



Paper

Group coaching

An effective intervention to support workers?

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Acknowledgements

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Introduction

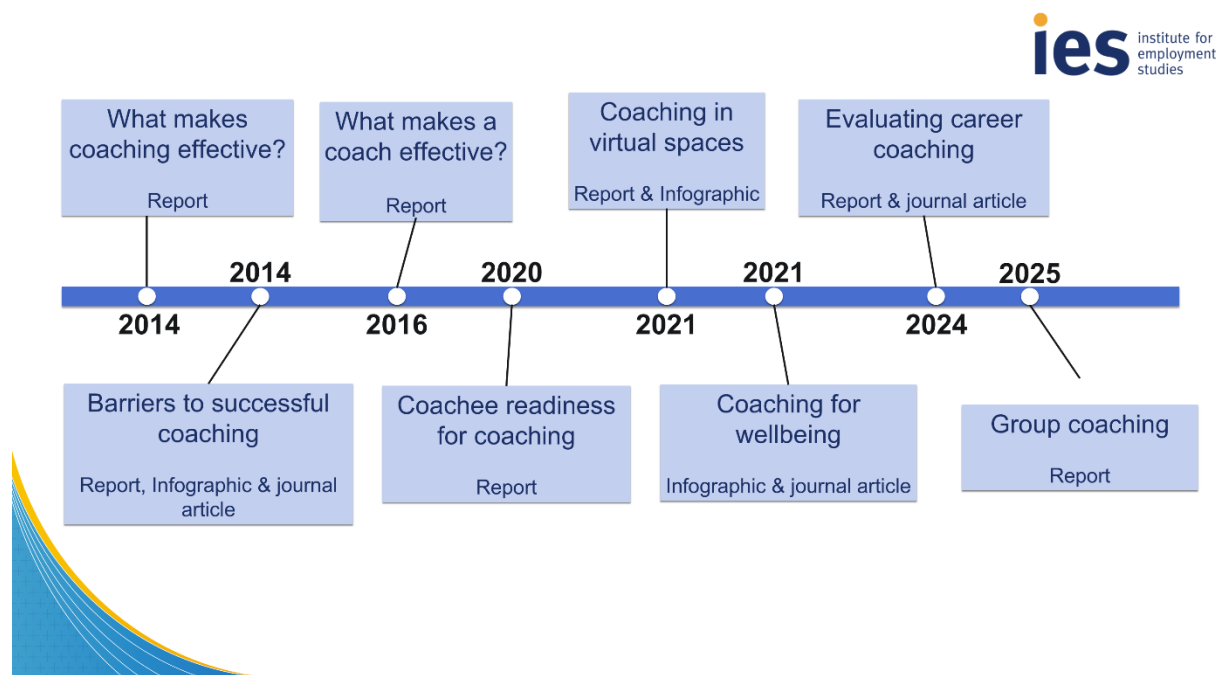
Context/background

Current global economic and political uncertainty and cost hikes in employing workers has led to budget cuts and rapid organisational change. Organisations are looking for new ways to remain competitive and maintain productivity. Employers need interventions which support individuals while creating the workplace conditions for cultural change, innovation and new working practices to be adopted faster and more systematically.

Employers have utilised various coaching forms including one-to-one, team-based and manager-as-coach. Extending coaching to ever more of the workforce is a considerable investment. Consultancies are marketing group coaching as a cheaper alternative that, they claim, still provides the same wide-ranging impacts. Group coaching is not new outside work settings but there is little empirical research to explore the purpose and impact of workplace group coaching and the benefits for organisations and employees.

This paper is the eighth topic explored in the IES Coaching Effectiveness series which uses evidence to explore different aspects of business coaching (see Figure 1).

Figure 1: The IES coaching effectiveness research collection



Source: IES, 2025

Research

This review cast the net widely across empirical academic evidence and insights from coaching practitioners and experts, to answer key questions:

- What does group coaching in work settings look like?
- How is it different from other coaching, especially team coaching, and other group-based development approaches?
- What is the evidence that group coaching works? What problem does it solve or workplace culture does it enable?
- When is it appropriate to use? And with which 'groups'?
- Is group coaching an intervention employers should be considering?

Group coaching in work and beyond work

In this section we focus on answering two key questions:

- How is group coaching different from other coaching, especially team coaching, and other group-based development approaches?
- What does group coaching look like?

After drawing on and summarising the relevant evidence-base to define and 'position' group coaching, five research study summaries are presented as examples to highlight the mechanics of different group coaching approaches and the results achieved.

What do we mean by 'group' coaching?

As the coaching profession continues to expand into different arenas such as relationship coaching, conflict coaching, and wellbeing coaching, coaching delivery methods have also expanded. From what once was a one-to-one coach-coachee relationship, there has been an increasing interest in team and group coaching, and what the strengths of these approaches are for coaching outcomes (Britton, 2015).

