

**Working (it) Out: An Heuristic Enquiry into  
Exercise and Psychotherapy**

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## **Abstract**

This dissertation is an heuristic enquiry into the relationship between exercise and psychotherapy. My own experiences of exercise are captured through qualitative enquiry by way of internal reflection, immersing myself into exercise itself, and utilising journal writing, meditation, and allowing illumination through the heuristic process. I examine, in my current and historical relationship to exercise, how I think and feel about exercise as a practicing psychotherapist. Relevant literature is explored throughout the dissertation to help explicate ideas and themes that relate to exercise and psychotherapy. This dissertation provides practitioners an introductory base to how they may relate and work with clients who are interested in exercise, or if they feel exercise could be a useful addition to therapy.

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## **Attestation of Authorship**

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined and in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

Signed: \_\_\_\_\_

Daniel Harrison

Date: \_\_\_\_\_

## **Acknowledgements**

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Lastly, to my children Abigail and Micah. In your small but big ways you have provided me with all sorts of nourishment on my journey. You will always be my reason for persevering. I love you both.

## Chapter One: Introduction

See this guy here staring back at you? That's the toughest opponent you're ever going to have to face. I believe that's true in the ring, and I think that's true in life. Now show me something. (Coogler, 2015)

The above quote from the movie *Creed* (Coogler, 2015) shows Rocky Balboa, an experienced and aged boxer, passing on his wisdom to Adonis, an amateur boxer. They both stare into the mirror. Rocky reminds Adonis of his worst enemy – himself. If Adonis can face his toughest critic, himself, he can do anything. When first engaging with writing this dissertation, I thought how I could comfortably use heuristic enquiry to articulate myself and present a dissertation of which I was proud. It did not take long until I was overcome with self-doubt and questioning my academic ability. How could I jump into the ring and write my dissertation when I had yet to defeat my toughest opponent – myself? Engaging in both exercise and dissertation writing challenged me physically and intellectually. The two ran side by side – sometimes in unison, sometimes in conflict. I had a fight on my hands.

### Background

This dissertation explores my journey into exercise and my understanding of exercise as a psychotherapist. My earliest memories of movement would be in my early ages of life running around the local playgrounds with my family and then to more coordinated efforts through school and competitive sport. I have fond memories of running around trying to kick a football with other six-year olds, also attempting to understand the idea of teamwork, huddled in big bunches around the ball with flailing legs. It was at the age of six when I started to understand how exercise could affect me. Unfortunately, my first experience of this was negative by way of an asthma attack after running around outside my family home. Chapter Three of this dissertation explores my relationship to asthma in more depth.

My family has always been big on sport, whether it be participating or watching, it was happening somewhere. Movement was all around me – tennis, football, hockey or the basic handball, tag, and bullrush. It was in my late adolescence where I became more curious with the relationship between mind and

body. I studied several martial arts, wushu (Chinese kung-fu), Capoeira (Afro-Brazilian fight-dance), Brazilian jiu jitsu, ninjutsu, muay thai and my favourite, boxing. I believe I studied these disciplines for several reasons. Firstly, it was a means to connect to others, to find friendship and a community where I could feel like I belonged. Secondly, I was lost. I have always had a habit of wandering the local streets and beaches at night in search of myself. Although I did not necessarily find what I was looking for, I felt an overwhelming sense of peace and calmness during and after this exercise. Lastly, I wanted to fight. I was a very depressed teenager who had a lot of unexpressed anger. I thought that through learning to fight I could perhaps expel some of this anger, or maybe displace and take my pain out on others.

I was able to understand my experiences of movement, my body, and exercise at greater depths when I started my own personal journey into psychotherapy. Here I could understand, with my therapist, how asthma shaped a large part of my identity and how movement (or restriction of) and not trusting my body created issues around self-esteem, shame, and confidence. It was also suggested, by my therapist, that I engage in the gym and confront myself in the mirror, to tackle the above struggle. It was in the grappling and exercising these thoughts with my therapist that we could identify how useful it may be to explore gym and physical activity more. Due to the personal nature of my topic, I have chosen heuristic research as the method and phenomenology as the methodology, providing me a guide for looking into my experiences (Douglass & Moustakas, 1985), as explored in Chapter Two of this dissertation.

### **Research question**

“Working it out” is a phrase often used in therapeutic circles when describing the therapeutic process. From a psychodynamic perspective, client and psychotherapist are “working through” together, flexing emotion, cognitive ability, and relating to each other in the room and engaging in a process of transformation. “Working out” is also common language used in the gym or when performing physical exercise. Dictionary.com provides three definitions for “work out” – to be capable of being solved, to have a good or specified result, and to engage in vigorous exercise. It also

provides one definition for “workout” – a session of vigorous physical exercise or training.

“Exercise” (noun) is both an activity requiring physical effort, carried out to improve or sustain health and fitness, and an activity carried out for a specific purpose (Dictionary.com). Much like working it out, the psychotherapist and client can exercise together. Whether it be by using the relationship to create deeper understanding or by simply exercising their hearts and minds, they are engaged in an activity with the purpose of improving or sustaining wellbeing.

Thus, “*Working (it) out: An heuristic enquiry into exercise and psychotherapy*” encapsulates my aim of wanting to develop a better understanding of how I, as a psychotherapist, relate to exercise, using the heuristic research method. I came to this topic by way of discussion with my supervisor. It was in the creative synthesis stage where it felt best to have a question that both creatively and accurately reflects what I aim to achieve in this research. My initial review of the topic, “a psychotherapist’s experience of embracing exercise” did not hold the qualities and synonymous meaning represented in “working (it) out”.

## **Literature review**

Consistent with my heuristic method (see Chapter Two), the following literature review is my subjective enquiry into psychotherapy and exercise. This brief review, in effect a preview, also explores my reflective responses to the literature searched.

I have used different sources such as the Auckland University of Technology library, the University of Auckland library, and various psychological and exercise journals and articles. It is a collection of where my thoughts and interests led me – my initial engagement of actively searching through literature.

Exercise and psychotherapy is not something that is commonly written about (Hays, 1999). Over the years, there have been several studies which provide evidence as to how exercise can improve mental health, more specifically depression, anxiety, and mood levels (Helgadottir, Owen, Dunstan, Ekblom, Hallgren, & Forsell, 2017; Mikkelsen, Stojanovska, Polenakovic, Bosevski, & Apostolopoulos, 2016; Rethorst, Wipfli, & Landers, 2009; Seidler, Dawes, Rice, Oliffe, & Dhillon, 2016; Stanton, Donohue, Garnon, & Happell, 2014). I have noticed in my practice as a psychotherapist that many clients come for immediate symptom relief and often hold

the awareness that exercise may help with their overall wellbeing; however, not necessarily knowing what that means. Practicing psychotherapy also requires hours of a sedentary lifestyle, sitting in the room with clients over long periods of time.

The Ministry of Health New Zealand (2018) website suggests five major points when taking care of one's physical wellbeing:

1. Sit less, move more! Break up long periods of sitting.
2. Do at least 2½ hours of moderate or 1¼ hours of vigorous physical activity spread throughout the week.
3. For extra health benefits, aim for 5 hours of moderate or 2 ½ hours of vigorous physical activity spread throughout the week.
4. Do muscle strengthening activities on at least 2 days each week.
5. Doing some physical activity is better than doing none.

My first reaction to these five statements is that I have met only a handful of psychotherapists who do at least two and a half hours of moderate exercise per week, let alone two days of muscle strengthening activities per week. The above guidelines were developed by reviewing other country's guidelines, experts in the field of physical health and exercise, and review panels (Ministry of Health, 2018). Each statement has a rationale which describes why it is an important guideline. For example, sitting for long periods increases the risk of developing non-communicable diseases. Furthermore, two and a half hours of physical activity each week may not be enough to offset the negative effects of prolonged sitting time. The research also suggests there not being enough evidence to identify the effect of too much sitting on depression (Ministry of Health, 2018). Between the years 2002-2004, adults were sitting on average four hours a day. Psychotherapy is typically a sedentary profession with sessions often lasting 50-60 minutes at a time. Thus psychotherapists are most likely exceeding the average of four hours of sitting a day in their professional role alone. The research also suggests that any form of physical activity can help with symptom relief of stress, anxiety, and depression.

Hays (1999) suggested psychotherapy has a long history of recognising the relationship between the mind and body. Freud conducted some of his analyses while walking or hiking with some of his clients, and recognised the benefits. Many

recent studies have emerged indicating exercise as helping to decrease symptoms of depression and anxiety, and increasing positive characteristics in populations such as, body image, mastery, self-sufficiency, and self-concept (Helgadottir et al., 2017; Mikkelsen, Stojanovska, Polenakovic, Bosevski, & Apostolopoulos, 2016; Rethorst, Wipfli, & Landers, 2009; Seidler et al, 2016). A common theme in the literature, highlighted by Pollock (2001), is that participating in exercise appears to be of more benefit than the type of exercise itself. This may suggest that social elements and being in relationship with others bring a positive impact on mental health. For instance, while the exercise routine I was involved in during this research was individual, I often used the same facilities with like-minded others: all participating with different goals but connected through similar themes.

Even though there is a compelling amount of research that suggests the benefits of physical activity to overall wellbeing (see citations above), mental health professionals' integration of exercise appears to be minimal. For the most part, mental-health practitioners generally limit themselves to making supportive recommendations about exercise. They typically do not become involved in its planning and maintenance, although they will help their clients think about the reasons - manifest and latent - as to why the client might resist such a healthy behaviour change (Pollock, 2001).

