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Abstract

Mental health clinicians struggle with self-care; over time, lack of self-care and the accumulation of stressors can lead to burnout and compassion fatigue. Through the lens of self-reflexivity, journaling is one way a therapist can implement self-care by a process of self-monitoring. Using self-reflexivity, a different form of self-reflection, a therapist may develop the capacity to reflect on their subjective and objective selves whereby developing a mindfulness-based practice to prevent the development of burnout or compassion fatigue. This article explores the reflexive process and its relationship to journaling. Additionally, journaling as a practice and the benefits of the expressive process of journaling are discussed. It is imperative that practicing clinicians develop protective strategies that promote wellness to better support clients.

Keywords: counseling, journaling, self-care, self-reflection, self-reflexivity

As life’s struggles increase, it is important to develop the capacity to cope. Clinicians assist clients with developing coping strategies; however, how does a clinician cope with the burdens they carry from each of the clients they meet with? The accumulation of stressors can, over time, create burnout and overall compassion fatigue for those in the helping professions (Figley, 1995). As a result, it is imperative to find coping strategies that prevent or alleviate symptoms (Figley, 2002). Without self-reflection, clinicians might struggle with self-monitoring their feelings, emotions, and symptoms. Therefore, incorporating self-care strategies that include self-reflection is an important aspect of the self-monitoring and prevention of compassion fatigue (Norcross, 2000; Venart, Vassos, & Pitcher-Heft, 2007; Williams et al., 2010). This article
introduces the model of self-reflexivity (Aron, 2000) and its relationship to journaling as a self-care technique for mental health clinicians. Therefore journaling, its benefits, and its application to mindfulness as a self-monitoring practice will be discussed. To conclude, the application of this practice for clinicians and suggestions for further research will be presented.

**Self-Reflexivity**

The concept of self-reflexivity has been more common in the human sciences literature and it has many definitions and uses (Holland, 1999). As a term in the social sciences, self-reflexivity describes the process a person goes through to take account of the self and the impact they have on another person’s self (Holland, 1999). Self-reflexivity can be both an abstract, symbolic, and vague concept, as well as a unified process with a level of concreteness to it (Pagis, 2009). Aron (2000) described a more technical use of the term and distinguished self-reflexivity from the usual understanding of self-reflection in that self-reflexivity implies a cognitive process in which one thinks about oneself with some distance. The use of self-reflexivity, for Aron (2000), is the dialectical experience of seeing one’s self as both the subject and the object as well as experiencing the self as subject and reflecting on the self as object. Thus, the self-reflexive process differs from self-reflection, in that self-reflection is calculated and contemplative (Pierson, 1998). However, self-reflexive thought is not exclusively intellectual, as it is also experiential when one encounters their emotions (Aron, 2000). Additionally, Boyd and Fales (1983) described reflection as “the process of internally examining and exploring an issue of concern, triggered by an experience, which creates and clarifies meaning in terms of self, and results in a changed conceptual perspective” (p. 100).

When seeing one’s self as the object, self-reflexivity presents the capacity to recognize our own separateness from the world (Auerbach & Blatt, 1996). This is done by establishing distance within one’s self. A person must recognize that the self is in the world, and also that the self can be distant from the world and objectively look at the self among others and the interconnectedness of all. In order to maintain interconnectedness, and thus interpersonal relationships, we need to know ourselves—a concept which Auerbach and Blatt (2001) called, affect attunement. Being attuned to one’s affect is one component of self-monitoring. Additionally, Auerbach and Blatt (1996) described this process as a dialectic between our two selves, the
objective and the subjective self. To do this, the person needs to become an object to himself (Pagis, 2009).

