Self-Coaching Emotions on the Journey to Wellness

By Jennifer Lynne Bird Rosarian Academy

I'm back in physical therapy again. At least my neck chooses to feel pain in different ways each time. This time, a facet joint on the right side has decided to lock itself in place. A discussion with my physical therapist, Eric, makes me realize I have a long way to go.

Eric: Relax.

Me: I am!

Eric: Not even close.

Eric and I have coauthored articles together and given presentations on stress management (e.g., Bird & Wanner, 2014; Bird et al., 2023). His expertise makes him the best physical therapist to help me, and there is no one I would trust more to manipulate the joints in my neck. There is nothing wrong with the treatment plan or the exercises.

To quote a Taylor Swift (2022) lyric, "I'm the problem; it's me."

As both a teacher and a National Board Certified Health and Wellness Coach, I thrive on helping other people. I find it ironic that I can't follow my own advice, but like others in helping professions, I often sacrifice my own well-being in service to others. Grant (2023) believes that "teaching others can build our competence. But it's coaching others that elevates our confidence. When we encourage others to overcome obstacles, it can help us find our own motivation" (p. 137). Therefore, I'm reflecting on my past experiences and turning them into teachable moments with the hope they may help others in the future. I frame this narrative in the context of how readers can navigate their emotions during recovery from physical pain.

CURRERE CONNECTIONS

I consistently chronicle my life as a series of stories. Clandinin and Connelly (2000) define narrative inquiry and explain, "We think of chronicles as the sequence of events in and around a particular topic or narrative thread of interest" (p. 112). One of my favorite parts of research involves examining a story, either mine or someone else's, and finding the narrative thread that weaves all the parts together. Both narrative inquiry and *currere* serve as scaffolding for the current narrative. Connelly and Clandinin (1988) add that *currere* "points to processes of experience" (p. 20). With every *currere* narrative, writers regress into the past, progress into the future, and explore the present through the lenses of both analysis and synthesis. I frame my *currere* composition as what I learned from exploring my emotions during my physical therapy experience in the not too distant past and how I can apply the lessons to help both myself and others in the future. One of my former professors at Miami University, Tom Romano (1995) writes, "I see no dichotomy between analysis and synthesis" (p. 6). He elaborates, "Good writing, regardless of the mode of

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discourse, causes writers to think. That thinking involves a productive dialectic between analysis and synthesis" (p. 6). I agree, which explains why I intend to dovetail the analysis of breaking down concepts and the synthesis of putting them back together.

I first realized that my stories possessed transformative power during the worst time of my life. A month after my mom's death, I was curled up in a corner chair of Denise Taliaferro Baszile's graduate class, determined to finish my degree while drowning in grief. When asked about my progress on my paper, I honestly replied, "I have done nothing." Instead of getting angry with me, Denise kindly advised me just to write—write about my mom, my emotions, anything that was on my mind. That evening, through my tears, I started on the road of expressive writing that would eventually define my career. Shiro (2023) explains, "Writing our narrative or telling our story is the way we make sense of our life—how we interpret our experiences, either as they happen or as we're able to reflect on them afterward" (p. 215). Fast forward to the present. I needed to make sense of my inability to relax. I mentioned it to a friend who replied that of course we don't relax because we're teachers.

MINDFULNESS MOMENTS

After numerous years teaching, I've become an expert at hiding my feelings during the school day. This becomes necessary because teenagers bring their heightened emotions to my classroom, and I don't need my emotions adding to the storm. Since their emotions are chaotic, mine need to be calm. Interestingly, colleagues and students praise me for how calm I am. Neff (2021) cautions, "The real problem comes when people distance themselves from their own emotions unconsciously. If we aren't aware that we're shutting down to protect ourselves, we never have the opportunity to process the empathic pain we've experienced" (p. 261). I became too much of an expert in distancing myself from my emotions and became too busy with the routines of the school day to process how I felt. My neck, however, told a different story.

