

FIELD GUIDE · FREE TO SHARE

Build your support system on purpose

A field guide to mentors, sponsors, coaches, and therapists: how to tell them apart, how to choose one, what each costs, and how to know when it is working.

SIMONE HARVEY · FOUNDER AND PRINCIPAL · SANTIS GROUP

Disclaimer. I am an executive coach. I am publishing a guide on how to hire one so you should read section five and section six with that in mind. I have written both so that a careful reader could apply them and decide against hiring me which will be the right outcome for most people who read this.

TLDR

Mentor vs. Sponsor vs. Coach vs. Therapist

WRITTEN FOR

Mid-career

COST

Free to share

SECTION 1

An Incidental Professional Support System

Most people build their support system by accident.

A manager who was generous with you once becomes your de facto mentor. A therapist you found in a directory during a bad month becomes the person you discuss your career with. You have never hired a coach, because you were not sure what one does or whether you were allowed to have one. And you have probably never had a sponsor, unless you have had someone advocate and create opportunities for you in rooms you are not in. Sometimes, this lack of support looks like working hard and nothing is moving.

There are four roles here; they are not interchangeable, they have different costs, and the one that matters most for your trajectory is the one you cannot buy.

SECTION 2

The Four Roles

Two questions sort all four: what the relationship draws on, and where the work happens.

YOU HIRE THEM

Therapist

Requires clinical training and a license.
Works on why the pattern formed.

Coach

Involves structured inquiry and method.
Works on what you do next.

YOU TRADE WITH THEM

Mentor

Commits their experience and their time.
Works on the route they already walked.

Sponsor

Leverages their reputation for you.
Works in rooms you are not in.

Three of these you can choose. The fourth chooses you, and only after you have delivered something they can point to.

Therapist. Requires clinical training and a license. Works on why the pattern formed. A licensed clinician is the only one of the four who can diagnose and treat a mental health condition. The orientation is toward your history and your interior life, and toward relief and functioning rather than performance.

Coach. Involves structured inquiry and method. Works on what you do next. Coaching is oriented to the present and the future, to goals and to action, and a coach who is working properly is drawing conclusions out of you rather than handing them to you. A coach cannot diagnose or treat anything, and a competent one will tell you when you have reached the edge of what coaching can do.

Mentor. Commits their experience and their time. Works on the route they already walked. The value is pattern recognition you do not have yet, from someone who has been where you are going.

Sponsor. Leverages their reputation for you. Works in rooms you are not in. A sponsor puts your name into a conversation about an opportunity and attaches their own credibility to it. Everything they do for you happens when you are not present.

SECTION 3

Three You Choose. One Chooses You.

You can select a therapist. You can select a coach. You can, with effort and a reasonable ask, select a mentor.

You cannot select a sponsor. A sponsor selects you, and only after you have delivered something they can point to.

This misunderstanding produces a specific failure: people try to acquire a sponsor the way they acquire a mentor, by asking. The ask lands wrong because it inverts the trade. A mentorship request costs the mentor an hour. A sponsorship request costs the sponsor their standing, spent on someone whose work they may not be able to vouch for yet.

The distinction traces to Ibarra, Carter and Silva's 2010 analysis of Catalyst data covering more than four thousand high-potential employees. Their finding was that high-potential women were being mentored more than their male peers and sponsored less, and that the sponsorship gap tracked with who actually advanced. If you are mid-career and feel well-advised but stuck, that is worth checking against your own situation.

Sponsorship is a trade rather than a favor. In Hewlett's account of the sponsor side, backing rising talent extends the sponsor's reach and builds a bench that delivers their agenda. Approaching it as generosity misprices it in both directions. You are offering someone a person who will make them look right.

The sequence follows from that. Deliver first. Make sure the work is visible to someone with standing. Then there is something to sponsor.

There is one route you can actually influence, and it is the reason section six treats mentors seriously. Sponsors frequently come from the pool of people who already mentor you. A mentor who has watched you take their advice, act on it, and report back on what happened has the one thing a sponsor needs: direct evidence that backing you is safe. You cannot convert a mentor into a sponsor by asking. You can make yourself the obvious candidate by being the mentee whose follow-through they have personally observed.

A caveat you should be aware of: the sponsorship literature is largely survey-based and correlational. It tells you that sponsored people report advancing faster and feel better about their trajectory. It does not establish that sponsorship caused it, and the same qualities that attract a sponsor may independently drive advancement. Treat the direction of the finding as sound and the size of the effect as uncertain.

SECTION 4

What Each One Actually Costs

ROLE	WHAT YOU PAY	WHAT IT DRAWS ON FROM THEM	WHAT IT REQUIRES OF YOU
Therapist	Copay, coinsurance, or full fee	Clinical training and a license	Consistent attendance
Coach	Full fee, no insurance	Method, structure, attention	Work between sessions
Mentor	Nothing	Their time and experience	Preparation and reciprocity
Sponsor	Nothing	Their reputation	Delivered results

Therapy. Therapy is the only one of the four that insurance touches.

