



Mental Health and Wellbeing

Recognizing and Managing Depression in Clients

Introduction

In the coaching profession, fostering a supportive and goal-oriented environment is paramount. However, it is equally important for coaches to be attuned to the emotional and psychological challenges their clients may face, particularly when signs of depression arise. While coaches are not mental health professionals, their unique position allows them to observe potential red flags that may indicate a client is struggling with depression. Recognising these signs early on, understanding their impact, and knowing when to refer a client to a qualified mental health professional are essential components of ethical and effective coaching.

This guide provides coaches with practical tools to identify symptoms of depression, assess their severity, and navigate the delicate process of supporting clients while maintaining clear professional boundaries. It aims to empower coaches to create a balanced approach where coaching and mental health support can coexist, ensuring that clients receive the care they need while continuing their personal and professional development.

Guide:

Recognizing and Managing Depression in Clients

Coaches play a pivotal role in identifying signs of depression in their clients, which can significantly impact the coaching process and outcomes. It is crucial for coaches to recognize these signs but not to diagnose—which they are typically not

qualified to do—but to understand when a referral to a mental health professional is necessary.

Understanding Symptoms

Depression can manifest through a variety of symptoms that can affect an individual's emotional state, cognitive functions, physical health, and behavior. Emotional symptoms include persistent sadness, feelings of emptiness, or a diminished interest in all or most activities. Cognitive signs might involve trouble concentrating, making decisions, or remembering details. Physically, the client may report fatigue, changes in sleep patterns, or significant weight changes. Behaviorally, there may be withdrawal from social activities, reduced work performance, and neglect of personal responsibilities (Neenan, 2008).

Observation and Inquiry

Coaches should be attentive to changes in mood, performance, and engagement during sessions. A decrease in productivity and motivation, especially if the client was previously active and engaged, can be indicative of underlying issues. It's also beneficial for coaches to gently inquire about any notable changes they observe, which can help in assessing the client's emotional and psychological state without making direct interpretations or diagnoses (Bachkirova, Cox, & Clutterbuck, 2014).

Assessing Severity and Functionality

The determination of whether a client is coachable at the moment or needs to be referred to a mental health professional often depends on the severity of these symptoms and their impact on daily functioning. If a client is unable to perform routine tasks, maintain personal hygiene, engage meaningfully with people, or if they express feelings of hopelessness or suicidal ideation, these are strong indicators that professional mental health support is needed rather than or alongside coaching (Palmer & Whybrow, 2019).

Ethical Considerations and Referral

Coaches must maintain an ethical boundary concerning their expertise. Recognising when issues such as depression are beyond the scope of coaching and referring clients to mental health professionals not only ensures the client's safety

but also upholds the integrity of the coaching profession (Jordan & Livingstone, 2013).

This foundational understanding allows coaches to create a supportive environment that respects the client's needs and maintains professional boundaries, ensuring that clients receive appropriate care and support for their mental health challenges.

Decision-making on Referral to Mental Health Professionals

Determining when to refer a client to a mental health professional is a critical step in the coaching process, particularly when signs of depression are apparent. This decision should be guided by a thorough understanding of the symptoms' impact on the client's daily life and their ability to benefit from coaching versus therapeutic intervention.

Recognizing the Limits of Coaching

Coaches need to recognize the boundary between coaching and therapy. While coaching can help clients set goals and develop personal and professional skills, it does not treat mental health disorders. Coaches should ideally be trained to identify signs that indicate a need for mental health intervention, such as marked changes in mood, expressions of hopelessness, or any mention of self-harm (Palmer & Whybrow, 2019).

Assessing Severity and Impact

The severity of depression can vary widely. A key consideration for referral is the extent to which depression affects the client's ability to function in daily activities, work, and relationships. If depression significantly impedes the client's capacity to engage with coaching tasks or to implement changes in their behavior or thinking patterns, this is a strong indicator that the individual may require therapeutic intervention (Jordan & Livingstone, 2013).

Consultation and Collaboration

Before making a referral, it can be beneficial for coaches to consult with mental health professionals, provided they have the client's consent. This collaboration can help ensure that the client receives a well-rounded approach to their mental health needs. Such consultations can also aid coaches in understanding their role in the client's broader support network (Cox, Bachkirova, & Clutterbuck, 2014).

Communicating the Referral

Discussing a referral to a mental health professional should be handled with sensitivity and care. Coaches should ensure that such recommendations are made from a place of support and concern for the client's well-being, rather than as a critique of the client's issues. It's important to frame the referral as a positive step towards healing and personal development, which can complement the coaching process (Stober & Grant, 2006).