I said I felt fine, but my body felt otherwise. Brown (2015) notes that "recognizing emotion means developing awareness of how our thinking, feeling (including our physiology), and behavior are connected" (p. 48). On a typical school day, I may feel annoyed about a last-minute schedule change. If I show stress, my students show stress, so I push away that emotion, put on a smile, and share the new schedule with the students. They react to the schedule change, and now I notice their emotions along with mine but appear calm, even while my mind races to redo my plan for the school day. Doyle (2020) shares from her experience, "My superpower is empathy, which means that I am often unable to distinguish between what is happening to other people and what is happening to me" (p. 144). I am the same. If one of my family, friends, colleagues, students, or even a stranger I interact with briefly in a grocery line feels something, I feel it too. Over the years, I learned to set boundaries, but if I feel tired, all the emotions flood in and threaten to drown me. My body registers the stress, but the school day marches on without the opportunity to write, exercise, or dissipate the tension in a healthy way. Rankin (2022) explains,

Most people are poorly equipped to even know our feelings, much less feel them in a healthy, skillful way without numbing, repressing, or getting so carried away by our emotions that we either explode or fall apart and can't function. (p. 147)

Usually repressing wins as my default option, but numbing (unnecessary online shopping) can occur or having a meltdown, as I did on the day I started silently crying in the middle of a physical therapy session. I may have scared the other patients, but thankfully all the therapists in the room showed understanding.

Crying during physical therapy served as a motivating moment to figure out what I needed to do. The exercises worked, and physically, I started to feel better, but I needed to get out of my own way and design a plan to feel better emotionally. I'm a supporter of psychotherapy; I see my primary care doctor for a physical health checkup, so why not see a doctor for a mental health checkup? Ever since I needed to talk to someone after the death of my mom, I have checked in with a psychiatrist several times a year. Thankfully, no major life events happened during my months of physical therapy, but I scheduled a mental health visit for some insights. The diagnosis? From a mental health perspective, I showed resilience and, currently, experienced no trauma. All excellent news. I did need to focus on keeping my thoughts in the present moment instead of thinking too much about the past, which I couldn't change, or the future, which I should prepare for but not overthink until it arrives.

Mindfulness is a process that helps people remain in the present moment. Mindfulness expert Kabat-Zinn (2023) explains, "You can think of mindfulness as pure awareness. Operationally, I define it as the awareness that arises from paying attention on purpose in the present moment and non-judgmentally to whatever arises in the field of experience" (p. 58). Neff and Germer (2024) concur, "Mindfulness provides clarity by allowing us to be directly aware of our experience rather than filtering it through the lens of thought" (p. 70). All that sounds great in theory and makes a difference in people's lives, but it didn't in mine.

Tried yoga. Couldn't shut off my mind.

Tried meditation. Couldn't shut off my mind.

Tried centering prayer. Couldn't shut off my mind.

You get the point.

I realized I needed to take the theory of mindfulness and practice it in my own way by examining my emotions and writing about them. I don't like the term "manage" when discussing emotions. Yes, I believe it is possible to manage stress. But emotions, which are part of me, need examination. Cameron (2018) argues, "Consciousness of and openness to emotions—no matter if they are pleasant or unpleasant—helps you regulate your response, rather than letting the feelings whip you around" (p. 119). I prefer the term "regulate," because it implies adjustment and flexibility.

RELAX AND WRITE

I looked forward to physical therapy because I knew it would help me heal; I also kept an optimistic attitude and believed that in time I would get better.

So why couldn't I relax?

Carmichael (2021) argues, "Many high functioning people sometimes struggle to slow down and relax" (p. 126).

You think?

There was more to my story than that obvious fact.

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I couldn't shut off my emotions. I realized this by my last physical therapy session, but it would have been nice if this realization occurred to me earlier in my treatment process. My body



completed the exercises, but my mind hadn't left the classes I taught earlier in the day, what my family planned to do the following weekend, and how I felt about all of it.

My students and I once had an interesting conversation of what could happen if people answered the question, "How are you?" with anything other than the expected "good" or "fine." Most people wouldn't be prepared for it. When we casually ask someone how they are doing, we intend it as an introduction or courtesy. If another person answered the question with "you know, I'm having a terrible day and barely hanging on here," then we would have to deal with the other person's emotions. Hollis (2025) believes, "How are you? Is an essential, soul-searching inquiry" (p. 176). Nevertheless, people (including myself) often push their true feelings aside in order to maintain politeness and social expectations.

