Family eJournal: benefits of online guided group journaling for women

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Abstract

Purpose – The purpose of this paper is to examine the benefits of online guided group journaling for an individual’s mental health. The authors focused on a specific social networking platform called Family eJournal.

Design/methodology/approach – In total, 51 female participants were recruited from an American university with an average age of 20 years. Participants completed an online survey called the Relationship and Lifestyle Questionnaire. The questionnaire utilized two subscales, the Multidimensional Scale of Perceived Social Support (Diener et al., 1985) and the Depression and Anxiety Stress Scale (Lovibond & Lovibond, 1995). In addition, the questionnaire also measured several items related to an individual’s health choices such as smoking or dieting. Half of the participants in the study were randomly assigned to the Family eJournal user group.

Findings – Following the ten-week time period, the Family eJournal group reported significantly higher social support and lower scores of depression compared to the non-Family eJournal control group. However, there was no difference between groups in regard to anxiety or health choices. Implications of online group journaling and future directions are discussed.

Research limitations/implications – Current findings suggest that online journal sharing may provide a buffer from depression. For those who experience a negative perception of social experiences, building and maintaining interpersonal relationships becomes increasingly difficult, furthering the experiences of social isolation. Therefore, the ability to self-disclose and share personal experiences is crucial, albeit difficult to express (Heinrich and Gullone, 2006; Wei et al., 2005). As depression increases, individuals may alter the types of social, cognitive and emotional behaviors they employ. In turn, online asynchronous communication platforms may foster a reduction in discomfort in self-disclosure and increase positive perceptions of social experiences.

Practical implications – The findings suggest that the SNS platform Family eJournal may provide a simple opportunity to improve family relationships. Asynchronous online communication is immune to drawbacks and barriers associated with traditional means of communication such as busy schedules and geographic disparity (Perron, 2002).

Social implications – Online social networking may be a beneficial way to connect with others and facilitate positive mental health.

Originality/value – While the authors have known the benefits of journaling for some time, few studies to date have examined the potential benefits of asynchronous communication via online journaling. Online journaling platforms may provide an attractive avenue for enhancing the well-being for individuals who have limited opportunities to communicate in real time.

Keywords College students, Online, Journaling, Mental health

Paper type Research paper

Socioemotional selectivity theory specifically suggests that as people age, they become more selective with their interpersonal choices (Zhang et al., 2011). Although this may result in the development of closer relationships, it also decreases the quantity of close relationships for adults. Individuals begin to invest more in closer relationships but are also likely to feel a bigger sense of loss if difficulties arise within that relationship (Zhang et al., 2011). When a relationship dissolves, experiences of loneliness likely increase, and may last for a longer amount of time if a new relationship does not fill its place (Zhang et al., 2011). Bowlby (1973) speaks to how separation often promotes symptoms of depression, specifically through high levels of loneliness. Frequent experiences of separation in a variety of facets (i.e. professional, educational, familial and intimate relationships) attributed to the exploratory and unstable nature of young adulthood likely contribute to heightened levels of depression and social isolation.

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Many lines of research suggest loneliness and social skills have a negative correlation, where a lack of self-disclosure is present (e.g., Wei et al., 2005). Alexithymia, which can be described as a cognitive impairment that hinders the ability to verbally express emotions fluidly, is linked with individuals’ self-report of loneliness and depression (Frye-Cox and Hesse, 2013). The experience of intimacy and self-disclosure is beneficial and necessary in order to satisfy social needs and build social relationships. Specifically, emotional self-disclosure, the ability to share distress and core aspects of one’s identity, is vital to not only building relationships but also to decrease experiences of loneliness and depression (Laurenceau et al., 1998). Therefore, self-disclosure has been found to also negatively correlate with loneliness and depression. However, self-disclosure is a social skill necessary to build interpersonal relationships, which individuals who experience social isolation avoid (Heinrich and Gullone, 2006; Wei et al., 2005). Young or emerging adults, filled with exploration but accompanied by levels of instability, separation and ultimately loneliness and depression, experience difficulty in disclosing to others.

In addition to developmental differences, depression is found to be prominently expressed amongst females. Although studies show that loneliness is experienced by both males and females, Borys and Perlman (1985) and Rokach (2000) found that females are more disposed to admit to their subjective feelings and more likely to be diagnosed with depression. Similarly, in studies implementing the UCLA Loneliness Scale, which is the most commonly used measure for loneliness, females are also more likely to report loneliness than males (Heinrich and Gullone, 2006).