Self-reflexivity is not introspection (Aron, 2000). Aron (2000) described that, to differentiate these, it is important to note that many people take time to examine their emotions, but the self-reflexive process involves an objective development of one’s emotions and feelings related to another’s affect. Additionally, with self-reflexivity, there is body awareness that comes with being present in the moment, thus developing a mindfulness-based reflection. Self-reflexivity is not only intellectual or cognitive, but also emotional and affective as well (Aron, 2000). The focus is on maintaining the tension between subjective and objective self-awareness, to connect thought and affect, mind and body, and the observational and the experiential self (Aron, 2000). The range of one’s self-reflexivity is deepened as one learns to use the dialectics of self and mutual regulation (Beebe & Lachmann, 1998). It is this regulation process that allows a clinician to be present in their body and able to regulate themselves in a therapy session when a disturbance presents itself through the engagement with a client’s shared experience.

Self-reflexivity presents an examination approach to journaling. Journaling has a long history of use as documentation of life’s journey, venting frustration, remembering events, and writing practice (Adams, 1990). Despite this long history, journaling has not been widely researched as a tool to increase self-monitoring as a way to bring awareness to therapists about the self as a clinician. Discursive self-reflexivity is the process in which a person uses language to unfold the self, and embodied self-reflexivity is the process of discovering the self through the body (Pagis, 2009). Self-reflexivity is encouraged for psychologists to recognize that their own subjective systems were being used to view the systems of other people (Holland, 1999). This self-reflexive process allows the clinician to see themselves in relation to others (i.e., clients) and how their subjective self, or bias, may impact the client.

Journaling should be explored as a means of contributing to the research on self-care practices for therapists by specifically investigating how journaling may develop increased mindfulness-based practice. Mindfulness has several documented benefits in counseling (Gambrel & Keeling, 2010) related to anxiety and depression (Hofmann, Sawyer, Witt, & Oh, 2010), clinicians (Aggs & Bambling, 2010; Dorian & Killebrew, 2014; Dunn, Callahan, Swift,
Ivanovic, 2013), and overall benefits (Chiesa & Serretti, 2010; Coffey, Hartman, & Frederickson, 2010; Davidson et al., 2003). Mindfulness could also be a tool used to alleviate symptoms of burnout, stress, and compassion fatigue through increased awareness of the self in relation to clients.

Much of the research that discusses self-reflexivity described it in relation to therapy (Aron, 2000), the development of the self (Pagis, 2009), and research (Allen, Wilkins, Gazzaley, & Morsella, 2013; Fox & Allen, 2014; Holland, 1999; Maxey, 1999); however, no such literature has been found on self-reflexivity and its relationship with the dual process of journaling and the connection to mindfulness.

**Journaling**

Journaling has been implemented for psychologically processing events for decades; however, the first study that explored expressive writing was published in 1986 (Pennebaker & Beall, 1986). Recently, Pennebaker and Chung (2011) reported that, by 2009, over 200 studies on journaling had been published. Journaling studies have covered an array of interests including effects of writing on physical health and biological outcomes (Batten, Follette, Rasmussen Hall, & Palm, 2002; Pennebaker & Seagal, 1999; Petrie, Booth, & Pennebaker, 1998). Additionally, research has uncovered the effects of writing on attitude change, stereotyping, creativity, working memory (Kirk, Schrutte, & Hine, 2011), motivation, life satisfaction, and school performance (Hubbs & Brand, 2005). Although several researchers have contributed to the bolstering research on journaling and expressive writing, a few sustaining contributors include the works of Pennebaker (1988, 1997) and Progoff (1966).

Pennebaker and colleagues explored the relationship between writing and physical health (Pennebaker, Kiecolt-Glaser, & Glaser, 1988) and how specific language style and word usage can be a predictor of adaptive bereavement (Pennebaker, Mayne, & Francis, 1997).

Progoff introduced his “Intensive Journaling Workshop” in 1966 after years of studying the works of Freud, Jung, Adler, and Rank (Juline, 1992). Progoff’s work with Jung directly influenced the journaling process and, through his time with Jung and his practice as a psychotherapist, Progoff developed his own theory of human development, called Holistic Depth Psychology (Gestwicki, 2001). It was through his exploration of this theory that he developed the Intensive Journal Method as a practical
way to help clients navigate problems (Gestwicki, 2001). The Intensive Journal Method was described by Progoff as, “one of the oldest methods of self-exploration- keeping a diary” (Juline, 1992). He combined this practice with a structured format designed to guide individuals to a deeper level of self-exploration.