To feel better, physically and emotionally, we need to share how we really feel with people we trust. Brown (2010) argues, "Our stories are not meant for everyone. Hearing them is a privilege, and we should always ask this before we share: 'Who has earned the right to hear my story?'" (p. 47). As a compassionate clinician, Eric had earned the right to hear my story. Learning it would help him adjust the treatment plan to better help me heal. However, I didn't know the other patients in the clinic, and they didn't need to know details about my life. So, I wrote everything down on a sheet of paper and handed it to Eric before each session.

This was nothing new. Eric and I were part of a team who conducted groundbreaking research on this exact topic (Bird et al., 2023). We concluded,

This researchable scenario demonstrated how patients who articulated a positive outlook when writing about their experience and when identifying obstacles that could prevent them from achieving a successful outcome also perceived that they had experienced greater healing as was validated using standardized physical therapy assessments. (p. 49)

Our research added to the existing literature, which illustrates that writing serves as a contributing factor to both emotional and physical healing. Pennebaker and Smyth (2016) explain, "In some cases, expressive writing may not directly influence biological processes at all but rather shake people out of a cycle of secrecy and worrying about their health" (p. 48). If I didn't need to worry about my health, why wasn't writing calming me down like it usually did?

I realized the answer involved the time when I wrote my notes about how I was feeling. With my busy schedule, I gave myself no time to process my writing. Bernstein (2024) recommends, "Let it all out. This is a chance to unleash your emotions on paper, allowing for the release of any pent-up feelings" (p. 140). I vented my emotions but did not give myself the opportunity to pause and appreciate the relief I felt before I hurried to the next thing in my day. I typically drove directly from a busy day of teaching to the physical therapy clinic, meaning I wrote my notes the night before or sometimes during a too short, fifteen-minute lunch break while I simultaneously ate, checked email, and studied lesson plans for my afternoon classes. Consequently, by the time I got to the clinic after school, my mind was still reeling from the lesson I should redo because students struggled with comprehending the novel we were reading, the lack of sleep because of the neck pain, and the emotional exhaustion because I love teaching but had nothing left to give at the end of the day. Any healing benefits from my writing session disappeared by the time I arrived at the physical therapy clinic, and my muscles felt tension again. I found that if I waited to write until immediately before physical therapy, I felt better.

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Writing gave me the opportunity to process my feelings by actively putting words on paper instead of passively observing my thoughts during other forms of mindfulness. Fallon (2020) argues,

Writing comes from that place—from the thoughts and feelings you didn't even know you had. The ones buried beneath your consciousness. The ones with the greatest leverage to improve your physical health, to change your habits and patterns, to break old ties, to build new neural connections and forge a new path forward. (pp. 52–53)

When I write a narrative, I critique every word choice and punctuation mark. Conversely, when I write in my journal, I let the feelings fly and sometimes am not even aware of what I write until I read it.

Part of the tension with any *currere* composition that involves narrative inquiry exists in which parts of the story to include and exclude. Each subsequent bullet point possesses the potential for additional exploration. I choose to leave them as a list to inspire you as the reader to use expressive writing in your life. Fallon (2020) states, "The research is clear: writing can help us manage negative emotional states, process our lives, and even heal from trauma" (p. 154). Expressive writing helped me:

- Navigate my grief after my mom's death
- Articulate physical symptoms to share with a member of my medical team
- Ease my anxiety
- Make difficult decisions
- Find the courage to have challenging conversations

As a writing teacher, I observed expressive writing help others as:

- Physical therapy patients used writing to cope with the emotional side of healing
- Families of hospital patients used writing to think of questions for medical teams
- College, high school, and middle school students used writing to manage anxiety
- Teachers used writing to process challenging days
- Church ministry groups used writing to compose prayers for healing

SONG

My process of using both writing and mindfulness as emotional regulation can be written in a journal, or if time or circumstances don't permit writing, reflected on with thoughts in the moment and written about later.

Originally when describing the process that worked for me, I thought of the acronym "SAIL." I paused to buy several bracelets (numbing my emotions with mindless shopping) on Amazon, one with a sailboat and one with a wave. Look at me! When I wear my bracelets, I will remember what I learned! This unsurprisingly didn't solve anything. Time for a new plan. I reflected on my current *currere* composition, wondering if my narrative thread held everything together. This writing needs to sing! I remember my dissertation advisor, Tom Poetter, telling me that good writing sings. Singing occupied my mind significantly with all the church choir

rehearsals leading up to the Christmas Eve service. That reminds me, which songs will I add to my "revision mix" playlist as I continue writing and revising?

