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## **Addressing the self-care needs of coaches through the use of formulation**

### **Abstract**

If coaches are to deliver their best work, it is important that they are emotionally and psychologically well-resourced. In a rapidly changing and increasingly complex world, the ability of coaches to monitor, manage and enable their own well-being is an important component of effective and ethical practice. However, little is known about the self-care needs and practices of coaches, with few resources available to guide practitioners in the development of personalised self-care plans. In this context, it is argued that the use of formulation has the potential to make a significant contribution. Formulation is well-established in applied psychology as a means of better understanding and responding to the needs of individual clients. This article extends the use of formulation to the domain of coach self-care. Following a review of literature relevant to self-care and to formulation, the article presents a case study which illustrates how formulation was applied by a coach to enhance self-awareness, self-monitoring and decision-making in relation to her self-care needs. Particular attention is paid to the way in which the process guided the coach's thinking and decision-making to illustrate how formulation can enable reflective practice in relation to self-care. Implications for training and practice are considered.

Keywords: self-care, formulation, well-being, coaching, coaches, The Health Awareness Tool

### **Practice points**

1. To which field of practice area(s) in coaching is your contribution directly relevant?

The need to attend to self-care is arguably an increasingly critical competence for all coaches and hence the article has potential relevance to the many contexts in which coaching is delivered, as well as to coach training programmes and the coaching bodies.

2. What do you see as the primary contribution your submission makes to coaching practice?

This article introduces a recently developed model that can assist coaches in conceptualising their self-care needs and designing interventions to address them.

3. What are its tangible implications for practitioners?

The delivery of high quality coaching is arguably more likely to be achieved if the workforce is psychologically healthy and emotionally well-resourced. The article draws together the two distinct literatures of formulation and self-care in order to illustrate one way through which coaches might be better supported in recognising, conceptualising and responding to their self-care needs.

## Addressing the self-care needs of coaches through the use of formulation

### Introduction

In an increasingly complex world, the ability of coaches to recognise and attend to their self-care needs takes on a new significance. Across the helping professions, there is a growing interest in self-care as a distinct area of scholastic enquiry (see Posluns & Gall, 2019, for a review). However, there is a lack of literature that is specific to the well-being needs of coaches and relative to other areas of theory and practice little attention has been paid to the topic of coaches' self-care and how to enable this<sup>1</sup>.

In the field of applied psychology one well-established way of understanding the idiosyncratic needs of a client is formulation. In recent years, formulation has attracted growing interest in coaching, with proponents arguing that its use enables a more systematic approach to decision-making and action planning (Corrie & Kovacs, 2019; Grant, 2011). Thus, formulation might provide one means through which coaches can be supported in making decisions about their self-care needs and identifying practices that can address them. Yet, to the best of the authors' knowledge, there is currently no literature which seeks to combine the two distinct literatures of self-care and formulation for the purposes of enabling the well-being of coaches.

This article explores the proposition that formulation can usefully be applied to the task of optimising coaches' self-care. The article begins by defining self-care and outlining the rationale for positioning this as a core professional skill. The concept of formulation is introduced both as a means of enabling practice more generally and for supporting self-care

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<sup>1</sup> For the purposes of this article, the term 'well-being' is used to refer to a desired state or outcome and is informed by the Collins English Dictionary definition of "the state of being well, happy, or prosperous" (<https://www.collinsdictionary.com/dictionary/english/well-being>; accessed on 01/11/20)<sup>1</sup>. Self-care, in contrast, refers to the process through which well-being is pursued, acquired and/or maintained.

specifically. A case example is then provided to illustrate how formulation can be applied to support coaches' decision-making in relation to self-care. The article concludes with a consideration of some of the issues that arise from repositioning coach self-care as a core professional competence.

### **Defining self-care**

Self-care has been defined as "...the ability to refill and refuel oneself in healthy ways" (Gentry, 2002; p. 48). This ability comprises an engagement in specific activities that nurture well-being at the physical and emotional levels (Myers et al., 2012) as well as cultivating a caring and compassionate attitude towards the self and the challenges that the self experiences (Kissil & Niño, 2017).

