Reflective Journaling: Innovative Strategy for Self-Awareness for Graduate Nursing Students

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Abstract

Structured self-reflective journaling has the potential to serve as a means of self-awareness and professional growth. The purpose of this study was to describe what graduate nursing students were coming to know about themselves via reflective journaling. The context was a graduate course in psychiatric nursing. A descriptive exploratory design was conducted using qualitative methods. Content analysis was performed on journals of students enrolled in a graduate nursing course to identify prominent themes and patterns regarding the students' perceptions of what they were coming to know about themselves as they worked in the psychiatric mental health area. Four themes emerged from the narrative content of the journals: becoming aware, feeling the pain, what I learned, and personal growth exists among colleagues. Caring is one way in which these relationships can be examined. In this study positive correlations were found between manager caring and peer caring and their relationship with RNs' job satisfaction and intent to stay both in a position and the profession.

Key Words: Reflective journaling, self-awareness, caring, advanced practice, graduate nursing students

Background

Incorporating reflective journaling in nursing education has been advocated as a way for students to develop not only critical thinking skills, but self-understanding and a means for coping with critical incidents in practice (Craft, 2005). The concept of reflection on practice events or experiences is not new (Schön, 1983). Reflection-on-action has been reported as a retrospective process in which students entering professional disciplines attempt to make sense and create an inner dialogue about some clinical experience held to be unique or conflict-laden (Schön). While Schön's work is not in nursing, it is relevant to the work of reflection in nursing today. His approach to an epistemology of practice was based on identifying what practitioners actually do. Hence, reflection is viewed as a rigorous activity that includes the analysis of the structure of reflection. This seminal work resonates with many of those in nursing education today and forms the basis for reflection in nursing.

In today's complex healthcare delivery system, nurse practitioners are challenged to deliver evidence-based care and commit to lifelong learning. Reflection on practice and an awareness of self have been recommended as ways to enhance clinical competence (Kessler & Lund, 2004). Moreover, reflective practice has been described as a way of self-examination in which the individual reviews or looks back over what has happened in their practice as a means for professional growth (Ruth-Sahd, 2003).

Reflective journaling is an effective teaching tool that can help students become more fully aware in clinical decision-making instances and ultimately promote reflective practice (Kessler & Lund, 2004). Reflective journaling can also help students, as well as nurse practitioners, to sustain themselves emotionally in their work. It provides students the opportunity to tell their story about how new understanding was constructed from having entered another's world and experiences (Schön, 1991). Reflective activity, or in this instance, reflective journaling, can be viewed as an opportunity to think consciously about clinical events and evaluate choices and identify learning needs (Johns, 2004). Moreover, self-reflection is a means by which students may develop self-awareness, the ability to care for self, and a growing awareness of self in relationship with others (Hentz & Lauterbach, 2005). More recently it was reported that reflective journaling and the process of critical reflection enabled graduate nursing students to gain self-awareness and personal growth as they learned the importance of self-care in provision of care to others. Graduate nursing students were able to come "…to know self as a caring person and recognizing the importance of self-care to engaging in caring relationships with patients" (Wilson & Grams, 2007, p. 20). Journaling has also notably been described as a means to personalize the learning experience, whereby the journal records the student's learning process and content (Lauterbach & Hentz).

While reflective journaling is as an effective teaching method that can facilitate assessment of experiences and underlying assumptions, additional studies are needed

since much of the available literature remains theoretical (Ruth-Sahd, 2003). According to Ruth-Sahd, reflection can be ambiguous and reflective practice has not been adequately researched. Since the majority of studies regarding reflection have been qualitative, it is suggested (Ruth-Sahd) that the use of quantitative studies might assist in testing the conclusions of existing qualitative research; thereby helping to illuminate the outcomes of the reflective process. The purpose of this descriptive study was to describe what graduate nursing students were coming to know about themselves by means of reflective journaling within the context of a graduate course in psychiatric mental health nursing.

