perfect storm”. This final subtheme concerns the increasing demands and expectations, from self, clients and life, allied with decreasing resources, codified here as the “perfect storm”. Participants described varied external, increasing, demands and expectations of a psychosocial, sociocultural, socioeconomic, environmental, or familial nature. Client interactions and life complexities, including caring responsibilities, increased the challenges of launching or running a coaching business. This busyness could perhaps be viewed through the lens of sacrificing present wellbeing for an imagined future, masking the experience and impact of these increased demands, and decreasing resources, to continue to coach.

I wonder what it was like to be coached by me when I was that unwell and I was hiding it. Luca

In sacrificing their own needs, to maintain relationships, are we seeing evidence of an avoidant attachment strategy (Collins 2014)? This *Brave Face* or *Pleasanteeism* appears on the rise across the UK, as three-quarters of workers surveyed feel “pressure to disguise the sinking feeling that accompanies their difficulty in coping” and put on a brave face regardless of how they’re feeling (Lime Global 2022).

Illness and the intrapersonal demands of self-concept, values and beliefs, expressed as being a “positive person” and not being a “giver upper”, appeared to have a bi-directional impact. Participants also shared the pressure they felt to be observably successful and have their “stuff

together". This professionalism may lead to perfectionism, highlighting a mismatch between high ideals and current reality (Dale and Olds, 2012) and may also be a form of delusion in coaches (Bachkirova 2015).

It's resilient to suffer in silence for the common good...especially when you're a man! ... Secretly, society will judge me as incompetent and incapable as a helping professional if I were to be seen seeking help myself. Suni

In Conditions of Worth, Rogers (1959: 209) describes the pervasive impact these 'ought to be's' may have. Psychoeducation in coach training may help coaches navigate these complex human dynamics. Some of the coaches interviewed were also trained as therapists and supervisors, confirming the literature that whilst useful, this psychoeducation does not give immunity.

Theme 2: Navigating CF/BO - Not so good for Self or Others

Here participants explored the contexts and potential causation of their Cf and Burnout. Participants recognised Cf and Burnout yet expressed their interchangeable relationship differently. Participants' confusion over the terminology meant the phenomenon was described as a whole experience, with Cf and Burnout used interchangeably, without delineation.

It appeared that Cf could lead to Burnout and vice versa, and the two could be independent of each other. However, the main consideration was that all participants experienced elements of the phenomenon in their coaching practice. Interestingly, those who had also experienced Burnout before becoming a coach had not previously experienced Cf alongside it. This theme was expressed through three subthemes.

In the Dark. This subtheme conveys the participants' shock: they were not expecting the experience and described a loss of "confidence", "perspective" and "judgement", synthesised here as *In the Dark*. This lack of awareness, concerning the risks or symptomatology, meant that coaches had missed or "resisted" the "red flags", with some participants initially mistaking it "for depression".

Compassion fatigue is like the early warning sign, almost like the lighthouse, you know you're going to get dashed against these rocks if you don't keep a bit of distance. Luca

A mountain to climb. This subtheme illustrates the increasing challenge of remaining present with clients, as the coaches' previous strategies became less effective or failed altogether. As the literature review outlined, and participants recognised, coaching requires the ventral vagal system of social engagement to be functional (Porges 2009) illustrated by Dana's *Polyvagal Ladder* (2018). When both parties are in this *SAFE state*, helping, coaching, and co-regulation remain available, with coaches able to be present with clients. Presence, considered a core coaching competency by the accreditation bodies, is fundamental to the coaching process: however, it carries risk. As Rae shares:

When I'm with clients, to have that focus and be able to give them my whole self, has taken more out of me than it did before.

Continuing coaching, and un-mitigating this risk, results in disconnecting from self/others or denying/resisting reality. The impact of this chronic stress became increasingly evident for participants, often resulting in significantly reducing or stopping coaching for some time.

The first time I experienced compassion fatigue, I had to stop coaching people around the topic of stress and Burnout because I was taking it on. I was getting affected by it quite deeply, so I had to pause for a while. Hali

Loss of valued role. This subtheme reflects the identifying moments of Cf and Burnout. There was a sense of loss of valued self, synthesised here as *Loss of valued role*.

I remember thinking what's going on? I'm doing what I wanted to do in life, and everything has been geared toward this point. And now? I don't want to see my clients ... I almost don't care... I lost drive and motivation. All of it, just gone. And there's a scary point, everything has been building to that point, then suddenly that's all gone. Kim

Burnout affects individuals in their careers at any point, impacting productivity, and creativity, reducing compassion toward self and clients (Grosch and Olsen 1994). To mitigate this impact, the coaches tried mindfulness, resting, and holidays, with varying levels of consistency or success. These strategies were added to their to-do lists, thereby increasing the stress they were trying to avoid.