If a clinician is in network with your plan, you pay a copay per session. Out of network, many PPO plans reimburse a portion once you have met a deductible, and this benefit goes widely unused because people do not know to ask. To claim it you request a superbill from your provider rather than a standard invoice; a superbill carries the provider's tax identification number and a diagnosis code, and you submit it to your insurer through their claims portal. Self-pay means no insurance involvement at all, and some clinicians discount for it because it removes their administrative burden.

Rates vary by region, by license type, and by whether the clinician is fully licensed or pre-licensure. Pre-licensure associates practice under supervision and charge considerably less, which is a legitimate option. Many clinicians also hold a small number of reduced-fee slots. If cost is the thing stopping you, ask directly whether they have flexibility. It is a normal question, and clinicians have an explicit professional obligation to serve beyond the people who can pay the full fee.

If you are in crisis right now, do not work through this document. The 988 Suicide and Crisis Lifeline takes calls, texts, and online chat around the clock. Crisis Text Line is reachable by texting HOME to 741741. You do not have to be actively suicidal to use either one; both are appropriate when you are overwhelmed and need to talk to someone now, and both are practiced at triage, so you are not taking a slot from someone with greater need.

Coaching. Coaching is not covered by insurance, has no price floor, and has no ceiling. Executive coaching rates put one-to-one engagements out of reach for many of the people reading this. Here are the routes that are open.

Your employer's money, which is frequently unclaimed. Many organizations carry a professional development stipend, a tuition or certification benefit, or a leadership development budget that can be pointed at coaching. Most of it goes unspent because nobody asks. Ask your manager and your HR business partner, in that order, and name it as leadership development rather than coaching, because that is the language the budget line is usually written in. Bring a specific goal and a specific cost. "I would like to work on X, here is what it costs, here is what you will see change" moves budget. "Would the company pay for a coach" does not.

Internal coaching programs. Larger organizations often have internal coaches or a contracted coaching pool available at no cost to you. This is under-advertised almost everywhere it exists. Ask your people team whether it exists before you assume it does not.

Group and cohort coaching. Delivered at a fraction of one-to-one rates. You lose customization and you gain peers working the same problem, which for some goals is the better trade.

Newly credentialed coaches. Coaches building logged hours toward a credential price accordingly. The working alliance research in section seven found no meaningful outcome differences by coach experience level, which makes this a reasonable option.

Mentors and sponsors. Neither charges a fee.

A mentor requires preparation from you. Arriving without a specific question is the fastest way to lose one. It requires reciprocity as well; the relationship should return something, even if what you return is diligence, follow-through, and a report on what happened when you took their advice.

A sponsor requires delivered results and a degree of loyalty. Their reputation is attached to your performance once they have advocated for you, which is an obligation worth taking seriously before you accept it.

SECTION 5

Why These Markets Are Hard to Navigate

Both markets are difficult for structural reasons, and you will make better decisions knowing what they are.

Therapy: many good clinicians have left the insurance system. Accepting insurance requires substantial unpaid administrative work, and reimbursement rates are frequently set well below market. Over time a large number of private clinicians opted out entirely. This is not a signal about quality in either direction. It does mean that restricting your search to in-network providers narrows the field more than you might expect, and that learning the out-of-network reimbursement process is worth the time it takes.

Coaching: the title is unregulated. Anyone can call themselves a coach tomorrow. There is no license, no protected title, and no regulator. Credentialing exists and is entirely voluntary. The practical consequence is that the quality-control burden sits with you, the buyer, which is not the case with therapy and is the reason section six is longer on the coaching side.

One more thing this readership should hear. The coaching industry markets certification programs aggressively at mid-career professionals as a second act, and those programs are a significant revenue stream in their own right. Becoming a coach and hiring a coach are unrelated decisions. A program selling you the first is not a neutral guide to the second.

SECTION 6

How to Choose

Disqualifiers first, because they are more useful than green flags and easier to apply under pressure.

Therapist: credential literacy. Doctoral-level psychologists hold a PhD or PsyD and can conduct psychological assessment and testing. LCSW, LMFT, LPC and LPCC are master's-level clinical licenses; the letters describe training lineage more than quality, and any of them can be the right person for you. Psychiatrists hold an MD or DO and are the only ones who prescribe medication. Pre-licensure associates practice under supervision at lower cost. Verify any license through your state's licensing board, which takes about two minutes and is public.

Disqualifiers. They cannot or will not describe their therapeutic approach in plain language. They discourage you from asking about it, or treat the question as resistance.