An exploratory review of the literature conducted by the present authors highlighted that self-care tends to be identified as serving one of three functions: (1) maintaining or enhancing a current state of well-being. Applied to coaching, an example would be where the coach holds a positive view of their overall well-being and implements self-care practices in the service of flourishing; (2) addressing well-being that has been compromised. In this context, self-care has a remedial function with an aim of restoring the coach to a previous state of well-being and (3) preventing depleted well-being from emerging or re-emerging. This might be used to protect against compassion fatigue or burnout through providing a means of managing the psychological pressures associated with client-facing work.

In practice, the relationship between the health promoting, recovery-focused and preventative functions of self-care is likely to be dynamic and inter-linked; well-being is not a static state and coaches' needs will change as a consequence of numerous internal and external factors over the course of their lives and careers. Nonetheless, the selection and implementation of any self-care strategy will likely vary as a function of the purpose for

which it is used. Hence, effective self-care requires a heightened ability for self-awareness, self-monitoring and self-reflection. A commitment to then implementing and evaluating those practices that are identified as likely to make a positive difference is also necessary (Pakenham, 2017).

### **Why self-care matters**

As a means of enabling well-being, there is a compelling case for elevating self-care to the status of a core professional competence. Psychological well-being has been associated with positive outcomes at both individual and organisational levels. Within the helping professions more broadly, for example, effective self-care has been associated with lower levels of stress (Zahniser et al., 2017), greater capacity for compassion (Butler et al., 2017) and enhanced quality of life (Goncher et al., 2013). Moreover, in the context of mental health practice, those identified as ‘master therapists’ have been found to afford self-care a priority status in their professional armoury (Jennings & Skovholt, 1999).

The need for self-care has also been identified in coaching where the self of the coach is recognised as playing a central role in both process and outcome. It has been proposed, for example, that the self is a critical component of how coaching is delivered and experienced by the client (Bachkirova, 2016) and might also influence the outcomes obtained (de Haan et al., 2013). Indeed, Bachkirova (2016) goes as far as stating that the self is the *main* instrument of coaching and has proposed three ‘main conditions’ for what she terms the good use of the self as an instrument for enabling effective delivery: (1) understanding the self; (2) looking after the self and (3) checking the self for quality and sensitivity.

At the same time as being a potentially significant asset, and as noted above, the self can be rendered fragile. Depleted emotional well-being negatively impacts both individuals and organisations, costing the UK an estimated £33-42 billion per year (Stevenson & Farmer,

2017). One well-documented example of well-being depletion is the phenomenon of burnout. A term originally defined by Freudenberger (1974) to capture a state of reduced commitment, loss of motivation, and emotional exhaustion, burnout is a common occurrence in the helping professions. Among staff working in mental health and professional psychology settings, burnout has been identified as affecting up to 67% of health care providers (Morse et al., 2012). This negatively impacts professionals' emotional well-being, work satisfaction, the quality of care offered and employee retention (Morse et al., 2012). Although the prevalence of burnout in coaches is unclear, the impact of negative events has been documented. Schermuly (2014), for example, has defined the undesirable and damaging effects of delivering coaching (such as being exposed to personally challenging topics) as 'negative effects' and subsequent research has identified that these are common occurrences for coaches (Graßmann & Schermuly, 2018).

Self-care not only facilitates recovery from negative effects (Turnbull & Rhodes, 2019) but can also protect against negative outcomes for clients (Bearse et al. 2013; Thériault et al., 2015). For good reason, then, Barnett and Cooper (2009) have called for a more concerted research effort on the development of self-care practices of those working in the helping professions. However, in responding to this call, several questions arise. For example, how can coaches be supported in identifying their self-care needs? What training, frameworks and models might provide a solid foundation for devising effective personalised approaches to self-care? One method that has relevance in this context is formulation.

### **Formulation and its relevance to coach self-care**

A formulation is a personalised explanatory account of the evolving and interacting factors that predispose, precipitate or maintain specific behaviours or events (Corrie & Lane, 2010; Lane & Corrie, 2009). This explanatory account also helps identify factors, internal or

external to the person, that might catalyse change. Formulation has a long history within the field of applied psychology (see Corrie & Lane, 2010, for a comprehensive review) and has been recognised as a hallmark of expert practice by The British Psychological Society (2011).