Group coaching

Nacif (2023) argued that there is currently no consensus of what group coaching is. However, features of group coaching have been identified. For example, group coaching can be a process where the experience of several individuals can be used to achieve both personal and collective growth. The group dynamic can be used to provide diverse perspectives, enrich discussions and collective learning to develop robust solutions for everyone (Van Dyke, 2014). Bonneywell and Gannon (2021) define group coaching as a process where individuals from a similar population are coached for growth and development, even if they are not working towards a common goal.

Brown and Grant (2010) note how the aim of a group coach is to empower the group to manage their dialogue and focus on goal achievement. The coach is seen as an active member of the group, providing feedback and creating a space where members can collaborate to seek a wider understanding of the issues they are discussing.

Researchers into group coaching have attempted to identify core components of group coaching which should be present if it is to achieve its anticipated impact. These are discussed in the box below.

Five core components of group coaching

1. Group coaching is participant led. The individuals in the group gather for learning and engaging in exchanges which can expand their awareness on the chosen topic or issue, determined by the group participants and not the coach.
2. The establishment of a supportive environment that encourages open sharing of vulnerable experiences and exploration of options to overcome obstacles. The coach has a role to prioritise active listening and curiosity, to ensure that a safe space for sharing is cultivated and that there is equitable participation, as well as to promote reflective thinking.
3. The interconnected web of relationships that extend beyond the coach-participant interactions. The life experiences of the participants in the group leads to fostering an exchange of shared experiences and the opportunity to expand connections within the group coaching environment.
4. In group coaching each participant defines their session's focus, which includes a specific goal. Each session starts with check-in and ends with check-out, which allows the participants to reflect on any learning, insights and progress made towards their goals.
5. Ongoing accountability through continuous conversations. The coach needs to encourage participants to connect any coaching discussions with their life context, to foster continued reflection, action and public commitment.

Filleti and Jones (2025)

How does it differ from other coaching?

Coaching has been used for many years in the workplace as a learning and development intervention to help employees achieve their valued professional outcomes, typically through an individual and their coach having collaborative, reflective and goal focused discussions (Smither, 2011). Bresser and Wilson (2016) described the essence of coaching as empowering individuals to develop in the way they wish, through building awareness and confidence, which facilitates an individual to make choices and change. It has been viewed as a tool to enhance performance through eliminating unhelpful thoughts and patterns of behaviour (Bennett and Wayne Bush, 2009).

Jones et al., (2015) note that although coaching has typically been perceived as an executive development activity, it does not have to be limited to managers and executives in organisations, and there is an emerging consensus of what constitutes the core features of coaching: formation and maintenance of a helping relationship between a coach and coachee; a formally defined coaching agreement or contract, setting personal development objectives; the fulfilment of this agreement through a development process focusing on interpersonal and intrapersonal issues; and striving for growth of the coachee by providing the tools, skills and opportunities they need to develop themselves and become more effective.

Attempts have been made to differentiate coaching from other forms of one-to-one development interventions. For example:

Other one-to-one development

Zhang et al., (2024) noted coaching is theoretically situated at the intersection of counselling, motivational interviewing and mindfulness but differs from these as it is 'action driven and future oriented rather than focusing on self-exploration and past experiences'.

Brockbank and McGill (2012) reported how coaching is conceptually different to mentoring, as mentoring is a long-term relationship between an experienced mentor (in the field in which the mentee is working) and an inexperienced mentee, in which the mentor provides career development and networking. In contrast, in the coaching relationship, there is no expectation that the coach has experience of the coachee's area of work, but the relationship is guided by the specific objectives that are agreed.

Coaching is different to performance management relationships, due to the absence of a power relationship between a line manager and their direct reports, in favour of a more helping relationship a coachee should have with their coach (Jones et al., 2015).

A confusing feature in the literature regarding group coaching is that terms such as 'group coaching,' 'team coaching' and 'group facilitation' are used interchangeably. This is in part because there is little agreement on the definition of a 'team'.

Passmore et al. (2025) recently suggest a pragmatic two-part distinction between a team and group. Firstly, they define that a team consists of more than one person, i.e. they are a group. Secondly, they define a team as a particular form of group, one where its members share a common purpose or goal, which they are working to achieve together. Using the Passmore et al. distinction enables us to better understand the differences between group coaching and team coaching.

Team coaching

Jones et al. (2019) argue that lack of an agreed definition for team coaching makes it hard to research. Hackman and Wageman (2005) defined team coaching as a process of having direct interaction with a team, intending to help team members in the co-ordinated and task-appropriate use of their collective resources in accomplishing the team's work. Bloisi et al.,(2003) highlighted team coaching is when individuals are working together towards a defined and mutually accountable goal. More recently Passmore et al. (2025) in their study define team coaching as a partnering process using coaching methodology with a group of people that share a common purpose, to facilitate them reflecting on themselves, their relationships and context, and thereby identify new insights, actions and ways of being to achieve their common purpose.

