

An introduction to schema coaching techniques, part 1: The schema octagon

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Coaching psychologists are at the forefront of developments in the coaching field because, with suitable training and ethical adherence, they have been able to adapt and adopt evidence-based methods from related fields, for example, the adaptation of solution-focused therapy into solution focused coaching. Schema coaching, a new approach, has been developed by utilising the methods and techniques of schema therapy which have initially been applied to clients in the workforce. An Early Maladaptive Schema (EMS) is an organised persistent pattern of thought and behaviour that typically develops in early childhood and is self-defeating or dysfunctional. For example, a client with the failure EMS may be a highly trained and experienced professional but despite this is haunted by an underlying sense that things will go badly wrong at any moment. Schema coaching systematically integrates a range of techniques from cognitive behavioural therapy, psychodynamic therapy, attachment theory, mindfulness and gestalt therapy. The techniques of schema coaching include: case conceptualisation, schema psychoeducation, imagery rescripting, transformational chairwork, schema challenge, mindful release, emotional exposure and relapse prevention. This paper is the first in a series on schema coaching and focuses on the range of EMSs, coping styles and modes (mood states) relevant to coaching. It includes a summary of the effectiveness research on the schema approach and introduces the key concept of limited reparenting.

Keywords: Coaching psychology; schema therapy; schema coaching; coaching techniques; schema octagon; limited reparenting.

COACHING PSYCHOLOGY investigates the psychological factors that assist with the achievement of goal directed behavioural change in the normal population (Grant, 2001). Coaching practice includes many different approaches including the use of a compassion-based focus that leads to the change desire by the client, enhanced health, and wellbeing in both individuals and organisations (Boyatzis et al., 2013).

Coaching psychologists are at the forefront of developments in the coaching field (Palmer & Cavanagh, 2006). One of the reasons why coaching psychology has been able to achieve this position is by adapting and adopting evidence-based methods from other fields of psychology, for example, the adaption of

solution-focused therapy (Berg, 1994) into solution focused coaching (Grant, 2019).

Using this adaption and adoption approach, schema coaching has been developed by utilising the methods and techniques of schema therapy and applying these to clients in the workforce (McCormick, 2022). From an ethical perspective McCormick (2022) suggests coaches using schema therapy techniques should ideally be formally trained in clinical psychology, certainly have undertaken a recognised schema therapy training programme and have a supervisor with extensive schema therapy experience. It is imperative that, like all coaches, schema coaches remain within the boundaries of their practitioner competence and that psychoeducation is clearly undertaken so

that clients can make informed decisions about contracting into schema coaching. Regular formal written reflective practice is also an essential component of continuous professional improvement in schema coaching (McCormick, 2023).

The schema approach may have relevance in other areas of coaching outside the workplace, however, as McCormick (2022) was probably the first English language publication in the area, so this wider utility has yet to be explored.

Early Maladaptive Schemas (EMS), have been defined as ‘extremely stable and enduring themes, comprised of memories, emotions, cognitions, and bodily sensations, regarding oneself and one’s relationship with others, that develop during childhood and are elaborated upon throughout the individual’s lifetime, and that are dysfunctional to a significant degree’ (Young et al., 2003, p.7). For example, a client with the *failure* EMS may be a highly trained and experienced professional but despite this the individual is haunted by an underlying sense that things will go badly wrong at any moment.

Jeffery Young and his colleagues developed schema therapy in the early 2000s (Young et al., 2003) after becoming dissatisfied with the outcomes of gestalt therapy (Young, 2008). Schema therapy has now become increasingly recognised as a valid theoretical conceptualisation and treatment approach for a wide range of long-lasting emotional disorders (Jacob & Arntz, 2013). Given this recognition of the validity of schema therapy, the approach has potential for use in coaching.

Schema therapy systematically integrates a range of techniques from cognitive behavioural therapy, psychodynamic therapy, attachment theory and gestalt therapy (Young et al., 2003). Each of these therapy models has strengths, but most of them use only one or two modalities. Schema therapy goes well beyond eclecticism and is a highly integrated approach where each of the therapeutic techniques is systematically directed

towards addressing the critical unmet childhood need that has been identified in the case conceptualisation. Young (2008) argues that schema therapy is broader, both conceptually and in terms of techniques, goes deeper into client problems and is more highly experiential than other therapeutic modalities. Roediger et al. (2018) suggests that schema therapy has three key elements:

- A case conceptualisation approach that is based on the schema model that investigates persistent patterns of dysfunctional behaviour.
- A therapeutic relationship approach called limited reparenting which involves helping clients to repair the psychological damage done in childhood.
- A range of carefully integrated highly experiential techniques e.g. transformational chair work and imagery rescripting.