A formulation typically draws on several sources of data including the client's story, relevant principles, theories, models and research, psychometric measures, and the professional experience of the practitioner. Synthesising these sources of data into a coherent explanatory account involves the use of skills including the ability to generate and test hypotheses, interpreting data from multiple sources, decision-making and having an effective language for sharing ideas with clients. Thus, rather than a model or coaching technique, a formulation utilises a variety of exploratory and analytical skills to arrive at an account that informs the work which unfolds. For this reason, there are inherent challenges in evidencing a direct link between formulation and outcome as a formulation typically has an indirect, meta-effect on the coaching delivered and the outcomes obtained (Corrie & Kovacs, 2019).

Within coaching, formulation is an emerging area of interest as both scholars and practitioners increasingly recognise its role in understanding clients' needs and designing individually-tailored interventions (Corrie & Kovacs, 2019; Grant, 2011; Kovacs & Corrie, 2017; Lane & Corrie, 2009). While there is no consensually agreed model of formulation, approaches have been developed or adapted for a coaching context. For example, the Purpose-Perspective-Process (PPP) model (Lane & Corrie, 2009) is a generic framework that supports the coach in designing an approach through taking account of three domains: 1) the purpose of the work; 2) the perspectives that inform it and 3) the coaching process that will be followed. This model ensures that the coach's decision-making remains aligned with the agreed purpose and takes the form of a coherent process that is consistent with the perspectives which underpin the coach's chosen approach.



The Purpose-Account-Intervention-Reflect (PAIR) framework (Kovacs & Corrie, 2017) builds on the PPP model and was developed specifically to guide coaches in implementing a formulation-based approach. As with the PPP model, the PAIR framework emphasises that the starting point is an articulation of the Purpose of the work. In the Account stage, the coach develops a formulation through three phases: 1) exploring the issue and gathering data; 2) generating ideas and hypotheses that are tested through the coaching; and 3) designing a process, including the selection of tools, techniques or interventions. The subsequent stages (Intervene and Reflect) encourage the coach to monitor the results of their interventions, updating the formulation (and the process) in an iterative fashion as the coaching proceeds.

Finally, the Health Awareness Tool (HAT) (Corrie, 2019; Corrie & Parsons, 2021; see Figure 1) is a four-quadrant model designed to assist coaches in identifying the well-being needs of their clients. It has also been applied specifically to the self-care needs of coaches (Corrie & Kovacs, 2020). In this model, a client who lacks resources and reports having difficulty in functioning would likely fall within the quadrant of struggle (the red zone). In the case of a practicing coach, this is the zone of burnout and highlights a need to seek external support in addition to implementing self-care interventions. When a client or coach is high in one dimension and low in the other, they fall within the quadrant of managing or existing (the amber zones). For these individuals, the data gathered can be used to design interventions to address the identified self-care needs targeting either improved functioning or increased resources. Those who are high on both resources and functioning fall within the quadrant of flourishing (the green zone) and any interventions would aim to enhance existing levels of well-being.

Figure 1. The Health Awareness Tool (HAT)

*Figure 1 here*

Despite a growing recognition of the value of formulation in coaching, to the best of the authors' knowledge its use in coach self-care represents a novel form of application. Yet it may provide a helpful and systematic way of enabling Bachkirova's (2016) three 'main conditions' for the good use of self as outlined in Table 1:

Table 1. Formulation and the Three Main Conditions for the Good Use of Self

*Table 1 here*

In the next section, a case study is used to illustrate how Ciara, a 45 year old coach, used formulation to identify and make decisions concerning her self-care needs during a period of personal and professional transition.

### **Developing self-care through use of formulation: a case study<sup>2</sup>**

Ciara is a dual trained practitioner and works as a coach and a therapist as well as a supervisor and trainer. Until five months ago, she had worked part-time as the CEO of a charity specialising in addictions and part-time in private practice, while simultaneously studying for a post-graduate degree in coaching. On completion of her studies, she left the charity to set up her own business which, although progressing well, was in its early stages of development.

