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DIARY WRITING  
– DOES IT MAKE ANY  
DIFFERENCE?

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# Diary Writing

## – does it make any difference?

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## Diary Writing – does it make any difference?

### 1. Introduction

This article is based on an explorative, qualitative study focusing on reflection and diary writing in the nursing education. The study is part of an interdisciplinary, empirical and theoretical research project: Reflection in Practice.<sup>1</sup> Some of the findings from this study were presented at the 13<sup>th</sup> International Reflective Practice Conference – subtitled: Creating Phronesis, which took place in Aalborg, June 6<sup>th</sup> – 8<sup>th</sup>, 2007.

First, I will describe the background of my interest in diary writing as a tool for reflective activities in nursing education. Secondly, I will introduce the theoretical and analytical framework as the conceptual base of this study. Then, shortly, I will present the study and discuss some of the findings. Here the focus will be put on the dynamics between writing, reflecting and developing professional knowledge. Finally, you will find my own reflections about the didactic prospects and challenges using diaries as an educational tool for reflective activities in education.

### Background

Within educations, incl. both theoretical and practical elements, educations within nursing, teaching, midwifery, etc., one often speaks of reflective activities and different reflective tools as "the bridge" that can overcome the so-called gap between theory and practice, "a bridge" that can stimulate and initiate professional development as a whole without elements of contradiction. Reflection and reflective activities form "the key"

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<sup>1</sup> Reflection in Practice is initiated by the Research Unit for Multidimensional learning (RUML) at the University of Aarhus, Denmark, and guided by Prof. Steen Wackerhausen. The theoretical part of the project, Reflection in Practice, is primarily focusing on *reflection* as phenomenon and as concept. The theoretical part is supplemented by 22 empirical studies of reflection as practice. The research project, Reflection in Practise, is an example of research collaboration between University of Aarhus and University College-institutions. Various health educations as well as various pedagogical educations from all over Denmark participate.

that can solve these basic problems, which are often experienced as both frustrating and negative. The aim is to teach the students how to reflect correctly – and how to develop the cognitive capacity for reflection. If the teachers (and the students) succeed reflection will lead to positive changes, development and insights.

On the other hand, there has been an epistemologically founded critique of the scholastic paradigm and the traditional focus on the verbalised, rationalistic and analytical forms of reflection and reflective activities. The critical movement has intended to shed light on the contextual and situational aspects of knowledge and knowledge development, and has focused on other types of knowledge and learning, e.g., tacit knowledge, embodied knowledge, situated learning, experiential learning, etc. (Wackerhausen, 1998, 2007; Wahlgren et al, 2002). Putting it this way the epistemological discussion forms what you can call an anti-Cartesian and anti-reflective movement.

Choosing the diary and diary writing in this study concerning Reflection in Practice must be seen as my attempt to put new perspectives into this discussion and to avoid being neither pro or contra reflection as an educational tool. Six student nurses were asked to write down both their experiences from situations they found relevant and important for learning and their professional interest. They were not told what topics to write about, neither were they told how to structure their writings. The students did not ask how to write. It was important to me that the students got the feeling that their diary was a “free” space without control and assessment. They did not write the diary in order to please me. The idea was to write for their personal sake, gain and benefit. Yet, I was allowed to read their diaries without making any assessments or comments on their writings.

## 2. The concept of reflection

There are many different, sometimes contradictive, traditions, reflection frameworks and concepts of reflection. In the project, Reflection in Practice, we have tried to balance between a totally open framework and a very restrictive one. Being open and inclusive involves the risk that every form of thinking can be named reflection and perceived as reflective processes. On the other hand, being too exclusive and restrictive, you might lose too many, and maybe the most interesting, aspects of reflective activities and processes. Thus in the project, Reflection in Practice, we operate with an open conceptual framework and the reflection has in my study been defined as:

*“En bevidst, omhyggelig og tidskrævende form for tænkning, som er karakteriseret ved en kritisk-konstruktiv, spørgende og svarsøgende holdning” (Wackerhausen, 2007)<sup>2</sup>*

Furthermore, we have chosen a more functional way to talk about reflective processes and the central aspects in reflection: the anatomy of reflection (Wackerhausen, 2007). In the empirical studies of reflection we must, as an analytical principle, relate to 6 basic aspects of reflection. In reflective processes there is always

- Someone reflecting
- on something
- with something
- from something
- for something
- within something

You cannot speak of, analyze or understand the dynamics of reflective processes without thinking through and analysing these different perspectives of the reflective processes.

