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The future of behavioural interventions in the workplace

From therapy, counselling and coaching to online guidance

Whitepaper

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Summary

This paper deals with various interventions to reduce work-related problems or achieve desired behavioural improvements and performance enhancements. We first discuss the more traditional behavioural interventions such as coaching and counselling. These interventions build on the active elements of psychotherapy. For a successful behavioural intervention, it is important that an employee is motivated to learn and is prepared for (psychological) growth. In addition, an employee should experience for themselves that the intervention is meaningful and achievable. When the situation is complex and/or requires extensive behavioural change more intensive guidance from a professional (empathetic) counsellor or coach is desirable. In the case of minor problems or relatively small behavioural change, forms of intervention that involve the use of technology, such as e-coaching, e-counselling, online platforms and apps, can also be used. Where these modern forms of behavioural interventions also make use of the active elements of psychotherapy, they are a great addition to more traditional interventions. In addition, the deployment of a counsellor or coach is limited in these online interventions, bringing them within the reach of larger groups of employees in terms of cost.

In six compact chapters we show how psychotherapy has served as a model for the latest generation of behavioural interventions in the workplace.

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1 Introduction

Many people experience the need to develop their personal effectiveness in their working lives, wonder whether they are in the right workplace, or want to improve their work performance. More and more often, organisations facilitate their employees in realising their development wishes and put a lot of money into this. According to research agency Technavio, the market for 'soft skills' training will grow by 10% a year to 25 billion dollars worldwide by 2020 (Technavio, 2016). Expenditure on individual coaching also continues to grow annually and, according to the International Coach Federation (ICF), is¹ around 2.5 billion euros a year worldwide (International Coach Federation, ICF, 2016).

There are also employees who want to work on their personal and professional development because they run up against the limits of their abilities, experience stress or are burned out because of their work. For example, the Dutch 'National Survey on Working Conditions' shows that a significant number of employees complain of burn-out: 17% of employees experience exhaustion, 10% do not easily meet the psychological demands of work, and 50% neglect family activities because of work (Hooftman et al., 2018). Mental and physical complaints limit the employee's functioning and happiness. This is detrimental for the employee, his immediate environment, and the organisation itself. If action is not taken on time, such a situation can lead to an unhappy employee, unhappy colleagues, absenteeism, sick leave, and dismissal.

In order to facilitate employees' development wishes, functioning and (work) happiness, an employer may consider making work or task adjustments, offering (additional) training or setting up an individual intervention. Individual interventions traditionally include coaching and counselling. For some years now, online interventions that are supported by digital means have also been offered, such as e-counselling, e-coaching, apps and online programmes.

In this paper we discuss the different forms of intervention, their effectiveness, and how to use them. We start by sketching a framework that gives an indication of the forms of intervention (chapter 2). We discuss that most forms of intervention in the workplace are derived from psychotherapy. We also consider the elements that make workplace coaching, counselling and online interventions useful interventions (chapter 3). In subsequent chapters, we explain these forms of workplace intervention; counselling (chapter 4), coaching (chapter 5), and online interventions (chapter 6), and discuss what they are used for and how they can support each other.

¹ International Coach Federation (ICF): <https://coachfederation.org>

2 Interventions based on the level of complexity and guidance by a professional

Before examining the origins of the different forms of intervention and their application in more detail, we will contrast them with two factors: the level of complexity of the developmental question or desired behavioural change and the amount of guidance and support given by a professional; see Figure 1.1.



Figure 1.1. Interventions based on the level of complexity and the guidance & support by a professional.

This figure shows how the role of a coach or counsellor differs according to the complexity of a development question or desired behavioural change. The more complex certain development issues are, or the more extensive the desired behavioural change is, the more intensive the guidance and support from the coach or counsellor should be. In the case of very serious case histories or a psychological disorder for which short-term counselling is not sufficient (e.g. post-traumatic stress disorder), referral to a psychotherapy therapist is recommended. Within therapy, there is more room for long-term individual counselling and treatment.

Workplace counselling is the provision of brief (short-term) psychological therapy for employees of an organisation, which is paid for by the employer (McLeod & Henderson, 2003). An example is an employee who has lost a family member and after a while is still so intensely sad that he cannot work. A counsellor can help this staff member with mourning and guide them to return to work (chapter 4).

Workplace coaching is a useful intervention when there is no obvious problem but a desire for development, for example when an employee wants to increase his personal effectiveness, acquire certain skills or reflect on his career.

Coaching is the creative process in which the client, as a partner, is inspired and challenged to reach his or her maximum personal and professional potential (ICF, 2018). In traditional face-to-face coaching, coach and client work towards a goal in several discussion sessions (chapter 5).

Within workplace counselling and workplace coaching, the expert (coach or counsellor) plays an important role. As a result, these forms of intervention are quite labour-intensive and therefore relatively expensive.

Workplace e-coaching and e-counselling are forms of coaching and counselling in which there is no need for the coach or counsellor and employee to meet physically.

The support takes place remotely and online. Nowadays, there are even online interventions in which little or no support is required from the professional. These are apps and online programmes in which an employee can work on his development inquiry entirely independently (chapter 6).

3 Origin and working ingredients

Both workplace counselling and coaching are relatively young fields, which means that scientific research into these forms of intervention is still in its infancy. As a result of limited research, we have limited knowledge regarding how effective the concepts and foundations of the forms of intervention are. However, we do know that the most commonly used methods and techniques can be traced back to the field of psychotherapy. The same applies to online interventions. Psychotherapy is a form of treatment for people with psychosocial problems and/or psychiatric disorders. By understanding psychotherapy's effectivity, we may gain insight in the working ingredients in workplace counselling, coaching and online interventions.

