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Ethics in Coaching

Jonathan Passmore & Lance Mortimer

INTRODUCTION

Ethics is less discussed than models and theories, but is a critical aspect of leadership coaching. Despite its critical nature, it is rarely featured in research papers or in coaching conference papers when compared with evaluation of programmes or coaching models. It's relative low profile in the coaching literature and in conversations between coaches may be due to the fact that by their very nature ethics is unclear and ambiguous. Almost everyone thinks they are acting ethically. We suspect that this view applied equally to many of the people at Enron and Worldcom, where ethical mismanagement led to corporate disaster.

Professional bodies in coaching (e.g., ICF, Association for Coaching, European Mentoring and Coaching Council) have offered some guidance, but in a sector that is largely unregulated, many coaches operate outside of the professional codes of practice set by coaching trade bodies. In psychology, there is clearer and stronger ethical guidance which reflects the more highly regulated nature of the domain. However, such guidance is often written with the clincial practitioner in mind and thus does not always consider the ethical issues which arise within organisational contexts and specifically within the tri-client nature of executive coaching – coach, coachee and organisational client

In this chapter we explore the issue of ethics in coaching starting with a review of the nature of ethics. In the second section, we explore how other professions try to manage ethical issues and specifically draw on practices from clincial areas, such as counselling and nursing, as well as from business. In the third section we review the limited literature on coaching ethics and reflect on what steps we might take to improve current practice. In the final section of this chapter, we consider ethical decision making and offer a model of decision making designed specifically for coaching practitioners.

EXPLORING ETHICS

The development of ethical thinking dates back centuries.   Trager (1979), has suggested that ethics can be traced back as far as 38,000 years, to the time when man bagan to organise life and assign tasks amongst each other. Weiner (2004) has highlighted the evolution of ethics which is based on the early work of Greek philosophers such as Socrates, Plato and Aristotle. Even in these early times, there appeared to be a divide between the great thinkers. Plato advocated that the denial of bodily pleasure was the best course to achieve happiness. He argued that real life is only achieved through ideas and not what can be experienced through the senses. This proved to be a foundation for later religious moral codes. Others, such as Socrates, advocated moderation as opposed to denial. Here we begin to witness the beginnings

of a divide that encapsulates the issues we tussle with today. What are ethics and what do they mean when we try to apply them to real world, complex problems?

Society in modern times is beseiged by uncertainty as to the 'right' or 'wrong' of decisions and answers. We live in a multicultural world with multi and cross cultural ideas of what is morality. As a result the psychologist and coach needs to navigate these in their work. Before we move to explore ethical standards in various domains, let us review what we mean by ethics.

What is Ethics?

As alluded to in the introduction to this chapter, ethics means different things to different people. In a business sense, it may be as simple as 'learning right from wrong, and then doing the right thing' (McNamara, 2008). Others (Bailey & Schwartzberg, 1995) have defined ethics as the systematic study of the nature and science of morality.

Morality may be seen as a set of standards and guidelines that are aspired to as ideals within the social norms (Thompson, 2005) for the protection and adherence of values. Ethics is a practice that determines what we consider to be good or bad, right or wrong, in social relations. As de Jong (2006) notes this is about the virtue of helping others, keeping the interests of the individual at the heart of the matter, honouring the trust placed in the practitioner and promoting autonomy. All of these are important in the leadership coaching relationship.

Ethical theory (Thompson, 2005) states that there are four basic approaches. Descriptive ethics concern the values and beliefs that are held in relation to particular societies. As an example, some societies may believe that multiple marriage is acceptable, whilst in other countries, such a practice is illegal. Descriptive ethics do not examine issues, they merely serve to provide us data about situations that exist throughout the world and how different people respond to them.

Secondly, normative ethics examine how social norms exist and materialise. What are the 'ought to do's' and the musn't do's'? These normative beliefs give rise to moral standards, which serve to inform ethical judgement. Social norms tend to change, sometimes at alarming speed, depending on the alacrity of the environment, so what might be acceptable a few years ago, may be inappropriate today. Consider the wearing of seat belts in cars, or hitting children as examples.