Young et al. (2003) has set out a complex conceptual model of schema therapy that has three levels of analysis and treatment. At the highest level there are the EMS which are ‘extremely stable and enduring themes, comprised of memories, emotions, cognitions, and bodily sensations’ (p7). At the next level are the coping styles that clients use to deal with these EMS throughout their lives. These coping styles include surrender – giving in to the EMS, avoidance – trying to escape the EMS and compensation – reacting in the opposite way to the EMS. At the third level are schema modes. These are the moment-by-moment emotional states that are triggered by the client’s life experiences. Young et al. (2003) outlined 18 EMS, three coping styles and 10 schema modes. For example, a client may feel like a failure, despite their achievements (*failure* EMS), cope with this by giving in to it (surrender coping style) and on a day-to-day basis feel a great deal of resulting frustration (angry child schema mode).

To provide a greater understanding of the range of EMS, a sample from these developed by Young et al. (2003) is presented below:

- First domain: Disconnection/rejection schema, which include abandonment, abuse, emotional deprivation, shame and alienation.
- Second domain: Impaired autonomy and/or performance schema which include incompetence, vulnerability to harm, enmeshment and failure.
- Third domain: Impaired limits schema which include entitlement/ grandiosity and insufficient self-discipline.
- Fourth domain: Other directedness schema which include subjugation, self-sacrifice and approval-seeking.
- Fifth domain: Over-vigilance schema which include pessimism, emotional inhibition, unrelenting standards and punitiveness.

As an early adopter of schema coaching, McCormick (2022) noted the great complexity of the schema classification system and suggested that, in his eight years of conducting schema coaching with executives, only eight of the 18 schema were likely to be seen in this population. This suggestion is simply the experience of one practitioner and clearly further empirical exploration and validation is needed over time.

These eight schema commonly seen in coaching are:

- **Unrealistic striving** – the person feels they must strive to meet their own very high-performance standards and they often do this to avoid their own inner criticism. They often feel very pressured, cannot slow down and can be very critical towards themselves and others.
- **Lack of support** – the belief that, despite what the individual has achieved in their career, they still believe that the important people in their life will not or have not supported them enough, emotionally or practically.
- **Excessive involvement with others** – the person is or has been too emotionally involved with one or more important others (often parents, schoolteacher,

spouse, early boss), at the expense of their normal social and emotional development. As a result, they feel that they lack a sense of identity and direction.

- **Sense of failure** – despite the person's achievements in life, they still believe that they have failed, will fail, or that they are inadequate in comparison to their peers.
- **Feeling overly controlled** – the person unnecessarily surrenders control of important areas of their life to others, often to avoid the other person becoming angry, retaliatory, or manipulative. The person typically feels like their own needs are not being met and they can become resentful.
- **Needing approval** – despite the person's achievements, they still feel they need too much approval, recognition, or attention from others, usually at their own expense. The sense of self-worth is typically too dependent on others' approval and they are usually very sensitive to criticism.
- **Pessimism** – the person feels that they focus too much on the negatives in life (e.g. loss, disappointment, conflict, guilt, unsolved problems, past and potential mistakes). They feel that even if things are good at the moment, they will inevitably go wrong.
- **Lack of spontaneity** – the individual strongly suppresses their spontaneous feelings, actions or communications, usually to avoid disapproval by others. As a result, they stop themselves from doing things that are enjoyable and worthwhile.