A garden with a thousand blooming flowers

It appears that there are more than 500 different forms of psychotherapy (Lilienfeld, 2012). The best-known forms are:

- Behavioural therapy, aimed at changing and adapting unhealthy behaviour;
- Cognitive therapy, aimed at changing and adapting dysfunctional thoughts;
- Psychodynamic therapy, aimed at making unconscious thoughts and forgotten experiences visible;
- Client-focused therapy, aimed at understanding and increasing the personal power of the client;
- Schema therapy, aimed at tracing and adapting the origin of certain behaviour patterns;
- Solution-focused therapy, focusing on the client's strengths and resources;

This multitude of psychotherapies raises the question: which intervention produces the best results? This matter has been subject of debate for a long time. Generally speaking, researchers appear to have two fundamentally different approaches: the 'specific factors' approach and the 'generic factors' approach.

Specific factors

This approach assumes that the effectiveness of therapy is determined by the presence of factors specific to the therapy in question. The extent to which these factors contribute to the outcome of the therapy determines the success of the therapy.

Schema therapy, for example, focuses on the behavioural patterns (schema) that were developed by a client in the past and are now dysfunctional.

A client may, for example, suffer from an excessively "perfectionist" schema: a behavioural pattern that makes the client very critical and focused on details. Schema therapy focuses on challenging this scheme. The more a schema is challenged during therapy, the more successful therapy is: the more a client will be able to distance himself from the schema and make freer choices in his behaviour. In summary, the objective (based on specific factors) of a therapy is used to determine afterwards the extent to which the therapy was successful. In this way, therapies that differ from each other in terms of design, focus and execution can still be just as successful in achieving their own goals.

Generic factors

This approach assumes that therapy is mainly effective thanks to factors that recur in almost every form of therapy. These are therefore not factors specific to the therapy, but generic elements. This approach is also known as the "dodo effect" (Wampold, 2015). This is a reference to the dodo scene from *Alice in Wonderland*. In this scene, all animals have become wet and everyone has to get dry as soon as possible. The dodo starts a contest. All the animals shall dry themselves in their own way and when everyone is dry the dodo decides that everyone has done well. So, everyone has won and deserves a prize.

This approach emphasises that as long as a therapy contains certain generic factors, it doesn't matter which form you choose, and each type of therapy is therefore interchangeable.

The three generic factors that are noted are:

1. **Motivation and hope:** Without the motivation or will to learn and (psychologically) grow, therapy will not get off the ground. In addition, the client must have the hope and expectation that change is possible.
2. **Therapeutic relationship:** An empathic therapist is needed who shapes the therapy, is consistently present and provides support throughout the process.
3. **Therapeutic ingredients:** It does not matter exactly what the ingredients are and which part of the client's life they have an effect on (more functional work, improvement of social relations, more effective emotion regulation), as long as they bring about healthy behaviour and let the client experience that his complaints can be interpreted from a certain framework and that it is possible to work on them.

Research among clients who did or did not recover after therapy shows that the success of therapy depends mainly on the therapeutic relationship and the characteristics of the patient and therapist. A good relationship between therapist and client, a motivated client and an empathic therapist seem to make the difference (Norcross & Wampold, 2011). Which therapy is used does not seem to make much of a difference?

Questionable types of intervention

The presence of these three generic elements is often sufficient to ensure that an intervention delivers a successful outcome for a client. This also explains why types of intervention for which there is little, or no scientific foundation can still produce some positive results in the eyes of a client.

For example, an intervention using the reading of a horoscope (astrology) does not in itself have much to do with the actual influence of the position of the stars on our behaviour as long as the therapist (reader) takes the above three factors into account (hope and motivation on the part of the client, a good relationship of trust and a plausible framework for the client).

How the various factors shape workplace counselling, coaching and online interventions will be discussed in the following chapters.

4 Workplace counselling as intervention

4.1 Definition and characteristics

Workplace counselling is mainly used for employees with negative feelings, fatigue, lack of energy, tension complaints, headaches or listlessness. Workplace counselling has traditionally been based on the 'medical model', just like most forms of psychotherapy. This model assumes that there are dysfunctions that can be remedied. In counselling, symptom reduction can therefore be an important component of the process.

In the introduction to this chapter, the definition of counselling is the provision of brief psychological therapy for employees of an organisation, which is paid for by the employer. The Dutch professional association of counsellors (ABvC)² gives a more specific definition of counselling that can be used to give more substance to workplace counselling: counselling is a short-term form of individual psychosocial guidance. This definition contains four key words: short-term, individual, psychosocial and guidance. We explain these four key words below.

1: Short-term

A workplace counselling programme is short because in most cases it requires between 1 and 8 hours of counselling sessions. One session lasts 1 to 1.5 hours. Counselling thus resembles the workplace coaching programme, which has a similar duration (chapter 5), and contrasts with certain forms of therapy, in which people are intensively guided over a much longer period of time. Counselling is therefore suitable for people with complaints that can be reduced in the relatively short period of a few months. People who suffer from severe emotional complaints, personality problems or mood disorders are more likely to benefit from therapy. It is up to the counsellor, during an intake interview with the client, to assess whether the client is sufficiently healthy for counselling or should be referred to therapy.

2: Individual

Workplace counselling is a one-to-one relationship. The counsellor guides the client within a safe and defined environment. What is shared during the counselling sessions is confidential. Only with the explicit consent of the client is a counsellor justified to share information about the client. The counsellor has to be careful not to provide information (unconsciously or consciously) to others, e.g. the client's employer. Also, the employer needs to be aware of the confidentiality between the counsellor and the employee.

In the case of an absent employee who is receiving counselling, the cause of the absenteeism, progress of the intervention, agreements made with the counsellor, problems from the past, and problems in the private sphere are matters that the employer is generally not allowed to ask about³.

3. Psychosocial

This refers to the nature of the guidance given. Psychological functioning refers to a person's beliefs, thoughts and feelings. Social functioning concerns a person's dealings with the world around him, such as other people, work or institutions. Usually there is an interaction between psychological functioning and social functioning.