Method

A descriptive qualitative design was chosen to describe students' perceptions of reflective journaling as it related to preparing for the advanced practice nursing role. Approval for the study was granted by the university Institutional Review Board. At the beginning of the semester graduate nursing students enrolled in a web-enhanced course for mental health concepts were approached for their willingness to participate in the study. The study was presented to all students enrolled in the course and they were provided the opportunity to ask questions about the study. Students were informed that their decision not to participate would not affect their academic evaluation or grades in the course.

All students were instructed to maintain a reflective journal throughout the entire 15-week semester. Reflective journaling is a course requirement but students are required to submit only two journals during the semester at specified times. Students were encouraged to create an ongoing dialogue about the progress of their learning in preparation for the advanced practice role in their chosen specialty area and specifically what they were coming to know about themselves as they worked in the psychi-

atric mental health setting. A specific format is used for the reflective journaling process. Students are provided templates for the reflective journals with specific questions as guides. In the first reflective journal students are instructed to create an ongoing dialogue about the process of their leaning and personal goals for the course in preparation for the advanced practice role in their specialty. They are further instructed to reflect on what they are coming to know about themselves in relation to the clinical area. Finally, they are encouraged to reflect upon the development of their relationship with their preceptors and other professionals in the clinical setting. For many students, this was their first introduction to reflective journaling. Class time was devoted to the topic of reflective journaling and students were engaged in a discussion about the process. Articles regarding reflective journaling, the process, development of critical thinking skills, reflective writing, and the documentation of professional nursing practice were provided to the students. With regard to the study, only the journals of those students who indicated their willingness to participate were included for data analysis. Only data from reflective journal #1 (What am I coming to know about myself as I work in this clinical practice?) were included for data analysis in the present study.

Qualitative content analysis, the analysis of the content of narrative data to identify prominent themes and patterns among the themes (Polit & Beck, 2007), was used to analyze the reflective journals. Reflective journals of those students who consented to participate were reviewed for accuracy and completeness. In order to be considered accurate and complete, student journals had to address the guided questions and responses needed to indicate emotional content rather than recording of only factual content. One question was coded, "What am I coming to know about myself as I work in this clinical practice?" Four faculty read each journal

entry and individually coded the data. The faculty then met to review the initial codes and to group codes into categories and then into themes. The Statistical Package for the Social Sciences was used to describe this sample of graduate nursing students.

Sample

There were 31 students enrolled in the class and 28 students consented to have their reflective journals analyzed as part of the study. Only 16 students completed the short demographic data form. Based upon these data ($N = 16$), the participating students were on average 35 years of age (range of 25 to 51). All the respondents were female and over half were Mexican-American. The majority of students (37.5%) were enrolled in the Acute Care Nurse Practitioner Major. The remainder of students were enrolled in Family Nurse Practitioner (25.0%), Pediatric Nurse Practitioner (25.0%), or Geriatric Nurse Practitioner (12.0%) Majors.

Over 90% of the students worked while attending the nurse practitioner program and 88% did so with a part-time school enrollment status. Most students in this sample self-reported attending religious services on a weekly or more frequent basis (75%) and being Catholic (81%). The majority of students also indicated they were in committed relationships (81%).

Data Rigor

In qualitative methods, trustworthiness is used in lieu of reliability and validity. Trustworthiness as defined by Lincoln and Guba (1985) means that both the findings and interpretations of the findings are credible to the individuals who experience the original and multiple realities. Four criteria have been recommended to establish trustworthiness: credibility, transferability, dependability, and confirmability (Lincoln & Guba).

Credibility refers to the confidence in the truth of the data. Peer debriefing is another

way to establish credibility and refers to the exposure of the investigator's thoughts, experiences, and interpretations of information to a peer who is an expert in the topic area and the requisite methods (Lincoln & Guba, 1985). In the present study, peer debriefing was conducted with the investigative team and an outside faculty member who is expert in qualitative methods. Member check was not used in this study. The investigators gave careful consideration to the use of "member check" as confirmation that the data analysis captured what the informants said and meant as a further effort to establish credibility (Janesick, 1994). Sandelowski (1993), however, cautioned investigators that the use of member check may actually pose a threat to validity because the story and meaning of the informant is contextual and changes over time. Since the aim of this study focused on the experiences of students within a specific contextual and temporal set of events, member check was not used.