In a study conducted by Royak-Schaler and Feldman (1984), less than half the surveyed therapists considered the discussion of physical health and exercise to be an appropriate task for the therapy setting, even with the understanding of its health benefits. Although Royak-Schaler and Feldman's study did not attempt to evaluate the rationale behind the therapist's process of not needing to talk about exercise, it did point out the need to reflect on the barriers of making health-related recommendations in the therapeutic space. By association, one might ask what reluctance psychotherapists have to engage in a way that incorporates the management of exercise in treatment? I was unable to find a more recent study like the above research, possibly suggesting a large gap in the research. McEntee and Halgin (1996) suggested four areas as to why psychotherapists may be reluctant in recommending exercise:

1. Perceived inappropriateness.
2. Confusion of the therapeutic relationship.

3. Client sense of failure (client may feel a sense of failure if they do not meet the therapist's expectation).
4. Therapist insensitivity, client resistance and therapist unfamiliarity (p. 6).

Hays (1999) described sports psychologists in the 1960s as rooted in psychodynamic theory practicing from a humanistic perspective. However, because of the nature of psychotherapy, and the focus on the past and the unconscious rather than the present, conscious thought, and education, psychoanalysis within the sporting world has been considered irrelevant. Hays also suggested that completely rejecting psychoanalytic theory and practice can miss important themes and interactive dynamics. Therapists may see the significance and value in exploring resistance (to exercise) and the transference process. Despite a client's good intention, he or she may not continue to engage in exercise. Subsequently, the therapist can then attend to defence processes that have both adaptive and maladaptive aspects.

This literature review acknowledges that further research into this specific field is necessary for developing a better understanding of how the world of psychotherapy understands exercise and its implications for practitioners and clients of psychotherapy.

### **The following chapters**

This chapter has outlined part of my initial engagement with the dissertation, the background as to how I came to research the question, an elaboration of the dissertation question itself, and an initial literature review. Chapter Two discusses the heuristic method and the phenomenological methodology of the dissertation, with specific exploration on the six stages of heuristic research (Douglass & Moustakas, 1985). Chapter Three discusses the core themes and findings that have emerged through immersing myself in an heuristic process with the use of literature. The concluding Chapter Four is a discussion of main points I wish to include in this dissertation that I feel are important for psychotherapists who are interested in how exercise and psychotherapy relate.

## Chapter Two: Methodology and Method

### Introduction

The methodology used in this research is phenomenological and qualitative, based on my lived experience of exercise as a psychotherapist. The study is based on the heuristic approach (Moustakas, 1990), whereby the research involves living with the topic both consciously and unconsciously. Kenny (2012) described this as “an embodied question [which] allows the inquiry to work on us and influence the quality of our thinking and exploration, which in turn guides the experience and the understanding we achieve” (p. 7).

This dissertation also includes my personal journal entries (indented and italicised text) which reflect my experiences of exercise and associations. I have then used literature throughout to augment my understandings. Heuristic enquiry requires the researcher to live with the question through identification. The journal writings and reflections help to create a dialogue to excavate the unconscious material within me (Moustakas, 1990). In this chapter I discuss both the phenomenological methodology and the heuristic method.

### Phenomenological methodology

Phenomenological approaches to qualitative research acknowledge and give value to subjective experience. Just as it appears, phenomenological investigation “attempts to reveal the actual nature and meaning of an event, perception, or occurrence” (Douglass & Moustakas, 1985, pp. 42-43). This is not always easy.

*Journal entry – February 2017*

*I felt like a child, walking into my first classroom, on my first day of school, except the gym was my playground, the machines my toys, the others gaze my classmates. In a moment, I regressed.*

The primary goal of phenomenological study is to illuminate meaning, structure, and essence of a specific occurrence. It is through identifying our preconceptions that new meaning and understanding may emerge from our immediate experience (Crotty, 1998). Edmund Husserl (1859–1938), a German mathematician, founded the philosophy of phenomenology and placed emphasis on setting aside assumptions, explanations, and constructs of what had been considered “objective” “reality”. As a practicing psychodynamic psychotherapist, I am naturally drawn to

phenomenological research as it explores the unconscious through honest accounts of subjectivity – a natural goal in psychotherapy of making the unconscious conscious. Choosing a qualitative methodology is also based on the desire to look inwards and focus on my mind-body experience of exercise. My aim is to develop a deeper understanding of this experience through the subjective lens of (being) a psychotherapist.

### **Heuristic method**

The word heuristics is derived from the Greek word *heuriskein*, meaning “to discover or to find” (Moustakas, 1990, p. 9). My intention in this research has been about discovery and exploration of self as a psychotherapist in relation to exercise. Douglass and Moustakas (1985) further described heuristic research as a method to illuminate understanding on or of a point of focus, such as a question or problem, by searching for meaning in human experience. Sela-Smith (2002) elaborated suggesting that heuristic research is a form of surrendering, embracing the subjective experience by allowing oneself to swim into the unknown. Here transformation can take place; by making myself vulnerable and venturing into the unknown, I am able to experience the world differently.

*Journal entry – March 2017*

*Beginning to meditate and contemplate more about exercise and psychotherapy – how the two relate and how I feel as a psychotherapist exercising. Struggling to find connections – all I know is that I’m passionate about the two. Trying to allow the heuristic enquiry to wash over me like flowing waters. Trying to trust the process. This is much different to any other essay I’ve written. I usually have an idea captured in my head of what I want to write about, sometimes even writing the summary section first! This is not a process that can be rushed. This feels a bit tricky with everything else going on in life.*

Sela-Smith (2002) described heuristics as an invitation for the self to surrender – going to depths of experience that are not normally known in waking state consciousness. Rather than focusing on the experiences of the outward world, heuristics invites a focussed attention on the inward: in other words, my feeling responses to my experiences of exercise. Sela-Smith expanded on the transformative process:

The researcher uses the data within to lift into awareness the experiences that are felt and trigger the being of the researcher. In this lifting, an awakening, a greater self-understanding, and personal growth occur and combine to produce self-transformation. When a story is formed with the embedded wholes of the transformation in it, the story itself contains the power to transform anyone who dares to surrender to the listening (p. 64).

I naturally began to think of the transformative process, as the process of wanting to change my body composition evolved, as shown below.

*Journal entry – April 20014*

*Transformation. A word that has come up in supervision more than once. I am going through a transformative process. Had a talk to a bodybuilder the other day. He had such incredible passion to compete. He had transformed his body from a physically and mentally unhealthy place, to something he was proud to maintain. Psychotherapy can be a transformative process. It can also be an ambiguous process with no real 'I feel better!' moments. It is a gradual unravelling. Similar to exercise and change, I suppose. Gratifying moments of achievement, such as reaching a personal best, but needing to be consistent for long-standing change to take place. The unveiling of my body's potential?*

Moustakas (1990) described the prerequisite to having a transformative process through heuristic enquiry as the researcher needing to form a deeply felt question. My question has evolved since its birth from 'what is a psychotherapist's experience of exercise?' to 'working (it) out): an heuristic enquiry into a psychotherapists experience of exercise' which allows space for my experience to find a voice and does not limit the research to exercise itself, but rather the before, during, and after exercise. This fits with Kenny's (2012) perception of deeper understanding and transformation as "the gradual discovery and growth of a purpose which I did not know... it's the only way which is not a presumption, forcing the self into theory" (p. 62).

### **The six phases of heuristic research**

According to Moustakas (1990), the heuristic research method has six phases, initial engagement, immersion, incubation, illumination, explication, and critical synthesis. The following summarises the six phases of heuristic research and show how I have used each phase in the process of my research. Boxing metaphors have been used to help describe my process during the six stages.

### **Initial engagement – touch gloves**

At the beginning of a fight, boxers often touch gloves as a show of respect to their opponent (see Figure 1). I felt like I increasingly grew an amount of respect for this dissertation as I engaged with it, as opposed to my naïve assumption that it would be a challenging but simple task. I was now able to size-up my opponent, start an exercise routine, and begin the heuristic process. It would not be an easy task.



**Figure 1: Touch gloves**

Initial engagement involves the researcher finding a topic of an autobiographical nature and a topic that “holds important social meanings and personal, compelling implications” (Moustakas, 1990, p. 27). Although having a personal history and interest in exercise, my most recent engagement with exercise began after separating from my wife in June 2016 – in what seems to be a natural progression for many separated couples, to focus on oneself and moving on from an unhealthy relationship. Prior, exercise had been an integral part of my development from an early age. After choosing the topic of research, and in an attempt to immerse myself deeper into my topic, I joined a gym. As a psychotherapist, I hold the viewpoint that maintaining physical wellbeing is an important part of maintaining overall health. Exercise, or at the very least movement, is an everyday experience for most. I also think exercise is seldom spoken about in the field of psychotherapeutic and deserves better attention, especially as it is a form of self-care that is often suggested to people when visiting many medical professionals.

### **Immersion – “ding, ding”**

The bell rings (see Figure 2) and both fighters start to dance around each other, immersed in each other’s eyes. Immersion involves staying with the topic and living the question (Moustakas, 1990).



**Figure 2: Bell**

In this phase, all parts of the researcher’s life can appear to connect to the question, internally and externally, staying with the experience of the phenomenon and the forms it may take. Sela-Smith (2002) described how natural the process of immersion is, stating “something amazing happens when the researcher has surrendered to the call in phase one (initial engagement). When the question has been properly formed, it appears to have a power that draws the image of the question everywhere in the researcher’s life experience” (p. 65). Since initially engaging with, and immersing myself, I have kept a journal titled ‘*Exercise and the Psychotherapist*’ containing:

- Reflections of daily life in relation to psychotherapy and exercise.
- My dreams and free associations.
- Reflections from supervisors and personal therapy.