At the time of developing her formulation, Ciara was not aware of any immediate threats to her well-being. However, she sensed that recent events could potentially erode the

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<sup>2</sup> This case is used with kind permission of the coach concerned although some features have been changed to protect confidentiality. As the aim is to illustrate the application of formulation in this context, the emphasis is on the choices that the formulation enabled the coach to make rather than the outcome of any self-care interventions subsequently implemented.

quality of her client-facing work as well as negatively impact her business and her quality of life more generally. The purpose of the formulation was, therefore, for Ciara to consider how best to approach self-care planning in order to protect her existing well-being.

Ciara began her formulation by reflecting on her current professional and personal circumstances which led her to identify the following factors (see Box 1):

Box 1. Current Professional and Personal Circumstances

*Box 1 here*

When reflecting on her list, Ciara was struck that the pressures she was facing were more numerous than she had appreciated. She detected no obvious signs of burnout. Nonetheless, her insight prompted Ciara to ‘audit’ her week by collecting a sample of data relating to specific areas of her experience and functioning (see Table 2):

Table 2. Data Collected to Inform the Formulation

*Table 2 here*

Ciara also collected data on the number of hours she had worked as well as time allocated for rest, recreation and social connections. Her results indicated that over the course of the week she had worked ten to eleven hours per day. Opportunities for exercise, relaxation and extracurricular activities had been limited – she had exercised only once and had made no time for interests outside of work. The data collected over a typical week also confirmed for Ciara the importance of taking time to review her self-care practices.

***Developing a formulation using the HAT***

Ciara was trained in formulation and familiar with the models outlined above. Having recently completed some detailed work with a coach to plan and implement her career

redesign, she was clear about her purpose and the perspectives that she brought to her work. Given that she wanted to acquire a better sense of any patterns relevant to her needs and pinpoint specific areas that required attention, she selected the HAT.

Ciara began by exploring in turn the axes of resources and functioning of the HAT. She identified her professional and personal resources as follows (see Box 2):

#### Box 2. Personal and Professional Resources

*Box 2 here*

Reflecting on her list led Ciara to conclude that she had a high level of personal and professional resources available to her.

A review of her functioning, the horizontal access of the HAT, led Ciara to consider the transitions that she had identified at the start of the process as well as the baseline data she had collected. To gain greater clarity about different aspects of her functioning, she undertook a more granular analysis of elements of her experience. This led her to identify the following factors (see Box 3):

#### Box 3. Factors related to Functioning

*Box 3 here*

Ciara mapped the results of her reflections on to the different quadrants of the HAT to help her identify her self-care needs (see Figure 2).

#### Figure 2. Ciara's Application of the HAT

*Figure 2 here*

Her formulation suggested to Ciara that she was broadly functioning in the green zone of flourishing, indicating that her existing self-care strategies were working well. However, she also concluded that she had not fully considered how the different elements of her current situation were interconnected and the consequences that this might have for her well-being, her personal life and her business. Equally, she wondered whether an ability to keep going while generally feeling well and productive had masked her lack of self-awareness of pressure points. This pattern suggested to her that there was the potential for her to slip into the amber zone of existing (low functioning + high resources) if certain factors were not managed effectively.

Developing her formulation also enabled Ciara to identify subtle signs of change. These included procrastination (a personal ‘warning sign’), the erosion of time for life outside of work, the sense of loss at the lack of opportunity for social connection and the reduction of perceived efficiency in her information-processing capabilities. Her awareness of a personally relevant schema (Young, 1990) reminded her of patterns that could potentially disrupt her well-being during this period of transition. She was also aware that her optimism and excitement about what her new business might enable her to achieve, as well as taking pride in the work she was being offered, were leading her to overlook the need for balance.

### *Actions arising from the formulation*

Ciara reviewed her personal and professional resources and decided that she already had the tools she needed to address her well-being needs. However, she remained aware that she had missed certain potential warning signs in relation to her well-being and this formed the basis of her action plan.