Transferability refers to the degree to which data can be transferred and used within other groups or settings (Lincoln & Guba, 1985). According to transferability, life experiences cannot be fully appreciated, understood, or interpreted out of context. Transferability can be achieved through the use of thick description. In this study, thick description was achieved through the inclusions of the students' perceptions in their reflective journals in terms their perceptions, words, and symbolic meanings.

Dependability refers to the stability of data over time and is the provision of records, which account for changes in the construct under study as well as changes within the study's design (Lincoln & Guba, 1985). Dependability was accomplished by means of an audit trail. The investigators and outside faculty member individually reviewed all reflective journals and maintained individual written (field) notes. These written notes and the content of the reflective journals served as the basis for developing categories related to themes and relationships.

Confirmability refers to the examination of data, the data findings and interpretations, and the recommendations that are developed. Confirmability is established on the audit trail and indicates that the findings are grounded in the data (Lincoln & Guba, 1985). In the present study confirmability was accomplished through review of the raw data to determine the logic of interpretations and inferences based on interpretations.

Results

Four themes emerged from the narrative content of the journals: becoming aware, feeling the pain, what I learned, and personal growth.

Becoming Aware

This theme (Figure 1) describes the students emerging awareness about mental illness in general and about individuals affected by mental illness. This theme consisted of three categories. The first category was that of preconceived notions. Students wrote about developing an awareness of preconceived notions about mental illness
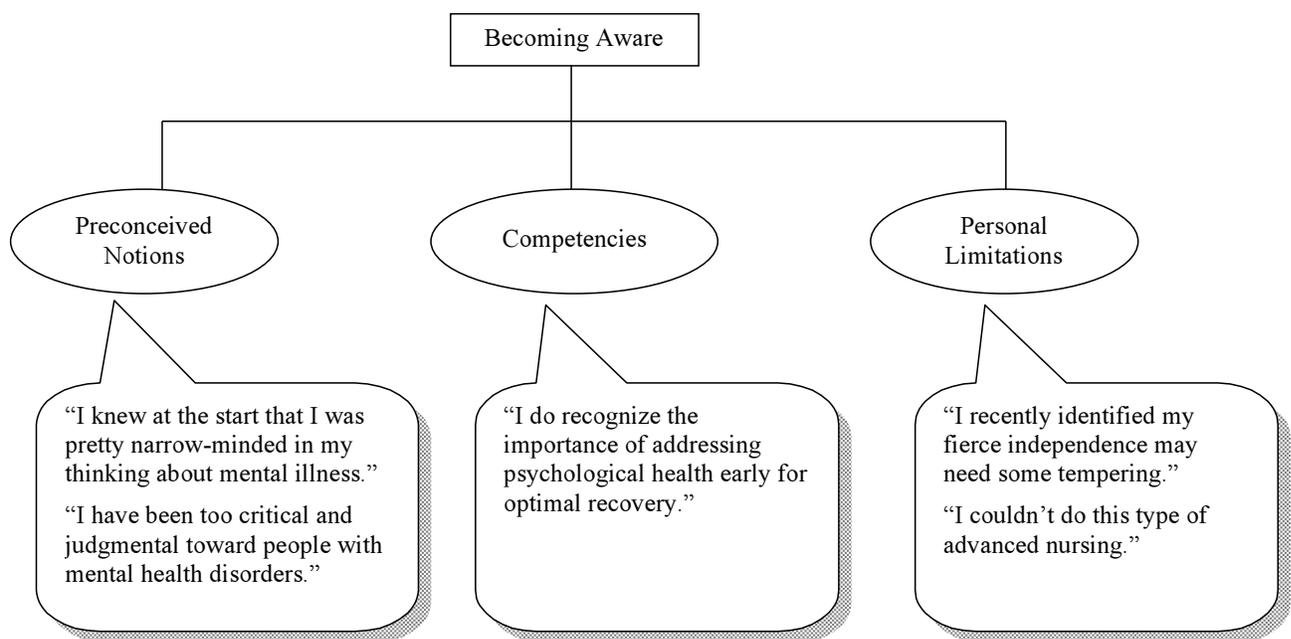

Figure 1. "Becoming Aware" consists of three categories including students' preconceived notions, a range of perceived competencies, and self-identified personal limitations.

and persons with mental illness. As students began to progress through the course, they identified ideas they had held about the nature of mental illness and characteristics of individuals with mental illness. For example, one student said, "I knew at the start that I was pretty narrow-minded in my thinking about mental illness." Another student identified prior thoughts and behaviors by saying, "I have been too critical and judgmental toward people with mental health disorders."