² The General Professional Association for Counselling (ABvC): www.abvc.nl

³ This may vary from country to country and depends on national legislation.

If, for example, someone is structurally bullied by his colleagues (social functioning), this can have an effect on how he feels, how he thinks about himself and how he looks at the world (psychological functioning). At the same time, one of the reasons for structural bullying can be psychological because the person feels inferior and therefore does not dare to be confident, for example. This creates a self-sustaining dysfunction. This client can be helped by receiving counselling in which becoming more assertive and developing a more positive self-concept are central. Some counselling practices not only work psychosocially but are based on the so-called bio psychosocial model (George & Engel, 1980). In this case, the physical aspect of the problem is included in the approach, such as sleep deprivation, tension, and excessive stress reactions, along with the psychological and social elements. This practice involves exercises that help the client to better recognise and regulate his body's signals. Portable sensors (*wearables*) can also be useful here (chapter 6).

Guidance

Basically, counselling consists mainly of dialogue between counsellor and client. During the sessions, the focus is on complaint reduction, awareness of the problem and examining oneself in practice by means of exercises and homework.

Complaint reduction

Workplace counselling starts with an intake interview in which the problem and the seriousness of the complaints are examined. If the client appears to be suffering from severe (emotional) complaints, the focus is first on complaint reduction. In the case of a client with a lot of stress complaints, for example, counselling can start with the application of relaxation exercises that lead to complaint reduction. This creates space to investigate together what the cause of these complaints is and how they can be improved. If desired, the counsellor offers explanations and information about the complaints, either based on psychological models (psychoeducation) or not.

Subsequently, the counsellor and the client jointly identify concrete action steps to deal with the complaints.

Dialogue

In addition to the reduction of complaints, the counsellor focuses on gaining new insights that will help the client to move forward. This happens during one or more sessions after the intake. The client talks extensively about his feelings, experiences, and wishes. The counsellor helps the client to gain insights by asking questions and by listening actively and empathically.

Exercises/ homework

In addition, the counsellor uses exercises during the conversations or gives these as homework. The exercises are similar to those used in coaching (chapter 5) and are in most cases borrowed from psychotherapy techniques.

Through insights and changes in beliefs, thoughts, feelings and behaviour, the client gains a grip on the situation. In this way, the psychological and social functioning of the client improves during counselling. Counsellor and client also work on perpetuating the changed beliefs and behaviour. Usually, a relapse prevention plan is drawn up towards the end of the intervention. The client then thinks about factors that can cause him to relapse again, and how he is going to overcome these obstacles.

4.2 The cradle of counselling: Client-centered therapy

Carl Rogers (1902-1987) worked in the U.S. as a counsellor. Although Rogers had a doctorate in psychology, he did not have the legal qualification to call his work as a practitioner 'psychotherapy'. Therefore, he named his treatments 'counselling' (Woolfe, Dryden & Strawbridge, 2003). Rogers developed a form of intervention as the basis for his counselling which is now widely known as "client-centered therapy" (Rogers, 1951). In client-centered therapy, the patient's insight into himself is central. The starting point is that each person knows best what is going on with him and what is good for him; he does not need to be told by someone else.

The practitioner is only there for guidance and facilitates healing by accepting his client completely; with all his good sides and with all his problems. In this way the practitioner encourages his client to be mild to himself and accept himself (Rogers, 1951).

Some 70 years ago, this approach meant a paradigm shift for the world of counselling and treatment, working from a fairly hierarchical relationship between practitioner and patient. In this relationship, the practitioner had the authority and knowledge and could heal the patient. The patient was helpless without the practitioner. The client-centered approach knocked the practitioner off his pedestal and put the client and his insights first. Within this approach, the patient is no longer referred to as a patient but as a client. According to the client-centered approach, this method of treatment has positive effects on the client's sense of control and motivation. After all, most people will be more proactive and motivated in their treatment if their own knowledge is assessed as valuable and their own strengths are deployed instead of being dependent solely on the knowledge and skills of the practitioner. Nowadays, people are working in an increasingly client-centered way, in most types of counselling, coaching and also in therapy.

Box 1 The perfectionist

A client comes to a counsellor with an ever-increasing number of stress-related complaints. After the intake and dealing with her stress complaints, it emerges that the client has a rather perfectionist side. At work, she feels as if she has to perform at 100% all the time. As a result, she often 'freezes' and gets very tense. The client recognises that performing at 100% is an unrealistic expectation of herself. She also realises that she doesn't have her perfectionist beliefs just at work, it is also present at home in her private life. Together with the counsellor, she identifies alternative thoughts that can help her during those moments (exercise borrowed from cognitive behavioural therapy): "It doesn't have to be perfect", and "I'm doing fine" and "I'm good the way I am". The client decides to apply these thoughts when she feels stressed in future. In the follow-up session they investigate where the perfectionist thoughts come from. By diving into the client's childhood together (exercise derived from twilight therapy) they discover that the client received special praise as a child when she did things flawlessly. There wasn't much room to make mistakes with her parents. At first, the client is angry with herself for allowing the past to influence her so much. The counsellor helps the client realise that her perfectionist, driven side has also brought her a lot: a beautiful career, a nice house and a marvellous family. The awareness that her perfectionism has brought her stress as well as success, allows the client to embrace this side of herself a little more. In the final session the client talks about her progress: she starts to relax again and is able to calm herself better when she feels stress coming on thanks to now having alternative thoughts as a resource. During the session she makes a relapse prevention plan, in which she describes how she will hold on to the upward trend, and what she does when there is setback.

4.3 The counsellor's basic attitude

In the example from Box 1, the counsellor played a facilitating role, allowing the client to express herself freely, gain new insights and practice different behaviour. Three basic elements can be distinguished in the counsellor's attitude. These basic elements can be grouped under the generic ingredients that make therapy effective, such as 'motivation and hope of the client' and 'therapeutic relationship' (chapter 3). When these basic elements are used, the counsellor creates a good counselling relationship and is a role model for the client (De Sousa, 2014). The three basic elements are set out next.