### Diary writing – does it makes any difference?

This brings me to my own empirical study of reflection and reflective processes. The purpose of the study was to investigate if diaries written by Danish nurse students during theoretical and clinical studies could shed light on the reflection process in practice. What sort of reflective practice does diary writing stimulate if diary writing can be looked upon as a reflective practice at all?

The aim of the study was to:

- Investigate and characterise the reflection processes in diary writing
- Discuss whether diaries written by nurse students during nursing education as educational training can “bridge” the gap between theory and practice
- Illustrate the importance diary writing might have in the formation and development

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<sup>2</sup> The definition of reflection can be translated as follows: “Reflection is a conscious, careful and time consuming way of thinking, characterized by a critical, constructive questioning and answer seeking approach”. (my translation).

of the student's professional knowledge and professional identity

The study was designed as an explorative, qualitative study, based on analyses of diaries written by six nurse students during a four-month period. The analyses of the diaries were supplemented by focus group interviews. Before the interviews the students were asked to read her/ his personal diary. The interview became what we can call: a common reflection-on-reflection, meta-reflection in other words.

To illustrate how the six basic aspects of reflection are a part of the study one can describe the study as follows:

- Someone reflecting (*6 student nurses*)
- on (*their everyday practice*)
- with (*diary writing*)
- from (*the perspective of the student or you can say the perspective of the novice*)
- within (*clinical and theoretical education*)
- for (*developing their professional knowledge and becoming reflective and mindful practitioners*)

### 3. Findings

The empirical material is large and can easily lead to various analyses and findings. This article will focus on (a) the dynamics between the content, i.e., what the student writes in her/ his diary, and (b) the way the student structures her/ his writing, i.e., the structure or the style of writing.

It seems as if there is a close connection between these two aspects: the content and the structure. To show you an example of different writing styles related to different contents I will show you two examples from one of the diaries. The student is given the name, Susan.

August 30<sup>th</sup>

*First patient. Pyometria.*

*Diagnosis: Diabetes, nearly blind, bedsore risk, bilateral amputations.*

*Needs help from two persons.*

*I have been wondering how many problems one patient can have and thus how many problems I have to be aware of. It is insufficient only to handle the problems related to the diagnosis.*

*The patient needs help for her personal needs. I notice how important it is to create a good atmosphere, letting your own peace come through to the patient.*

*It is difficult to remember all the details related to the demands of the patient, when you have just started in the clinical placement— you don't know where things are. I nearly forgot to remove the dishes when the patient had finished her lunch. Important to do that in order to prevent the patient from getting the feeling of being overlooked.*

September 6<sup>th</sup>

*Today I took care of a patient with nausea. The patient was 8 weeks pregnant, and she had to let a doctor examine her. The patient was born in Indonesia and did not speak any Danish, and only a little English. She was anxious that something was wrong and also very nervous of being in the hospital, in general.*

(Susan continues to write about the examination, the communication between the professionals and the lack of communication between the professionals and the patient, the patient (and Susan herself) being nervous and obviously uncomfortable by the situation, Susan's own experiences being pregnant related to the situation of the patient).

*I can imagine how she must have felt, technology all over, and not knowing what was going to happen to her and to her unborn child. I think that it is very important to inform the patient and to do it in good time, so that she can be properly prepared and can become involved in what happens to her and her unborn child. She must not have the experience that things just happen to her and her unborn child, without being engaged. Especially when you know that the patient doesn't speak Danish.*

What are the differences between what Susan writes and how Susan structures her writing August 30<sup>th</sup> and September 6<sup>th</sup>? How can we describe and understand these differences? How will these differences influence, or perhaps develop, Susan's professional knowledge? Does she become reflective at all?