The second category was competencies. Students shared feelings that ranged from incompetence prior to the start of the course to developing competence. This was exemplified by one student's comment that they had become more aware of the need for psychological intervention for patients experiencing physical trauma. The student commented that now, "I do recognize the importance of addressing psychological health early for optimal recovery."

The third category was personal limitations in which students described identifying areas they needed to develop, "I recently identified my fierce independence

may need some tempering." There was a description of moving from discomfort to comfort in this category ranging from "I couldn't do this type of advanced nursing" to "[When] I first began this semester I honestly felt very uneasy and somewhat uncomfortable around psychiatric patients…I now feel comfortable in this setting."

Feeling the Pain

This theme (Figure 2) describes the students' overall perception that this specific mental health clinical rotation was emotionally difficult. Two categories emerged within this theme, pain in the present and pain for the future. The students shared that they often felt discouraged by the patient situations, felt that a number of patients were unappreciative of the efforts of the health care team, and felt uneasy and uncomfortable around the patients. Several students remarked that because of their personal discomfort, they distanced themselves from the patients and had a difficult time motivating themselves to interact with them. Other students described emotional pain related to patient experiences and

stated that they allowed patient stories to affect them. When addressing pain in the present, a student stated, "I often find myself feeling sorry for the patients. I feel bad that they cannot work or cannot lead productive lives because they have a mental illness."

Some students believed that there never was an end to mental illness. Students expressed a wish to give hope to patients and their families but, at times, felt that hope for them was impossible. Many students saw no hope for persons suffering with mental illness, particularly children hospitalized with mental disorders. A student reflected, "Children and especially their families suffer for a lifetime...this makes me feel very sad for them." Another student when dialoging about future pain stated, "I see no hope for them and I wish there was some way of giving them hope."

What I Learned

This theme (Figure 3) describes the students' personal perceptions of what they learned during this course of study. This theme consisted of three categories: worldview of persons with mental illness (all),
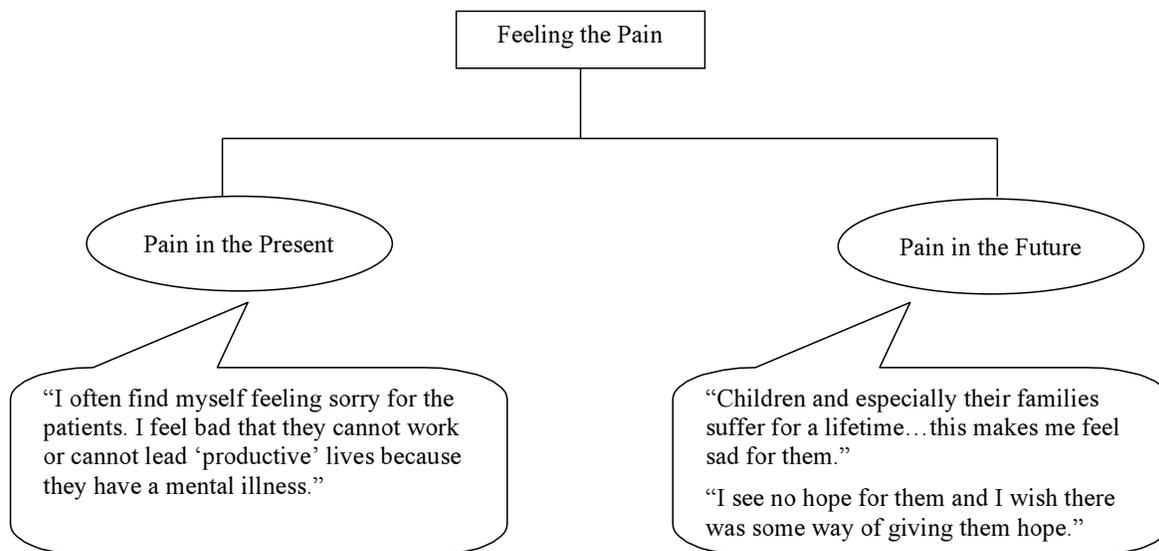