It has also been defined as a way in which a coach can help teams improve their performance and the processes through which their performance is achieved, through reflection and dialogue (Clutterbuck, 2009). A coach does not lead a team but is more emergent within a team, to aid their quality of thinking, rather than leading a team towards a specific realisation. The coach does this by focusing on the underlying skills and processes, such as how a team communicates. The outcomes of team coaching could have a longer-term effect on team productivity and outputs (Hicks, 2010).

Group facilitation

Facilitators have defined their role as helping groups do better (Schuman, 2005), and Brown and Grant (2010) comment that group facilitation is focused on the group process and their participation in the group process in comparison to being focused on group outcomes. Thus, it could be argued that group facilitation is based on 'how' something is done, rather than what is being done or the content of the discussion. The facilitator is there to ensure that group members cooperate with each other and allow equal opportunities for sharing (Hunter et al., , 1996). Clutterbuck (2007) adds that a facilitator manages group dialogues and focuses them on decision making, remaining detached from the group but being a catalyst for action.

As cited in Brown and Grant (2010)

Examples of group coaching

There is currently limited literature on the effectiveness of group coaching for people in work settings. Therefore, we have included examples of research studies focusing on the use of group coaching to improve individuals' wellbeing and self-belief in non-work settings as well as a research study on career advancement of women in the workplace. There are under-supported groups present in our workforces and so many lessons learned about what works for these groups outside work settings may be transferable to our workplaces.

Wellbeing of parents

Gellett et al., (2024) undertook a systematic literature review exploring the experience and impact of group coaching with parents of children with Special Educational Needs and Disabilities (SEND). Given the nature of the review, it was unclear whether the parents in the papers reviewed were employed.

The mechanics of the coaching approach

Utilising a solutions-focused approach, placing parents as the experts of the situations, helped parents in the studies select goals, analyse the situations they were in, form action-based decisions and evaluate any successes. According to the review authors, the parent-centred approach also allowed for the development of a non-judgemental space which meant parents felt they could be authentic, form connections, reflect and share knowledge and experiences. The ability to form connections and feel like equal partners in the coaching process was often discussed as key to the success of group coaching. Time together with people in similar situations allowed for the creation of new perspectives, new learnings and to share and build on solutions. Finally, the group coaching created a sense of accountability to maintain actions and set goals.

Results for individuals

Across studies, goal setting was seen as a tool through which parents could improve their performance within the areas they wanted change. Coaching supported parents to break

down goals to make them manageable and less overwhelming and working in collaboration with other parents allowed for greater support.

Parents felt empowered to see themselves as experts and integral to the change process. The sharing of ideas, creating plans and making adjustments increased their self-efficacy and confidence in how day-to-day challenges were managed. The group coaching allowed for problems to be approached proactively. The review also suggested that group coaching can help reduce parental stress and helped to change perspectives towards a more hopeful future.

The authors understood that there were limitations to the studies included in the reviews, including parent attrition throughout coaching sessions, small sample sizes and limited diversity, and methodological challenges including no control groups and variations in coaching programmes. However, the early indications of the use of the group coaching approach with the population seems positive.

Health and wellbeing of people with long-term conditions

Another population group coaching has been used to support is for those who have been diagnosed with a long-term condition (Whitley, 2013). The aim of this research was to understand if coaching can be used to help patients to change their lifestyle, to improve the control of their health and wellbeing, and identify useful group coaching initiatives.

Mechanics of the coaching approach

In this study five group coaching sessions were held, with a continual learning cycle. Before the coaching began, pre-conversations were held with participants to answer any questions or concerns they may have had and to ensure they were central to the development of sessions and that their needs were met. Sessions lasted for two hours fortnightly, and the group coach both observed the interaction between the participants and ensured group cohesion; allowing for a trusting environment and peers to provide support and learning. Homework was set after each session. Six participants were included in the study, all female of working age (although their employment status at the time of the study was not reported), with different lengths of time since their condition had been diagnosed.

Results for individuals

Participant feedback suggested the benefit of the group coaching approach was that each participant was able to provide different ideas and different perspectives, and accountability for actions. Participants were enabled to integrate learning to reach the goals they had set for themselves. Although some conversations in the group coaching sessions were challenging, it was this level of discomfort that led to change, and the support of the other participants meant they achieved actions they may not have achieved on their own. The group reported being able to discuss shared experiences and discover solutions, provided clarity about what could be achieved and stepping stones for improvement. Participants also appreciated being able to reflect on their progress and

gain encouragement from others. Although, once again a small sample, the research demonstrated the benefits of group coaching to improve participant health and wellbeing, that could be transferred to other stakeholder groups.