I initially engaged with a personal trainer to set goals and take measurements to track my progress, keep myself accountable, and to engage more closely with the question, immersing myself and becoming more focused. My ability to stay immersed in my topic wavered as life threw me trials and tribulations. Family commitments and fulltime work made it difficult to be fully present at times and the spaciousness was not there to be utilised. However, early on in this research, exercise began to grow into what felt like at times to be an obsession – when I was

not exercising, I was thinking about exercising. My mind was consumed with wanting to go to the gym.

The first item of literature I read was a book specifically about utilising exercise in psychotherapy (Hays, 1999). I felt elated at how easy it was to find a book directly related to my topic; however, this was short-lived as the search results to find others alike were slim. Finding literature on exercise and psychotherapy proved to be initially difficult. This knowledge encouraged my immersion, creating a passion to reveal my inner-experiences through the heuristic research process. Moustakas (1990) expanded on this understanding as also “trust[ing] in one’s self-awareness and understanding... and a willingness to enter into a process rooted in the self” (p. 17).

In July 2017, psychotherapy students were asked to present their dissertations to staff and other students writing their dissertations. At this time, I felt stuck in the immersion phase which I presented as an infinity symbol – going around in circles, not knowing where to go and feeling overwhelmed. I allowed myself to be completely vulnerable with what I presented and wrote the presentation in a free associative way, allowing myself to experience where I was at with my question.

I felt I needed to use the presentation as a tool in order to get out of my ‘stuckness.’ Sela-Smith (2002) described how fulfilling dissertation requirements can hinder the researcher by preventing him or her from having an intimate dialogue with their topic. Inner conflict needed to be understood in order for me to progress in my transformation; what better way than to let down my guard to a group of psychotherapists? After failed attempts of humouring my psychotherapist-audience, I surrendered to the process and released myself of confusion, thus gaining focus (Moustakas, 1990). I surrendered myself to the ring and rolled with the punches and feedback from both lecturers and students, to then, subsequently, go back into my corner with my supervisor and digest. This process can also be described as a flow and transition into the incubation phase.

### **Incubation – in between rounds**

Incubation is the phase when the “data is set aside and conscious attempts to look at the topic are stopped” (Atkins & Loewenthal, 2004, p. 497). The incubation phase is increasing awareness of aspects that are related to the topic, typically more on an unconscious level.

It is in the incubation phase where I have been able to retreat from my conscious focus on my question and allow the inner tacit knowing to flow (Sela-Smith, 2002). This process is depicted in Figure 3 as the resting boxer.



**Figure 3: Resting boxer**

When sparring and hitting the heavy bag, I take rest between rounds. I go to my corner, crouch down, and catch my breath. I surrender to the round that has been, go inward and meditate in a form of incubation; just as a psychotherapist would when sitting with a client who needs to adjust his or her breathing. Breathing through and sitting with feelings can often lead to a deeper understanding of self or topic.

A song written by Simon and Garfunkel (1970) titled ‘*The Boxer*’ contains the lyrics “I have squandered my resistance, for a pocketful of mumbles.” It is in the surrendering to the process of heuristic enquiry, rather than the resistance I felt in the immersion phase, where I am able to discover and reorganise new ways of thinking and understanding of embracing exercise as a psychotherapist. Sela-Smith (2002) also described this not as a period of setting aside the question, rather incubation is a phase where additional input stops as the unconscious part of the self has all the information it needs to sort through:

*Journal entry – July 2017*

*I spoke to [clinical supervisor] and emailed [dissertation supervisor] around my process of presenting my dissertation to staff and students. What a daunting process that was. I wanted to flee from that space the moment I walked in. I wondered how much of that was resistance, avoidance and my general theme of procrastination, or the fact I had not set foot in this classroom for nearly four years. Alas, as painful as it was, talking to [clinical supervisor] has helped me unpack and become unstuck. Diving in*

*like [dissertation supervisor] says. Very different to writing about something that I am already conscious of. I'm looking forward to my long run tonight.*

### **Illumination – blow to the head**

Illumination is where “hidden knowledge and intuition link together the individual elements of the experience and allow a perception of the wholeness and essence of experience to emerge” (Kenny, 2012, p. 8). This phase has asked of me to be open to new awareness, with the continuation of journal writings and contemplation.

Previous hidden meanings emerged adding different dimensions to my question than have been previously expected (Moustakas, 1990). Sela-Smith (2002) suggested that illumination is not something that is planned, rather occurs spontaneously as I am able to reorganise my knowing and allow transformation to take form on a deeper level.

Illuminations have come sporadically throughout my dissertation process. Ironically, it was often in the moments of and breathing where the “punch” or conscious breakthroughs happened, as depicted in Figure 4 (p. 14) titled ‘blow to the head’.



**Figure 4: Blow to the head**

Whether it be in-between sets of heavy weightlifting or in between boxing rounds; essentially it is here where I went deeper. Moustakas (1990) described the concept of focussing as an emergence of themes from the experiences by way of clearing and decluttering what obscures our understanding. Furthermore, it is here where indwelling took place – turning inward with intent to develop a deeper understanding of experience, as highlighted in the journal entry below.

*Journal entry – April 2017*

*Found myself sitting on my deck today after some high intensity interval sprints. Catching my breath, soaking in the rare sun and resting my body. In this recovery, I feel like I'm in tune with my body and my mind feels focused. I think about what was good about the workout, how I can improve and how it made me feel.*

These illuminations are explored in Chapter Three of the dissertation within my journal entries and exploration of them. “Illumination is that moment when there is a breakthrough into conscious awareness of wholes and clustered wholes that form into themes inherent in the question” (Sela-Smith, 2002, p. 64). It is only by being receptive to discovering what is not known, in the tacit and intuition, that illumination can then take place.

### **Explication – bob and weave**

Explication, as described by Atkins and Loewenthal (2004), tends to run parallel with the illumination process, whereby the data are analysed and understood in various ways. It is a process of coming to an understanding of meanings that have arisen through examination.

*Journal entry – August 2017*

*Exercise appears to be a realm where I can learn a huge amount about myself. Not just about my body or physicality, but my defence mechanisms, identity, self-esteem and so much more... I am surprised at what I am learning about myself...*

Examining the tacit dimension and continuing to be conscious in an awakened state is the purpose of the explication phase (Moustakas, 1990). I am bobbing and weaving through all the information (see Figure 5).

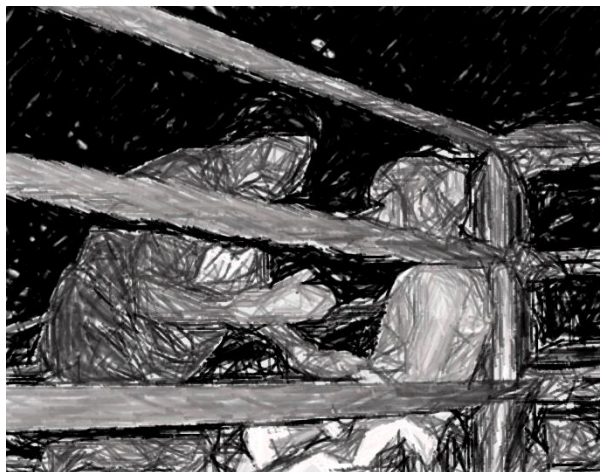


**Figure 5: Bob and weave**

Within this process, I am able to examine the various layers of meaning by attending to my own awareness, thoughts, and beliefs. Sela-Smith (2002) likened this process to “a new person coming into one’s living space, everything within that space will shift as it relates to the change that has taken place” (p. 68).

**Creative synthesis – transformative game plan**

Like with many sports, a boxer develops a game plan prior to fighting his opponent. It is suggested he throws punches to the body to weaken his opponent, or find an in for his powerful left hook, as his opponent often lets his right-hand guard down. However, the game plan tends to change and transform as the fight goes on. It evolves and is fluid, like water adapting to a shape. The boxer requires creativity to defeat his opponent. Much of my creative synthesis ideas came from continual dialogue with my supervisor. Like a coach in my corner (Figure 6), developing and adapting our game plan.



**Figure 6: Trainer in corner**

Moustakas (1990) described creative synthesis as when “the many strands of experience and understanding that have emerged in the research are brought together to form a coherent whole” (p. 8). Creative synthesis is the final phase of heuristic research which encapsulates the essence of the experience and findings which is then

communicated to an audience. The end results in a creative synthesis, the construction of order and meaning through the discoveries and themes that have emerged. Throughout this process, I have held closely the parallels of the transformative process of heuristic enquiry and the transformative process of participating in an exercise routine.

### **Summary**

This chapter has defined the method and methodology of research undertaken in the dissertation. Heuristic enquiry has been explored as a journey and transformative process of self-discovery whereby unconscious material has been allowed to swim to the surface. Boxing metaphors have been used throughout this chapter to bring life to, and help connect, the physical with the emotional and cognitive. The next chapter shows my findings and explores related literature.

## Chapter Three: Findings

### Introduction

This section explores my process of using the heuristic method and the findings that evolved. Journal entries, dreams, and associations have been synthesised. These findings, as depicted in Table 1 below, have been categorised as best to reflect my journey of exercise.

**Table 1: Findings summary of themes**

Findings
- Goals
- Depression
- Resistance
- The gaze of the other
- Finding a voice
- Aesthetics and physical appearance
- Masculinity
- Sexuality
- The importance of relationship to trainer

Champions are not made in the gyms. Champions are made from something they have deep inside them – a desire, a dream, a vision. They have to have the skill, and the will. But the will must be stronger than the skill. (Talk: Muhammad Ali, 2017).