SONGS—The acronym for how I used my emotions to help me heal.

Stop. Observe. Name. Go on. Survey.

When the emotions took over during a physical therapy session, during the school day, or any other time I can't process them, the first thing I need to do is stop. David (2016) explains, "By opening up that space between how you feel and what you do about those feelings, emotional agility has been shown to help people with any number of troubles" (p. 5). The space refers to the pause between an emotion and an action. I can feel sad that I won't get to visit family this weekend, but I can stop before I complain about it or redirect that sadness in an unhelpful way, such as crying at the physical therapy clinic.

Next, I need to observe by accepting my emotions. Cain (2022) writes, "The ability to accept difficult emotions—not just observe them, not just breathe through them, but actually, nonjudgmentally accept them—has been linked repeatedly to long-term thriving" (p. 95). Being a non-judgmental observer is part of mindfulness. I apply it to accepting my emotions and not overthinking them. Right now, I feel sad. It's okay to feel sad. One moment of sadness doesn't mean I am not happy with my life. People can't be positive all the time. By observing and accepting my emotions, I control them instead of them controlling me.

After accepting my emotions, I need to name them and identify the situation causing them. Boardman (2021) notes, "Evidence suggests that people who are able to recognize and experience positive emotions alongside negative ones are more resilient and better equipped to handle adversity" (p. 144). Feeling positive emotions promotes healing, but ignoring negative emotions can lead to false positivity and repressing emotions. Right now, I feel sad. Is it just sadness? I'm not hungry or angry? Feels like only sadness because I don't want to miss time with my family. Anything else that's causing the sadness? I don't think so. By naming my emotions and identifying the cause, I create a solvable problem instead of allowing my feelings to perpetuate.

Then, I need to go on and let go of the emotions so I can focus on the present moment and what I need to do. Carter (2015) argues, "I'm all for feeling deeply, even if the emotions are difficult or negative, but we also need to move on once we've felt what we need to feel" (p. 111). It's okay to feel my emotions, but not to remain stuck in them. In the present moment, I need focus on physical therapy and feeling better physically. I feel sad, but it is because of a temporary event, not a permanent problem. If I can't see my family this weekend, I need to rearrange my schedule or eliminate something I don't really want to do so this doesn't happen again. Going on with life does not mean ignoring the emotions or repressing them but instead reframes a situation to give me control over it.

Before too much time passes, I need to survey the situation and see if it represents an opportunity to make larger changes. Milkman (2021) states, "Our beliefs can change our emotions. If you have positive expectations, that often generates positive feelings, which have a host of physiological benefits such as alleviating stress and reducing blood pressure" (p. 157). Was feeling



sad about not visiting my family a simple scheduling conflict or a sign that I need to rearrange my priorities? Is there anything else about this event I need to process by talking to someone or writing about it in order to reach a resolution and learn from the experience? Further reflection led me to realize I had become too busy. There is no space to enjoy life when rushing from one thing to another, and time with my family means more to me than another item on a to do list. It led to an examination of my schedule, and while I can't say I will never be sad again, hopefully I will not be sad because of the same exact experience.

THE VALUE OF JOY

While completing research, I looked through one of my mom's old books. She placed a bookmark on the page with a quote from Beck (2001), that suggests, "once you've identified your current emotional state, ask 'Why?' until you've figured out what's making you feel that way" (p. 142). On her bookmark, she wrote, "always think of one more why." I smiled as I placed my bookmark next to hers, grateful for one more piece of advice from her.

It makes sense. I feel sad. Why? I can't visit my family this weekend. Why? I have lesson plans to finish. Why? Because school was busy this week. Why? An unexpected assembly. Why?

The school schedule was out of my control, and I didn't have time to get everything done, and now I'm upset because my dad is recovering from health issues, and I know spending time with my family will help me.

I found the answer. I visited my family and arrived at school at 6:30am Monday to finish the lesson plans. Thanks, Mom.