1: Empathy

This refers to the extent to which the counsellor is able to empathise with the client (feels and understands the emotion and thoughts of the client) and shows understanding for the inner state of the client. This goes a step further than showing sympathy (compassion). By being empathic, the counsellor shows that he can follow his client and that the client's feelings are normal. Research shows that practitioner empathy does indeed determine the success of a treatment (Moyers & Miller, 2013) because it is an important part of an effective therapeutic relationship (Anderson et al., 2009), see also chapter 3.

2: Unconditional acceptance

Unconditional acceptance means that the counsellor accepts his client in all his whims. The counsellor emphasises that the client is as valuable as he is, and that he is free to share his feelings and experiences. The counsellor listens accepting and without judgement.

3: Congruence or genuineness

The counsellor behaves in a congruent way: he does not pretend to be someone else (genuineness) and expresses his feelings and thoughts towards the client openly. Client-centered therapy assumes that unfortunate people are *incongruous*: that they hide their inner world of experience (thoughts, feelings) or consider it unimportant, and behave the way they think they should instead of how they actually want to behave. This manifest itself in incongruous verbal behaviour (words) and non-verbal behaviour (attitude, facial expression, intonation). Most people who go into counselling are incongruous. To help the client become more congruent, the counsellor himself is a congruent role model and encourages the client's honesty and sincerity through unconditional acceptance.

No regulated profession

In most countries, being a counsellor is not a state-regulated profession. In other words, there are no government guidelines for this line of work and the 'counsellor' title has no legal protection (as is usually the case for doctors, teachers or pharmacists, for example). Because of this, everyone can call himself a 'counsellor' and start working as such. This also applies to other titles such as 'therapist' and 'coach', which are usually not protected either. There are various national and international professional associations of counsellors who work to guarantee the quality of counselling. If a counsellor's activities are covered by health insurance, it is usually a condition that the counsellor is a member of a professional association.

5 Workplace coaching as an intervention

5.1 Definitions

There are many different definitions of workplace coaching available. Remarkably, there isn't a single definition in scientific publications that is followed as a gold standard. This makes an unambiguous description of coaching a difficult matter. In the introduction to this chapter, we have chosen to adopt the more general definition from the International Coach Federation (ICF): Coaching is the creative process in which the client, as a partner, is inspired and challenged to achieve his or her maximum personal and professional potential (ICF, 2018).

The ICF is the largest international professional organisation and, in addition to this broad definition, has drawn up a set of competences that a coach should possess. These competencies make it clear that the partnership, as defined in the definition, stands for an equal (working) relationship. This equality means that the coach is not the omniscient expert who possesses the truth.

Therefore, coaching does not involve a hierarchical relationship in which the coach gives advice or determines what is good for the client. What is more striking in this definition is that it is all about the potential of the person.

There is no reference at all to problems, deficiencies, or psychological disorders. This definition therefore does not use the term patient but the term client. Some coaches, incidentally, prefer to use the 'coachee' to refer to their client.

5.2 From problem-oriented to development-oriented

During the 1960s, workplace coaching came into vogue within the business world due to a changing view on leadership, the strong growth in the number of large companies, new theories on organisational development and the wider propagation of psychology insights (Brock, 2012). Coaching in this period was mainly offered by therapists, managers and specialists, although they rarely call themselves coaches now. In the 1980s, workplace coaching broke through on a large scale within the business world and the terms 'coaching' and 'coach' were frequently used. In this period, the emphasis was still on the medical model, i.e. solving or reducing problematic behaviour. As a result, workplace coaching was not discussed openly (taboo): 'There is something wrong with people who use coaching'.

Nowadays, workplace coaching is increasingly used as a preventive and development-oriented intervention. Workplace coaching therefore comes more out of the taboo: working on yourself is seen more as a strength instead of a weakness. The concept of 'coaching culture' is making its appearance, in other words, an organisational culture in which it is normal to use coaching in the professional development of employees.

Specialisations and themes

In the early years, workplace coaching was only aimed at senior management. Nowadays, coaching is offered within all layers of an organisation and beyond. This has led to specialisations, such as:

- Executive coaching: focused on leadership development
- Performance coaching: focused on performance improvement
- Career coaching: focusing on career and career issues
- Team coaching: aimed at improving cooperation within teams
- Life coaching: focused on personal development and growth
- Lifestyle coaching: aimed at achieving a healthy lifestyle

Most of the specialisations mentioned are work-related. This is confirmed by the biennial benchmark study of the Dutch Association of Professional Coaches (NOBCO)⁴ into the composition of the Dutch coach market (NOBCO, 2018). This survey shows that the top five coach questions mainly contain work-related themes. These are the issues at stake:

1. Work-life balance
2. Self-development
3. Stress and burnout
4. Collaborating with colleagues or functioning in a team
5. Career

The benchmark also shows that two thirds of the coaching is paid by the employer. The reason that companies, in particular, use and pay for coaching, may have to do with the fact that coaching is a relatively expensive form of intervention.

5.3 The effectiveness of workplace coaching

As described earlier, there is no consensus on the definition of workplace coaching, but there is a lot of overlap between different definitions used. The following elements can be found in the most common definitions:

- Structured and targeted process
- Focused on growth and client development
- Equivalent relationship between coach and client
- The client determines his own goals

The research into workplace coaching mainly concerns those types of coaching in which the above elements occur. Although research is still in its infancy, several meta-studies have been carried out. Studies looking specifically at workplace coaching show that coaching has a positive effect in the following areas (Jones, Woods & Guillaume, 2015; Tea Tree, Beersma & Vianen, 2013):

- Strengthening the way a person deals with problems, stress and unpleasant situations (coping techniques)
- Improving the way a person strives to achieve goals (goal-oriented self-management)
- Improving a person's attitude towards work (work attitude)
- Increasing motivation
- Learning new skills
- Improving performance at work
- Enhancing well-being

Use of methods and techniques

Depending on the target group, the theme, and the methods a coach masters, the coach can use certain tools within coaching. The most important element for workplace coaching is conversation: the dialogue between coach and client.