Thirdly, meta ethics takes the view that when people make assertions that some things are right or wrong, then there is a reason for saying so. Meta-ethics considers the language behind what it means to actually *say* something is right or wrong.

Finally, applied ethics uses scenarios to test thinking and the application of principles in practice. The applied stance gives rise to debate and in the right circumstances, ethical and personal development.

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Rowson (2001), draws a different picture on approaches to ethics. He bases his model on three clasifications for understanding an individual relationship with ethical decision making; consequentialist, deontological and pluralist. These are summarised in Table 1.

Table 1: Classification of ethical approaches

Consequentialist.	This is where the end result determines the course of action and rules are viewed as flexible. For example a situation where the coach may seek to shame the coachee into actions that may ultimatley help them achieve their goal.
Deontological.	Determines actions to be either good or bad. This provides little or no room for flexibility or individual interpretation. It is however efficient, challenging the individual to make a choice given two options. An example of this maybe where the coach reflects back what they have heard and paints a picture of two scenarios, one clearly positive, the other clearly negative.
Pluralistic.	This approach seeks to balance the above two approaches to arrive at the best result for the client. This is a collaborative situation between coach and client that is led by the coach, who will shift between flexible and rigid as is believed to be best at the time. Kelly (1955) recommends a 'creative cycle', whereby both parties think over the problem several times from different angles until a satisfactory understanding is reached. This can lead to the development of new perspectives.

Ethical codes

In the first section we set out a number of different ways in which writers have thought about ethics and sought to categorize ethics. In this section we will briefly explore how professional bodies have developed ethical thinking into codes of practice. The American Psychological Association, APA (2003) suggests a list of five general principles in its code of practice. These cover the themes of beneficence (promotion of the client's best interests)., fidelity (faithfully to clients), integrity, justice and respect for people's rights. These are summarised in Table 2.

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Table 2: APA Ethical priciples

Principles	Summary
Principle 1: Beneficence and Non-maleficence	To strive to benefit those with whom they work and take care to do no harm. In professional actions, seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons. When conflicts occur they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm.
Principle 2: Fidelity and Responsibility	Establish relationships of trust with those they work. To be aware of their professional responsibilities to society and to the specific communities in which they work
Principle 3: Integrity	Seek to promote accuracy, honesty, and truthfulness.
Principle 4: Justice	Recognize that fairness and justice entitle all persons to access and benefit from the contributions, processes, procedures, and services being conducted
Principle 5: Respect for People's Rights and Dignity	Respect the dignity and worth of people, and rights of individuals to privacy, confidentiality, and self-determination.

It might be assumed that English speaking psychologists, operating in similar environments and with the same organisational clients, would adopt very similar ethical codes. As a comparison, we have included the British Psychological Society's (BPS) ethical code. The BPS (2005), however manages to set out its ethical approach in just four areas. These are summarised in Table 3 as will be seen, while the APA code makes explicit the aspect of benefits to clients, this is more implicit within the BPS code. However, both codes stress the rights of individuals and the integrity of psychologists to practice.

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Table 3: BPS Ethical principles

Principle	Summary
Respect	Value the dignity and worth of all persons, with sensitivity to the dynamics of perceived authority or influence over clients. Particular regard to people's rights including those of privacy and self determination.
Competence	Value the continuing development and maintenance of high standards of competence in their professional work and the importance of preserving their ability to function optimally within the recognised limits of their knowledge, skill, training, education, and experience.
Responsibility	Value their responsibilities to clients, to the general public and to the profession and science of Psychology. Including the avoidance of harm and the prevention of misuse or abuse of their contributions to society.
Integrity	Value honesty, accuracy, clarity, and fairness in their interactions with all persons and seek to promote integrity in all facets of their scientific and professional endeavours.

REVIEWING ETHICS IN PARALLEL DOMAINS

In this section, we explore how other sectors have tried to manage ethical issues. Specially we draw on practices from clincial areas such as counselling and nursing to areas that others may consider to be closer to executive coaching, that of business ethics.