As the above quote from Muhammad Ali (1942 – 2016), one of the greatest boxers of all time, suggests, a serious contender of any sport needs to find something deep within his or herself to become a champion. Skill alone is not enough. One must have the will, passion, and desire. Finding these attributes within oneself can, however, be a complicated process as highlighted in the journal entry and Figure 7 below.

*Journal entry – February 2017*

*I lay here in my bed, knowing I need to get up and go to the gym. I feel like my willpower has been sucked into some blackhole – will it return to me? Minutes pass as I stare up towards the ceiling of my bedroom - daydreaming. How will I possibly find the determination to go when all I want to do is hold my pillow and pretend otherwise?*



**Figure 7: Pillow denial**

## **Goals**

Reflecting upon a conversation with my supervisor, I came to realise how much of an impact my personal life had on my ability to exercise. Committing to exercise was difficult when it felt like I had far greater priorities. So how can my personal life and exercise co-exist? Goals. Finding goals in all areas of my life, not just the goals I made with the personal trainer (see Table 2, p. 20), helped me to maintain a feeling of achievement and potency; finding power in my daily basic life – work, children, and other life issues. Doing the most ordinary things in life well became a priority.

It was important to not only have vague goals such as, ‘I want to feel happier.’ Rather, I needed specific and concrete goals that were achievable, both short and long-term. The short-term goals served as a continual source of achievement, filling my glass to the brim so that I could tackle the much larger goals. These goals served to be one of the greatest motivators during my pre-workout state. My willpower alone was not enough to get me exercising. Below are the goals I created when I first embarked on this journey.

**Table 2: Goals 2017 summary**

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<b>Goals 2017</b>	
<b>Goals: 1 month</b>	<ul style="list-style-type: none"><li>- Create habit of going to the gym 3 days a week</li><li>- Eat healthy food at least 70% of the time</li><li>- Make sure all lifts are with good form</li><li>- Kayak at least twice</li></ul>
<b>Goals: 2 – 6 months</b>	<ul style="list-style-type: none"><li>- Maintain 10 rounds of 3 minute boxing</li><li>- Eat healthy at least 90% of the time</li><li>- Create personal bests in bench, squat, deadlift, and overhead press</li><li>- Lose any amount of body fat percentage and maintain muscle mass</li></ul>
<b>Goals: 6+ months</b>	<ul style="list-style-type: none"><li>- Formulate a lifestyle that includes exercise by habit</li><li>- Feel comfortable about my body</li><li>- Feel strong</li><li>- Have better cardiovascular and asthma management</li></ul>

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## **Depression**

Depression (and depressive thoughts) appeared in many of my journal writings and reflections. It is something I have struggled with throughout my life, only gaining a better understanding of it in the most recent six years. Depression and exercise have a close relationship and history in my life, as outlined in the below journal entry.

*Journal entry – April 2017*

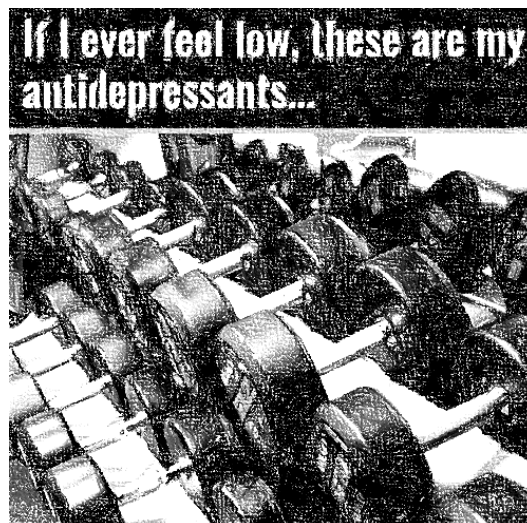
*I was only at the gym for about 20 minutes today. Usually there for at least 45 minutes. I am stuck on a few memories – mixed memories of sadness joy, anger and desperation. I remember being so depressed as a teenager, predominantly due to my acute asthma taking control of mostly all areas of my life. I also remember being so fucking angry at my asthma, at my body. I wanted to die, my asthma was that bad. I was desperate for relief. I remember walking outside and sometimes falling to my knees as the cold air would take my breath away, then subsequently being rushed to the local A&E [Accident & Emergency clinic]. I remember trying to kill myself by inducing asthma attacks. I would purposefully sprint as fast as I could outside, either at school or close to home, hoping to just collapse and die. Come to think of it, given the location ..., I guess I wanted to live. Thank you gallows' humour. My school principal even helped me into an ambulance one time.*

*What horrible memories. The irony is, besides still being alive, my several attempts of inducing asthma became harder and harder over the months. Harder, as in, my asthma wasn't as severe. It also felt like I was getting out a "fuck you, asthma!" At first, I thought maybe because I was growing out of it. But the doctor told me it was probably due to the fact I WAS exercising.*

*Journal entry – May 2017*

*Depressive thoughts. Life is becoming increasingly harder with the ex-wife. Finding it hard to keep my motivation up. I'm really struggling to work even. Finding myself very tired during the day. I miss my kids. How do people consistently go to the gym when there is so much other shit in their life? How can a GP tell their depressed patient to exercise when the last thing they want to do is move? Lethargy is coming on. The kitchen looks like it's ten miles away.*

I struggled with deeply depressed thoughts, hopelessness, and wanted to end my life by the very thing I thought was going to kill me. Exercise-induced asthma attacks – why would I want to move when it had so much potential to hurt me? These thoughts run rampant in my head when I wake up in the morning before exercising; creating an internal war that sometimes has no definitive winner. Maintenance of treatment response is often poor in depression treatment (Helgadóttira et al., 2017); therefore, maintaining awareness of the effects exercise was having several months into my exercise programme was crucial. The image below (see Figure 8) was found when scrolling through my Instagram feed when I was feeling low and contemplating going to the gym.



**Figure 8 : Anti-depressants**

*Journal entry – September 2017*

*The word consistency has been floating about this week. I am finding the more consistent I am with my exercise, the happier I feel during the week. I am also conscious of the amount of time I spend in the gym – how much does time exercising relate to how good I feel? The variation of exercise – does it matter what exercise I am doing? Regardless, even though there are major stressors in my life, I feel there is a close link between keeping consistent in the gym five times a week and the elevated mood I feel.*

## **Resistance**

There are many reasons why I have been resistant to exercise, some of which are outlined throughout this dissertation. One may assume that being lazy or lacking willpower would be the fundamental issue for not exercising. Although there does require a certain amount of self-motivation, reluctance has been the lesser of my concerns. The journal entries below begin to explicate what resistance means to me.

*Journal entry – April 2017*

*In what way does my lifestyle limit me from exercising? Are my poor nutritional habits creating a reluctance to exercising? What are my beliefs around exercise and is it as beneficial as people say it is? I seem to be able to conjure up any excuse under the sun to not exercise and barriers appear to be rationalised out of thin air. All it takes is putting on my shoes and going for the walk. This isn't about my scheduling of time – I have that down like clockwork. What is the real obstacle here?*

*Journal entry – May 2017*

*My self-esteem has been a hot topic during my contemplations as of late. I'm reminded of Carl Roger's understanding of empathy: if the client does not have the capacity to receive empathy, to internalise it and digest it, will it fall short? If I don't feel deserving and lack a healthy self-esteem, does it make it harder to justify taking care of myself? Do I fall short due to not fully loving myself? I suppose I thrive when I feel safe and less vulnerable. Going to the gym and exercising brings to surface my vulnerability – not being all that good at certain exercises. Does failing at the exercise equate to feeling like I am a failure? Do I need to release myself from this fixed mindset to embrace exercise?*

*Journal entry – May 2017*

*I tend to be a Rescuer. I put other people's needs before my own, much to my detriment at times. Saying no to a new client who is desperately seeking help is difficult at times, even though it is probably an easy refer. I am prone to a*

*chronic sense of self-sacrifice – everything is about everyone else – my clients and my children.*

I wrote Table 3 (p. 24) in the initial stages of exercising. It explores what perceived barriers and resistances I could face and how to potentially overcome them.

### **The gaze of the other**

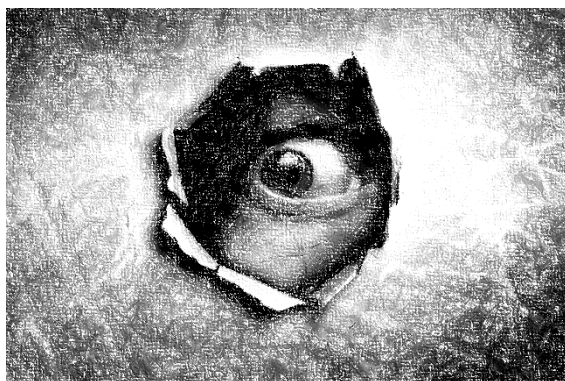
I see only from one point but, in my existence, I am looked at from all sides. We imagine that we are forever being watched in the way Santa Claus and God always seem to be looking over our shoulder... God is merely the concept of the Other just taken to its ultimate limit (Krips, 2010, p.94).

Lacanian psychoanalytic theory suggests that it is the anxious state that comes with the awareness that one can be viewed, that a person loses a degree of autonomy upon realising that he or she is a visible object (Krips, 2010).