Although extensive research has found that females are more susceptible to experiences of internalizing disorders than males across developmental stages, specific factors related to depression and anxiety warrant further investigation. Specifically, personality traits, social background and even physical factors are mediators that have been noted to explain the prominence of depression in females (Leach et al., 2008), but specific symptomatology of internalizing disorders, such as loneliness, has seldom been explored. Features of loneliness are often referenced within the context of females experiencing depression and/or anxiety, as a symptom of the disorder, but not in light of chronic loneliness as its own experience. Since females may have a heightened susceptibility to experience internalizing disorders, it is important to explore potential interventions that may alleviate or buffer the development of depression and/or anxiety.

Studies on self-disclosure are increasingly examining communication on internet platforms. Social networking sites (SNSs) have been around since the late 1990s, and they have literally played a daily role in our lives by allowing us to stay connected with friends and family across the globe (Wink, 2010). Facebook for example, created by Mark Zuckenberg, was originally created as a way for Harvard students to connect (Wink, 2010). Little did Zuckenberg know that Facebook would soon expand to a user network extending outside of college communities and become a global phenomenon (Wink, 2010). Facebook and other SNSs are now embedded in our society as they appeal to our abilities to connect and interact with family, friends, individuals worldwide. SNSs have also provided opportunities to connect with individuals of similar demographics, interests and/or location (Dredge et al., 2014). They also provide access to the sharing of images, profiles, text, videos, etc., and allow for the opportunity to grow and maintain relationships (Lin and Lu, 2011).

SNSs may be categorized into three general categories: generic social networking, SNSs for children and SNSs for professional use in the business world. Generic SNSs include but are not limited to Bebo, Facebook, MySpace, Xanga, Friendster and Family eJournal (Wink, 2010). Generic SNSs are the most popular and widespread as they cater to demographics from all three categories. While SNSs share many common features, we are only beginning to understand the potential mental health consequences.

According to Rowe (2012), “research has shown that journaling as an individual continues to grow as an effective tool for healing and self-discovery” (p. 16). Journaling has also been shown to be an effective tool for reducing an individual’s anxiety and depression levels (Pennebaker, 2004). Therapists have reported that journaling gives their clients a way to freely express an individual’s fears, feelings and thoughts (Rowe, 2012). When we make a written record of our
fears, thoughts and emotions, we may feel free from judgment. Journaling as a group can also create a sense of well-being and reduce feelings of detachment (Rowe, 2012).

In addition to expression of fears, thoughts and emotions, journaling may also promote healthy reflection (Roberts, 2007/2008). In turn, the benefits may result partly from acquiring better insight, coping, interpersonal skills and understanding. While we have known the benefits of journaling for some time, few studies to date have examined the potential benefits of asynchronous communication via online journaling. Online journaling platforms may provide an attractive avenue for enhancing the well-being for individuals who have limited opportunities to communicate in real time. As a result, we predicted that users of a specific online journaling communication platform would report higher degrees of social support, less depression and anxiety, and lower risk of unhealthy behaviors compared to a non-journaling control group.

Method

FamilyeJournal (FeJ) is an online social networking tool where families can connect and continue to build stronger relationships by in asynchronous communication by computer, smartphone, or tablet (“About FEJ,” 2014). Unlike most “free form” SNSs, FeJ provides each user with specific prompts or questions to answer. It is considered a “shared group journaling” platform and each group is closed to outside users. Also, users within the group can only accesses other responses following active participation to a prompt or question. Essentially, the system disallows online “lurking” behavior within the platform. Each entry only requires about five to seven minutes to complete, and recommended usage is a minimum of three times a week. In a previous study, active users reported overwhelmingly positive results related to family cohesion (Asbury and Strauss, 2014). The prompts and questions are aimed at helping their users share their feelings and thoughts about everyday life events. They are non-confrontational and non-controversial without an underlying agenda (e.g. political, religious, etc.). In turn, the platform is intended to be a therapeutic tool used to strengthen and improve family connections (Asbury and Strauss, 2014). Sample questions include: “Describe how you feel today; what was your first thought or feeling when you awoke this morning; how would you define a really good conversation?”