Figure 2. "Feeling the Pain" consists of two subcategories representing the emotional difficulty students described including pain experienced in the present and pain students anticipated for the future.
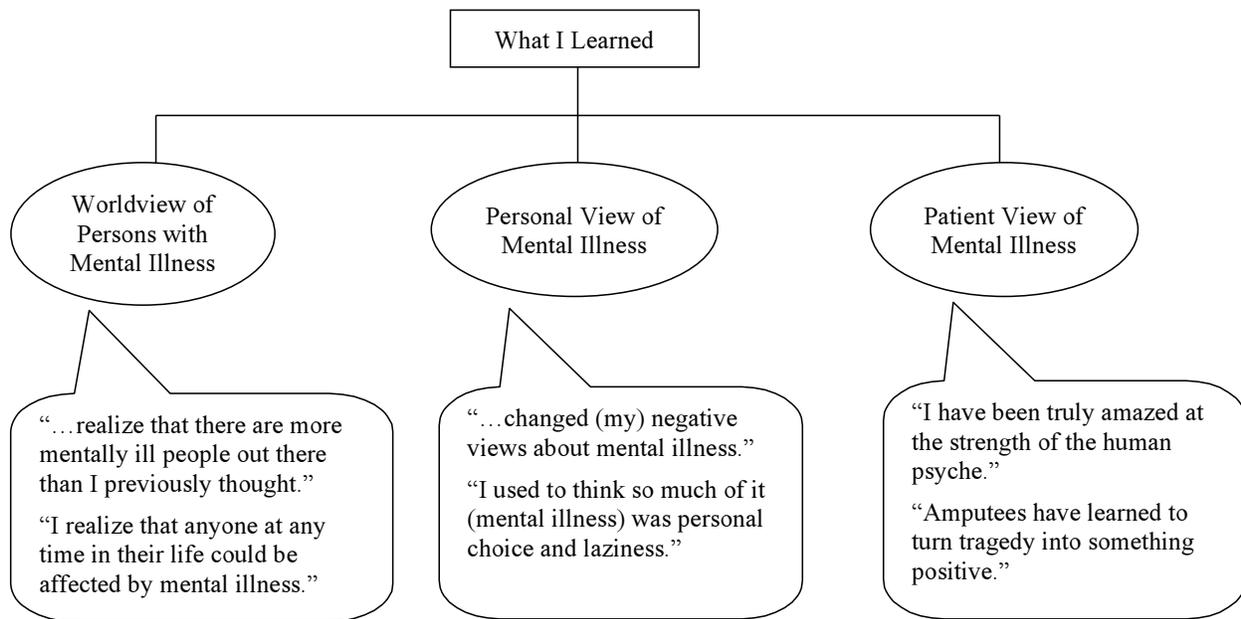
Figure 3. "What I Learned" is comprised of three categories: worldview of persons with mental illness (all), the student's personal view (me), and patient view (them).

personal view (me), and patient view (them). With regard to the first category, students described a view of all individuals with mental illness. Although undergraduate clinical experiences had introduced these advanced practice nursing students to a basic understanding of mental illness, this experience was eye-opening to many. One student commented that during the discovery they began to "realize that there are more mentally ill people out there than I previously thought" and that it could happen to "anyone at anytime." Students also came to understand the linkage of the physical and psychological realms of human experience in disease and wellness. They also noted that recovery or improvement in status from mental illness can be a lengthy process and affects both the family and society as a whole. Students also noted that both society and institutions have "not put much emphasis on mental illnesses" and resource allocation to this realm of healthcare delivery.