McCormick (2022) found that, based on his personal schema coaching experience, clients typically used *surrender* as their coping mechanism and that *avoidance* or overcompensation mechanisms were rarely seen. Also, the volatile mood or mode swings often seen in clinical clients are rarely seen in coaching. The simple notions of *vulnerable child*, *inner critic* and *healthy adult* are

usually sufficient to use in coaching to assist clients with mode swings (McCormick, 2022). In exploring this issue, Roediger et al. (2018) note that ‘Our legacy from childhood includes parental messages experienced as non-psychotic ‘voices in the head’. The *vulnerable child* mode includes the client’s memories of painful experiences, distressing inner thoughts, ‘You are pathetically weak’, painful emotions and intense negative bodily sensations. The *inner critic* is the client’s set of internalised dysfunctional beliefs that can either be punitive, ‘You are hopeless at this’ or demanding, ‘You need to work much harder at this’. By contrast, the *healthy adult* mode is the adaptive self-regulating inner voice of the client. It is the ‘coach inside the client’s head’ that can assist in the development of adaptive healthy thoughts which enable the client to grow stronger and more productive. This *healthy adult* is very important in the long term as it enables the client to finish coaching and not feel abandoned. It provides an ongoing positive encouraging force in the client’s life. However, both the ideas of *surrender* as the typical coping mechanism and the simplified mode structure suggested above is solely based on experience of the author and that further empirical validation of these observations is needed over time.

The goal of both schema therapy and schema coaching is to enable clients to get their core developmental needs met in an adaptive manner through changing their maladaptive thoughts, feelings and behaviours (McCormick, 2022). Young initially developed schema therapy to treat clients with borderline personality disorder which is characterised by a prolonged pattern of unstable relationships and unusually strong emotional reactions. He suggested that schema therapy would often take at least three years to address these types of issues (Young 2008). It might therefore appear strange to use schema techniques designed for more serious disorders and requiring some years of treatment in executive

coaching with a highly functioning population. However, Yang et al. (2010) suggests that personality disorder is prevalent in the general public with more than 70 percent of the population having some degree of personality disturbance.

The advantage of using these techniques in coaching is that they enable the properly trained coach to draw upon an unusually rich range of powerful experiential techniques to assist clients to change (McCormick (2022). Therefore, the aim of this series of papers is to introduce a number of these techniques that are most relevant to coaching.

The evidence base for the schema approach

Coaching psychologists use an evidence-based approach in their practice (Cavanagh et al., 2005) and so before discussing techniques it is essential to briefly examine the evidence on effectiveness in this area. Ideally this effectiveness research would include large scale random controlled trials of schema coaching versus waiting list controls or the use of other effective treatment modalities. However, the field is in its infancy and none of this work has yet been undertaken. Given this, a brief review of effectiveness in the related area of schema therapy has been undertaken.

In an early meta-analysis, Jacob and Arntz (2013) examined five studies that used schema therapy to treat clients with borderline personality disorder and concluded that schema therapy demonstrated preliminary effectiveness as a treatment. Bakos et al. (2015) identified 3,200 published relevant research abstracts but excluded all but nine studies on the grounds of methodological adequacy. They concluded that schema therapy showed preliminary effectiveness with a positive impact on personality disordered clients. Körük and Özabacı (2018) undertook a meta-analysis of 35 studies that used schema therapy to treat clients with depression and on this basis, their conclusion was that schema therapy had some efficacy in the treatment of depressive disorders. Koppers et al. (2020) explored the impact

of group schema therapy on clients with both personality disorders and depressive symptoms and found it to be effective for a broad group of these clients even if the majority did not reach full symptom remission. Peeters et al. (2020) found a combination of schema therapy and exposure to the source of fear to be a helpful treatment for clients with chronic anxiety and co-morbid personality disorder. Outside the clinical environment Shahsavani et al. (2020) found that schema therapy was effective in reducing migraine severity both at post-test and follow up. In the area of relationship therapy, Roediger et al. (2020) undertook a random controlled trial with 12 couples and found that schema therapy-based imagery rescripting had strong positive effects on the experienced closeness and mood of both partners. McCormick (2022) concluded that when considering the overall research there was support for the efficacy of schema therapy to treat a wide range of psychological disorders. The author also noted that the use of schema techniques in coaching is in its infancy so there is a need to build empirical support in this area.

Limited reparenting

Roediger et al. (2018) suggested that overall using the schema approach is similar to the process of raising healthy and happy children and is called limited reparenting. It involved helping to repair the damage done to clients during childhood. The aim of limited reparenting is for the coach to provide the type of care and concern of a parent which the client never received in childhood. It is critical in schema coaching and differs from the working alliance seen in CBT as it includes a deeper emotional involvement between the coach and client. Limited reparenting involves the coach giving a lot of themselves to their clients and being highly involved and personal to enable the client's emotional needs to be met. Clients in schema coaching need to feel considerable warmth and authenticity from their coach. Roediger et al., (2018) postulated that the low dropout rates seen in

schema therapy, as compared to other therapies, are a result of the close bond produced by limited reparenting.