Wellbeing of transgender people

The group coaching approach has also been reported to improve wellbeing and decrease mental health issues for transgender individuals (Grajfoner, 2009).

The coaching approach

This research was based on six participants who started the course, with four completing it (nine consecutive weekly group coaching sessions of two hours). The participants were transgender people at various stages of the transition process.¹ There was no mention of participant employment status. The sessions were led by a coaching psychologist, following a seven-step problem solving structured plan that included individual, pair and group work. Participants were asked to formulate simple and achievable goals they were to work on over the following weeks and to consider alternative opinions that could lead to goal modifications.

Results

Towards the end of the coaching sessions, they were asked to reflect on what they have achieved. In their feedback the participants identified the goal setting approach, sharing experiences and achieving clarification about transitioning, as enjoyable parts of the coaching. Additionally, having a time for self-reflection and developing a sense of self-acceptance, confidence and a more positive outlook. It was the supportive group atmosphere and the group acceptance provided the confidence to overcome social anxiety.

Career advancement of women

There is also evidence that group coaching can be used to support the career advancement of women in the workplace (Fileti and Jones, 2025). The study aimed to explore whether women-only group coaching contributed to positive career outcomes, specifically a significant difference in self-efficacy, self-esteem, courage, resilience and career advancement between those who have and have not attended coaching.

¹ The study author refers to participants as 'pre-operative transsexuals' in various stages of the transition process. However, in line with IES' inclusive language guidance we do not use outdated terms for reporting and prefer to say transgender as the more broad and respectful term currently in use.

The coaching approach

The coaching intervention involved eight weekly one hour coaching sessions conducted over three months on an online virtual platform. Before the group sessions, participants had individual coaching sessions to identify what they thought their strengths were and their main leadership goals, to ensure the coaching sessions were participant led. In the first group session ground rules were set so that a safe space for confidential sharing could be developed. The coach then introduced some reflective thinking and in the following sessions participants reflected on progress towards their goals, as well as exchanging perspectives so that participants could learn from others and build a support network. At the end of each session, key takeaways were shared and next steps outlined, so participants had accountability for progress. The final session included a celebration of achievements, reflections on personal growth and leadership. A total of 111 women participated, of which 58 attended the group coaching sessions.

Results for individuals

The results indicated that the women who participated in the group coaching sessions significantly improved their ability to make connections with individuals from diverse backgrounds and their courage in the workplace. The authors discussed that this could encourage women to gain access to more diverse networks, connecting with like-minded women, sharing experiences and building networks to enable supportive transitions in the workplace. They also argued that group coaching could provide a cost-effective way to help women gain courage and contribute actively to advancing their careers. The research also noted that a women only group can increase participation in discussions, as well as having a supportive environment to share ideas, discussions that were participant led, the opportunity to set goals and be accountable to them, and the importance of interconnected relationships within the group.

Self-belief of carers

A further study looked at coaching specifically for self-efficacy (a carer's belief they have the capacity to undertake the tasks required) for dementia carers (Chenoweth et al., 2016). The study was based on sample of 91 family carers of people with moderate to severe levels of dementia. It is unknown how many, if any, of the participants were in employment.

The coaching approach

The coaching programme comprised three main elements including training modules and one-to-one coaching for all, supplemented by group coaching for some. There were eight learning modules, including: understanding and developing self-efficacy, or belief and confidence in their capacity to undertake the caring role; developing and practicing self-determined goals; reflecting on achievements and learning to adapt the caring role; developing self-care and self-help activities; learning person-centred care approaches; reconnecting emotionally with the care recipient and learning how to obtain assistance

with the caring role. Individual coaching was applied for one hour a week over 20 weeks in their own homes, with carer learning activities tailored to the self-identified carer needs and abilities. Some carers who wanted respite services also received 20 hours of group coaching (ten coaching sessions of two hours).

Results for individuals

The results indicated that carer coaching helped most of the family carers to develop self-efficacy when caring, carers reported managing disruptive behaviour better and responding less negatively. They also reported seeking formal and informal care readily and being able to develop goal-directed behaviours that met their needs (including their health and wellbeing). After coaching, carers felt able to frame their caring responsibilities and any consequent issues more positively, suggesting the coaching improved their self-efficacy and aided them to take better control of complex caring situations. Stress reduction techniques learned in the coaching sessions were useful for helping carers let go of issues they previously thought unsolvable.

Interestingly, in this study those who attended the group coaching sessions also reported additional benefits. For example, carers were more willing to seek help outside of their immediate family both for themselves and the person they care for. Having the opportunity to interact with peers allowed for frank sharing of experiences, feelings and caring techniques, which went beyond what occurs during regular caring support groups. They also found it easier to develop goal-focused behaviours and were more successful in achieving short and long-term goals in comparison to those who received individual coaching. The authors argued that group-based coaching could be beneficial to carers confronting similar issues.