#### 4. Writing, Knowing, and Reflecting

##### Writing

To distinguish between different styles of writing I have been inspired by Bjercknes and Bjørk and their description of two different writing styles, namely: informative writing and expressive writing.

The informative style of writing is characterized as a style of writing, where the purpose is to inform, convince or instruct someone else. You have to describe relations between A and B, to emphasize certain details and to follow certain rules of communication and writing. You have to keep a certain distance to your own personal experiences and relatedness. You write/ talk to someone else.

The expressive style of writing is based on the idea of meaning and closeness. When you write in an expressive style there is a high degree of closeness between thinking and writing, and your style of writing is not based on formal demands and rules of writing. In principle, you write/ talk to your-self.

In her diary, Susan uses the informative style of writing as well as the expressive style of writing. The diary written on the August 30<sup>th</sup> is a typical example of informative writing. Susan informs an unknown reader (perhaps, her clinical counsellor?) about many factual aspects related to her patient, the diagnosis, the needs for assistance and the basic needs for nursing. The writing is very informative and gives the reader the feeling that Susan knows and can describe all the important details about the patient she has been taking care of. You feel safe and confident that Susan knows what to do. The diary written on the September 6<sup>th</sup> is an example of expressive writing. As a reader you nearly become a part of the situation yourself. Susan is obviously very involved and engaged with the patient, and is referring to what she feels as well as her own experiences.

## Knowing

To be able to discuss the question about developing professional knowledge I will relate on Barbara Carper's article: "Fundamental Patterns of Knowing in Nursing". In this article, Carper distinguishes between 4 different types of knowledge in nursing: Empirics, Ethics, Aesthetics and Personal Knowledge. These four patterns of knowledge in nursing are different types of knowledge, but according to Carper:

*"Each pattern may be conceived as necessary for achieving mastery in the discipline, but none of them alone should be considered sufficient. Neither are they mutually exclusive".*  
(Carper, 1978, p. 21).

It will lead too far to make justice to how Carper describes and defines the four patterns of knowledge in this article. Carper wrote the article 30 years ago but it still is very interesting and it puts relevant perspectives to the epistemological "search" for what we can know in nursing and – as an educational question – how we can evolve and stimulate the development of professional knowledge in the nursing education. Questions and aspects still are essential to nursing, now perhaps even more than ever.

I will shortly present Carper's definitions of the four types of knowledge in nursing, and I have to refer to Carper's article for a deeper understanding. Talking about empirical knowledge Carper refers to:

*"Knowledge that is systematically organized into general laws and theories for the purpose of describing, explaining and predicting phenomena [...] seeking and generating explanations which are systematic and controllable by factual evidence[...]".* (Ibid., p.14).

Empirical knowledge is essential to the purposes of nursing, and it gives new perspectives on phenomena of health and illness, but cannot "*encompass or express the uniqueness of the individual*". (Ibid., p.19).

Ethical knowledge – or what Carper names The Moral Component – is focusing on "*matters of obligation or what ought to be done*".

The ethical knowledge:

*"... includes all voluntary actions that are deliberate and subject to the judgement of right and wrong – including judgements of moral value in relation to motives, intentions and traits of character".* (Ibid., p. 20).

Nursing is a deliberate action. The nurse has to be aware of what is involved in making moral choices and being responsible for the choices made. Thus the ethical knowledge goes far beyond just knowledge the norms and codes of the discipline.

Carper makes an analogy between the aesthetical pattern of knowledge in nursing and what she calls The Art of Nursing. According to Carper, The Art of Nursing involves:

*“The active transformation of the patient’s behaviour into a perception of what is significant in it [...] what need is being expressed by the behaviour”.* (Ibid., p.17).