As a first step, she decided to speak with her supervisor and share her insights. She asked for her supervisor's support in monitoring her caseload and in keeping her self-care practices as a regular item on their agenda.

Ciara then developed a plan for (1) actions to take in the present and (2) areas to monitor. In relation to the former, she decided to make a list of the tasks on which she had been procrastinating and allocate times to complete them. From experience, she knew that this was an effective strategy for her. Second, she would write down and reframe any negative thoughts, especially those associated with unfounded fears concerning loss of income that might lead to over-working. She decided to diarise more 'down time' to ensure that there was some leeway in her schedule to rest and reflect.

In terms of areas to monitor, Ciara decided that she would review her physical symptoms weekly to determine whether she needed to speak with her medical consultant. She also committed to a scheduled weekly pause, undertaken while going for a walk, to reflect on whether there were any resources that she was under-utilising. Additionally, she would review the notes from the work that she and her coach had undertaken on helping her manage her demanding standards schema. Finally, she found herself a novel to read.

## **Discussion**

The case study above provides an illustration of how formulation was used in the context of a coach reviewing and refining her self-care practices during a period of personal and professional transition. The approach proved useful in enabling the coach to clarify her choices and devise an action plan while drawing attention to factors of which she had not been fully aware. In this sense, formulation enabled the coach to engage in a personally meaningful way with Bachkirova's (2016) three 'main conditions' for the good use of the

self: (1) understanding the self; (2) looking after the self and (3) checking the self for quality and sensitivity.

The case study was organised around a formulation at the level of individual factors, which was appropriate to the coach's purpose and professional context. However, well-being and the resources that enable it are increasingly couched within interpersonal and systemic contexts. In their systematic review and meta-analysis of the literature on well-being and work performance, for example, Nielsen et al. (2018) identified psychologically healthy workplaces as those that utilise resources at the levels of the individual, group, leader, organisation and overall context, citing evidence that resources at all levels are related to employee well-being. This conclusion is consistent with current thinking about depleted well-being. Burnout, for example, is now widely recognised as a multifactorial phenomenon in which personal, interpersonal and systemic factors are implicated (da Costa & Pinto, 2017). Unsurprisingly, then, research has pointed to the need for interventions that target relational and organisational factors in addition to the personal characteristics of individuals (Maslach & Leiter, 2016; O'Driscoll et al., 2017).

Marshalling resources at different levels has implications for the ways in which self-care formulations are approached. After Nielsen et al. (2018), where an individual is working independently, as part of a geographically dispersed workforce or where factors are directly under the client's influence (e.g. building competence in a clearly defined area), a formulation at the individual level might be preferable. Where matters of concern are embedded in interpersonal or group contexts, the formulation will likely consider relational factors such as patterns of communication, the distribution of work amongst team members and social support between group members. At the level of leader, organisation or overall context a formulation will require a conceptualisation of the impact of a wider range of factors. These might include leadership style, organisational culture and power dynamics as

well as the structure and implementation of reward systems to understand the interface between the resources and functioning of the individual and those of the wider system.

While formulation has the potential to offer a flexible and systematic approach to addressing the self-care needs of coaches, several questions remain. First, it is not clear when the use of formulation is best undertaken as a self-directed activity and when it is better supported through engagement with a supervisor or coach. Formulation is a complex and often labour intensive skill that requires practice; if coaches are to use formulation generally and in relation to their self-care needs specifically, they will need training in how to do so. At what stage in their professional development and how they are trained in this skill needs to be considered especially, as noted above, because formulation relies upon the use and synthesis of meta-competencies that typically develop with experience.

Second, individual coaches are likely to vary in their ability to engage with Bachkirova's (2016) three main conditions for the good use of self. If self-care is defined as a core competence, questions arise concerning how this skill is taught, monitored and evaluated and what steps should be taken if trainee coaches do not demonstrate the level of self-awareness that training and professional bodies might subsequently specify. Nonetheless, training programmes arguably have a key role to play in helping coaches acquire effective self-care and instilling an understanding of this as an ethical requirement for safe and effective practice. Such a development clearly has implications not only for the training and credentialing of coaches but also for how, collectively, coaches position their 'selves' as agents of change.