It was also very difficult for several students to see children experiencing mental illness. Some students had not had prior exposure to those experiencing mental illness and psychic turmoil at an early age. Another student commented that they were surprised to meet "children who can only think about death, children who mutilate themselves, and some that want to harm others." Students stated that they were disturbed that often families of these children could not be reached or when families were present physically, they were not supportive of the child in distress.

With regard to the second category, personal view (me), students came to examine and process some of their own behaviors and belief systems regarding the care of those experiencing mental illness. They wrote that they were often surprised by their self-discoveries and their enjoyment of a clinical experience they had initially had apprehension about. Many students described the clinical experience as an "eye-opener." They wrote openly about transitions and the broadening perspective they experienced. Some students felt they were too critical or judgmental with mentally ill patients. One student commented that their clinical rotation "changed nega-

tive views about mental illness." Another student wrote about gaining new self-awareness in that they "used to think so much of it (mental illness) was personal choice and laziness." Students found they needed to continue to work on their own objectivity, boundary setting, and tolerance of those experiencing mental illness.

With regard to the third category, patient view (them), students looked to both the individual and the environment to provide interventions in the care of mental illness. Some students noted that simply providing a non-judgmental environment and proper clinical management was important. Others shared that the patients themselves needed just limited assistance or had all the tools they actually needed to foster improvement of their mental health. Many students were surprised by the positive attributes they saw within patients themselves. Students noted that there was an innate capacity for the human condition to overcome adversity. One student noted that, "I have been truly amazed at the strength of the human psyche." Another student who was assisting in the care of wounded soldiers wrote "am-

putees have learned to turn tragedy into something positive."

Personal Growth

This theme (Figure 4) was comprised of what made the student feel competent or capable. It also includes a category of what they feel they have to be thankful for. Students wrote about how they had become more patient and more confident with their abilities in the mental health setting. They described how they can listen better (with compassion) and how they have learned how to approach people with mental illness. They also shared how they are now more tolerant of situations. Students also described how this specific clinical experience has reinforced all that they have to be thankful for and that they felt fortunate. Students also reflected on their own issues, such as self-esteem. They wrote that their self-esteem was not good at the start of the course but now, by means of this course, they are working on it. Finally, students reflected on their positive learning and how they developed new interests and that they are eager to learn more. They shared that

they enjoyed interactions with their patients. They also shared that while they were uncomfortable in the beginning of the clinical rotation, now they were more comfortable. As one student commented about the end result of this clinical experience, "I was always nervous around people with mental health issues;" now, "I feel more confident in my ability to work with people with mental health problems."

Discussion

The primary purpose of this study was to describe what graduate nursing students were coming to know about themselves via reflective journaling. The context was a graduate course in psychiatric mental health nursing that prepares them for the advanced practice role.

The emergent themes demonstrate how the students engaged in the process of reflective journaling. Graduate students discussed how they were becoming aware of their own feelings and biases in relationship to patients with mental illness. The students also shared their feelings of personal pain in relationship to being fully present; facing

their discomfort and preconceived notions when working with individuals in the psychiatric setting. Through the process of structured reflective journaling, the students were also able to share what they learned in the course and, more importantly, what they learned about themselves in relationship to caring for persons with mental illness. Personal growth occurred over time with students obtaining a clearer meaning of their role as practitioners in a psychiatric setting as the semester progressed.