This structured approach ensures that coaches can make informed decisions about referrals, maintaining the focus on the client's best interests and overall mental health.

Guidelines for Continuing the Coaching Relationship

Once a coach recognizes signs of depression in a client, deciding whether to continue the coaching relationship involves careful consideration of the client's emotional state, the severity of symptoms, and the coach's capability to provide support within professional boundaries. Here's how coaches can manage this delicate balance:

Establishing Clear Communication and Boundaries

The decision to continue coaching should be based on informed consent where both the coach and the client acknowledge the limitations and scope of coaching. It is essential to clarify that while coaching can support personal growth and goal achievement, it is not a substitute for therapy in managing mental health disorders. Coaches should openly discuss with the client what can and cannot be achieved

through coaching and ensure the client understands the difference between coaching and therapeutic interventions (Stober & Grant, 2006).

Setting Realistic Goals and Expectations

When depression is evident, coaching goals may need to be adjusted to accommodate the client's current capabilities. Goals should be realistic, focusing on enhancing daily functioning and personal effectiveness within the limits of the client's emotional and psychological state. It's helpful to break larger goals into smaller, manageable tasks to promote a sense of accomplishment and progress, which can be particularly therapeutic for individuals experiencing depression (Palmer & Whybrow, 2019).

Encouraging Professional Mental Health Support

If a client is already receiving therapy or if the coach deems it necessary, encouraging the continuation or initiation of professional mental health support is crucial. Coaches should facilitate an environment where seeking mental health support is seen as a strength rather than a deficiency. Coordination with mental health professionals, with the client's consent, can provide a complementary framework where coaching and therapy support different aspects of the client's life (Jordan & Livingstone, 2013).

Monitoring and Adapting to Changes

Coaches should remain vigilant to changes in the client's mood, behavior, and general well-being. Regular check-ins can help assess whether the current coaching strategy is beneficial or if adjustments are needed. Coaches must be prepared to reassess the situation and consider pausing or terminating the coaching relationship if the depression significantly worsens or if the coaching appears to be ineffective or causing distress (Cox, Bachkirova, & Clutterbuck, 2014).

These guidelines ensure that the coaching process remains supportive, goal-oriented, and ethically sound, providing the client with the best possible environment to manage their condition while pursuing personal and professional growth.

Monitoring and Supporting Mental Health

Effective monitoring and support of a client's mental health are vital components of the coaching process, especially when the client shows signs of depression. This ongoing vigilance helps ensure that the coaching relationship remains beneficial and responsive to the client's evolving needs.

Regular Check-Ins

Coaches should establish a routine of regular and structured check-ins that focus on the client's emotional and psychological well-being. This could include specific questions designed to gently explore the client's current state without delving into areas that require therapeutic intervention. These check-ins help identify any changes in the client's condition and provide early detection if the client's depression worsens, which might necessitate further action, such as adjusting coaching strategies or a renewed discussion about referral to a mental health professional (Palmer & Whybrow, 2019).

Creating a Safe Space for Expression

It is crucial for coaches to foster an environment where clients feel safe and supported in expressing their feelings and challenges. This involves demonstrating empathy, maintaining confidentiality, and showing genuine concern and understanding. A supportive coaching environment can significantly enhance the client's ability to manage stress and can contribute positively to their mental health journey (Jordan & Livingstone, 2013).

Adaptive Coaching Techniques

Depending on the client's mental health status, coaches might need to adapt their coaching techniques. For clients managing depression, techniques that emphasize strengths and resilience can be particularly effective. Additionally, coaches can employ mindfulness and stress reduction strategies to help clients cope with anxiety and depressive symptoms (Stober & Grant, 2006).

Collaboration with Mental Health Professionals

Although some authors and practitioners encourage collaboration with a client's mental health provider when the client is also receiving therapy (Cox, Bachkirova & Clutterbuck, 2014), this expectation can be problematic. Therapists are bound by strict confidentiality agreements and are unlikely to discuss their client's case with a coach, even with the client's consent. Moreover, the wisdom of sharing such information is questionable, as it could blur the lines between therapeutic and coaching roles. Instead, coaches should clearly delineate the boundaries of their expertise, focusing exclusively on coaching objectives and methods. Coaching primarily aims to help clients achieve tangible and clearly defined goals in the present, distinct from the therapeutic process.

In summary, when a client is receiving therapy alongside coaching, it's essential to be mindful not to encroach upon therapeutic objectives or methods. If the client shares their therapeutic experiences, the coach should listen and apply those insights to the specific collaborative coaching objectives, ensuring that a clear "buffer zone" remains between the two disciplines. This helps maintain professional integrity and ensures the client receives the best from both services.