## **Conclusion**

The well-being of the coaching workforce would benefit from becoming a priority for research, training and practice. The ability for coaches to develop effective self-care practices



and for greater clarity surrounding the role of individual, interpersonal and systemic factors in enabling these practices is, as has been argued in this article, increasingly important. In the current absence of empirically-supported models, this article has introduced formulation as one way for coaches to devise personalised approaches to understanding and addressing their self-care needs. Arguably, self-care practices would benefit from being positioned as a distinct professional competence and an ethical imperative if coaches are to establish and maintain careers that are highly satisfying to them and optimally effective for their clients. As an approach of growing interest to the coaching community, formulation offers an organising framework for helping coaches make informed choices about self-care needs at different stages in their lives and careers in ways that can support sustainable well-being in an increasingly complex world.

### **Declaration of interests**

There are no declarations of interest.

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## Figures, tables and boxes

Figure 1. The Health Awareness Tool (HAT)

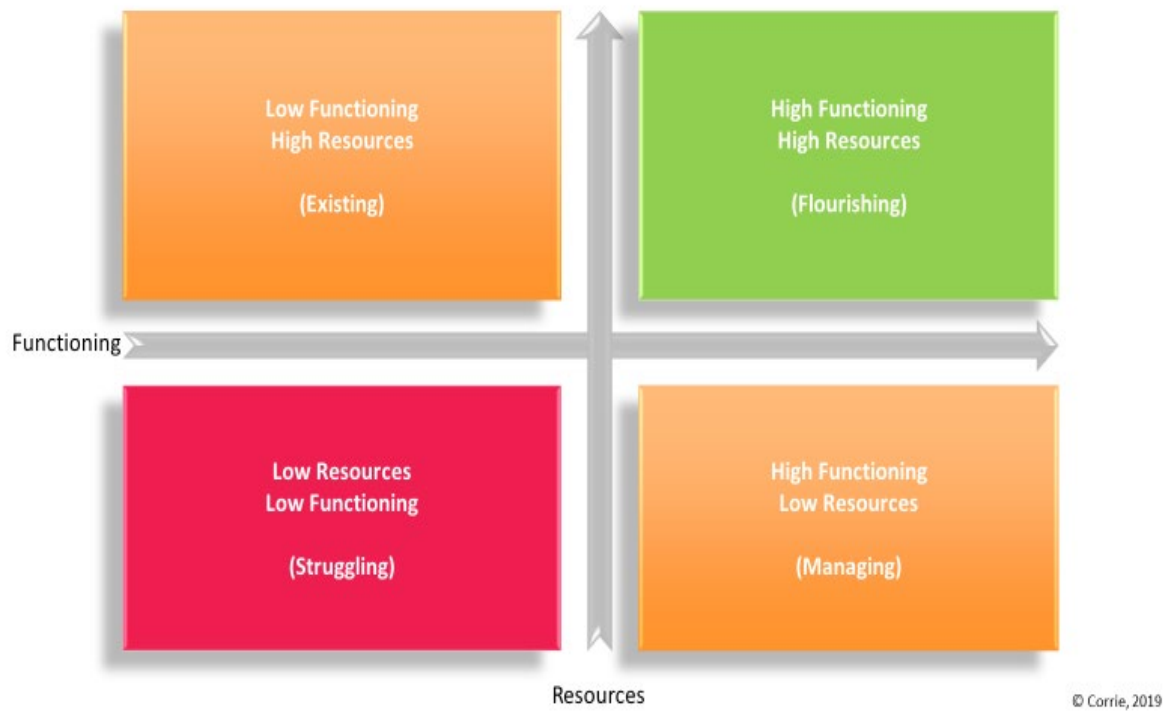


Figure 2. Ciara's Application of the HAT

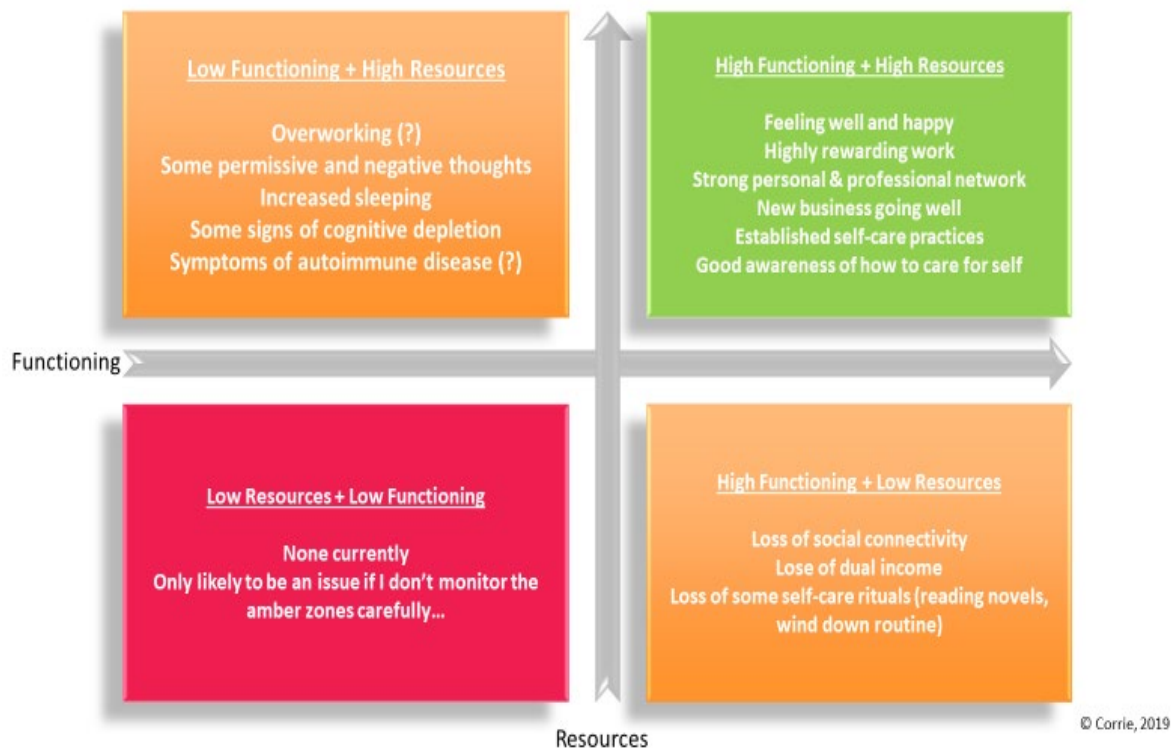




Table 1. Formulation and the Three Main Conditions for the Good Use of Self

Formulation and understanding the self:

- Clarifies beliefs about one's own well-being needs
- Helps identify and prioritise specific well-being needs currently and in terms of more general patterns or themes