Counselling

As in coaching, counselling has numerous professional bodies representing the interests of counsellors. In the UK the main body is the British Association for Counselling and Psychotherapy (BACP, 2010). It provides six ethical principles, which are fidelity (honouring the trust relationship), autonomy (respect for client's right to self-determination), beneficence, non-maleficence, justice (impartial and fair treatment of clients), and self-respect (promotion of practitioner's care for self and self-knowledge) (2003).

What is interesting are the discrepancies between the contents of the codes established by different organisations; take, for example, the British Association for Counselling (BACP), the Confederation of Scottish Counselling Agencies (COSCA) (both of which exclusively deal with counselling), the British Psychological Society (BPS), and

the United Kingdom Council for Psychotherapy (UKCP) (both of which include counselling as one of many positions). BACP prioritizes the principle of autonomy, with the exception of possible situations of self or public harm. The BPS assumes a similar stance giving priority to fidelity, whereas UKCP and COSCA give precedence to the principle of beneficence (Bond, 2000).

This, as Bond (2000) notes, leads to a difference in the power relations experienced by the client. A greater prominence on the respect for client autonomy is likely to result in the sharing of power, whereas a more controlling relationship exists when beneficence is exercised. These discrepancies between bodies are hardly ideal as they lead to client and counsellor confusion. In addition, practitioners belonging to more than one of these bodies are left with ethical dilemmas as a consequence of conflicting guidelines.

Counsellors, and coaches alike, must also devise strategies to deal with dilemmas between contractual duties and ethical principles. Consider the scenario where a client confides in their coach that they are having suicidal thoughts due to the fear about the financial collapse of their business. The coach may be faced with the conflict between promoting autonomy and client welfare and avoidance of harm. Legal requirements to report may not be enforceable by law and the executive coach may be faced with the decision whether to report (and if so to who) the problem or to try and work with it.

It has been argued (Cross & Wood, 2005) that ethical standards are developed through experience. In essence, ethical dilemmas are a route to personal and professional development. We draw on Kelly's (1955) personal construct theory as a way to understand the impact of ethical practice. They suggest that dilemmas are developmental and that they help us to consider what is right and wrong. However in doing so, we will often open ourselves up to conflict and confusion. Such states may lead to cognitive dissonance -the uncomfortable feeling caused by holding two conflicting ideas at the same time. Doing the right thing may not always feel right. In returning to our definition, this is the very thing that makes it a 'dilemma'.

Nursing

The principle underlying the ethical basis of medical practice is to 'prevent abuse of power by the medical practitioner' (Kelly, 1996). No universal code has been established for medical practice. However, medical practitioners adhere to four main principles; justice, autonomy, non-maleficence (avoidance of harm to the client) and beneficence (promotion of the client's best interests). These principles however are frequently ignored, as, an over adherence to a code may restrain nurses autonomy and prove detrimental to the standard of care (Chadwick & Tadd, 1992).

In many instances nurses and therapists may be instructed by their employers or managers what actions to take. Such instructions however may go against these principles or the interests of the patient. As independent and competent professional adults, it is the nurse who must aim to consider the situation and apply the principles and live with the consequences of their actions (Bailey & Schwartzberg, 1995).

Writers in the sector have noted that while codes are a catalyst for moral thinking and are useful in that they provide a means of discipline and quality control they cannot replace the individual ethical decisions which practitioners need to make (Bailey & Schwartzberg, 1995). Such decisions require practitioners to be able to review situations and the interests of patients to come to the best decision in that moment. This requires nurses to develop skills as effective ethical decision makers, with a mental model of decision making which guides their decision making process. A similar situation is required in coaching. An over reliance on codes can not help the practitioner as much as a framework for ethical decision making which they can apply in the moment and thus which is more responsive to clients and individual situations which a code can never be expected to cover.

Business

A considerable amount has been written on the topic of business ethics (Trevino & Nelson, 1999; Ferrell, Fraedrich & Ferrell, 2002; Fisher & Lovell; 2009; De George, 2006; Ciulla, Martin & Soloman 2007 & Crane & Matten, 2004). The work in this area can be divided into two broad themes. The first focuses on case studies and scenarios of ethical issues. The second considers ethical models and ethical decision-making processes. While there are some references to the later, the majority of work focuses on ethical dilemmas and case studies which reflect the business school approach to learning from observing and reflecting on real life cases. This contrasts with the psychological model of learning and research which is focused on research studies using empirical methods.