Gulum and Soygut (2022) used a task analysis approach to build a process model of limited reparenting. Their results produced a roadmap of limited reparenting and identified the important aspects of the process. They suggested that limited reparenting provided clients with emotional experiences that were healthy and potentially healing by clarifying and validating their feelings, understanding the origins of their EMS, and by being willing to offer limited reparenting within professional boundaries. They concluded that understanding the core concepts behind the schema approach was more important than a focus on the specific psychodynamic, cognitive, behavioural or experiential techniques.

Limited reparenting is typically combined with empathic confrontation which enables the coach to not only achieve a deep caring emotional relationship with the client but also to kindly and gently challenge them to see the damage done by their EMS and to develop more helpful adaptive behaviours. Roediger et al. (2018) suggests that the right balance between reparenting and empathic confrontation is critical to success.

Limited reparenting case study

KH Tan was an ambitious, entrepreneurial engineer who was developing a series of highly innovative blood analysis machines. His start-up company was five years old and had just begun to generate a profit. KH was a risk taker who had been willing to mortgage his home and borrow large sums of money from his aging parents to finance his company. He came to coaching tormented by the fear that he was not going to be successful and this was having a pronounced effect on his performance at work. KH had already spent a year in psychotherapy and despite learning a range of techniques his anxiety was still often crippling. In exploring the background to his problem, it became clear that KH was very often torn between his burning ambi-

tion and his painful anxiety. After working for four sessions using solution-focused coaching, the client had made very little progress and was feeling stuck. Given this outcome and the prolonged nature and seriousness of the problem the coach introduced the idea of using schema coaching and KH was very positive. The next coaching session was four hours and explored in depth the childhood beginnings of the problem. KH's father had been a very successful sales representative who had often left the family for weeks on end. His mother was supportive but did not function well when KH's father was away. When asked for a core childhood memory KH said he remembered when he was about seven years old being taken to an aunt's place to stay while both his parents went away for the duration of his father's sales trips. He recalls crying as they left, his father's harsh words to him and his mother attempting to hide her tears as they drove away. That night he ran away from his aunt's house and when found he was punished. Given this childhood deprivation the focus of the coaching was to provide KH with a great deal of warmth and caring as he relived his trauma. The limited reparenting involved the coach being highly involved with the reliving of the pain and providing warmth and reassurance that KH's parent's abandonment and his

aunt's punishment did not make KH unworthy, bad or doomed to fail. The schema coaching involved a range of different approaches used over an eight-month period. This approach enabled KH to move forward more positively and effectively in the development of his start-up business. In the final session during a period of reflection KH said that it was the sense of being cared for in working through his early trauma which was the most powerful healing experience in the coaching.

The techniques of schema coaching

The schema approach offers a wide range of techniques that can usefully be employed in coaching (McCormick, 2022) and as an aid in remembering these the Schema Octagon, as illustrated below, can be used.

Each of these schema coaching techniques will be examined in detail in a series of upcoming articles.

Author

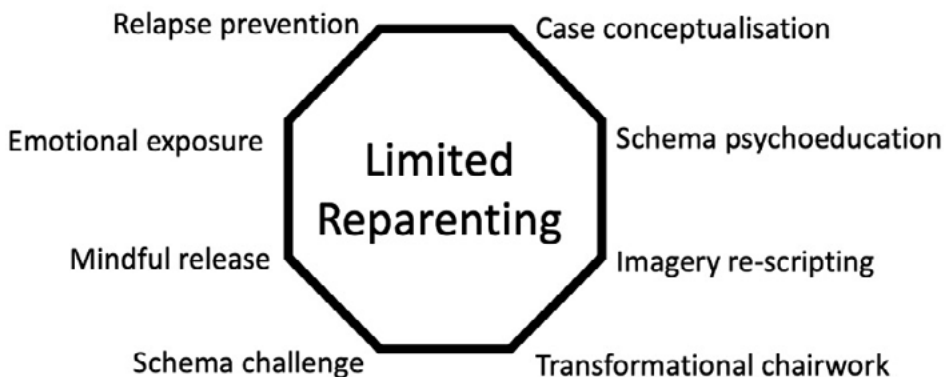
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Figure 1: The Schema Octagon.



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