**Table 3: Overcoming exercise barriers**

<b>Overcoming Exercise Barriers</b>	
<b>Barrier</b>	<b>Overcoming</b>
Work commitments creating less opportunity for exercise commitments.	Create a timetable and set days and specific times of when to exercise.  Create a schedule that client- work can work around, as opposed to work being the priority.  Exercising and self-care is the priority.
Low energy levels due to poor sleep or lack of sleep.	I have a habit of staying up late, reading or playing on the computer.  Keeping a consistent sleep cycle will be paramount in achieving my goals.  Go to bed at a certain time, wake up at a certain time.
Feeling unmotivated to exercise.	I am prone to more depressive moods now and again which prevent me from feeling motivated to exercise.  I feel overcome with lethargy. I will need to exercise my heart and mind to keep it healthy.  I can't neglect the other joys in my life that lift me up and help maintain healthy motivation levels.
Not eating, poor nutrition and diet, leading to inability to exercise.	I need to eat right to feel and see change.  Keeping myself accountable and letting others know of my goals so that I don't backslide.  Eating unhealthy foods will demotivate me and I will not want to exercise.
Other life obstacles that reduce my chances of exercise.	Life has and will continue to throw curve balls.  Seeking support from those who love me and want to see me achieve will be important to maintain consistency during the more chaotic periods.

Much like the feeling of walking down an empty street with leaves rustling in the wind, going to the gym early in the morning when no one was there still made me feel like there was the presence of another, as depicted in Figure 9 and in the following journal entry.



**Figure 9: Watched**

*Journal entry – April 2017*

*Early morning, I went to the gym to get a workout in before seeing clients. I was reminded of the horror movie “It” by Stephen King. I watched It at an age far too young and subsequently with each corner of the house I scuttled passed swiftly in attempt to avoid the potential terror of the clown. Early morning gym is empty. I am alone but I am not alone. The number of reps [e.g. lifts of a barbell] is directly proportional to the number of people I think are watching me. In this case, there are none, except It.*

Krips (2010) cited Jacques Lacan’s thoughts on Sartre’s concept of gaze: “not a seen gaze, but a gaze imagined by me in the field of the Other... [by which] the other surprises him, the subject, as entirely hidden gaze” (p. 94). Lacan further stated that the presence of another person is irrelevant altogether as it is our own act of looking that causes this feeling suggesting that, except for the actual look of the person looking, the gaze is everything in the field of vision (Krips, 2010, p. 94). My diary entry above is less about my fear of being killed by a clown as, and more importantly, it suggests that I am afraid to be seen, found and known. It also feels like an intense insecurity of how I am being perceived – my body, how much I can lift, my technique.

## **Finding a voice**

As outlined in the two journal entries below, ‘finding a voice’ is defined by my ability to articulate myself. Exercise has given me such a platform to practice expressing and experiencing emotions such as anger, grief, joy, and uncertainty.

*Journal entry – March 2017*

*Lifting weights, skipping, kayaking, boxing... they are all forms of expression. My body is moving. I'm battling, I'm breaking down muscle. I'm in an intimate relationship with my body and exercise – I learn about myself in this relationship. Off topic? I never did feel like I had much of a voice growing up. One of my greatest themes during my training as a psychotherapist was ‘finding a voice’ – whether it be in experiential training groups, community korero or sitting with clients. I needed to find my voice. I needed to express what was happening within me, I needed to give myself permission to unleash. There's a purpose in my exercise – I'm training to learn about myself, through experiencing my body. I am articulating thought and feeling – reflecting on past, present and future. My mind is racing. I feel my thoughts can be in many different places during a workout.*

*Journal entry – May 2017*

*Woke up feeling absolutely exhausted today. Fairly angry too. I went to the gym and boxed for an hour. As soon as I put the gloves on and started punching the bag and pads, I knew it would help me get out of this headspace. I articulated something through my gloves, I could feel some power and hope coming back to me. Is exercise something, like a friend, I can learn to rely on and trust? It reminds me of playing computer games as a teenager. My belligerent teenage years full of anger. The only place I felt I could safely express this anger was through video games, and the occasional passive-aggressive dig at my teachers. Shooting things, explosions, being a hunter and creating carnage. I'm displacing my anger.*

I experience a purpose in my exercise, as if I have intent to grow or learn. The body is expressing itself through exercise, finding a place to breathe. Exercise has helped bridge the gap between fear and courage to speak out, by accepting my body, experiencing the sensations and by practicing feeling. It is also helping me put words to earlier life experiences.

## Aesthetics

A change in physical appearance is a hopeful result when embarking on a transformative process of keeping to an exercise regime. As noted in the following journal entries, what I see in the mirror provides a foundation of motivation, struggle, and change.

*Journal entry – March 2017*

*Again I shower, again I look in the mirror. I'm not too happy with what I see in the mirror. The struggles of being asthmatic meant having to take prednisone, a type of steroid that created an insatiable appetite and rounded your face. It was the precursor to a lot of bullying growing up. Thankfully, I very rarely need it anymore. I have created a habit of looking in the mirror and describing what I see and how I feel. It feels like a battle at times, learning to love my body, every shape and every curve.*

Early research on body image focussed on shape and weight as primarily a women's issue, focussing on eating and that body image was negative (Grogan, 2016). Body image research has since evolved; and media today emphasises body image concerns for both men and women. Social media, commercials, billboards, magazines, all tend to highlight what the "ideal body" is or to label several body-types as sexy, appealing, unattractive. Idealising a certain body type, which in many cases is unobtainable unless through the lens of photoshop, can create substantial amounts of distress in those wanting to achieve it.

*Journal entry – April 2017*

*I'm starting to see change. It's only been four weeks but I can see the change in my body. I feel excited – all my hard work and now I can see the results. I think I'm starting to enjoy looking in the mirror after a workout. It's certainly easier than what felt like an exercise of shyness. I think this is pride and satisfaction. Like the feeling of landing my first forwards flip on the trampoline then quickly running to my family to tell them all about it.*

*Journal entry – April 2017*

*I keep hopping on the gym scales in the morning. Somewhat conscious of my weight, but I feel more focussed on my appearance. I have always been "big." I suppose this has always been in comparison to friends, family members and what I have seen in the media. Doctors always told me I needed to lose weight. It was never about feeling healthy or having a positive body image – accepting, appreciating.*

## Masculinity

*Journal entry – May 2017*

*I dreamt of being the 'Hulk' – a huge, green and masculine behemoth. Jumping around the city of Auckland creating utter carnage but also saving lives. A fun dream. I'm not surprised I had such a dream, immersing myself in exercise has felt all consuming at times. I woke up feeling empowered. Saving lives, being all powerful and basically being invulnerable... who wouldn't want to dream of that? How much of me wants to be a huge masculine behemoth? I feel like it taps into my natural tendency to rescue others – to be the protector and save those more vulnerable than myself. How do I want others to view me? As a saviour? There is something very primordial here – the hunter and gatherer, the protector portrayed with a muscular physique.*

The 'Hulk' is a character from the Marvel Universe – a scientist who, when exposed with gamma radiation, now possesses the ability to transform into a massive green creature with incredible strength and power. It is also an ability he finds hard to control. Becoming angry is his main trigger for transformation. One might say it is a curse. It reminds me of my own repressed rage and how at times I am afraid to have the conflicts that should take place, but instead I push the anger down. More of my masculinity findings are deepened in the below journal entry.

*Journal entry – June 2017*

*Staring in the mirror at the gym after a session of heavy lifting. This time I'm not consumed by my appearance, but rather how strong I feel. How strong can I get? Does strength equate to a greater sense of manliness? I'm reminded of the men's group in university. I went to one meetup and never went again. I felt so out of place and insecure. They were all older, much more mature men who I felt had a better understanding of their masculine self. How much of this relates to being the youngest of five brothers?*

Parallel with my entry findings on aesthetics, the mirror (Figure 10, p. 29) at both the gym and at home has been a place where I can practice feeling comfortable in my skin. I have always struggled with understanding my masculinity and never felt I have been the stereotypical masculine figure that my father has portrayed. Interestingly, growing up I never focussed on my father's physique, but have always idealised his physical strength and his ability to do 'manly things', such as changing the oil or tyre on the car, fixing things around the house, or simply opening a stuck

jar of peanut butter. Being the youngest of five brothers also added to the label of ‘SNAG’ – the ‘Sensitive New Age Guy.’



**Figure 10: Mirror, mirror**

## **Sexuality**

*Journal entry – July 2017*

*Seems I just want to look good naked.*

Since the separation from my wife, I have pondered the idea of dating. I have never dated before, besides the one-off meet-up as a teenager. I have only met someone then thrown myself into a committed relationship without knowing what their middle name or favourite colour was. Dating was a foreign concept to me. However, I tried it on for size. Throughout the year I met several women either through family, friends, or the hesitant dating application. Albeit, they did not last long (as I soon discovered a new fear of commitment), there was a common theme when paralleled with immersing myself in exercise – I wanted to look good naked. More so, I wanted to look good naked for others, not only for myself:

*Journal entry – August 2017*

*We've been dating for over a month now. I think I am still in this because it's at a slow pace. I'm going over to her place tonight. I'll go to the gym before*

*to get a good pump. Got to look good naked. Here I am assuming sex will be involved. Or, at least, preparing myself in the event of potential sex.*

Countless days have I stared in front of a mirror, watching my muscles grow as I make the final rep of my standing bicep curl count. My mind wanders to the relationship of muscle size, growth, and the hauntings a man can feel around the insecurities he has with the size of his penis. As if the pump from the gym, before any potential sex, can mitigate any insecurity about size or performance. These two attributes appear to ‘pop-up’ on many occasions.