In business, the dilemma at the heart of ethics is balancing competing interests. Ferrell, Fraedrich & Ferrell, (2002) suggest that ethics in business is essentially about a tradeoff between interests of profit and consumer and stakeholders. Businesses which push the profit aspect too far are likely to be short lived. While considering only the needs of stakeholders will lead to financial disaster.

Given the difuse nature of business the focus has been on ethical decision making models as opposed to codes of practice. The most interesting work has been in the area of ethical decision making in business. Ford and Richardson (1994) have suggested that models of ethical decision making divide the influencing factors into two groups; individual factors and situational factors. At the individual level are factors such as age, gender, education, personality and attitudes. At the situational level factors include work context, orgnaizational culture and job role. Crane and Matten (2002) have highlighted differnces between US and European approaches. European approaches have tended to focus on the situational factors such as the institution and the wider system while US approaches have tended to focus more on the individual factors.

Several authors have offered models to help managers resolve ethical dilemmas. Ferrell, Fraedrich & Ferrell, (2002) have suggested that to understand ethical decision-making we need to consider three aspects in framing business ethical decisions. The first is the intensity of the issue itself. This is the perceived importance

of the issue, which may be affected by personal values and organizational circumstances. The second is the stage of the moral development of the individual making the decision. This factor within the model draws on the work of Kohlberg (1969) who suggested that individuals have different levels of moral development; the lowest being punishment and obedience, the highest being universal ethical principles which include inalienable rights which apply to all. The third element is the culture of the organization, which sets its own ethical framework about the way stakeholders are regarded and treated. These three elements when combined influence the intended behaviour and thus the ultimate actions of the organization.

Other writers have suggested alternative models. Jones (1991) drawing from earlier work by Rest (1986) has argued that individuals move through four stages of a process for ethical decision-making:

- Recognise the moral issue.
- Make a moral judgement about that issue.
- Establish an intention to act upon that judgement.
- Act according to intention.

Figure 1: Framework for Understanding business ethical decision-making
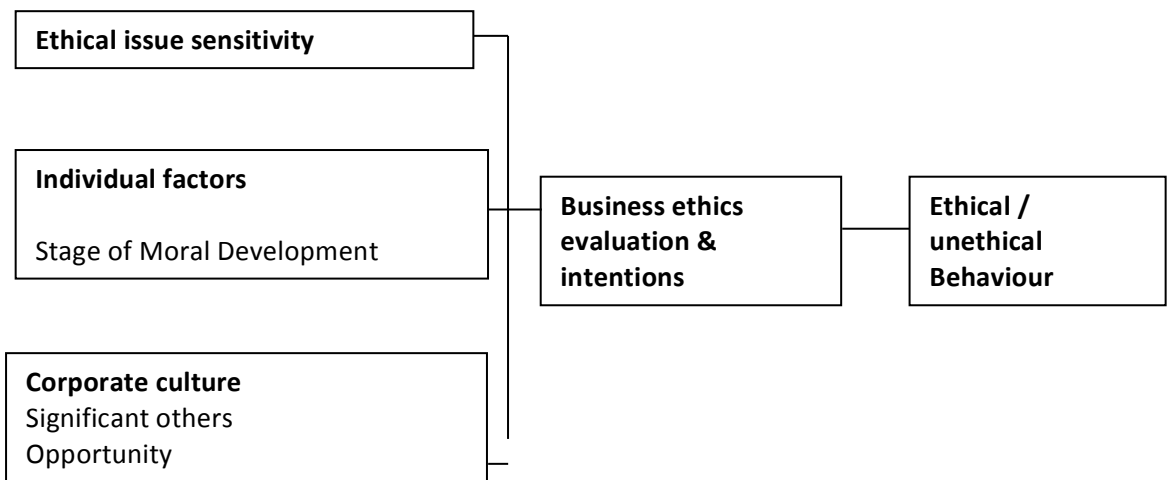
(Adapted from Ferrell, Fraedrich & Ferrell, 2002, p104)