The aesthetical knowledge includes more than recognizing separate details. It is *“the knowing of a unique particular”* and has a transformative and hermeneutical character experiencing and gathering a whole/ a unity of ends and means.

Personal knowledge is characterized as *“subjective, concrete and existential. It is concerned with the kind of knowing that promotes wholeness and integrity in the personal encounter”*. Personal Knowledge is the very base of being able to make an authentic and interpersonal relationship between the nurse and the nurse confronting the patient as, not only, a human being but as a person. An authentic relationship between the nurse and her patient is based on engagement and requires, according to Carper, acceptance of the patient as an individual free to become a person – a “self”. (Ibid., p.19). Carper finds that Personal Knowledge is the most difficult component to master and to teach but at the same time it is:

*“The pattern most essential to understanding the meaning of health in terms of individual well-being”.* (Ibid., p.18).

In Susan’s diary you can find elements of empirical knowledge both at August 30<sup>th</sup> and at September 6<sup>th</sup>, but not to the same degree. The diary from the August 30<sup>th</sup> gives you much information about factual and categorical elements concerning the patient and the care of the patient. In the diary from September 6<sup>th</sup> you get some, but only little, factual information.

Both in the diary from August 30<sup>th</sup> and from September 6<sup>th</sup> Susan writes about ethical aspects. As an example from September 6<sup>th</sup> Susan ends her “story” writing:

*“I think that it is very important to inform the patient and to do it in good time, so that she can be properly prepared and can become involved in what happens to her and her unborn child”.*

She formulates a rule or an ethical principle based on the experience with the patient.

There are no examples of aesthetical and personal knowledge in the diary written August 30<sup>th</sup> but the diary written September 6<sup>th</sup> is, even if the amount of text is little, full of notes that have an aesthetical and personal character. As an example of an aesthetical element Susan writes:

*“I can imagine how she must have felt, technology all over, and not knowing what was going to happen to her and to her unborn child”.*

The writing shows that Susan is very engaged in and aware of her patient’s experience of the situation and stay close to her patient. She points out how important it is to respect and meet the patient as a unique and whole person.

## Writing, Knowing, and Reflecting

This analysis shows how the style of writing is related very closely to the content of the writing (Fig. 1). And, what is possibly the most interesting, it defines the types of knowledge which can be developed/ made visible in the writing.