*Journal entry – May 2017*

*As I watched the other men in the gym, I couldn't help but notice a trance they all seemed to be in – completely self-absorbed and continuously stroking themselves with the mirror. I had the most bizarre fantasies when watching them and I couldn't help but chuckle to myself: they were all walking penises and with every set of reps they had, they would grow larger and larger until they left the gym completely inflated.*

It is safe to say that my confidence in the bedroom has grown ever since dedicating myself to exercise. As if knowing (at least from my perspective) that I look good naked, means I am less anxious and worried about myself, the other, and the space in-between. Do I walk away with an inflated ego (and penis?) – probably, yes. The below journal entry was written in the middle of the night when I was attempting to sleep. It was also post a chest-dedicated workout.

*Journal entry – July 2017*

*My greatest asset when it comes to strength training is my legs. My dad has gifted me with two tree trunks that could squat a truck. Well, not a truck, but it is my heaviest lift... I was squatting at the gym last night and noticed a guy watching my every rep in the mirror. He was with, what appeared to be, his girlfriend. He walked over to me and said “no-homo, bro, but you're really fucking strong and have some amazing leg definition.”*

‘No-homo’ is a slang term meaning ‘not in a homosexual way.’ Popular hip hop artists like Jay-Z and Lil Wayne have used the phrase ‘no homo’ in song lyrics in an attempt to convince the public that there is nothing homoerotic or seductive in their lyrics. The phrase has been used since the early 1990s by predominantly

straight men who feel they need to make their sexual orientation clear and that they are not gay or living a secret gay lifestyle.

My response to my new avid gym-goer friend was “thanks, man! I wish I could build a chest like yours!” We then shared information on how we train specific body parts and avoided the ‘no homo’ comment. It is a statement that is commonly used on social media, but also in the gym. I felt sad that this man had to reassure me of his sexuality when complimenting my physique and strength. Throughout my life, my sensitivity to mine and others emotions has swiftly gotten me labeled as gay. Whether it is using the word “lovely”, my mannerisms, or a general appreciation of the male physique, there can be a questioning of sexuality. The below journal entry shows an earlier experience as a teenager dating. If only I said ‘no homo’:

*Journal entry – July 2017*

*I can't stop thinking about one of my first relationships as a teenager. I was 16 and a girl who I thought at the time was way prettier than I deserved asked me out. It was our second date, we decided to take the ferry from Half Moon Bay to the city and do some window shopping. It went well until the ferry ride home. I made a comment on how beautiful the evening sky was, in all its orange-red soaked glory. She then subsequently wondered if I was gay. Perplexed by her response, I asked her why. She could only tell me that only “gay boys” say things like that. There was no way of convincing her otherwise. There was no third date.*

## **The importance of relationship**

My dissertation journey has not been without its challenges. I needed an extension upon nearing the due date of the dissertation and also needed to change supervisor. The journal entry below provides a brief account of my experiences of transitioning.

*Journal entry – November 2017*

*I sat with my new supervisor today, processing the transition of going from one trainer [as it were] to another. Naturally, there was a stark difference in the dynamics between us, compared to my previous supervisor. I had hoped from my previous supervisor that I would get a kick up the ass to counteract any of my avoiding or procrastinating behaviours. However, it appeared to envelop me in shame and an inability to present my work to her. My writing up until this date, although important in understanding my relationship to*

*exercise, has been riddled with shame, sadness and a lethargy. Why? My immediate reaction to my new supervisor was that of passion and fun. Where has this been in my writing? Although natural to place a greater hope into the newness of a new trainer, I couldn't help but notice two men bonding over something that ignited interest in both. It evoked feelings of being with my friend, a male, training in the gym together, motivating each other to lift heavier or take that extra rep.*

Shame and shyness was a topic of conversation with both my previous supervisor and my personal trainer. I found it difficult to show my dissertation work to my previous supervisor and self-conscious with my personal trainer, preoccupied with whether I was doing the exercise right by her standards. Both had felt like a Critical Parent, however both wanted to help me and wanted what was best for me:

*Journal entry – June 2017*

*Again, I feel the urge to hide from my supervision sessions and the trainer at the gym. I experience them both as solid individuals who know who they are and what they need. I am reminded of my mother – caring, loving and warm. She is a firm nurturer. She is also someone I often evade – she sees through me and I do not want to disappoint her. How much of her am I placing into these relationships? To be seen is to be vulnerable, making me susceptible to all sorts of rejection. The most powerful people in my life appear to all be women. Mother, supervisor, trainer and therapist. How much power am I giving them? How much of this idealisation cripples me? I find myself going to the gym purposely when the trainer is not there.*

The above journal entry mentions my mother, a caring, loving and warm person. I have always idealised her and looked up to her; however she is someone I do not want to disappoint. Feelings evoked in me when with my previous supervisor and personal trainer were similar – seemingly caring and warm, and on the flipside a felt sense of potential critical wrath. Matching is important in the practice of psychotherapy. Neither my initial supervisor nor the personal trainer I engaged with were my first options. Perhaps this was not an optimal setting for my growth. My below journal entry elaborates my understanding:

*Journal entry – November 2017*

*Within my relationships of dating, marriage, therapy, supervision, in general, there is a hastened idealising. My relationship with my previous supervisor (female) illuminates how restrictive and how 'not good enough' I felt. It was also present with my personal trainer in the initial stages of this dissertation. These feelings prevented me from finding my voice. It felt like quicksand,*

*sinking into the ground, yelling for help. Except, the screams were all internal and often directed at myself. 'Daniel' could not be heard, he was not known. This was not the fault of the other, but rather a long-term internal struggle. My initial thoughts go to that of my mother. A strong, fiercely independent woman. Once was a nurse, now a midwife. Bringing life into the world on a weekly basis. A nurturer. A powerhouse. How could the youngest of five boys not idealise this woman? She was the archetype mother. How my words muffle to articulate when around a woman I perceive as powerful. It is no wonder why exercising with my personal trainer could be so difficult at times.*

## **Summary**

This findings chapter has not used all my journal entries or reflections during the heuristic process. However, it has drawn on those journal entries and reflections that are most relevant in describing the themes that have been apparent throughout my journey.

## Chapter Four: Discussion of Findings

### Introduction

This final chapter of the dissertation discusses my findings. For the purpose of this dissertation, I have excluded several findings and have chosen what I felt were important to include and other points worth mentioning.

### Discussion

Physical fitness is not only one of the most important keys to a healthy body, it is the basis for dynamic and creative intellectual activity.  
(Wikitalc: John F. Kennedy, 2017)

Exercise is like a form of meditation, being completely dedicated to the physical experience as an object of meditation, rather than the traditional forms of meditation where the focus is on an object or breath. There is a “zone” during exercise where the chatter of life is not so much a crashing wave, but a wave that flows with me. The isolation of muscle movements and coordination helps the mind connect to body. Within this experience, my findings show a connection to my history and childhood experiences; for example, having issues of trusting my body due to chronic childhood asthma. During the exercise movements and the rest periods, I have been able to surface unconscious material, similar to that of a psychotherapist ‘working through’ with a client. It is with the surfacing of such material I am able to understand my struggles with low self-esteem and confidence. This is also evident when trying a new exercise and fearing I may get it wrong. Much like therapy itself, within the right space, exercise can feel like a safe place to experience difficult feelings and explore their meanings. It can be a path in reclaiming a solid sense of self and a tool to work through conflicts we may have missed. It is also in the journal writing where I have been able to reflect more deeply on my experiences of exercise. Perhaps it is important to note the benefits of the two running parallel.

The following is a model developed by Marcus, Rakowski, and Ross (Towers, Flett & Seebach, 2005) which shows five stages of change in exercise (see Table 4, p. 35). It is a useful model when thinking about assessing clients’ readiness for the development of new behaviours and has been adapted from a transtheoretical model of behaviour change – stage theory. The five stages suggest that we are always in one element of change, as we will always fall into one of the categories below:

**Table 4: Five stages of exercise**

<b>Five Stages of Exercise</b>	
<b>Stage</b>	<b>Description of Stage</b>
Precontemplation	I currently do not exercise, and I do not intend to start exercising in the next 6 months
Contemplation	I currently do not exercise, but I am thinking about starting to exercise in the next 6 months
Preparation	I currently exercise some, but not regularly
Action	I currently exercise regularly but I have only begun doing so within the last 6 months
Maintenance	I currently exercise regularly and have done so for more than 6 months

Although throughout the majority of this dissertation I was in the maintenance phase, it was easy to notice the (what was for me) dread of precontemplation and contemplation. It is here I noticed how important consistency, much like going to therapy, is and how my depressive moods were less of a barrier to exercise when I maintained this consistency.

Rethorst, Wipfli, and Landers (2009) found significant differences in effects for exercise and frequency within the clinically depressed population. Exercising five times per week resulted in a significantly larger effect than exercising two to four times per week. There appears, however, to be conflicting results in several studies of exercise, frequency, and depression. One study showed that three times per week versus five times per week did not matter and was also below the American public health recommendation for exercise (Dunn, Trivedi, & Kampert, 2005). Another study, which combined exercise and antidepressants, also found that a higher dose of exercise was more effective than a lower dose (Trivedi, Greer, Grannemann, Chambliss, & Jordan, 2006). Going to the gym is a bit like taking an antidepressant. The difficulty for me, however, was within the motivation required getting to the gym.