Green flags. They can tell you what modality they practice, why they think it fits what you have described, and roughly what the first several months would look like. They tell you unprompted that you can stop or switch.

Coach: credential literacy. The International Coaching Federation issues ACC, PCC, and MCC credentials at ascending levels. Each requires completed coach-specific training hours, a minimum of logged client hours, mentor coaching, a recorded performance evaluation, and a knowledge assessment. That is a meaningful floor. It certifies process, training, and volume. It does not certify results, and it does not certify that the coach is right for you. Verify any claimed credential through the ICF directory; misstated credentials are common in an unregulated market.

Disqualifiers. They promise outcomes. Nobody can promise you a promotion, a raise, or a transformation. Second: they cannot articulate where coaching ends and where they would refer you out. A coach without a clear scope boundary will keep working past the point of usefulness.

Green flags. They ask what you want to be different and how you would know, in the first conversation, before quoting you a price. They contract explicitly on goals, cadence, duration, and how you will both evaluate whether it is working.

Mentor. Disqualifiers. They only tell stories about themselves. Their experience is more than roughly a decade stale in your specific function or industry, and they have not acknowledged it. Green flags. They ask about your situation before advising. They tell you when they do not know, and point you to someone who does.

Sponsor. You do not select a sponsor, so the question is different: how do you tell whether someone has become one. Disqualifiers. They praise you privately and go quiet in rooms where it would cost them something. They have never given you work that carries visible risk. Green flags. Your name comes back to you from conversations you were not in. They put you on assignments where failure would be attributable to them. They tell you specifically what you need to fix, because your performance is now partly their problem.

SECTION 7

Chemistry Is Not Fit

The construct that predicts outcomes in coaching is the working alliance, which has three components: the emotional bond between you, agreement on the goals of the work, and agreement on the tasks and methods used to get there. Graßmann and colleagues pooled the available studies in 2020 and found the working alliance positively related to every desirable coaching outcome measured, and negatively related to unintended negative effects. The alliance is the mechanism through which coaching works.

The part that should change how you choose comes from De Haan and colleagues' study of roughly 1,900 coach and client pairs. Agreement on goals and agreement on method each predicted success more strongly than the emotional bond did. Whether you agree on what you are working on and how you will work on it matters more than whether you click.

Standard advice to pick the coach you feel most comfortable with therefore points you at the weakest of the three signals. In a first conversation, listen for whether they can restate your goal more clearly than you stated it, and whether their proposed method makes sense to you as a way of getting there. Alignment on goals and method is the stronger predictor.

The same logic runs through the mentoring evidence. Ragins and Cotton's 1999 study of more than six hundred protégés found that people with informally formed mentors rated them more effective and were paid more than people matched through formal programs, and found no significant career-outcome difference between people in formal mentoring programs and people with no mentor at all. That is one cross-sectional study across three occupations, not causal evidence, and formal programs have improved since 1999. The direction is consistent with everything above: the quality and fit of the relationship is the active ingredient, not its existence.

So the question is not whether you have a mentor. It is whether you have one you chose, on a goal you both named.

SECTION 8

The First Conversation

You are evaluating them. Bring questions.

For a therapist. What approach do you practice, and why would it fit what I have described? What does progress look like, and when would we check? What is your fee, do you take insurance, and do you have any reduced-fee availability? Expect a first session that is largely orientation and paperwork, including disclosures about privacy practices. You are under no obligation to return.

For a coach. What would we work on, and how would we both know it was working? What is your method? What falls outside coaching, and what would make you refer me elsewhere? What are your credentials and where can I verify them? How long do you expect this to take, and what happens if it is not working at the halfway point? A coach who quotes you a price before asking what you want to change has skipped the part that predicts outcomes.

For a prospective mentor. Come with one specific question rather than a request for mentorship in the abstract. "Would you be my mentor" asks someone to accept an unbounded obligation. A bounded ask is answerable, and it is how most mentorships actually start. Something close to this works:

I am working through [specific transition or decision]. You made that move at [organization] a few years ago. Would you be open to twenty minutes so I can ask you two questions about how you approached it?

Three things make it land: it names the thing you need, it names why you are asking this person specifically, and it has a defined end. Then close the loop. Tell them what you did with the answer. That follow-up is what turns a single conversation into a standing relationship, and it is what makes you the person they think of later when something needs advocating for.

For a prospective sponsor. There is no first conversation to prepare for. Sponsorship follows from work they can see.

SECTION 9

Accountability

Who owes what, and who is answerable when it does not work.

Therapist. They are accountable for competent, ethical practice within their scope, and they are licensed and regulated against that standard. You are accountable for showing up and for telling the truth in the room. If it is not working, your state licensing board is a real avenue, which is not the case anywhere else on this list.