In table 4 we have summarized the codes from two different sectors; nursing and business and compared them with coaching. The comparison makes interesting reading. For example, we find that codes place the client at the centre in person centred work such as nursing and coaching, however this is missing in business, with a lack of certainty about who is placed at the centre. This raises interesting questions when we consider ethical dilemmas in leadership coaching about who is the client – is

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the client the individual in the room or the organization. Who's needs should be put first if there is a conflict between them? A second interesting difference is collaboration. While this features in nursing and business codes, it is missing in coaching. However, it could be argued that to make the biggest difference leadership coaches need to collaborate with those running the organizational change plan and those delivering management training.

Table 4: Comparing ethical codes across sectors

Nursing	Business	Coaching
Source: ANA	Source: ERC	Source: ICF
Responsible & accountable for patient care and rights of the patient	**Accountability** Obligation or willingness to accept responsibility	**Client Centred** Development of client. Appropriate services offered.
Competence. Owes the same duties to self as to others, to maintain competence, and continue personal and professional growth.	**Competence** The state or quality of being adequately or well qualified	**Continuous competence enhancement** The need to enhance their experience, knowledge, capability and competence on a continuous basis through continual personal development.
Co-operative working Participates in establishing, maintaining, and improving healthcare environments.	**Co-operation** The willing association and interaction of a group of people to accomplish a goal	**Personal Pledge** Abide by codes of ethics and conduct set out by their own representative body
Education Participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.	**Education** Obtaining or developing knowledge or skill through a learning process	**Boundary Management** Recognize their own limitations of competence and the need to exercise boundary management and learn / acknowledge different approaches to coaching which may be more effective for the client
Collaborates With other health professionals and the public in promoting community, national, and international efforts to meet health needs.	**Collaboration** To work cooperatively especially in a joint intellectual effort	

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Integrity	Integrity & Values	Confidentiality and Standards
The profession is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.	Identification of and adhereance to core values and beliefs that guide and motivate attitudes and action	Apply high standards in their service provision and behaviour
		Reputation Every coach will act positively and in a manner that increases the public's understanding and acceptance of coaching.
	Law-abiding Abiding by the encoded rules of society	**Principle Five - Law and Diversity** Act within the laws of the land within which they practice and also acknowledge and promote diversity at all times.

Codes of practice in coaching

As we have noted coaching is an unregulated sector. It has a wide number of different professional bodies, all of which publish ethical codes. While these are similar, as Brennan & Wildflower, (2010) note there are important differences. Such differences in wording or emphasis, as we noted above in counselling, can provide room for confusion.

In an attempt to minimize this problem a group of bodies came together to start the process of agreeing on the *First UK Statement of Shared Professional Values* (Association for Coaching, 2008). The coaching bodies involved were the International Coach Federation (ICF), the Association for Coaching (AC), Association for Professional Executive Coaching and Supervision (APECS) and the European Mentoring and Coaching Council (EMCC).

The agreement prepared a statement of shared professional values. These are:
- Every coach, whether charging fees for coaching provided to individuals or organizations or both, is best served by being a member of a professional body suiting his/her needs.
- Every coach needs to abide by a code of governing ethics and apply acknowledged standards to the performance of their coaching work.
- Every coach needs to invest in their ongoing continuing professional development to ensure the quality of their service and their level of skill is enhanced.

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- Every coach has a duty of care to ensure the good reputation of our emerging profession.

The agreement further breaks down into a series of seven guiding principles:

Principle One – Reputation. Every coach will act positively and in a manner that increases the public's understanding and acceptance of coaching.

Principle Two - Continuous Competence Enhancement. Every coach accepts the need to enhance their experience, knowledge, capability and competence on a continuous basis through continual personal development.

Principle Three - Client Centred. Every client is creative, resourceful and whole and the coach's role is to keep the development of that client central to his/her work, ensuring all services provided are appropriate to the client's needs.