**Benefits of Journaling**

Journaling has many health related benefits as it relates to disclosing emotions and feelings. Several researchers have explored the physical health benefits of confronting traumatic experiences through writing (Burton & King, 2004; Pennebaker et al., 1988; Sloan & Marx, 2004a). The words that people use in describing their experiences have been found to be a predictor of improvement in mental health (Gortner, Rude, & Pennebaker, 2006; Kirk, Schrutte, & Hine, 2011), and physical health functioning (Lepore & Greenberg, 2002; Pennebaker & King, 1999; Pennebaker et al., 1997; Pennebaker & Stone, 2003). Pennebaker and Seagal (1999) found that individuals received the maximum benefit from writing when they used a high number of positive emotion words, a moderate amount of negative words, and increased their use of cognitive words.

**The Process of How Journaling Influences Health**

Pennebaker (2004) reported that expressive writing is connected with positive health outcomes; however, researchers still do not know how and why it works. Researchers have found that one of the underlying reasons the written disclosure paradigm may be effective is because it closely resembles the exposure therapy techniques that have been empirically supported as a treatment for PTSD (Sloan & Marx, 2004b). The opposite has also been found to be true, in that individuals who suppress their thoughts and emotions experience adverse effects (Pennebaker, 1997; Petrie et al., 1998). Several theories have been used to explain this relationship; however, no single theory fully accounts for the effectiveness of the writing paradigm. There are several theories that attempt to understand the benefits of journaling and writing. The main concept underlying theories of writing is the idea that when people do not talk or write about their emotions, they can become trapped in their body (Pennebaker, 1997). Furthermore, thought suppression can cause increased psychological work by both an individual’s body and mind, increasing the risk of somatic symptoms and a variety of other illnesses. Writing provides a way
for a person to disclose emotions (Graybeal, Sexton, & Pennebaker, 2002). The three main theories to understand this process are inhibition theory, cognitive change theory, and self-expression theory (Greybeal, Sexton, & Pennebaker, 2002; Sloan & Marx, 2004b).

**Inhibition theory.** As discussed by Graybeal, Sexton, and Pennebaker (2002), Inhibition Theory described that when an individual does not disclose intense or important psychological experiences, the reserve of information can cause psychological stress. Inhibition Theory was examined by Pennebaker and colleagues (1998) and they found that after having individuals write down their emotions, there was an increase in their overall lymphocytes and CD4 (helper) T Lymphocytes. These particular lymphocytes play an important role in the immune system functioning. Thought suppression, however, did the opposite, and significantly decreased the amount of CD3 T Lymphocyte levels needed for T-cell activation (Petrie et al., 1998). At the time of this study, minimal research had explored the relationship between thought suppression and immune functioning and its findings have been crucial in the understanding of the relationship of thought suppression and physical wellness (Petrie et al., 1998). People oftentimes suppress emotional thoughts as a way to regulate mood and reduce distress; but, research has found that thought suppression has both cognitive and psychological effects (Petrie et al., 1998).

**Cognitive change theory.** The second theory described by Graybeal and colleagues (2002) is Cognitive Change Theory, which asserted that writing helps people to organize and reorganize thoughts and emotions about experiences, allowing them to create more reasoned or significant stories (Pennebaker & Seagal, 1999). This is consistent with narrative therapy (White & Epston, 1990), and the idea that everyone has a story. By allowing people to engage with their story, they can find inconsistencies as well as truth by looking at the situation more objectively. White and Epston (1990) would call this externalizing the problem. In narrative therapy, the therapist helps identify the discrepancies or reality; however, with journaling or expressive writing, it is the individual who will examine their own story.