According to Johns (2006) the process of becoming a reflective practitioner requires time, commitment, and discipline. In the experience of Johns, where reflection is a core learning process for graduate nursing students, it takes approximately 12 to 18 months before the process becomes internalized. In this particular study, many of the students were introduced to the concept of reflective journaling. It was beyond the scope of this study to determine whether students were able to begin to internalize the process. What is known from the study is that all students actively engaged in the process. Anecdotal feedback from students
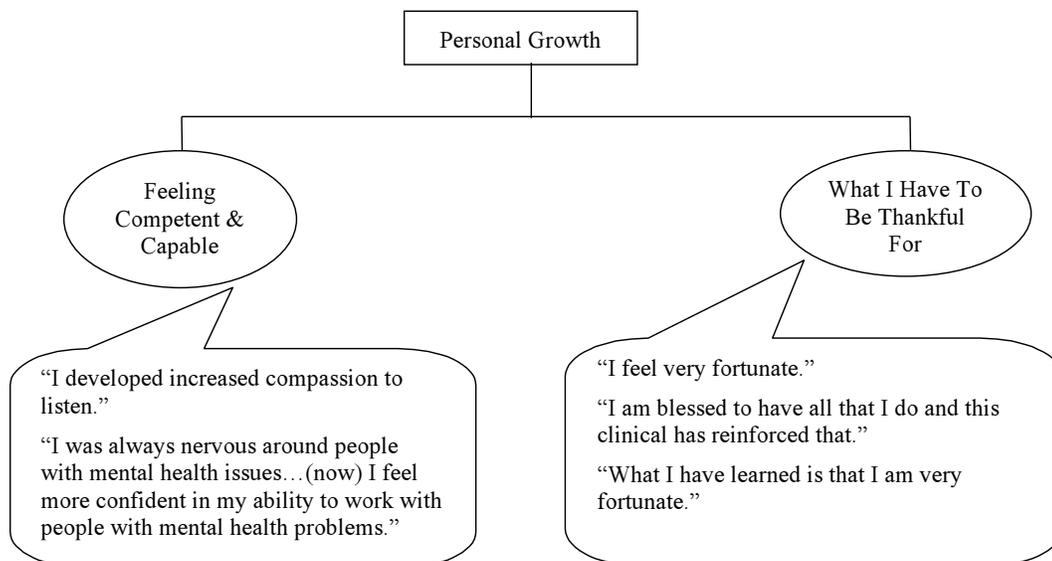

Figure 4. The theme "Personal Growth" consists of students' "Feeling Competent and Capable" working with persons with mental illness and "What I have to be Thankful for" in which students reflected on their personal lives, expressing feelings of thankfulness and feeling fortunate.

in clinical supervision was positive regarding the process of reflective journaling. In fact, a few students began to maintain daily journals. Students were supported in the reflective journaling process throughout the semester. Faculty reviewed the contents of all reflective journals and provided individual feedback to students regarding the emotional issues voiced. In this way, students were supported and guided in their reflective endeavors. Students were also supported by the faculty in dealing with the emotions detailed in the reflective journals. When particular themes were noted in student journals, faculty sought permission from the students to raise these issues for further discussion in the clinical supervision groups, which are a part of the course. Cooke and Matarasso (2005) reported students need regular and guided opportunities to learn reflective skills. In a nursing program in which problem-based learning is fully integrated, students were encouraged to develop their reflective skills for use as mental health practitioners. Through the use of actual clinical case materials, students were able to reflect on the therapeutic relationships with patients as well as their own learning outcomes (Cooke & Matarasso). In the present study, the practice of reflective journaling in students' first graduate clinical course offers an awareness of a process that facilitates their ability to frame and construct understanding from conflicted and ethically challenging future clinical practice experiences in their later coursework and professional endeavors.

Moreover, reflective mental health nursing practice can be challenging for students in that it raises issues for students as they confront feelings of frustration and guilt when facing clinical reality (Cooke & Matarasso, 2005). Encouraging students to engage in the process of reflection requires them to share their inner thoughts and feelings. Similarly, in the present study, students expressed their personal feelings of discouragement and discomfort working with patients in the psychiatric setting. As

Epp (2008) pointed out, it is important for the nurse educator to foster trust with students to enable them to explore and share their thoughts and feelings in this deeper, more meaningful way. In the present study, graduate nursing students were introduced to the concept of reflective journaling at the beginning of the course. They were provided written materials and references regarding reflective journaling and reflective practice. They were encouraged to ask questions about the content and process of this required assignment. Students also were informed of their rights not to participate in the study. Students were also made aware if they chose not to participate in the study, then the contents of their reflective journals would not be analyzed but only shared with the course faculty as a means of clinical supervision.