Coach. They are accountable for the process: contracting clearly, holding the structure, staying inside scope, and referring out when they hit the edge. You are accountable for the outcome, because the work happens between sessions. No credentialing body will adjudicate a bad coaching engagement for you, which is why the contract matters more here than anywhere else on this list.

Mentor. Nobody is accountable. It is a voluntary relationship with no contract, so it usually degrades without either party naming it. Mentorships fail by drifting more often than by ending.

Sponsor. You are accountable, and the exposure is asymmetric. If you underdeliver, they absorb reputational cost you will probably never see quantified. Their side of the obligation is largely informal, which is why it follows from work they have already seen rather than from a request.

Failure modes worth naming: a coach who has become a paid friend; a therapist you have plateaued with for a year without discussing it; a mentor whose advice is confidently out of date; a sponsor you have quietly stopped delivering for.

SECTION 10

How to Leave

You are allowed to end all four of these. Most people do not know that, and stay too long in the ones that cost money.

Therapist. You can stop at any time, and you do not owe an explanation. Ending is itself clinically meaningful, and a good clinician will want one conversation about it rather than a disappearance. If the reason you want to leave is that something in the room felt wrong, that is worth saying out loud before you go. Switching is normal. Approaches vary considerably and finding the right match often takes more than one try.

Coach. This ends on contract terms, so read them before you sign. A defensible coaching agreement specifies duration, session count, cancellation and rescheduling terms, what happens to unused sessions, confidentiality, and, if an employer is paying, exactly what gets reported back to them and what does not. Insist on a stated midpoint check. Language that works: "I do not think we are moving on what we contracted for. I would like to stop at the end of this month."

Mentor. Mentorships are allowed to end without a rupture, and most should. Cadence naturally decays as your questions change. Close it properly rather than going quiet: tell them what their input actually changed, which is what makes them willing to take the next person's call.

Sponsor. This is the asymmetric one. Disengaging from a sponsor carries political cost that leaving a coach does not, because they have publicly attached themselves to you. If you are leaving the organization or the relationship, tell them directly and early, before they hear it elsewhere. Being blindsided by someone you vouched for is how sponsors decide to stop sponsoring.

SECTION 11

When You Do Not Need Any of This

Some problems do not have a relationship-shaped solution.

You are in the wrong job. If the gap is between what you are good at and what the role rewards, coaching will not close it. It will make you more effective at a job that is wrong for you, which extends the time you spend in it. The honest answer is a different role, and sometimes a different organization.

The problem is the environment. If your manager is the issue, or the organization is dysfunctional, individual development is being used to make a structural problem your personal responsibility. Be alert to being sent to coaching as a substitute for a conversation someone senior does not want to have.

You need information rather than a relationship. Some questions are answered by a single well-aimed conversation, or by reading. Matching the size of the response to the size of the problem is reasonable.

You need rest. Burnout responds to recovery. A development plan will not address it.

If what you are dealing with is heavier than a career question, start with a clinician. Coaching is not a substitute for treatment, and any coach who suggests otherwise is outside their scope.

SOURCES

Ibarra, H., Carter, N. M., and Silva, C. "Why Men Still Get More Promotions Than Women." Harvard Business Review, September 2010.

Kram, K. E. Mentoring at Work: Developmental Relationships in Organizational Life. Scott Foresman, 1985.

Ragins, B. R., and Cotton, J. L. "Mentor Functions and Outcomes: A Comparison of Men and Women in Formal and Informal Mentoring Relationships." Journal of Applied Psychology 84, no. 4 (1999): 529 to 550.

Hewlett, S. A. The Sponsor Effect: How to Be a Better Leader by Investing in Others. Harvard Business Review Press, 2019. Survey data from the Center for Talent Innovation, now Coqual.

Graßmann, C., Schölmerich, F., and Schermuly, C. C. "The Relationship Between Working Alliance and Client Outcomes in Coaching: A Meta-Analysis." Human Relations, 2020.

De Haan, E., Grant, A. M., Burger, Y., and Eriksson, P. "A Large-Scale Study of Executive and Workplace Coaching." Consulting Psychology Journal: Practice and Research 68, no. 3 (2016).

Hullinger, A. M., and DiGirolamo, J. A. "Referring a Client to Therapy: A Set of Guidelines." International Coaching Federation, 2018.

American Psychological Association. "Understanding Psychotherapy and How It Works."

PRINCIPAL



Simone Harvey, PCC

△ FOUNDER AND PRINCIPAL, SĀNTIS GROUP

Executive coach to founders and senior leaders, working on the relational and judgment problems that surface once technical competence stops being the constraint. Professional Certified Coach credentialed through Georgetown and the International Coaching Federation. MBA. Based in Oakland, California.

This guide is free and meant to be shared.

[BOOK A CONVERSATION](#) SĀNTIS.GROUP

simone@santis.group · Oakland, California