Through this organization and examination of one’s thoughts, it is believed that a person will think differently about a situation and change some of their behaviors. Nonetheless, Pennebaker and Seagal (1999) reported that research does not necessarily support this claim.
They documented that Smyth’s (1998) meta-analysis pointed out the opposite. In addition, many studies have found that after writing about emotional topics, people continue their habits of smoking, dieting, exercising, and socializing similar to those in the control groups. Constructing stories is a natural human process, and writing helps organize and remember events in a coherent way while integrating thoughts and feelings (Pennebaker, 1997). Additionally, once an experience has structure and meaning, the emotional effects of the experience are more manageable, which can give a person a sense of predictability and control (Pennebaker & Seagal, 1999).

**Expression theory.** A final suggested explanation for the effects and benefits of journaling is that it allows for an individual to express themselves (Greybeal, Sexton, & Pennebaker, 2002; Sloan & Marx, 2004b). Though this theory has shown evidence in several studies (Chan & Horneffer, 2006; Gortner et al., 2006; Ullrich & Lutgendorf, 2002), Krantz and Pennebaker (1995) explored the effects of disclosure through other forms of self-expression such as dance and movements of the body and discovered that the writing group and movement group were the only groups to show improvements in physical health and grade point average. These theories and explanations make valuable contributions to the overall understanding of the effects of journaling. Despite these and other existing theories, researchers do not understand why journaling works.

**Journaling and Mindfulness**

Epple (2007) implemented self-reflexivity through journaling and theorized that journaling may increase one’s mindfulness. Additionally, Epple (2007) reported that journaling helps focus on one’s inner world. Furthermore, Epple (2007) used Progoff’s Intensive Journaling Method in a qualitative study and found that journaling provided a meditative experience for participants. When reflecting on the experience, one participant stated, “the journal has given me a place in which to experience myself and to discover my existence,” and another participant wrote, “I accessed my inner wisdom and, after that, I knew that everyone had inner wisdom” (p. 297).

Hölzel and colleagues (2011) described several internal processes at work when individuals engage in mindful practice—similar processes that Graybeal et al. (2002) described as cognitive change. Hölzel et al. (2011) explained that one way to view the benefits of mindfulness is through a practice that Brown and
Ryan (2003) described, which included insight, exposure, non-attachment, enhanced mind-body functioning, and integrated functioning. Additionally, Hölzel et al. (2011) used Baer’s (2003) review to theorize that several mechanisms were at work in the journaling process: exposure, cognitive change, self-management, relaxation, and acceptance. The authors described that mindfulness worked through four mechanisms of action including attention regulation, body awareness, and emotion regulation. These mechanisms include reappraisal and exposure, extinction and reconsolidation, and change in perspective of the self (Hölzel et al., 2011).

These practices and mechanisms parallel the process one goes through in journaling, specifically when prompted to write about thoughts, feelings, and emotions. As one writes and externalizes their narrative, one is able to gain exposure to their experience in a different way. Through writing, insights may develop about internal experiences. As one journals about subjective feelings, they can re-read their subjective feelings, detaching themselves through the reading process and allowing a person to examine their objective self. This process parallels the attention regulation mechanisms.

Over time, journaling about one’s thoughts, and both physical and emotional feelings, enhances the present moment attunement with one’s body, creating a mind-body connection, or body awareness. While writing about and experiencing bodily sensations, one is better able to assess and regulate emotions, which takes a constant appraisal of the present moment encompassing the reappraisal and exposure, extinction and reconsolidation mechanism. Lastly, these mechanisms create a cognitive shift in how one reflects on the self in a mindful way, or the mechanism of the change in perspective of the self.

Self-Reflexive Journaling

The self-reflexive approach to journaling is appropriate because of the emphasis on the dialectical process between the self as the object and the subject, allowing a deeper self-examination by the individual. Additionally, reflexive self-consciousness (Halliday, 1989) delves into the way an individual examines oneself and responds to the self in a world of constant change and stress, both of which will differ by therapist and experience. Self-reflexivity lends itself to journaling specifically to express emotions and feelings, which can prompt the self-monitoring process. Journaling about emotions and feelings is a subjective process of identifying and documenting the
experiences of one’s affect related to others or experiences. The proposed process of engaging in journaling as a self-reflexive process includes not only writing about one’s emotions and experiences with clients, but adds the self-reflexivity component by reading and re-reading one’s narrative and responding to one’s self. Dialoguing with the self creates a distance from the self and thus allows one to be more objective about their subjective emotions and feelings.