Therefore most of the competencies that are singled out by professional organisations are related to the use of conversation techniques.

⁴ Nederlandse Orde van Beroepscoaches (NOBCO) is a member of the European Mentoring and Coaching Council under the name EMCC-NL (see also: www.nobco.nl)

For example, the ICF distinguishes the following conversation-related competencies (Van der Meer & Van der Pool, 2016):

1. **Creating a relationship:** the ability to create a safe, supportive environment that continuously produces mutual respect and trust.
2. **Full attention:** the ability to be fully aware and to create a spontaneous relationship with the client, using a communication style that is open, flexible and self-assured.
3. **Active listening:** the ability to focus fully on what the client says and does not say, to understand the meaning of what is said in the context of the client's wishes, and to support the client's self-expression.
4. **Effective questioning:** the ability to ask questions that reveal information that contributes to the coaching relationship and insights of the client.
5. **Open communication:** the ability to communicate clearly, give feedback openly and use language respectfully.

In addition to conversations, most coaches use additional tools, such as:

Exercises

There are a range of exercises that increase insight, create awareness or gain a learning experience that are widely used by coaches. Which exercise the coach applies depends largely on the coaching method or techniques a coach uses. A few examples:

A coach who uses techniques from 'Solution-focused coaching', for example, will use a 10-point scale on which the client can indicate which score he is currently giving himself with regard to his development goal and which score he is ultimately aiming for (e.g. from a 3 to an 8). The score the client gives himself is a starting point for a further discussion: Why does the client not score himself lower (i.e.: what is going well already); and what small step can the client take to go up a fraction on the scale (Visser, 2009)?

- A coach who uses techniques from Acceptance and Commitment Therapy (ACT) identifies obstructed thoughts and allows the client to practice not suppressing these thoughts but rather to investigate and accept them (Jansen & Batink, 2014).
- A coach who makes use of 'Strength-focused coaching' will offer exercises that bring the client's core qualities to the fore (Korthagen & Nuijten, 2018).

Registration assignments

In order to map out how often a certain event or habit occurs; the client can keep a diary as homework. The client records consistently (e.g. every evening) when the event occurred during the day. The registration assignment can be expanded to include a component of reflection. In this case, the client also thinks about what he thought, felt, and did when the event occurred.

Questionnaires

It is also possible to use questionnaires to map out a particular situation or personality characteristics. An example is a questionnaire that measures a certain psychological construct (e.g. extraversion) and results in a certain score. It is important that the questionnaire is valid and reliable. This means that it accurately and actually maps out the concept it is intended to measure. There are many questionnaires in circulation in the workplace coaching sector for which substantiation is (partly) lacking. An example is the Meyers-Briggs Type Indicator (MBTI; Vermeren, 2008), a personality questionnaire that is not scientifically substantiated and is inconsistent with the extensively tested and validated Big Five personality dimensions.

Assessments

When coaching within an organisation, it is also possible that certain assessments (tests) have already been carried out at the client's premises. The results of this assessment can be used as input for the coaching relationship.

Knowledge sharing

A coach can use external sources of information to support a client in (better) understanding his situation or to inspire him. This could include a reference to a background article, websites and videos.

Peers

The knowledge or opinions of third parties (peers) can also be used as input for the coaching. These are usually questionnaires that the client's employees or colleagues fill in, or interviews that the coach conducts with persons relevant to the client. Normally, the evaluation is only carried out with the client himself. This self-reporting can give a subjective outcome about the actual results achieved. A more objective evaluation can be carried by involving third parties who have an insight into the client's performance (Luthans & Peterson, 2003).

5.4 Designing a workplace coaching programme

A workplace coaching programme usually consists of a continuous period during which the coach and client meet several times for a coaching session. Depending on the theme, objectives and availability of the client, the duration of a programme can vary from a few weeks to a few months. The benchmark mentioned above shows that the average duration of a coaching programme is 20 weeks with a session every 2.5 weeks. These sessions last 80 minutes on average, which means that a total coaching programme usually consists of 10 hours of coaching (NOBCO, 2018).

Setting up a workplace coaching programme

A coaching programme can take various forms: from face-to-face sessions in which the coach and client meet in the same room to remote communication via, for example, ZOOM (video calling), see also chapter 6. Usually, the trajectories follow a similar structured pattern with three phases. This concerns the preliminary phase (intake), the main phase (the sessions) and a final phase (closing, securing, and evaluating):

1: Pre-stage: Intake

A workplace coaching programme generally starts with an intake interview. The frameworks within which the coaching can take place are set in this interview. At the same time, the coach and client examine whether they both have sufficient confidence to enter the programme together. This is also called the 'click interview'. An effective programme does not seem possible without a rapport: the right click (creating rapport) is the start of a good working relationship (De Haan, Grant, Burger & Eriksson, 2016) (chapter 3). 'Clicking' is not only important from the client's point of view. Although in principle a professional coach can create rapport with most potential coachees, there are situations in which it is better for a coach to refrain from a coaching. This applies if there is a possible conflict of interests, if the client's coaching question lends itself better to referral to specialised assistance, or if the coach does not feel sufficiently competent for certain themes or target group. In case of a 'click', work arrangements are made during the intake interview and a coaching contract is agreed. This contract describes practical matters, such as the overall coaching objective, costs, number of sessions and the intended time schedule.

2: Main phase: the workplace coaching sessions

The intake is used to formulate an overall coaching goal that is further specified in the main phase. A distinguishing aspect of coaching is that there doesn't have to be a fixed objective for the entire programme.