Summary

Coaches play a key role in identifying signs of depression in their clients, which can affect the coaching process and outcomes. While not qualified to diagnose, coaches should recognize when a referral to a mental health professional is necessary.

Understanding Symptoms: Depression can manifest emotionally, cognitively, physically, and behaviourally. Symptoms include persistent sadness, trouble concentrating, fatigue, changes in sleep or weight, and withdrawal from social activities.

Observation and Inquiry: Coaches should remain attentive to shifts in mood, engagement, and performance during sessions, gently inquiring about these changes to assess the client's state.

Assessing Severity and Functionality: If depression impairs a client's ability to perform routine tasks or if they express feelings of hopelessness, a referral to a mental health professional is necessary.

Ethical Considerations: Coaches must maintain clear boundaries, recognising when issues go beyond coaching's scope and require therapeutic intervention.

Referral Process: When making a referral, coaches should approach it with sensitivity, framing it as a positive step in the client's healing journey.

Continuing the Coaching Relationship: If coaching continues alongside mental health treatment, goals should be adjusted to accommodate the client's emotional state. Clear communication of boundaries, realistic goal-setting, and close monitoring are key.

By maintaining ethical boundaries and focusing on the client's best interests, coaches can create a supportive environment while ensuring clients receive appropriate care for their mental health needs.

FAQS

Q: What are the signs that someone's grief is straying into mental illness e.g. depression?

- Indicators that it may be straying into a mental illness is when it becomes all pervasive and the client finds it difficult to think or talk about anything else and they may be finding it difficult to function with daily activities.
- Explore with your client about what you are noticing about their behaviour and/mood and look for thoughts, behaviours, physical signs, and emotions of possible depression such as:
 - Self-criticism, memory and concentration difficulties, procrastination (especially when the client normally doesn't do it), avoidance, unusual outbursts compared to normal self, body signs, sleep deprivation, loss of appetite, passive and sad emotions, disappointment with self, and numbness
- Remember you are not there to diagnose even if therapeutically trained. Take to supervision.
- Ask them whether they feel fit for coaching currently and reiterate your role as a coach and your professional duty of care to them.
- Instigate a conversation that helps the client to explore where else they may need support outside of the coaching e.g. their GP, therapy.
- Help them to action this outside the coaching without taking too much responsibility (e.g. you may have to support them to find a therapist by recommending or providing websites/directories of counselling).
- If you meet resistance from the client (they may not be able to be objective about their own health) then reiterate your professional duty of care requirements to them as well as your need to abide by the ethical code and only coach within the

boundaries of your capability (always with care and compassion). An option would be to pause the coaching for the next session to allow you enough time to take it to supervision.

About the Author



Dr Joan Swart spent more than 20 years in corporate management before switching to a psychology practice. Since then, she has designed curricula and supervised and trained learners at institutions like the Dr Bosman Group and the Jay Shetty Certification School.

She has authored four books, various book chapters, and peer-reviewed articles. Joan is an accredited supervisor with the Association for Coaching.

References made in Guide

Cox, E., Bachkirova, T., & Clutterbuck, D. (Eds.). (2014). *The Complete Handbook of Coaching*. Thousand Oaks, CA: Sage.

Jordan, M., & Livingstone, J.B. (2013). Coaching vs. Psychotherapy in Health and Wellness: Overlap, Dissimilarities, and the Potential for Collaboration. *Global Advances in Health and Medicine*, 2(4), 20-27. DOI: 10.7453/gahmj.2013.036

Neenan, M. (2018). *Developing Resilience: A Cognitive-Behavioural Approach* (2nd ed.). New York: Routledge.

Palmer, S., & Whybrow, A. (2019). *Handbook of Coaching Psychology: A Guide for Practitioners*. New York: Routledge.

Stober, D.R., & Grant, A.M. (2006). *Evidence-Based Coaching Handbook: Putting Best Practices to Work for Your Clients*. New York: Wiley.

Resources

- [Coaching Conversation: Red Flags in Mental Health](#) – LinkedIn Live with Joan Swart
- [Are your clients suicidal?](#) – Webinar with Marie Faire
- [Tools for Clients with Anxiety and Depression](#) – Podcast with Frances Masters
- [Mental Health and Coaching](#) – Coaching Perspective Article (July 23, Issue 38)
- [Mental Health & Wellbeing](#) – Digital Learning Resources

the AC, *If you have any questions or would like to contribute further, please email: ethics@associationforcoaching.com* The AC recognizes that contributions will reflect the contributor's own perspectives and views and therefore are not necessarily the views of the AC, unless explicitly stated.

*If you have any questions or would like to contribute further, please email:
lenka@associationforcoaching.com*