At the start of the pandemic in 2020, I kept a gratitude journal. I listed five things I felt grateful for every day. The practice faded once the pandemic did, but until I found the journal recently, I forgot how much it helped me. Brown (2012) shares from her research, "Participants described happiness as an emotion that's connected to circumstances, and they described joy as a spiritual way of engaging with the world that's connected to practicing gratitude" (p. 123). Emotions such as sadness can coexist with the gratitude felt for life. Sometimes joy moments happen spontaneously, such as when the veterinarian pulled off a medical miracle, and I brought my cat Lucy home for Christmas. It also becomes important to seek moments of joy every day. Sethi (2023) discusses her definition of a spiral of joy and elaborates, "When you rewrite your experiences of gratitude in detail ... your brain feels as if it's really happening, all over again" (p. 160). I decided to restart my gratitude journal, even if instead of five things each day, I only wrote one sentence about what the day meant to me.

CLINICAL AND LIFE IMPLICATIONS

At my last physical therapy session, Eric told me my neck muscles had relaxed more. I celebrated being pain free. While *currere* compositions celebrate narratives of experiences, they also teach. Miller (2024) writes, "One of the reasons stories are so fulfilling is because of the transformation the hero experiences after their journey" (p. 230). Here are the lessons I learned on my journey:

- 1. *Track your moods.* Physical therapy clinics have intake forms for the therapists to evaluate physical pain. I think they should consider adding an emotional intake form assessing emotions to provide clinicians with additional information to help patients. I recommend that anyone going through physical therapy, or any kind of medical treatment, find an app such as Daylio, which asks users to rate daily moods by choosing a happy face, a sad face, or other options. Also simply draw a smiling face or frowning face can help describe our moods.
- 2. *Create your own gratitude list or joy list for each day.* Writing teacher Cameron (1998) shares that when "writing 'just the facts,' feelings inevitably arise, as do insights and deep connections" (p. 228). Writing can help us feel better, and it may provide insights to share with medical teams.
- 3. Manage stress. Stress can magnify emotions, but that isn't helpful. Tindle (2013) advises,

When we are emotionally sober we remain alive to our own experiences, but do not become intoxicated by them, which ... activates your stress response systems and can lead you to make poor choices for your health and aging. (pp. 108–109)

Eric and I designed a chart of stress management strategies that may be helpful. (Table 1).

- 4. Use mindfulness techniques that help you. You may be better at yoga, meditation, or centering prayer than I am. If so, they are all great methods of mindfulness. Engaging in creative activities, such as the art process of coloring designs called mandalas, can also lead to mindfulness. Beck (2025) explains, "Deliberately entering and moving further into the creativity spiral can pull us out of the anxiety spiral" (p. 24). I found the app Hallow, which provides music and prayers to occupy my mind so I don't have to sit in silence. There are many mindfulness methods to choose from.
- 5. *Practice SONGS*. Stop, Observe your emotions, Name your emotions, Let go, and Survey the situation. We need to control our emotions, or they will control us. That said, it's okay to cry, even in a physical therapy clinic.

FULL CIRCLE NARRATIVE

Thankfully, my neck remains pain-free, although an unfortunate miniature golf mishap (yes, you read that right) landed me back in physical therapy six months after I left. Eric: Still working on relaxing?

Me: Getting there.

I remain a work in progress. On to the next chapter.

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MY ARTICLE GRATITUDE LIST

To Dr. Eric Wanner, Dr. Jayne Brahler, Dr. Tom Poetter, Dr. Denise Taliaferro Baszile, and Dr. Tom Romano for helping my writing and research sing, and to my family (who I now visit much more frequently).

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TABLE 1: STRESS MANAGEMENT STRATEGIES

(COMPILED BY JENNIFER BIRD AND ERIC WANNER) (Bird & Wanner, 2014; Cameron, 2018; Fallon, 2020; Pennebaker & Smyth, 2016)

Make list to identify stressors in life

• Writing something down makes it easier to identify and process feelings

Write about the stressors

• Write freely about a topic on the stress list

Practice meditation

• Find a comfortable place, close eyes, focus on breathing, don't dwell on your thoughts

Exercise

• Use recommendations from CDC (2023) and ACSM (2025) guidelines

If temporary stress becomes long-term

• See mental health or emotional health therapist

Eat a healthy diet

• As recommended from a registered dietician

Do not look at phone before going to bed

• Including looking at texts, emails, social media, which could prevent you from sleeping

Make a list of small things which bring you joy

• Spend time each day focusing on this list

Set a sleep schedule

• Use sleep recommendations as listed in CDC (2024)

Focus on the present moment

• Pray, spend time in nature, or choose another spiritual practice