Principle Four - Confidentiality and Standards. Every coach has a professional responsibility (beyond the terms of the contract with the client) to apply high standards in their service provision and behaviour. He/she needs to be open and frank about methods and techniques used in the coaching process, maintain only appropriate records and to respect the confidentiality a) of the work with their clients and b) or their representative body's members information.

Principle Five - Law and Diversity. Every coach will act within the Laws of the jurisdictions within which they practice and will also acknowledge and promote diversity at all times.

Principle Six - Boundary Management. Every coach will recognize their own limitations of competence and the need to exercise boundary management. The client's right to terminate the coaching process will be respected at all times, as will the need to acknowledge different approaches to coaching which may be more effective for the client than their own. Every endeavour will be taken to ensure the avoidance of conflicts of interest.

Principle Seven - Personal Pledge. Every coach will undertake to abide by the above principles that will complement the principles, codes of ethics and conduct set out by their own representative body to which they adhere and by the breach of which they would be required to undergo due process.

However even when professional bodies come together in this way to collaborate and develop best practice, the issue remains, as in nursing, that codes are only a starting point. Codes can never offer a solution for all situations, but only principles to consider in making a decision. The alternative route is to help practitioners develop ethical decision making frameworks which can guide them in making more conscious and informed ethical decisions.

We would also argue that the existence of ethical codes in itself has not fully imposed itself in the world of coaching. Spence et al. (2006) researching Australian coaches, found that 11% of them had not provided clients with ethical information or guidelines whilst formulating the relationship and contracting. Our experience of delivering coach training and supervision in the UK is similar. In fact we are surprised that the figure is this low. We would estimate from our own experience that less than

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half of coaches regularly set out the ethical or complaint guidelines to coachees and organizational clients. This must raise a concern regarding possible negligence and may leave the coachee or organizational client confused as to how to recognize whether they may have been violated in the first place.

This situation may change as clients become more experienced in procuring coaching. It is likely that clients will demand an insight into the coach's ethical standards, framework and model for ethical decision-making. In fact we would suggest that clients, when selecting should include three key questions about supervision, ethical codes and resolving ethical dilemmas.

Table 5: Three key questions when appointing a coach

> 1. What arrangements do you have in place for supervision?
> 2. What ethical codes do you work to?
> 3. How would you resolve an ethical dilemma which occurred during your coaching work at this organisation?

ETHICS IN COACHING

The next section focuses on how coaches might use codes, their personal values and insight to resolve ethical dilemmas in their own practices through using a heuristic decision model.

Sources of ethical dilemmas

Sources of ethical dilemmas can stem from four sources; issues with the coachee, issues with the coach, boundary issues and issues stemming from the multiple relationship nature of coaching in organizations.

Issues with the coachee. These may be emotional, personality or behavioural issues. Each of which may be a precursor to the client being a danger to oneself, those around them and the organization within which they work. When this is the case a coach must decide how to act upon it, if at all. An example is the tragic case of a British civil servant, who was in the media spot light over his advice on WMD during the lead up to the Iraq War. The individual felt under intense pressure and committed suicide by hanging himself from a tree.

Issues with the coach. These may be personal, emotional or behavioural. The coach may have a personal problem or finding it difficult to cease coaching when it seems it may be the correct step to take. An example my be the coach who continues to identify new issues and challenges for the coachee to work on, thus prolonging the relationship for commercial gain.

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Boundary issues. Boundaries may be crossed by anyone in the coaching relationship. These boundaries may be written explicitly in the form of professional codes or may be presented as standards of practice implicit within coaching. The dilemmas faced as a result of someone crossing certain boundaries are further exacerbated by the fact that there is a large degree of uncertainty in the new field of coaching. Guidelines often prove inadequate and regulations are weak. An example might be where the coach and coachee, having finished the coaching session, continue their discussions over drinks and dinner.

Issues stemming from multiple dyadic relationships. These dilemmas present themselves as a result of the coach working for many individuals/bodies at the same time. The coach may be asked to partake in something ethically questionable by favouring one particular stakeholder. In these instances the coach must assess who the client is, who should be given favourability and what principles would be broken and boundaries crossed by acting one way or another. An example of this would include the dilemma of whether to share information regarding the individual client's decision to leave the organization, with the organization's representative, as the manager is working on a business critical project and their department would impact on the firms financial future.