It is even possible to adjust, cancel or formulate a new (sub) objective per session. The GROW model is a way of shaping one or more sessions. This model consists of the following four steps (Alexander & Renshaw, 2005):

1. **Goal:** the coach asks the client what they would like to do and achieve in the session.
2. **Reality mapping:** the situation in which the client finds himself is examined. Often a client will discuss feelings and assumptions as if they were facts. As soon as a client has distinguished the real facts from his thoughts and feelings, he can gain new insights and increase his awareness.
3. **Explore options:** as many ideas as possible that can contribute to achieving the goal are generated. In doing so, the coach can ask creative questions to encourage the client to think 'out of the box', put himself in other people's shoes or overcome obstacles. The coach stimulates the creative thinking process and structures the outcomes. This step ends with a list of options thought up by the client.
4. **Work out an action plan (Wrap-up):** the most promising option is worked out in an action plan which the client can use after the session. In doing so, it is important to identify possible obstacles that may hamper the implementation of the actions and how to avoid these obstacles.

Following this GROW step-by-step plan offers structure to the coaching process. Moreover, the client is at the controls; he or she comes up with his or her own options and elaborates a self-chosen action. This increases the involvement of the client and makes him feel responsible for the results.

3: Completion phase: closure and evaluation

A successful workplace coaching programme is concluded as soon as the goals have been achieved. Upon completion, it is important to investigate how progress can be safeguarded in relation to the goals set.

If a client goes back to their usual day to day, there is a good chance that he will fall back into the old behaviour. Although the client is responsible for the safeguarding, it is still advisable to pay attention to this as a coach. Writing a so-called relapse prevention plan at the end of the process is a helpful exercise.

As a final part of a workplace coaching programme, a general evaluation is usually carried out. In this evaluation, the client is questioned about his experiences with the programme, his opinion of the coach and his satisfaction with the results achieved. The evaluation has several functions: on the one hand it marks the completion of the programme for the client and on the other hand it gives the coach insight into his own effectiveness. It is usually mandatory for certified coaches to complete coaching programmes with an evaluation to keep their accreditation as well as assess the quality of their service.

To facilitate the evaluation process, NOBCO has made an online evaluation tool available called the Coaching Monitor⁵. This instrument contains various validated questionnaires with which various elements of the coaching process can be evaluated, such as the coaching relationship and the goals set. Third parties (peers) can also be involved in the evaluation.

Multiple stakeholders (the 3-call)

The above example of a coaching programme set-up is based on a one-to-one programme between client and coach. However, there may be situations in which there are several interested or involved parties. If a coach is called in by an organisation to coach an employee, it is possible that the organisation, as a client, has a role within the coaching process. For example, the client may be a manager or HR officer who provides input for the coaching process. In that case, the programme starts with a three-way discussion between the coach, the client and the manager.

⁵ For more information about the NOBCO Coaching Monitor and the underlying research model, see: <https://www.coachingmonitor.nl>.



The coaching programme itself remains a one-to-one programme between coach and client. During the programme and at the end of the programme, evaluations can be shared with the manager. The client determines which information may or may not be shared as per the code of ethics of number of professional organisations.

6 Online interventions

6.1 Digitisation of the coaching process

Since the 1980s, an important development has taken place that has influenced the possibilities for coaches and counsellors and their clients to be in contact with each other: digitisation. With the development of the internet, the ability to store a lot of data (in the "cloud") and the dizzying growth in the number of mobile devices, people can be in contact with each other anywhere and anytime (Waringa & Ribbers, 2018).

Therefore, it's logical that these developments also have an effect in the world of professional and work-related development. Digital resources are increasingly being used to replace certain elements in the face-to-face guidance process. Five categories can be distinguished regarding digitisation in the guidance process (Kool, Timmer, & Van Est, 2013). These categories can be represented based on two factors: degree of digitisation of the coach⁶ and degree of digitisation of the client. See figure 1.2