Key messages

- Group coaching can be face-to-face or virtual and utilised as a sole method or in combination with other methods.
- Group coaching's success in supporting individuals' wellbeing in non-work settings features heavily in the research examples. However, it is an approach which has been used in achievement of various purposes beyond wellbeing including empowerment and career development.
- It works by providing a safe space to share and feel recognised, increasing feelings of self-worth, confidence and hopefulness that change can occur, and enabling a shift in mindset to set goals and 'reframe' challenges.
- The examples may provide confidence to employers in the potential of group coaching as a suitable intervention for under-supported groups, or groups with certain protected characteristics, within their own workforces.

What is the evidence group coaching ‘works’?

In this section we focus on answering a further two key questions:

- What is the evidence that group coaching works?
- When is it appropriate to use?

This section draws on academic literature to discuss the evidence base on outcomes. This is supplemented by feedback from practitioners and employers who were kind enough to reflect on their real-life workplace experiences of group coaching, how much it costs and identify where it has worked well and not-so well.

Outcomes

There is emerging evidence demonstrating benefits of group coaching for individuals and organisations. Coaching generally (Spence and Oades, 2011) and group coaching in particular (Jones, 2021) provides a psychologically safe space where individuals can feel accepted.

Health and wellbeing

Scientific studies, including the research study examples presented earlier in this report, identify health and wellbeing benefits from group coaching. These include:

- less stress and less burnout (Ezenwaji et al., 2019);
- less emotional exhaustion (Sutton & Crobach, 2022);
- a positive impact on wellbeing across a range of different contexts (Stelter et al., 2011; Barody, 2016); and
- improved likelihood of durable changes in behaviour, commitment and accountability (Brown and Grant, 2010).

Improved sense of belonging

When people feel they belong they are more intrinsically motivated, more resilient and experience greater wellbeing. Feeling isolated undermines internal motivation and can lead to disengagement, stress, or even depression (Deci & Ryan, 2012). A sense of community or universality in the group, where members can share common struggles,

and a sense of altruism can be gained from the group helping each other. If individuals make a commitment or goal in front of a group, there is a stronger sense of commitment to achieve it. Group members can also feel less alone and they can learn from the experiences of others (Armstrong et al., 2013).

The consequence of this sense of belonging is thought to be courage and a willingness to try a new approach that individuals may not have had previously. The group can provide hope, and agency from seeing others in similar situations make positive change.

Cost effectiveness

The potential for cost-saving and having greater reach are the primary appeal to many employers. The sales pitch of large consultancies is simple: it can have a positive impact on numerous individuals simultaneously.

Several factors influence the cost of group coaching including experience and track record of the coach; group size; number of sessions; and whether online or in-person. Our experts estimated an average cost for individual coaching as £100 to £300 per hour, and an average of £300 to £800 per hour for group coaching. These figures are in line with global coaching surveys (e.g. ICF, 2023). If six-eight staff participate in all sessions then that is a clear cost saving per person in terms of the cost of a coach's time.

In terms of cost-effectiveness, however, the jury was still out with two of the employers we spoke to. This is because, whilst both organisations had good evaluation data for outcomes from their individual coaching programmes, they did not (yet) have evidence for outcomes from their group coaching. This is because group coaching was a newer offering and/or comparatively smaller numbers of people had been involved to date (so they cannot yet be confident about relative effectiveness). In addition, they reported group coaching had more dropouts (so that slightly reduces the actual cost saving).

Two of the experts we spoke to cautioned organisations not to choose group coaching if the only organisational goal is to save the cost and time of individual coaching. An AI coach for individuals is likely to be cheaper, if appropriate to the content. For group coaching to be effective, they explained, there is upfront work required to ensure that outcomes have the best chance of being achieved. There are greater barriers to achieving successful outcomes with group coaching (compared to individual coaching) to ensure the investment is not wasted. The upfront work they referred to, and other implementation challenges are described in more detail in the following section.

Implementation challenges

Challenges have also been identified in the literature, including:

Managing group dynamics

As with any other groups, there may be a mixture of both quieter and introverted group members as well as those who are more extroverted and willing to offer opinions. Group

coaches need to be suitably trained in group facilitation, including the need for continuing forward momentum, monitoring group participation, encouraging participation, modulating any disruptive behaviour and celebrating forward movement of goals.

Upfront preparation and communication are seen as very important. Many of the group coaching programmes discussed (e.g. by O'Connor et al., 2017) had pre-intervention meetings with potential participants so they could inform participants of the process, see whether this would be the right intervention at the right time for individuals, and what future steps will be. It was important that communication was appropriately targeted towards the groups involved.