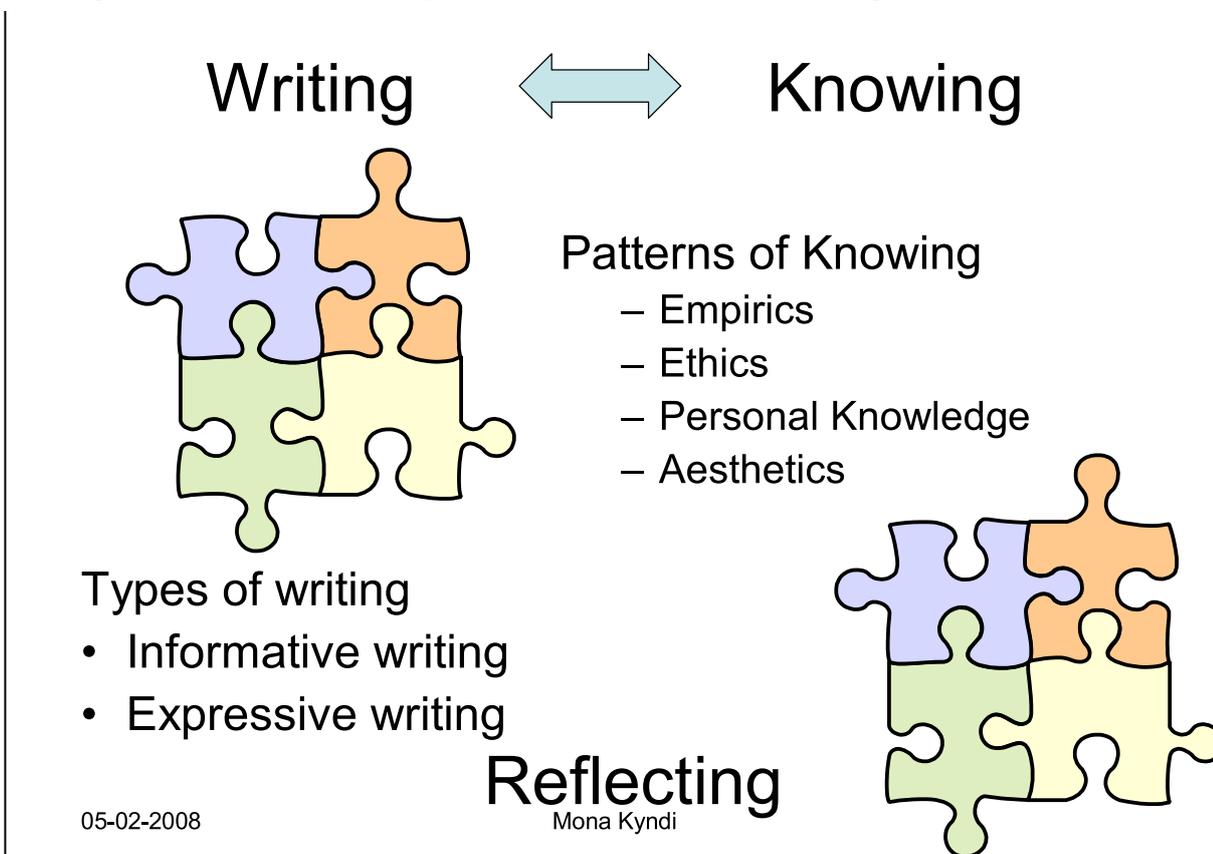


Fig. 1 The dynamics between style of writing, and the patterns of knowledge developed through diary writing.

Even if this article has focused primarily on one of the 6 aspects of reflection, the diary as a reflective tool, you will find some tendencies in the analysis made.

It seems as if the empirical and ethical patterns of knowledge are made visible and dominant in both the informative and the expressive styles of writing. At the same time it seems as if the personal knowledge and the aesthetical knowledge are related to the expressive style of writing.

Susan's diary shows that a student can become reflective through both types of writing. The structure of the writing, the style of writing, obviously makes a difference in the patterns of knowledge and the professional knowledge developed through writing of a diary. If you want the students to become both reflective and mindful through writing, developing aesthetical and personal knowledge, you have to stimulate expressive writing as a necessary style of writing as important and legal as the informative writing.

## 5. Now What?

We often ask the students to reflect and we ask them to write down their reflections. We might even give tools for reflection and teach them reflective methods enabling them to reflect on “the correct way” to make sure that the writing has an “effect”. Maybe we forget to define the purpose of the reflective process and are not aware of the importance of the relationship between the style of writing, the content and the patterns of knowledge developed. Writing surely makes a difference to students but is it the difference you expect? Which patterns of knowledge are underlined as important, and which patterns of knowledge lose importance? Do the students become reflective and mindful at all through the required or chosen writing style? Or do they lose important reflective competences and essential insights through the tools and structures we have chosen as the “best way”?

Does diary writing as a tool for reflection in nursing education make any difference then? Based on the findings of this study diary writing does make a difference! The nature of the difference is, however, more difficult to detect and to describe. The difference depends on the epistemological and pedagogical framework specified by the chosen or constructed tool for reflection. If you choose a very structured way of reflection you will stimulate the informative way of writing and the development of analytical thinking and empirical knowledge. If you choose a more open and more individual way of reflection you stimulate the expressive writing and the development of the personal and aesthetic aspects of knowledge. Becoming a professional, a reflective and mindful, practitioner

demands empirical, ethical, and aesthetical as well as personal knowledge. As a professional educational institution, stimulating reflective processes and activities, you have to stay reflective your-self and never stop asking: What is gained and what is lost?

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