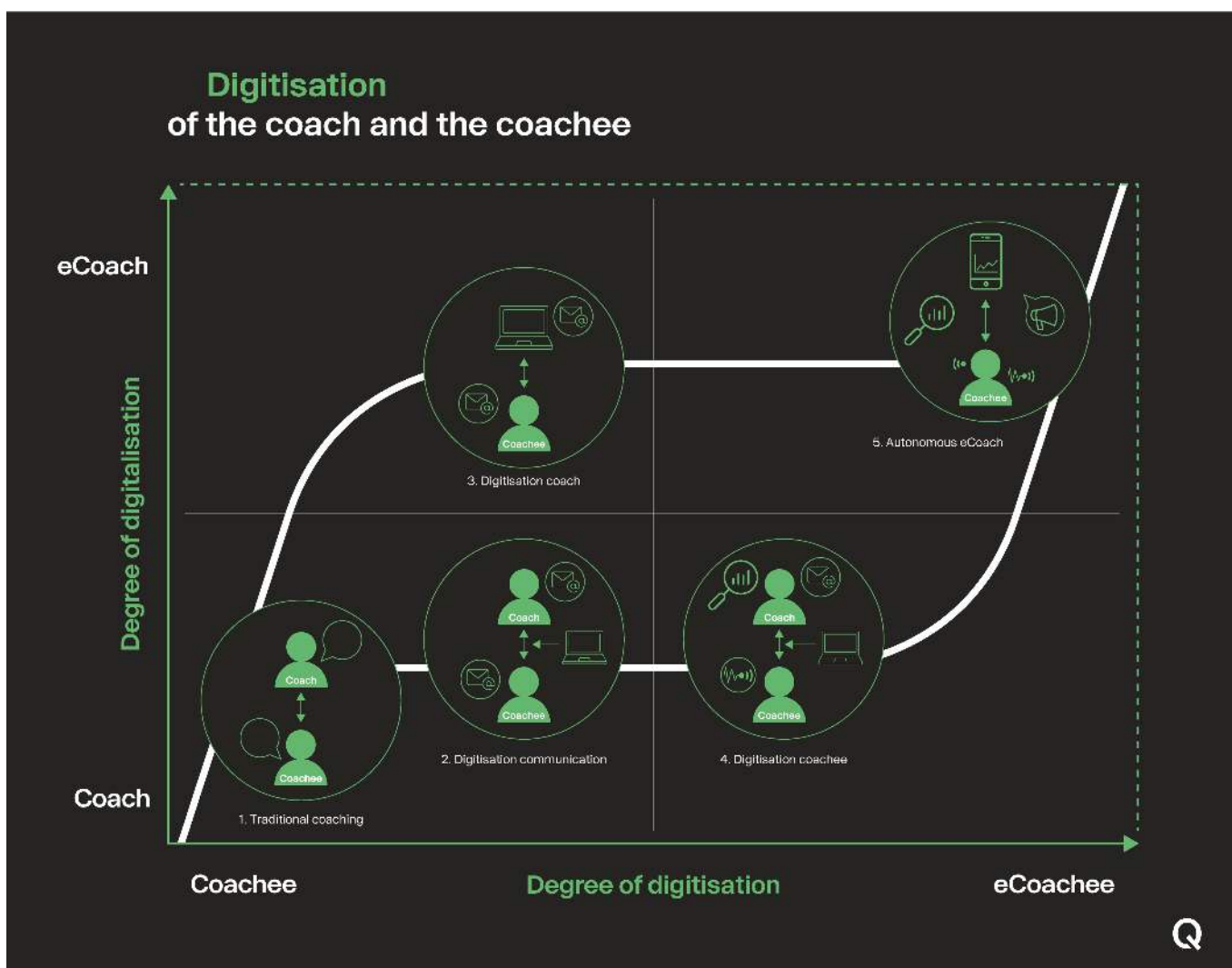


Figure 1.2. Digitisation in the guidance process.

⁶ The Rathenau Institute's report summarises all types of care, assistance, and service provision with the umbrella term 'coaching practices', in which all counselling professionals are referred to as coaches. Wherever the term 'coach' is mentioned in the remainder of this chapter, the term 'therapist' or 'counsellor' may also be read.

This results in the following five categories (Kool et al., 2013):

1: No digitisation

This is the form of face-to-face guidance and treatment discussed in previous paragraphs. The coach and client meet at regular intervals to work on the development and growth of the client in face-to-face sessions. Between sessions, the client usually receives homework, but no guidance or feedback.

2: Digitisation of communications

The communication about the guidance takes place online and sometimes asynchronously. By asynchronous, we mean that the client and coach are not present at the same time during the conversation but react to each other independent of time and place. An example of digital asynchronous communication is communication via e-mail. Examples of synchronous digital communication are video calling (skyping) or chatting.

3: Digitisation of the coach

Guidance is offered digitally, without the intervention of a person (human coach). This may involve online information or interactive self-help programmes (apps) that are used and run independently by a client. In some programmes a digital avatar is present. This is a virtual coach who automatically provides the client with tips, assignments and feedback based on how the client is going through the programme.

4: Digitisation of the client

Measuring instruments are used to gather information about the physical and mental condition of the client. This can be done by having the client fill in a digital questionnaire or complaints list via an app, for example. Data collection can also be automated with portable sensors ('wearables') that keep track of information about muscle tension or heart rate, for example. Such physical measurements can provide extra insight into the client's situation and progress.

5: Autonomous e-coach

In this scenario, the coach's tasks are taken over by an autonomous ICT system and the data collection from the client is fully automated. The client is assigned a behavioural profile and thus the "e-coach" (the system) knows when the client displays incongruent behaviour. Even before the undesirable behaviour takes place, the e-coach supports the client with feedback or advice. In this case, an autonomous e-coach seems to stray from the core of coaching and counselling as described in previous chapters. A support system can mimic coaching activities, however achieving an evenly matched therapeutic working relationship, although desirable, is still a far-fetched proposition.

6.2 E-coaching and e-counselling

Digitising communication and supporting various coaching activities online changes the way a coach or counsellor can give shape to his guidance.

This is expressed in the definition of e-coaching below:

"E-coaching is a non-hierarchical development partnership in which there is physical distance in the communication, and the learning and reflection process takes place both in the analogue and digital spheres" (Ribbers & Waringa, 2012).

This definition shows that e-coaching is a form of coaching in which part of the coaching has been digitised. As a result, coach and client no longer need to come together and can communicate remotely.

This offers the possibility to realise many more contact moments, for example several times in one week. This creates a continuous coaching dialogue in which the client is constantly invited to reflect and (inter)act. It also makes it easier to try out new behaviour in the client's own relevant work context on the work floor. The client is no longer 'let go' between sessions, but can take small, manageable steps and report back online again and again, receive feedback and reflect with his coach. In this way, the coach is closer to the client's development process and can adjust faster if necessary. In this way, e-coaching facilitates a steep learning curve.

Distinction between synchronous and asynchronous online communication

The coach can use two forms of online communications: synchronous and asynchronous. Digital synchronous communication can be carried out via video calls and chat. Video calling is very similar to face-to-face coaching, except for eye contact (looking at each other is not really possible) and body language (only the torso and face are visible). In chat, the differences with traditional coaching are greater: although the coach and client are present at the same time and react directly to each other, they cannot see each other and communicate in writing as opposed to through speech.

See the table below showing the differences between the types of e-coaching.

Type	Proximity	Visibility	Method of communication	Time
F2F coaching	Nearby	Yes	Spoken	Synchronous
Video coaching	At a distance	Yes	Spoken	Synchronous
Telephone coaching	At a distance	No	Spoken	Synchronous
Chat coaching	At a distance	No	Written	Synchronous
Mail coaching	At a distance	No	Written	Asynchronous

Table 1: Types of e-coaching compared to regular coaching.