- Illuminates factors that enable and impede effective self-care
- Illuminates links between current habits (positive and negative) and proximal and distal influences that can generate greater self-awareness

Formulation and looking after the self:

- Helps identify strategies that might promote an effective approach to self-care generally
- Enables the prioritisation of well-being goals and the methods of self-care most likely to achieve these goals at specific points in time
- Aids the ability to devise, plan and sequence interventions
- Helps the coach decide upon criteria for a successful 'self-care outcome'; that is, determining when self-care practices are working well and when they might need refinement

Formulation and checking the self for quality and sensitivity:

- Helps identify patterns in action that can be examined impartially to illuminate personal 'blind spots'
- Helps identify how pressure points could lead to sub-optimal choices (e.g. taking on too much work)
- Helps identify what type and how much work is safe to accept without compromising the service offered to clients
- Enables the development of personal signs of vulnerability that suggest emerging compassion fatigue or burnout

Table 2. Data Collected to Inform the Formulation

	Current modal rating 0-10 <sup>3</sup> (range over the week)	Ratings when at personal best
1. Energy levels at start of day	6 (range 4-7)	8-9
2. Enjoyment of work	9 (range 7-9)	9-10
3. Fatigue at the end of the day	8 (range 8-9)	4-5

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<sup>3</sup> Code for items 1-3: 8-10=very good; 5-7=acceptable but may need some attention, 2-4=sub-optimal: needs attention; 0-1=very poor; needs immediate attention and possibly external support. Scoring reversed for item 4.