Advanced practice nursing has been said to exist in a middle-ground, where the medical perspective is covertly valued despite efforts of nursing faculty to frame students' understanding within a nursing perspective (Noveletsky-Rothenthal & Solomon, 2001). Students enrolled in a family nurse practitioner curriculum were enrolled in clinical seminars for 14 weeks. Two seminar groups were used to evaluate the usefulness of structured reflection as a teaching method. The traditional seminar group was structured on the traditional family nurse practitioner tract method of seminar instruction while the second seminar group, the reflective group, was structured around Johns' Model (2006). Both groups of students were expected to maintain weekly journals. At the end of the semester, the students' journals were reviewed for content, depth of insight, and recurring patterns. One emergent theme was that of insight development. This theme centered on the content of the journal. Students in the traditional seminar group focused mainly on issues of role development and role attainment while students in the reflective seminar group focused on situations related to their own values and biases. Students in the reflective

group discussed personal biases in working with specific clients, such as substance abusers. An important finding was that when both seminar groups addressed similar issues, such as professional relationships, the traditional group tended to reflect in more global terms, while the reflective group spoke in more individual terms. In the present study, graduate students focused on relationship with their clients in personal terms, admitting biases, and preconceived notions about working with patients with psychiatric diagnoses. Hence, the process of reflection can be positively transforming in that "…outcomes are advanced self-awareness, meaningful professional practice, improved patient care, and therapeutic relationships" (Cooke & Matarasso, 2005, p. 247). Graduate students in the present study gained a self-awareness that enabled them to become more genuine in their interactions with patients. Hence, the students demonstrated what it means to become more fully human in interactions with others (Hentz & Lauterbach, 2005). Without the structured reflective journaling assignment, the students would most likely have mastered the course content but might not have been prompted to engage in this process of increasing awareness of self and others, which is integral to the advanced practice role.

References

Cooke, M., & Matarasso, B. (2005). Promoting reflection in mental health nursing practice: A case illustration using problem-based learning. *International Journal of Mental Health Nursing, 14*, 243-248.

Craft, M. (2005). Reflective writing and nursing education. *Journal of Nursing Education, 44*(2), 473-476.

Epp, S. (2008). The value of reflective journaling in undergraduate nursing education: A literature review. *International Journal of Nursing Studies, 45*, 1379-1388.

Hentz, P., & Lauterbach, S. (2005).

Becoming self-reflective: Caring for self & others. *International Journal for Human Caring, 9*(1), 24-28.

Johns, C. (2006). Revealing the essence of reflective practice. In C. Johns (Ed.), Engaging in reflection in practice: *A narrative approach* (pp. 3-11). Oxford, UK: Blackwell.

Johns, C. (2004). *Becoming a reflective practitioner* (2nd ed.) (pp. 2-24). Malden, MA: Blackwell.

Kessler, P., & Lund, C. (2004). Reflective journaling: Developing an online journal for distance education. *Nurse Educator, 29*(1), 20-24.

Lauterbach, S., & Hentz, P. (2005). Journaling to learn: A strategy in nursing education for developing the nurse as person and person as nurse. *International Journal for Human Caring, 9*(1), 29-35.

Lincoln, Y.S., & Guba. E. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.

Noveletsky-Rosenthal, H.T., & Solomon, K. (2001). Reflections on the use of Johns' Model of structured reflection in nurse-practitioner education. *International Journal for Human Caring, 5*(2), 21-26.

Polit, D., & Beck, C. (2007). *Nursing research: Generating and assessing evidence for nursing practice*. Philadelphia: Wolters Kluwer Lippincott Williams & Wilkins.

Ruth-Sahd, L. (2003). Reflective practice: A critical analysis of data-based studies and implications for nursing education. *Journal of Nursing Education, 42*(11), 488-497.

Sandelowski, M. (1993). Rigor or rigor mortis: The problem of rigor in qualitative research revisited. *Advances in Nursing Science, 16*(2), 1-8.

Schön, D. (1983). *The reflective practitioner: How practitioners think in action*. New York: Basic Books.

Schön, D. (1991). *The reflective practitioner* (2nd ed.). San Francisco: Jossey Bass.

Wilson, C., & Grams, K. (2007). Reflective journaling and self-care: The experience of MSN students in a course on caring. *International Journal for Human Caring, 11*(1), 16-21.

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