Pre-intervention meetings and the first sessions also tend to allow for coachee-led goal setting that are clear and explicit. However, there have been questions about the 'goal setting' approach for some groups (e.g. carers), as goals are usually made for the person they are caring for rather than their own personal wellbeing. Thus, clarity about the role of the coaching for individual carers and setting goals that are both meaningful and specific, to be addressed in group coaching, will lead to best traction and opportunities for collaboration.

The literature emphasises the need for coaches to be adequately trained to create the safe environment that encourages the open conversations where coachees can support each other and gain insights. Coaches also have an important role in monitoring group dynamics (making sure there is adequate time for all in the group), group facilitation, encouraging forward momentum (Armstrong et al, 2013) and moderating potentially disruptive group behaviour. This does require different skills from individual coaching relationships, and so group coaches need to be adequately prepared to elicit positive group coaching outcomes.

Confidentiality

Group coaching may not suit everyone. Some group participants may not feel empowered to share and they may prefer to have individual coaching to suit their needs. Confidentiality is an important consideration.

Ensuring that consent exists before commencing group coaching is important (Brown and Grant, 2010). This is more critical if dealing with traditionally under-supported groups, or topics related to specific personal characteristics where discussions of a more personal nature could occur. If participants have concerns about sharing experiences in a wider setting, it may mean that individual coaching is more appropriate.

Drop-outs and attrition

The number of people dropping out (or not attending) group coaching sessions has been noted to be high by several researchers. It is not clear whether attrition is higher or lower in comparison to individual coaching or other group interventions.

Communication is important to try and limit participant attrition. As the research has indicated, one of the rich components of group coaching is the dynamic interactions

between the participants, and having the safe space to share ideas, experiences, discuss the 'difficult' and learn from challenges, and see how this learning can be applied to individual situations. It therefore becomes important that the group dynamics remain stable, which could be disrupted if there is high attrition in the group.

Having a group coaching process structure could help to reduce attrition and ensure that participants remain engaged in the process. Although conversations and topics brought to the group can be coachee-led, some group coaching interventions also had 'a session focus' dependent on participant goals. Understanding how sessions are structured and any potential themes or topics to discuss can be beneficial for some participants.

Recruitment and scheduling

Logistical challenges in relation to recruitment and scheduling of group members are frequently mentioned by researchers but with no real sense of how big a challenge this is. For group coaching to work, all participants need to be present at the same time. This means that an adequate number need to be ready to be consistently available at the same day and time, and willing to be ready to make changes to their working lives.

Another way of reducing attrition is ensuring that participants are ready and motivated to participate and ready for change. Group coaching may not be suitable for everyone or may not be the right intervention at that time. Organisations need to be aware of this and may have to make difficult decisions about who to select into any group coaching interventions, and what other support may be beneficial for potential participants.

When might you want to select group coaching as a delivery method?

Whenever an intervention is being designed, the choice of delivery method is dependent on several factors including:

- purpose i.e. why is an intervention necessary? What are we hoping to achieve? What problems are we solving? Are the desired outcomes for individual, team organisational or societal benefit, or a combination?;
- target audience i.e. who do we want to benefit? Do they have anything in common i.e. job role, team, location, demographic, occupation or objective?;
- context; and
- resources available i.e. any limitations to cost, delivery, coaching skills?

Teams are the main unit through which most modern organisations deliver on their promises to their customers. If improvements in team relationships (e.g. psychological safety), team processes (e.g. cohesion) and team performance outcomes are required then some kind of team-based intervention is your first consideration. For skills acquisition or compliance outcomes, a training solution would be called for.

IES asked our expert coaches and organisational sponsors to reflect on their experience of when it is appropriate to select a group coaching approach in work settings (and when not). A summary of their reflections is presented in Table 1 below:

Table 1: Selecting group coaching in work settings: What the practitioners say

When group coaching is suitable	When group coaching is not suitable
<p>Where personal challenges are in common. When participants can benefit as much from each other as from the coach (peer-to-peer learning).</p> <p>Can morph into a self-managed mutually supportive networks beyond the coaching period if participants wish.</p>	<p>If only to save cost and time, there is a temptation to switch existing individual or team coaches to coaching groups (risking marginal or no benefit).</p> <p>If coach(es) are not sufficiently skilled at facilitation and group management and cannot properly flatten out the polarising effect of dominant or negative people, this can bring everyone's mood down and risk negative impact on wellbeing</p>
<p>For organisational culture change. Especially for shifting mindsets, embedding new working practices and building a common language and collective capacity for change (faster than individual coaching can).</p>	<p>If there is no trust – in the organisation/sponsor of the group, the coach or between group members, little or no progress will be made.</p> <p>When issues are highly personal or sensitive (these call for individual coaching).</p>
<p>Where shared agenda and work goals exist.</p> <p>When groups of peers are working towards similar outcomes e.g. improving leadership presence, wellbeing and resilience.</p> <p>Can increase collective insight and accountability.</p>	<p>Where there is no commonality in personal challenges or work goals, the coach will need to spend significant time to corral the group towards goals that sit together for more than one person. This calls for prior individual discussions or group session time to understand where people are coming from before actual coaching work, towards achieving benefits, can begin.</p>
	<p>Where an individual attending group coaching interferes with their need for self-care</p>

Source: IES Discussions with practitioners, 2025

Which workforce groups might benefit?