Multiple sources. Frequently dilemmas cross between one or more of these source categories, which adds to both their complexity and the 'stuckness' which the coach can feel when facing the situation.

Ethical decision making models in coaching

Ethical decision-making is a non-linear process that is principally cognitive in nature. Recurrent ethical thinking should be at the forefront of the coach's mind and fundamental to the operation of ethical decision making. Therefore it is reasonable to say that ethical decision-making is intertwined with the process of coaching.

There are many models that have been proposed to help the executive coach make ethical decisions, some of which have been critiqued. For ethical decision-making, it is advisable that one adopt or devise a framework of the series of processes necessary to analyze the problem. It is likely that the personal principles already developed will be used as part of this process, yet as the dilemma has not arisen and the context is not yet known, these personal principles may require revisiting several times. Furthermore, different dilemmas may compel the coach to access different resources to inform a decision.

Carroll and Walton (1997) devised a linear framework for use in counselling. Stage one involves creating ethical sensitivity such as understanding one's own list of moral principles and reflecting on case studies on ethical dilemmas. Stage two involves formulating an ethical course of action, such as identify the problem, review the guidelines and consider the course of action. Stage three entails implementing an ethical decision by anticipating potential difficulties in implementation, exploring fears and limitations and ensuring necessary support. Finally, stage four involves living with the ambiguities of having made a decision, through activities such as self reflection,

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acceptance of the limitations of the decision and formulating a learning experience from the situation.

In reality, solving an ethical dilemma is a messy process and rarely unidirectional, requiring evaluation and re-evaluation of actions before a final resolution is reached.

Therefore, ethical decision-making can be construed as an important and complicated process that involves making decisions of ethical concern, based largely on ethical principles and guidelines. It should be a non-linear process which involves an iterative process. For example we would argue that ethical thinking is fundamental to the operation of ethical decision-making and needs to be intertwined all the way through the process of coaching.

A MODEL FOR ETHICAL DECISION MAKING IN COACHING

Given the issues with ethical codes of practice and the limits of such codes, our attention has focused on the development of decision-making frameworks which could aid the individual coach in their work. The model consists of six stages to ethical decision-making and in contrast to previous models which have been largely linear the model aims to both offer iteration and also flexibility for coaches to incorporate their own vales and beliefs as part of the decision process. The six stages of the ACTION model (Passmore, 2009) are set out in Figure 2. The stages are summarized.

Awareness. Being aware of one's own coaching position and the ethical code of the professional body that they are affiliated to. Secondly, awareness of one's own personal values and beliefs.

Classify. Identification of the issue as it emerges in practice and the ability to classify the issue as a 'dilemma'.

Time for reflection, support and advice. The coach takes time to personally reflect using a combination of experience, peer support networks and accessing our own professional journals and diaries. We recognize that different coaches will use different approaches to suit their own personal styles and needs. One difference is the route taken by experienced coaches versus novices or coaches in training. The experienced coach is likely to have a wide network of support, they may have a co-coaching relationship in place or be a member of a peer network. For the novice coach and those in training the role of the supervisor is more important and the coach is likely to discuss the issue with their supervisor as part of their training.