...they sound great, but you can't because your body's so hyper ... sympathetic drive, it doesn't work like that. It's hard to teach your body. now, relax. When it's trained not to. Kim

At this point, there was a fork in the road for the coaches. One fork led towards integration as a coach, through a process of acceptance and reflexivity. The other fork led back towards the ideal/valued self as a coach. The former requires significant lifestyle and professional change. For some, this was not possible due to systemic considerations, such as financial, time or familial constraints.

Professionals say, Oh, you're burnt out, you need rest, but OK are you going to come and take over? ... I think 10 years ago when I first experienced it ... for three weeks I was in bed. Sari

To meet the high internal and external demands, more coping strategies were employed, leading to feelings of powerlessness and increased stress responses, resulting in the cyclical experience of multiple Burnouts, which Morgan described as “burn-on”.

How a coach appraises a stressful event can have a significant impact on their stress response. There are two main types of subjective stress appraisal: primary appraisal and secondary appraisal. Primary appraisal is the person's assessment of whether a situation is threatening or challenging. Secondary appraisal is the person's assessment of their ability to cope with the situation. Subjective stress appraisal may therefore play a role here (Lazarus & Folkman, 1984). Furthermore, coaches that saw this stress as intractable mainly employed emotion-focused modes of coping. Coaches that appraised the situation as troubling, but actionable, mainly employed problem-focused strategies (Parker & Endler, 1996).

Theme 3: Retrospective Recognition - Good for Self

Most of the participants recognised and accepted what was happening and were able to make significant lifestyle changes, looking back to make sense of their experience, to move forwards. This theme was expressed through three subthemes.

Making the invisible, visible. This subtheme emerged when some participants described recognising and naming the symptomology, through hearing others' stories. Others reported significant self-education and research. Participants recognised a need to remain mindful of the consequences and alert for these symptoms which become their 'red flags' as they developed and maintained positive strategies in response.

I think when you've been through it. You notice it quicker. Warning signs pop up, and then, the concern increases quite quickly. Kim

Reaching out. This subtheme confirms the literature, in that, asking for and accepting support was deemed important by participants. Connecting with others and creating small, strong support structures of peers, friends and family was significant; although difficult during the lockdowns of Covid-19.

I'm proud that I've been able to open up to other people about this and to rely on them. Sam

Engaging in supervision, coaching or therapy was key for participants.

I had some supervision...and suddenly I just saw things from a completely different angle. Alex

Authentic Personal & Professional Growth. This subtheme highlighted the participants' notion that knowledge was not enough. They each made "significant lifestyle changes", to avoid recurrence and enable the transformation, including a significant re-evaluation of their "space" and "time". This reflexive capacity facilitated significant psychological insight for the coaches, which increased with distance from the experience, resulting in the hard-won wisdom of *self before others: "putting your oxygen mask on first"*. This personal and professional development work encompassed caring for self, coaching and running a business (for external coaches).

Theme 4: Recovery & Integrated Self as Coach - Good for Self & Others

Here participants shared a sense of moving from doing to being, knowledge to wisdom, awareness to action; they became more attuned to their bodies and took consistent nourishing actions, increasing Interoception and Self-Regulation. This theme was expressed through three subthemes.

Creating a nourishing environment. This subtheme synthesises participants setting healthy boundaries for expectations and demands from self and others, whilst creating nourishing environments, internally, externally, personally, relationally and professionally.

I regularly have to reassure myself that the work is in proportion, and that breaks are coming. Luca

Consistently and proactively engaging in a variety of nourishing practices and strategies was deemed to be key by the coaches, to recover but also to maintain. They referred to "using tools on self", engaging in reflexivity and self-coaching, spending time in nature, being present with self, and "finding their authentic voice". There was a sense of evolution and transformation: previous coping strategies became prevention strategies.

Your gut, your heart is telling you that things aren't right, to do something earlier because once you do get into a state of Burnout, it's a very long journey back out of it. Lee

Self-compassion as a regular antidote. This subtheme describes participants' increased self-care, self-kindness, self-acceptance, self-esteem and confidence, keeping them grounded, committed to their practices and avoiding relapse.

Now I'm much more bounded and protective of my time and try not to give too much. I think there's something about having compassion for yourself, for those boundaries and the fact they're hard-won. Kai

Self-compassion is the pathway to positively relating to oneself (Neff and Costigan 2014) and a protective factor against the enervating effects of work-related Burnout (Coaston 2017).

Maintaining Balanced Self & Others. Creating and maintaining a non-negotiable balance between self and others results in an authentic, and sustainable, realignment of demands and resources, leading to coach maturity. The ABCs of Recovery: Awareness, Boundaries and Connection.