Do not let your adorning be external – the braiding of hair and the putting on of gold jewellery, or the clothing you wear – but let your adorning be the

hidden person of the heart with the imperishable beauty of a gentle and quiet spirit. (1 Peter 3:3-4, Holy Bible)

One of my main sources of motivation has been social media. Whether it be trolling through my Facebook feed looking for empty words of inspiration or looking at the various shirtless selfies of Instagram models flexing their muscles. Unfortunately, most of these photos provided an unrealistic goal due to the computerised filters that made them look more aesthetically pleasing. I admit, at times I wanted to look like that particular model while immersed in this dissertation process; however I can also acknowledge how unobtainable this is and accept this fact. Other people may not have the capacity to recognise this and go on a journey which leads them further away from their authentic self; such people may struggle with low self-esteem, body image issues, or body dysmorphia. Teenagers are particularly susceptible to this struggle. What was presented on social media was also evident in the gym. The health and fitness industry have several sales pitches that attempt to sell exercise as a fashion product, often sexualising it. At times, the gym felt like a fragile place with members looking like walking adverts in their new gear. I too found myself seduced by the mirror and obsessing over each body part, at times wondering if I should also take a selfie and post it online to see how many 'likes' I could get. Social media has increased the level of surveillance in the fitness world. Whereas before, how someone worked out used to just be between yourself and the gym, social media has pressured people to present themselves at their best (not just within the fitness world).

Self-esteem was a recurring theme within this dissertation, especially within historical aspects of exercise and health (asthma) and body image. As I was unable to do the motor tasks that my peers were doing, I often felt inadequate and subsequently developed a low self-esteem. This isolated me from my peers as I could not involve myself in the social aspects of the sports or missed days at school. Having a healthy self-esteem involves a sense of mastery, competence, and even an increased sense of identity. Exercising as a late adolescent and adult has provided me a tool to refocus my self-esteem into a more positive outlet (and to take back what was taken away from me – the ability to exercise). I have noticed that when I exercise I feel good, and when I feel good I want to exercise, creating a healthy loop. I also grew up feeling unhappy about my body as I was very overweight. This was the consequence of asthma, no exercise, and medication that ballooned my appetite

and increased weight gain. Throughout this dissertation process, it has been obvious that exercise has brought up self-image issues and that exercise can also be an important tool for developing a healthier perception of my body. Mastering exercise, and not needing the doctors and medications I used in my childhood, gives me control. Needless to say, exercising has not always been the easiest to pursue and has been fraught with many barriers.

A study, which included six qualitative and seven quantitative measures on barriers to exercise, concluded that the most common barriers to exercise were emotion and behaviour regulation, environmental context and resources, beliefs about capabilities (and consequences), intentions and social influences (Glowacki, Duncan, Gainforth, & Faulkner, 2017). Furthermore, the majority of their participants in the quantitative studies identified “low mood,” “lack of energy” and “being too tired” as barriers within this domain, all symptoms of depression. In contrast, according to Corrigan (2004), a leading reason for exercise being suggested as an alternative or complimentary treatment is that it is free of the stigma sometimes associated with conventional treatments. However, in the modern world, with the likes of social media, an increase of awareness in appearance, and almost narcissistic traits; stigma can appear when setting foot in the exercise world. I have experienced exercise as a chore, when it is viewed as obligatory – something I feel like I need to do. Instead, it might be more useful to think of exercise as something central to being human and not an additive to our lives that we may begrudgingly participate in. Exercise is both fun and necessary.

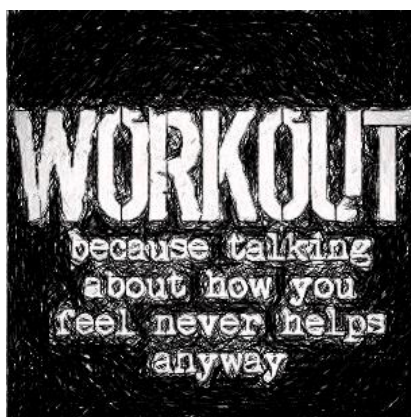
Findings in a study on traditional masculine gender norms show a threefold impact on men with depression affecting depressive symptom type and expression, men’s attitudes, intentions, and behaviours related to help-seeking and the type of treatments and coping strategies men are willing to engage with and commit to (Seidler, Daws, Rice, Oliffe, & Dhillon, 2016). Over my months of dedication to the gym (no matter what gym I attended), there has been an overwhelming dominant presence of male to female ratio. Perhaps the gym is perceived as more of a masculine place to exercise, or at least men have more implicit permission to “be ok” exercising in the gym, compared to women. A further study about masculine and feminine stereotypes suggested masculine stereotypes as being detrimental to men’s, but not women’s, exercise motivation and participation (Howe, Welsh, & Sabiston, 2017). The research proposed that increasing gender equality has left men with

fewer places to demonstrate masculinity, resulting in some men developing a compensatory need to publicly display their masculinity, primarily through a muscular body. If maintaining a muscular physique becomes central to a man's self-esteem, he is considered ego-involved in muscle building and maintenance. It is important as a psychotherapist to be aware of not only one's own responses to sexuality, but how sexual orientation interacts with exercise and sporting environments. A survey of university students in America showed male students and athletes as expressing more homophobic attitudes and perceptions than female students or non-athletes (Hemphill & Symons, 2009).

As well as sexuality, a person's culture and ethnicity are important to consider. Each individual I have worked with who has an interest in exercise has been drawn to different forms of physical activity based on his or her culture, history, and even family dynamics. I was drawn to Capoeira, an Afro-Brazilian fight dance because I come from a large and loving family. However, growing up, I struggled with social anxiety when it came to anything outside of my close family unit. With Capoeira, one learns the culture and history of the fight-dance, how it came about, and why it is important to pursue. We gather in a circle with musical instruments and sing songs that may be related to life, lost loved ones, songs of inspiration, or what is even happening in the present moment. Capoeira was also used against the colonial guard in Rio in the 1800s when the colonial government tried to suppress it and then subsequently attempted to suppress Capoeira and establish punishment to those who practiced it. The roda (circle that people form around others who dance) was a place where I could safely find my voice and express what had yet to be expressed but needed to be.

Many professions have the potential to cross-platform with another. Exercise and psychotherapy is having an increase in population of writers (Hays, 1999) and the incorporation of psychosomatic work is becoming more mainstream. Yoga, for example, is becoming more mainstream in Employee Assistance Programmes (EAP) in America, where clients of contracted organisations can walk into an EAP centre, grab a yoga kit and exercise (EAP Conference, 2017). Like fashion, psychotherapy has a history of having "the 'in' thing" – this would currently be the practice of mindfulness. As mentioned above, exercise can be a bit like practicing meditation.

I found an image while immersed in Instagram after a session at the gym that reads “workout, because talking about how you feel never helps anyway” (Figure 11).



**Figure 11: Irony**

I remember giggling and staring at it for several seconds. It captured me. Irony aside, there was truth in it. Working out on many occasions has felt much more therapeutic than a session with my therapist. Sometimes, the last thing I want to talk about are feelings or literally sit on a chair in silence with my therapist. Punching a boxing bag, swinging the oar on the waters, or lifting the bar over my head have often felt more appealing. A therapist, Goodman (Wallman, Morton, Goodman, & Grove, 2005) described working from a position of health when out walking, rather than lying on a couch which is symbolic to being sick. He suggested vigorous physical activity can elicit emotions better than slouching in a chair.

Exercise can encourage being more in the present moment. In traditional therapy, the client and therapist are sitting facing one another. ‘Walk and talk therapy’ is a style of therapy that developed through psychotherapists’ experiences of running and psychotherapy in the 1970s (Revell, 2015). Thaddeus Kostrubala, a psychiatrist, believed running and psychotherapy as having three distinct differences to that of psychotherapy on a seat. First, in running therapy the client and therapist are upright together outdoors; second, running therapy took the mystery out of therapy – it was outside for everyone to see, thereby making therapy less intimidating and shameful; and lastly, both client and therapist were getting the benefits of running during the session.

Hays (1999) succinctly provided five potential roles of a therapist in relation to the client and exercise that are useful in understanding the variation of roles a therapist may have when supporting someone on his or her exercise journey. I have summarised these roles below:

### **The consultant**

The consultant has familiarity with exercise but does not necessarily need to know about all forms of exercise. The consultant may encourage exercise as part of the treatment plan and recommend it to help alleviate symptoms of depression or anxiety. Consultants are also aware of basic terminology such as frequency, intensity, type and duration.

### **Support and encouragement**

Support and encouragement is best used for clients who are already familiar with exercise and appreciate the role exercise has on their wellness.

### **Technical advice**

The technical advisor is able to teach the client specific techniques and provide information about the physical and psychological effects of exercise. This is typically described as psycho-education.

### **Role model**

Being aware of the therapeutic frame and what is useful for the client, a therapist may disclose his or her personal use of exercise and provide suggestions or information to clients. Hays (1999) described this role as having a natural authority and credibility when describing exercise to clients. A therapist may want to be mindful of potential idealisation or an avoidance of the topic of exercise due to the client's feelings of inadequacy around the topic of exercise compared to that of the therapist.

### **Participant**

The therapist assumes the role of partner with the client in exercise. The dynamics change significantly and opens up opportunity and makes issues of boundaries, power, and other dynamics more obvious.

Although I have not yet exercised with my clients, I have noticed my own benefits of exercise when sitting with my clients. What I have noticed the most

(post-exercise), besides sometimes feeling a bit sore, is that my posture is more upright. I have always struggled keeping a good posture, with countless hours of computer gaming in both my youth and adult life. I often felt confident and more assured post-workout, especially if it was a heavy lifting day and I achieved a new personal best. I have often wondered how much of this my clients feel, whether they feel more ‘held’ with my upright posture. The mind also often feels clear after a workout, almost like a detox. After intensive exercise my mind and body felt more at one. I am also accomplishing a task in the process of exercising. Like a rock – solid and grounded.