Initiate. Through the previous stage, the coach may be able to start building a number of solution options to the ethical dilemma. It is advisable to take a period of time to fully explore all of the options available, both self generated and generated by the coaches support network, including through discussions with peers or a supervisor
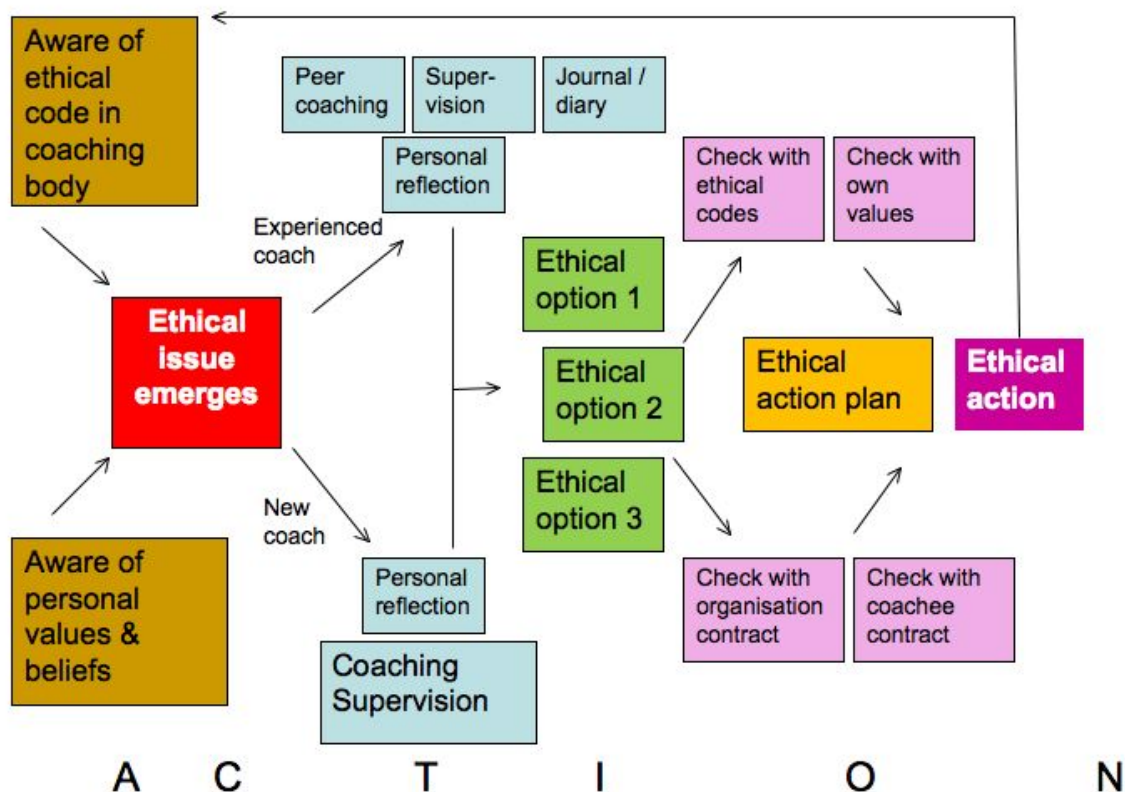
Option evaluation. Through this stage, the coach must give time and space to each of the options generated in the Initiate stage. This will include checking with ethical codes and reflecting on how the decision fits with their own values (revisiting stage 1). It is also likely to involve checking for any multiple relationship issues that may

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arise, when being hired by an organization to coach its staff, and finally reflecting on whether the decision is consistent with the contract established at the start of the relationship with the organizational client and the coachee.

  Novate. Once the decision has been made, the coach must incorporate this scenario into their ethical journal / experiences. It may also be prudent to share such a scenario (in a confidential manner), with those within one's own network or coaching body, so that colleagues can benefit from the situation.

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Figure 2: The ACTION model for ethical decision making in coaching
Passmore, 2009

CONCLUSIONS

In reviewing parallel professions to coaching, ethical codes offer both benefits and also limits to how we think about ethical decision making in coaching. Alternatives include developing ethical sensitivity through scenarios and ethical decision-making models. We have argued that subtle differences can lead to confusion. Further ethical standards are also only guidelines for action and do not lead us to be able to make ethical decisions. In the final section we offered a model for ethical decision making in coaching - the ACTION model. This model aims to offer a specific model for those working in leadership coaching. The model takes account of previous research and models developed in parallel domains and seeks to offer a flexible and non-linear approach to the resolution of dilemmas. As a coach centred approach ACTION provides a useful heuristic for coaches in their real life practice. We recognize that such a model is not definitive and we encourage others to critical reflect on this work and through research to enhance both our understanding of the dilemmas and ethical challenges faced by coaches and also to build more comprehensive models to guide coaches in resolving ethical problems.

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