When I can see myself in terms of what I bring. There's less compulsion to keep giving, to prove my worth. Luca

Balanced self and others, as Tammy describes "...to be fair to them, I need to be fair to myself as well". Participants described feeling more comfortable depending on others for support and comfort, whilst also feeling confident in their own abilities to cope with challenges, setting boundaries and maintaining a sense of self-worth, which could be viewed as a more balanced attachment style (Collins, 2014). This sense of before and after could also be viewed through a *Post Traumatic Growth* lens (Semeijn et al. 2019). Participants described shifts in self-concept, and behaviours, with some finding their "life's calling": In contrast with coaches projecting perfection, Kai believes demonstrating her imperfect humanity is "key to coaching success now".

Participants described recovery and integration as dynamic and ongoing, taking time and consistent application, for maintenance, as well as to avoid relapse, similar to other change models (Miller 2017).

A continuum. At one end, a healthy coach, at the other end is Cf and Burnout. Kim

Interesting points of note

Using constant comparison throughout the analysis, personal and professional demographics were explored, determining if these variables illuminated differences in the data, although no significant patterns were found. A difference of note was the presence of cynicism, highlighted in the *Stages of Burnout in Coaches* (Bachkirova 2016). Cynicism mainly appeared in an organisational context, with internal coaches or those coaches working closely with organisations.

The gender split of this research was 11:2 female to male. Coaching demographics show a 7:3 female-to-male ratio in the profession. Whilst acknowledging this imbalance, there were no notable differences in how males or females described their experience, nor in tone or emphasis observed by the interviewer, albeit with a small sample. However, extending this research to include more male voices is desirable.

Participants described their interviews as a cathartic, valuable process, appreciating the space and time to reflect in a non-triggering way, focused on the learnings and subsequent growth.

Conclusion

The three key findings presented in this research are 1. The phenomena of Cf and Burnout in coaches and the subsequent impact on their ability to coach 2. How coaches navigate the experience of Cf and Burnout, and 3. How they recover and continue to coach. Through exploring Cf and Burnout, the research outcomes and supporting literature suggest Coach Care requires increased focus during training, and through supervision.

Implications for theory

No previous empirical research into Cf and Burnout in the Coaching Profession existed. We offer a theoretical model, open the conversation and add to the existing literature in other helping professions. A surprising finding: over half of the interviewees identified as neurodiverse. As some

participants disclosed this during interviews, we retrospectively asked all coaches. Research suggests those on the spectrum are more prone to Burnout (Mantzas et al. 2021), and with greater sensitivity to others, this could be explored in further research.

Implications for practice

If coaches are aware of their Coaching Shadow, educated on the red flags and understand the risks they undertake as a coach, they may be forewarned and forearmed.

[coaches] have a responsibility to themselves and their clients to consistently commit to attending to their own wellbeing. Luca

Is there a case for supervisors, training providers and accreditation bodies, to play an important role in ensuring a focus on Coach Care? Building conversations about risk, prevention and recovery into CPD may be a good place to begin, with Coach Care becoming an integral part of professional practice. This normalisation may reduce the incidence of coaches falling prey to Cf or Burnout.

Limitations & future research

Researcher bias is a key limitation in qualitative studies (Corbin and Strauss 2008), compounded here as the researcher (a coach herself) experienced both phenomena. However, it was advantageous, increasing theoretical sensitivity (Charmaz 2006), mitigated by keeping a reflexive journal and regular supervision.

Another limitation was that although widely promoted, 20 participants completed the eligibility form, 13 returned the participant forms and were interviewed: a small sample size, due to the time constraints of the Masters, and difficulty recruiting participants to speak about sensitive topics. A positivist quantitative or mixed method approach may be useful to develop this research further. All participants experienced both Cf and Burnout, although interestingly a few only recognised that they had experienced Cf during the research process.

Cf and Burnout in coaches are not inevitable – it's both avoidable and treatable. Our hope for this research is that raising awareness may alert practitioners and their supporters to the risks, enabling them to either avoid the experience altogether or to heal much faster, by being able to recognise and name it, if it happens.

Creating this theoretical model is, we believe, valuable and vital work. So that rather than “burning themselves for others” coaches may be able to create nourishing and flourishing coaching practices, for themselves and others.

This research may be transferable to other helping professions: the very essence of which can lead to burning themselves out (Figley 1995). A compendium of symptomology has been created from this research.

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It was a privilege to do this research, witnessing the courage, vulnerability and honesty of the coaches sharing their experiences, taking part so their peers might avoid or navigate this landscape with more ease than they found themselves. We salute you.

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