Group coaching is an intervention which gives organisations the potential to offer targeted support to specific groups within the workforce with shared personal challenges. But how do you decide who to ‘target’?

People under-supported or under-represented in your context

An organisational coaching lead we spoke to at a large employer described their group coaching programmes as an additional wellbeing intervention designed to increase overall access to wellbeing support, by deliberately targeting two under-supported groups. They explained their rationale and experience as described below.

Example of targeting men-only and women from diverse backgrounds

Staff wellbeing data showed that white women aged 30 to 40 were the primary users of the organisation’s open-to-all-staff health and wellbeing programmes so the organisation engaged with other staff groups to better understand what the barriers to take-up were. In-house research identified perceived stigma from colleagues and community, a perceived negative impact of asking for help on career progression, and needing help being seen as a weakness.

Group coaching was considered an appropriate intervention to help normalise needing support with wellbeing as something that is common, that you are entitled to and is important. The key underpinning message was that accessing wellbeing support was not a weakness. In a team coaching situation there would be a hierarchy, whereas in group coaching there may be people at different levels, but they are not in your team, so people are on more equal terms. Peer networks already existed across the organisation for many specific groups but the role of the coach in introducing purpose, reflection and an opportunity to take meaningful action was pivotal in selecting a group coaching approach to supplement the peer networks.

Creating groups with colleagues of men-only and women from diverse backgrounds aimed to break the stigma. It also enabled the offer to be tailored appropriately. To address the worries around not being treated fairly at work, the group coaching was positioned separately to daily work, as a sign-up service with no notification to managers or permissions needed to participate. Cohorts were offered in the evening and in the daytime to try and accommodate everyone’s preference for participating inside or outside of work time. To avoid any backlash from staff in groups not targeted, two cohorts open to all were also made available.

The male participants reported feeling more comfortable in seeking support from other males. Both the men-only and women from diverse backgrounds defined cohorts demonstrated high levels of trust, psychological safety and satisfaction with the support. Take-up for the targeted group coaching was particularly high among male staff, with the men-only groups all fully booked and extra cohorts being made available.

Source: IES Discussion with employer lead, 2025

Parents, carers and people with long term or chronic health conditions

Both the academic literature and experts IES spoke to identified parents, carers and people with long term or chronic health conditions as groups who might also benefit from further support with their wellbeing and their ability to juggle work with caring responsibilities and self-managing their conditions. While an increase in wellbeing and resilience and a reduction in burnout would be expected outcomes for individuals, an organisational outcome should be reduced staff turnover and increased productivity.

The reason behind targeting those with caring responsibilities is that it is tough to be a working parent or carer. Caring responsibilities can have many implications on an individual's life, including employment. Caring compounds other inequalities (e.g., gender, race) in relation to income, pension and career progression as well as health inequalities; working carers are a vulnerable population who would benefit from support (Kenny et al., 2014). Without workplace support, many carers experience burnout and may exit the organisation (Williams, 2022). Carers UK (2024) also reported the staggering statistic that 600 unpaid carers a day give up employment to care.

While not all working carers suffer adverse outcomes, research shows that caring combined with working commitments leads to reductions in physical and mental health, especially for women (Spann et al., 2022). Women's substantial caregiving commitment often coincides with their peak earning years, potentially impacting their employment and financial stability too. IES multi-method research for the React Partnership (Dave et al, 2025) found that a wide range of supportive practices were necessary to support working carers. Carers and parents networks are popular, typically offering peer support. Group coaching could be a useful addition to networks as the addition of a coach takes the group beyond sharing common challenges to enables a shift in mindset to set goals and 'reframe' those challenges into actionable change.

In the UK, 14% of all working-age people provide care to someone who is elderly, sick or disabled, equating to nearly six million people (Treneman et al., 2025). And that is before you consider those with parental caring responsibilities. So, it is highly likely that all UK workplaces already contain carers, as well as parents, among their workforce, even if they have not declared themselves as unpaid carers (alongside their paid work).