## **Summary**

This section has elaborated on the ideas within the previous findings chapter. It has explored my internal experiences of exercise and the journey of journal writing. Implications of practice have been briefly explored. There is a large amount of research that suggests exercise has much to offer psychotherapy (Hays, 1999); however my writing has been limited to my findings to stay with the heuristic process. The importance of matching and my experiences of gender have also been explored.

## **Conclusion**

By way of heuristic enquiry, my hope is that this dissertation can use my lived account of exercise to help others understand the relationship between exercise and psychotherapy, how this may be integrated into practice, and how psychotherapists can better understand their clients’ relationship to exercise. This dissertation is a subjective account of my experiences that I feel are useful in understanding the relationship between exercise and psychotherapy. I feel there is an increasing need to reflect on exercise and how it impacts both therapist and client.

Lastly, a Salvation Army hymn written by Phillip Bliss (1838-1876), brought to my attention by my supervisor, titled ‘*Dare to be Daniel*’ (Hymnary, n.d.) feels appropriate in concluding this dissertation. Biblically, Daniel is well known for being in the lion’s den. ‘Dare to be Daniel’ refers to trusting God, surrendering control to Him, even in foreign territory. Daniel was a man who, as a young adult, was forced to serve in the courts of foreign kings – all of whom were not the wisest of kings – and was often threatened with death. Amid these threats, Daniel stood

firm in God. He shined brightest in unknown lands. The most recent two years have been challenging times, mostly because of leaving an abusive marriage and subsequent fallout. Although my Christian faith believes that God wants families to survive, I believe He wants us to ‘Dare to be a Daniel’ – and stand firm. How does this relate to exercise? Exercise has helped surface this understanding, in relationship to myself, personal trainer, and the process of exercise itself. Like the notion of finding oneself in the relationship with God, one can find and learn about oneself in our relationship to exercise.

Dare to be Daniel,  
Dare to stand alone!  
Dare to have a purpose firm!  
Dare to make it known.  
(Philip Bliss, 1873)

## References

- Atkins, D., & Lowenthal, D. (2004). The lived experience of psychotherapists working with older clients: An heuristic study. *British Journal of Guidance and Counselling, 32*(4), 493-509
- Coogler, R. (Director). (2015). *Creed* [Motion picture]. Philadelphia, USA: MGM.
- Corrigan, P. (2004). How stigma interferes with mental health care. *American Psychologist, 59*(7), 614-625. doi: 10.1037/0003-066X.59.7.614
- Crotty, M. (Ed.). (1998). Phenomenology. In *The foundations of social research: Meaning and perspective in the research process* (pp. 78-86). City, Australia: Allen & Unwin.
- Douglass, B. G., & Moustakas, C. (1985). Heuristic inquiry: The internal search to know. *Journal of Humanistic Psychology, 25*(3), 39-55. doi: 10.1177/0022167885253004
- Dunn, A. L., Trivedi, M. H., Kampert, J. B., Clark, C. G., & Chambliss, H. O. (2005). Exercise treatment for depression: Efficacy and dose response. *American Journal of Preventive Medicine, 28*(1), 1-8. Retrieved from <http://www.journals.lww.com>
- Glowacki, K., Duncan, M. J., Gainforth, H., & Faulkner, G. (2017). Barrier and facilitators to physical activity and exercise among adults with depression: a scoping review. *Mental Health and Physical Activity, 13*(1), 108-119. Retrieved from [https://www.researchgate.net/profile/Krista\\_Glowacki/publication/320364990\\_Barriers\\_and\\_facilitators\\_to\\_physical\\_activity\\_and\\_exercise\\_among\\_adults\\_with\\_depression\\_A\\_scoping\\_review/links/5ab15024a6fdcc1bc0bfe0cb/Barriers-and-facilitators-to-physical-activity-and-exercise-among-adults-with-depression-A-scoping-review.pdf](https://www.researchgate.net/profile/Krista_Glowacki/publication/320364990_Barriers_and_facilitators_to_physical_activity_and_exercise_among_adults_with_depression_A_scoping_review/links/5ab15024a6fdcc1bc0bfe0cb/Barriers-and-facilitators-to-physical-activity-and-exercise-among-adults-with-depression-A-scoping-review.pdf)
- Grogan, S. (2016). *Body Image: Understanding body dissatisfaction in men, women and children*. Taylor & Francis.
- Hays, K. F. (1999). *Working it out: Using exercise in psychotherapy*. Washington, DC, MD: American Psychological Association.

- Helgadóttir, B., Forsell, Y., Hallgren, M., Möller, J., & Ekblom, Ö. (2017). Long-term effects of exercise at different intensity levels on depression: A randomized controlled trial. *Preventive Medicine, 105*, 37-46.
- Helgadóttir, B., Owen, N., Dunstan, D., Ekblom, O., Hallgren, M., & Forsell, Y. (2017). Changes in physical activity and sedentary behavior associated with an exercise intervention in depressed adults. *Psychology of Sport and Exercise, 37*(8) 10-18. Retrieved from <http://www.elsevier.com>
- Hemphill, D., & Symons, C. (2009). Sexuality matters in physical education and sport studies. *Quest, 61*, 397-417.
- Holy Bible. (1973). *The new international version*. Minto, Australia: The Bible Society in Australia Inc.
- Howe, H. S., Welsh, T. N., & Sabiston, C. M. (2017). The association between gender role stereotypes, resistance training motivation, and participation. *Psychology of Sport and Exercise, 33*, 123-130.
- Hymnary. (n.d.). *Dare to be daniel*. Retrieved November 27, 2017, from [https://hymnary.org/n/text/standing\\_by\\_a\\_purpose\\_tree](https://hymnary.org/n/text/standing_by_a_purpose_tree)
- Kenny, G. (2012). An introduction to Moustakas's heuristic method. *Nurse Researcher, 19*(3), 6-11.
- Krips, H. (2010). The politics of the gaze: Foucault, Lacan and Zizek. *Culture Unbound: Journal of Current Cultural Research, 2*(1), 921-102.
- McEntee, D. J., & Halgin, R. P. (1996). Therapists' attitudes about addressing the role of exercise in psychotherapy. *Journal of Clinical Psychology, 52*(1), 48-60.
- Mikkelsen, K., Stojanovska, L., Polenakovic, M., Bosevski, M., & Apostolopoulos, V. (2017). Exercise and mental health. *Maturitas, 106*, 48-56.
- Moustakas, C. (1990). *Heuristic research: Design, methodology and applications*. London, England: Sage publications.
- Pollock, K. M. (2001). Exercise in treating depression: Broadening the psychotherapist's role. *Journal of Clinical Psychology, 57*(11), 1289-1300.
- Rethorst, C. D., Wipfli, B. M., & Landers, D. M. (2009). The antidepressive effects of exercise. *Sports Medicine, 39*(6), 491-511.
- Revell, S. (2015). Experiences of therapists who integrate walk and talk into their professional practice. *Counselling and Psychotherapy Research, 16*(1), 35-43

- Royak-Schaler, R., & Feldman, R. H. (1984). Health behaviors of psychotherapists. *Journal of Clinical Psychology, 40*(3), 705-710.
- Sela-Smith, S. (2002). Heuristic research: A review and critique of Moustaka's method. *Journal of Psychology, 42*(3), 53-88.
- Seidler, Z. E., Dawes, A. J., Rice, S. M., Oliffe, J. L., & Dhillon, H. M. (2016). The role of masculinity in men's help-seeking for depression: A systematic review. *Clinical Psychology Review, 49*, 106-118.
- Simon, P., & Garfunkel, A. (1970). The boxer. On *Bridge over troubled waters* [MP3 file]. USA: Columbia Records.
- Stanton, R., Donohue, T., Garnon, M., & Happell, B. (2016). Participation in and satisfaction with an exercise program for inpatient mental health consumers. *Perspectives in Psychiatric Care, 52*(1), 62-67.
- Talk: John F. Kennedy (2017). In *Wikitalk*. Retrieved April 1, 2018, from [https://en.wikiquote.org/wiki/Talk:John\\_F.\\_Kennedy](https://en.wikiquote.org/wiki/Talk:John_F._Kennedy)
- Talk: Muhammad Ali. (2017). In *Wikitalk*. Retrieved April 20, 2017, from [https://en.wikiquote.org/wiki/Talk:Muhammad\\_Ali](https://en.wikiquote.org/wiki/Talk:Muhammad_Ali)
- The Ministry of Health New Zealand. (2018). *Eating and activity guidelines for New Zealand adults*. Retrieved June 27, 2017, from <https://www.health.govt.nz/publication/eatingand-activity-guidelines-new-zealand-adults>
- Trivedi, M. H., Greer T., Grannemann, B., Chambliss, H., & Jordan, A. (2006). Exercise as an augmentation strategy for treatment of major depression. *Journal of Psychiatric Practice, 12*(4), 205-213. Retrieved from <http://www.journals.lww.com>
- Towers, A. J., Flett, R. A., & Seebeck, R. F. (2005). Assessing potential barriers to exercise adoption in middle-aged men: Over-stressed, under controlled, or just too unwell? *International Journal of Men's Health, 4*(1), 13.
- Wallman, K. E., Morton, A. R., Goodman, C., & Grove, R. (2005). Exercise prescription for individuals with chronic fatigue syndrome. *Medical Journal of Australia, 183*(3), 142.
- Workout. (n.d.). *Dictionary.com unabridged*. Retrieved April 4, 2018, from [www.dictionary.com](http://www.dictionary.com)