This self-reflexive process is imperative because, whereas other methods of self-care may provide meditative practices or a sense of calm, journaling brings about awareness of the self through self-reflexive practice and creates a distance between the self and one’s feelings, actions, and emotions. Journaling can enhance the individual’s self and their awareness of the self throughout the day and bring about insights that can only come from the self. Journaling brings the focus on the individual and allows the individual to see themselves in the third person, analyzing and assessing their internal process at an objective level. Self-reflexive journaling must be intentional, which is why further research on this process must be prompted.

**Call for Further Research**

With counselors’ schedules and intermittent time to themselves, journaling can offer a brief self-care strategy which can be implemented throughout the day or as a practice at the end of a work day. The journaling process can serve as a check-in and a reflexive process for a therapist to summarize and monitor the experiences encountered through their clients and the impact on clients’ affect. Pennebaker (2004) described that few studies address the use of journaling for clinicians, prompting the question of whether this is a technique that should be used by the therapeutic community. Additionally, Pennebaker (2004) suggested that, in the real world, we need fast and effective treatments in dealing with trauma, emotional upheavals, and daily stressors. Journaling could be served as a more efficient intervention. In light of the benefits presented, journaling needs to be further researched as a way for therapists to increase mindfulness and attunement to affect in relation to their work with clients, specifically developing a self-reflexive journaling structure.

To date, the author has found only one article examining the relationship between journaling and mindfulness (Khramtsova & Glascock, 2010), and only one article exploring journaling (creative writing) as a form of self-care specifically for counselors (Warren, Morgan, Morris,
Mindfulness-based practice has been documented as beneficial for therapists and, therefore, research in the area of journaling as a mindfulness-based practice would fill an important gap in the literature. Furthermore, research in the area of self-care for therapists is ongoing; however, with the benefits of journaling being widely experienced, finding a journaling process that has been empirically documented as helpful would add to current research. Both of these are areas of particular importance because of the high incidence of burnout and compassion fatigue in clinicians, especially those that work in the field of trauma (Figley, 2002).

**Conclusion**

Counselors struggle with caring for themselves and oftentimes may not be fully aware or attuned to how a client or session may impact them in the moment and the overall lasting effects. As a result, a clinician’s lack of attunement may present as burnout and compassion fatigue. Several studies have documented that therapists’ lack of self-care has potential to impact their clients (Guy, Poelstra, & Stark, 1989; Lawson, Venart, Hazler, & Kottler, 2007; Skovholt, Grier, & Hanson, 2001). Therefore, “it is imperative that counselors are aware of their vulnerability to distress and how to assess for and respond to it if it occurs” (Cummins, Massey, & Jones, 2007, p. 47). It is the self-reflexive therapist who may be able to understand and monitor their internal processes to determine their needs at that time. Such monitoring could include cancelling a session due to overwhelming emotions from a previous session, taking a day off, needing to start counseling of their own, needing more time to take care of physical needs, or something as simple as deciding to take a walk or a nap. Without self-reflexivity, one may neglect the self and continue to care for others without realizing one is experiencing burnout and, perhaps, unable to continue in the helping profession.

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**About the Author**

Ashley Martin-Cuellar is a licensed Marriage and Family Therapist and a recent graduate with her Ph.D. in Family Studies from the University of New Mexico. Currently, Ashley is a Post-Doctoral Research Fellow at the University of New Mexico and is a practicing therapist in Albuquerque. Ashley’s clinical work and research interests include trauma informed treatment with parents and children, as well as wellness, resilience, and compassion fatigue for clinicians and those in the helping professions.