Digital asynchronous communication goes a step further and is in many ways different from traditional face-to-face coaching. The coach and client communicate via written messages or video and audio recordings. This can be done by e-mail or on an online (learning) platform.

Coach and client are not present at the same time during the conversation and do not respond directly to each other. This means that they can both follow their own planning and engage in the coaching as soon as it suits them.

Characteristics of e-coaching via written messages

The e-coaching method using written digital messages (mail coaching) has the following three distinguishing features compared to the traditional form of coaching (Ribbers & Waringa, 2012).

1: Social anonymity

Because face-to-face contact allows the coach and client to see each other, there is a risk of socially desirable behaviour: the client does not fully open and/or suppresses his emotions (social inhibition). When the client can work on development without the physical presence of his coach, he is 'socially anonymous' and is less worried about how he comes across.

This benefits the coaching process because the client can be more himself. The coach is also freer and plays less of a socially desirable role. Feeling less inhibited in one's own behaviour online is also known as the 'online disinhibition effect' (Suler, 2016).

2: Asynchronicity

Communication becomes more asynchronous with more time there between communications. Asynchronicity means that guidance is independent of time and place, which provides flexibility. It allows the client to have more control over the course; he can determine the pace and time when he wants to contact his coach. This has a positive effect on the client's self-reliance and self-management (De Jong et al., 2014).

3: Writing

Research into so-called writing therapy shows that writing helps to structure thoughts and contributes to cognitive and emotional processing of events. Moreover, writing leads to greater self-insight, optimism, a sense of control and self-esteem (Burton & King, 2007; Pennebaker, 1997). Another advantage of writing is that it is spelt out (tangible) and can therefore be read back. This helps the client to perpetuate the insights gained and reduces the chance of relapse into old patterns (Murdoch & Connor-Greene, 2000).

All the above factors contribute to the three elements that determine good guidance (see chapter 3). Factors such as 'motivation and hope' and 'the (therapeutic) working relationship' are strengthened by the continuity in communication and the freedom with which the client is engaged in his development. Finally, writing as a 'therapeutic ingredient' offers various advantages that have a positive influence on the coaching process. Other therapeutic ingredients that are applied depend on the methods and techniques that a coach wishes to use. An e-coaching variant can be made of virtually any form of coaching.

6.3 Apps and other online programmes

Interventions such as therapy, counselling and coaching increasingly make use of programmes (apps) and online (learning) platforms. These digital tools relieve a coach of certain tasks. There are also programmes and platforms available that are carried out entirely online and without a coach. These are digitised and automated versions of the well-known self-help booklet. They usually consist of psycho-education, self-reporting possibilities and the possibility of receiving motivational messages.

The more advanced versions also use sensors and software ("wearables") to map out a client's different activities (performance) and provide motivational feedback using smart algorithms (Waringa & Ribbers, 2018).

More and more organisations are making apps and programmes of this kind accessible to their employees on a large scale. This facilitates employees' continuous development. Moreover, deploying a platform is often cheaper (per person) than deploying a coach or counsellor. Below we describe two programmes.

Skills programmes

These are programmes that can replace light coaching programmes and teach employees certain skills (e.g. asking for feedback, working in a customer-oriented way and profiling yourself). In these programmes, employees go through an online module independently. The module consists of text with explanations, videos, exercises, assignments and sometimes also a virtual role play.

Depending on the level of sophistication of the programme, the client's reactions are used to adapt the course of the module to the client. For example, during an assignment in a module on assertiveness, it may become apparent that a client has difficulty with his non-verbal attitude. On this basis, the module can automatically replace certain assignments with assignments on non-verbal attitude, so that the programme meets the client's learning needs.

Complaint reduction programmes

These are programmes that are used by employees with tension complaints, problems with vitality and mild psychosocial problems. They can be used to replace or support a tougher coaching or counselling programme.

These programmes focus on subjects such as learning to relax, dealing with depression and creating mental space. In terms of structure, these programmes are similar to the previous category of programmes: the client goes through a module including text, explanations, videos and exercises. An example of an online complaints reduction programme that has been found to be effective is Return@Work by Achmea Vitale. This is a programme that helps employees with psychological complaints get back to work. The programme leads to complaints recovery and a quicker return to work (Volker et al., 2015).

Rising intensity of guidance

There is as yet little research available into the effectiveness of apps and online programmes aimed at employee development. Where these apps and programmes are based on the same active factors that underlie psychotherapy, counselling and coaching, it is likely that they can contribute to the development and growth of employees. The fact that an important factor, the (therapeutic) working relationship, is absent on fully automated platforms or apps remains problematic (see also chapter 3).

One solution may be the use of the *online stepped care model* (Riper et al., 2007). On the basis of this model, in the case of general developmental issues or light, incipient problems, a short-term and cost-effective intervention is chosen. Think of information in the form of online psychoeducation, a skills programme or a specific complaints reduction programme.

The more serious the developmental issue or problem of the employee, the more powerful the intervention is, the more online counselling by an e-coach or e-counsellor is required. The e-coach or e-counsellor can keep a finger on the pulse and focus on a solid therapeutic relationship. Finally, if the client or the situation so requires, a choice can be made to offer the more traditional form of coaching or counselling or even refer to regular therapy. Rising intensity of the guidance is also in line with the previously presented classification of interventions based on the level of complexity of a development question or desired behavioural change and the engagement of a coach or counsellor (see figure 1.1).

Ethical issues

When deploying e-coaching, apps and online platforms, there are additional ethical issues relating to employee coaching. Think about the digital preservation of information about the client, for example. Through the use of the internet and a variety of devices, a great deal of information (data) about a client is collected and recorded. Where is this data stored (security) and who has access to this data (privacy)? Another issue is the possible intrusion of the client's life (integrity) when he is continuously monitored by sensors. It is very important for an organisation or counselling professional to find an unambiguous answer to these questions before offering this type of intervention.

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