IES and our research partners at Henley Business School are proposing to evaluate an intervention targeting support for working carers, particularly women, to address gender disparities in unpaid care and employment, and support the mental health and wellbeing of working carers; group-based interventions would be suitable to achieve this. Our premise is that when people feel they belong they are more intrinsically motivated, more resilient and experience greater wellbeing. Feeling isolated undermines internal motivation and can lead to disengagement, stress, or even depression. Being a working carer can be an isolating experience (Brimblecombe and Cartagena Farias, 2022) suggesting working carers experience lower levels of relatedness. Satisfaction of needs in carers, including belonging, has been shown to be related to their experience of mental health and the perceived burden of care (Barry et al., 2021). This suggests that providing sources of support that working carers need to increase the levels of relatedness they experience, could have a positive impact on outcomes, such as improved mental health.

We therefore propose that group coaching is a suitable intervention to satisfy working carers' need for relatedness, consequently leading to improved outcomes such as better mental health and reduced burnout.

Key messages

- With evidence accumulating that individual coaching in workplace settings can improve outcomes such as wellbeing, coping with stressors, resilience and goal-directed behaviours and reduces burnout, stress and depression, the indications are that group coaching could also be beneficial in work settings.
- For organisations to maximise their chances of successful outcomes from group coaching, there is a need to carefully recruit and select a collection of people who share common challenges or similar goals and ideally do not work in the same team. Those people may also benefit from peer-to-peer learning and the structure and facilitation provided by a coach. Allocation of random individuals to pre-determined slots is unlikely to be a viable option.
- Attrition seems a problem. If group coaching with 'under-supported' or 'time poor' participants (e.g. which staff in pressured occupations can be), is to be successful, then good communication is critical.

Conclusions

As the demand for coaching has increased, as well as the need for organisations to provide cost-effective wellbeing interventions, it is reasonable to conclude that group coaching could be a useful intervention for the wellbeing of under-supported groups within the workforce and/or for the career advancement of those with protected characteristics facing similar challenges. The group coaching approach, especially the opportunity to learn and grow from others, the sharing of experiences, being held to account for reaching goals and the feedback from external people in a similar situation can have positive implications.

However, current research findings are mainly based on small samples, non-controlled samples and in some cases had high participant attrition. This highlights that there is still more research to undertake in this area. The as yet unanswered questions and issues still to be tested include:

- A greater understanding of who in the workforce group coaching could be appropriate for. For example, is there enough uniformity in concerns across people with a variety of long term/chronic health conditions for a universal group to be beneficial?
- The modality used to deliver group coaching. Research to date has used both in-person coaching and group coaching delivered over a virtual platform but there is currently little evidence to suggest one is preferable or practicable in comparison to the other, or what the implications for coaching outcomes are. For 'time poor' staff, it may be important to see if there is a preferred mode of delivery and a method that reduces the chances of participant attrition, without affecting hoped-for outcomes.
- Is there a critical time at which group coaching is best delivered? For example, could group coaching be used as a preventative intervention before an employee has reached a crisis point, or is group coaching more effective as intensity (e.g. of care giving) increases?
- The group coaching for under-supported groups identified in our research examples did not have employment as an outcome. Thus, if group coaching is to be used for retention by helping people remain in employment (or make employment decisions, as for some, temporary changes to employment patterns could be the best outcome), more research is still needed in this area.
- Is group coaching really a cost-effective approach? An argument that has been provided about the benefits of group coaching is that it is cost-effective in comparison to individual coaching. However, there is not clear evidence to confirm this is the case (or the scale of it), when the organisational costs of logistics to convene groups, communicate to individuals and maintain group cohesion has been considered.

There could be value in using the group coaching approach in work settings, but currently research gaps exist in how best to deliver group coaching and to which populations. As employee health and wellbeing and employment outcomes are becoming individual, economic and social concerns, now is the time that more research is undertaken to see how group coaching can benefit organisations and their employees.

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Inclusive terminology

The terminology used to define ethnicity continues to evolve, and greater awareness has arisen about gender, cognitive differences as well as of disability. IES seeks to be a learning organisation; as such we are adapting our practice in line with these shifts. We aim to be specific when referring to each individual's ethnicity and use their own self-descriptor wherever possible. Where this is not feasible, we are aligned with Race Disparity Unit (RDU) which uses the term 'ethnic minorities' to refer to all ethnic groups except white British. RDU does not use the terms BAME (black, Asian, and minority ethnic) or BME (black and minority ethnic) as these terms emphasise certain ethnic groups and exclude others. It also recommends not capitalising ethnic groups, (such as 'black' or 'white') unless that group's name includes a geographic place. More broadly, we understand that while individuals may have impairments it is society that disables them, hence we refer to disabled people. Not all people identify with male or female, and we reflect their self-descriptions in our work and use the term non-binary should abbreviation be necessary. We value neurodiversity. Where possible we always use people's self-descriptors rather than impose categories upon them.

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