Box 1. Current Professional and Personal Circumstances

Professional circumstances:

1. Just established a new business
2. Working with clients experiencing high levels of distress and confronting new and complex challenges because of the COVID-19 pandemic
3. Working more flexibly and longer hours to try to meet clients' needs (including evenings and weekends)
4. Knowing of individuals across my professional networks who have been seriously ill or who have died during the COVID-19 pandemic
5. Delivering 100% of my work online from home
6. Planning a series of training events to be delivered in the next four months
7. Unclear about the future of my business in light of COVID-19 – hard to plan with any certainty

Personal circumstances:

1. Grieving for a parent who is receiving end of life care
2. Trying to support and manage the affairs of another family member living with dementia
3. The recent death of a long-standing family friend
4. A long-term health condition, generally well-managed but subject to 'flares'
5. Becoming the family's sole wage earner following my partner's redundancy

## Box 2. Personal and Professional Resources

### Personal Resources

1. Rewarding and enjoyable work: sense of contribution that reflects my values
2. Generally physically healthy
3. Membership of a gym to support health and fitness
4. An established relationship with a clinical specialist to manage my health condition
5. Elderly family members are receiving good quality care from teams that communicate effectively with me
6. Solid set of well-developed self-care practices which have until recently been implemented effectively
7. Able to ask for support when I need it
8. Good at handling pressure and organising my time

### Professional Resources

1. Rewarding and enjoyable work that gives me a sense of contribution
2. Access to good professional networks
3. Some great colleagues who have also become friends
4. Good relationship with my supervisor – a safe person with whom I can discuss both personal and professional needs openly
5. Opportunities for exciting projects with like-minded colleagues
6. Access to relevant materials to support my work (e.g. relevant databases, articles and books)
7. Referrers who value what I provide and make good use of my services
8. Created a good balance of activity in my working life: client-facing work, training, writing and research

### Box 3. Factors related to Functioning

#### Physical

- Feeling quite tired a lot of the time.
- Evidence of ‘video fatigue’ due to all work being online, including sore eyes.
- Sleeping more, possibly suggesting a higher level of fatigue.
- Some (minor) symptoms that suggest my health condition could be re-emerging.

#### Behaviour

There have been some radical changes in how my days are structured, partly by design but largely due to the restrictions imposed by COVID-19. Most notably:

- Work boundaries have changed; in trying to be flexible to accommodate clients’ needs, my working hours have become less predictable with less clarity about when my working day begins and ends.
- Working exclusively from home means that there is no journey time to and from work to ‘decompress’ at the end of the day.
- Procrastinating on certain tasks. This often occurs when I am starting to feel overwhelmed.
- I have recently taken on several new and exciting projects, which are the fruits of my career redesign. They are also part of a protective strategy as I am the sole wage earner. The concern is that I could automatically say yes to everything rather than thinking through what I can manage.
- I am not currently engaged in any interests outside of work. I have also stopped reading novels – an important form of relaxation.

#### Cognitive factors

- Overall, I have a positive, proactive mental attitude but I have noticed some permissive cognitions creeping in: “It’s OK if I don’t exercise today” and “I’ll do my admin tomorrow”. This has resulted in reduced efficiency in places.
- I have noticed occurrences of some negative, maladaptive thoughts (e.g. “I can’t keep on top of all this”) that hint at feeling overwhelmed. This may link to my current procrastination.
- I’m making less time for reflection. My thinking tends to be of the fire-fighting variety rather than deep thinking
- It’s taking me longer than usual to get things done.
- I can sometimes take on too much responsibility for my clients and expect too much of them and me. I need to watch for the presence of my ‘demanding standards’ schema (picked up by my former coach) which is a personal vulnerability.

#### Social

- I’m missing friends and social contacts. I would like to see more of them.
- I have not been able to visit elderly parents in residential care due to lock down. I worry about them and wish I could be with them more often.