A total of 51 female college students from a women’s US university with an average age of 20 years agreed to participate. All participants were informed about potential risks following approval of the host university’s institutional review board. The 51 females completed an online survey called the Relationships and Lifestyle Questionnaire (RLQ) that included a demographic section, the Multidimensional Scale of Perceived Social Support (Diener et al., 1985), the Depression and Anxiety Stress Scale (Lovibond and Lovibond, 1995), and several other items related to health choices created by the researchers (e.g. smoking, diet choices). Half of the participants were randomly assigned to the FeJ user group and asked to invite three to five friends and/or family members to FeJ, and answer questions from an online platform three times weekly for ten weeks. At the end of the ten-week period, all participants again completed the RLQ. Upon the conclusion of the study, the control group was given information about FeJ and instructions for creating an account.

Results

Separate sums of Likert scale items were calculated for social support, depression and anxiety before treated as interval-level dependent variables (see Support and Affect Items in the list “Relationship & Lifestyle Questionnaire Support and Affect Items”). Health choices were also treated at the interval level of measurement and calculated as sum totals of unhealthy behaviors (note: some items reverse-coded; see list “Relationship & Lifestyle Questionnaire Health Items”).

The repeated measures mixed-design ANOVA was performed to examine the differences between groups. One hypothesis was supported as the FeJ group reported significantly higher
family cohesiveness at time 2, with no change from the control group, $F (1,100) = 6.92, p < 0.05$ (see Figure 1). Similarly, support for the depression hypothesis was also suggested as the FeJ group reported lower scores at time 2, $F (1,100) = 5.71, p < 0.05$ (see Figure 2). However, no differences between groups were found with regards to anxiety or health choices ($p > 0.05$).

**Discussion**

Our findings suggest the SNS platform FeJ may provide a simple opportunity to improve family relationships. Asynchronous online communication is immune to drawbacks and barriers associated with traditional means of communication such as busy schedules and geographic disparity (Perron, 2002). Furthermore, the current findings suggest that online journal sharing may provide a buffer from depression. For those who experience a negative perception of social experiences, building and maintaining interpersonal relationships becomes increasingly difficult, furthering the experiences of social isolation. Therefore, the ability to self-disclose and share personal experiences is crucial, albeit difficult to express (Heinrich and Gullone, 2006; Wei et al., 2005). As depression increases, individuals may alter the types of social, cognitive and emotional behaviors they employ. In turn, online asynchronous communication platforms may foster a reduction in discomfort in self-disclosure and increase positive perceptions of social experiences.

**Figure 1** Family cohesion

![Figure 1](image1)

**Figure 2** Depression

![Figure 2](image2)
We are uncertain why we found no differences in levels of reported anxiety and health choices. Henry and Crawford (2005) found anxiety to be related to a general state of negative affectivity. Sufficient construct validity was uncovered and the factor was found to be orthogonal to the other dimensions. However, they suggest the possibility that anxiety as measured on the DASS-21 taps into a broader source of psychological distress. Health habits may fluctuate daily so perhaps these constructs are less resistant to change within a ten-week period of time.

Future studies should examine potential gender and cross-cultural differences before we can confidently generalize our results. The design of this study did not include a diverse sample as it only had female participants from a women’s university. Future studies should examine potential gender and cross-cultural differences before we can confidently generalize our results. Also, we have no measure for the usage of other types of SNSs. Any replication should include the frequency and degree of usage of other SNSs such as Facebook and Instagram. Despite these shortcomings, as online networking applications continue to grow, we are encouraged by the potential therapeutic benefits suggested by our findings.

Relationship & Lifestyle Questionnaire Support and Affect Items:

1. Social support:
   - There is a special person around when I am in need.
   - I get the emotional help and support I need from my family.
   - I have a special person who is a real source of comfort to me.
   - I can count on my friends when things go wrong.
   - I can talk about my problems with my family.
   - I can talk about my problems with my friends.
   - My friends really try to help me.

2. Depression:
   - I could not seem to experience any positive feeling at all.
   - I found it difficult to work up the initiative to do things.
   - I found myself getting agitated.
   - I was intolerant of anything that kept me from getting on with what I was doing.
   - I was unable to become enthusiastic about anything.
   - I felt I was not worth much as a person.
   - I felt life was meaningless.

3. Anxiety:
   - I was aware of dryness of my mouth.
   - I experienced breathing difficulty (in the absence of physical exertion).
   - I experienced trembling.
   - I felt that I had nothing to look forward to.
   - I felt I was close to panic.
   - I was aware of the action of my heart in the absence of physical exertion.
   - I felt scared without any good reason.

Relationship & Lifestyle Questionnaire Health Items:

- I have used illegal drugs.
- I have problems sleeping.
I have maintained a consistent diet and not binged on unhealthy foods.
I have a healthy diet.
I exercise.
I engage in behaviors I regret.

References


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