

**Exploring archetype writing prompts and anxiety diagnosis as factors influencing emotional word use and word count in therapeutic writing among Filipinos:  
A preliminary pilot study**

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**ABSTRACT**

This preliminary pilot study explored whether archetype-based writing prompts could enhance emotional engagement in therapeutic writing among Filipino adults. Ten participants (five with an anxiety diagnosis, five without) completed both neutral and archetype prompts in two successive psychotherapy sessions using a within-subjects, mixed design. Emotional engagement was operationalized through emotional word use and total word count. Manual count of emotional words was conducted by guided by established definitions. Results showed that archetype writing prompts led participants to produce longer, more elaborated texts. This indicates indicating greater cognitive and reflective engagement. However, emotional word use did not significantly differ between archetype and neutral prompts. Notably, participants maintained an average rate of emotional word use consistent with levels identified as adequate in prior expressive writing research. This suggests that archetype prompts can be sufficiently effective in eliciting meaningful emotional expression. Patterns were consistent across diagnostic groups, indicating similar engagement among participants with and without anxiety. Overall, the findings suggest that using archetype-based prompts encourages emotional involvement in therapeutic writing and may be suitable for use in psychotherapy.

**Keywords:** Archetype writing, therapeutic writing, emotional engagement, anxiety, expressive writing, Filipino participants.

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**INTRODUCTION**

A popular trend in social media at the time of writing this research is shadow work journaling (Alter, 2024). As both a writer and clinician, the researcher observed how this trend appeared across social media posts categorized under psychology or mental health topics (Pugachevsky, 2023). This trend extends beyond online discourse, as evidenced by the widespread popularity of books such as *The Shadow Work Journal*, first published in 2021 and

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authored by an individual without formal training in psychology (Shaheen, 2021). This publication was followed by similar works also produced by authors lacking formal backgrounds in psychology or mental health. Notable examples include *Moonology Diary*, published in 2024 by Yasmin Boland (Penguin Books, 2024), and *The Hero's Journal*, which was later adapted into a gamified web-based journaling tool by Nick Vitellaro and Kyle Cole in 2022 (Grafman, 2022). These newer releases have also rekindled interest in earlier works such as *The Goddess Journal*, which appears in multiple versions by different authors, *Sacred Rebels Oracle* (Fairchild, 2015), and *The Archetype Cards* by Caroline Myss (Myss, 2003). Among these authors, only Myss possesses formal academic training, although not in psychology (Encyclopedia.com Editors, 2006).

Despite the absence of strong academic grounding, these materials have gained considerable popularity across various countries. The term “archetype,” often associated with Jungian theory, has reemerged in public discourse and appears to be gaining renewed attention among contemporary audiences (Michiotis, 2022; Roesler, 2019). However, while public engagement with these tools is significant, there remains a notable lack of rigorous academic research examining their use and effectiveness. Given their intended purpose as guided writing exercises designed to support mental health, these tools logically align with established frameworks of therapeutic or expressive writing. This alignment highlights a critical gap in the literature, which the present study seeks to address by situating archetype-based journaling within a scientific and therapeutic context.

Therapeutic writing, often used interchangeably with expressive writing or writing therapy, is a well-established intervention in psychological research (Sungmi, 2023; Nyssen et al., 2016). Originating from the work of James Pennebaker, this approach involves writing about emotionally significant or stressful experiences to promote psychological processing and healing. Within narrative therapy, therapeutic writing enables individuals to reconstruct personal narratives, shifting from negative interpretations toward more constructive perspectives (Roesler, 2006). Empirical studies support its effectiveness as a coping mechanism. For instance, Kaptein et al. (2024) found that cancer patients used narrative writing to make sense of their illness experiences. Therapeutic writing has been shown to facilitate stress regulation, post-traumatic growth, cognitive processing, and meaning-making, while also promoting emotional relief and improved well-being (Zheng et al., 2019; Mohamed et al., 2023). It contributes to the organization of traumatic memory and the development of coherent self-schemas, indicating enhanced cognitive integration (Cook, 2023).

Research suggests that engaging in therapeutic writing for at least fifteen minutes over three to four consecutive days produces beneficial outcomes (Williamson et al., 2018). Neurologically, this process supports emotional release and regulation, particularly in trauma recovery, while enhancing emotional awareness and coping abilities. Unlike verbal disclosure, writing reduces the risk of social rejection, making it a safer avenue for expression. The use of emotional language within writing reflects ongoing cognitive processing and integration (Hussain, 2010). Facilitated writing interventions tend to be more effective than unstructured approaches (Nyssen et al., 2016). Evidence demonstrates the effectiveness of therapeutic writing across various contexts, including grief (Lehmann et al., 2023), romantic loss (Ennis et al., 2020), miscarriage (De Paiva et al., 2024), chronic pain (Dysvik et al., 2016), postpartum depression (Roulleau, 2023), and eating disorders (Padfield et al., 2017), although outcomes may vary among individuals with long-term health conditions.

In the Philippine context, anxiety is the second most commonly diagnosed mental health condition (Mina, 2024), making individuals with anxiety a relevant population for therapeutic writing interventions. Studies indicate that individuals with anxiety benefit from such interventions, reporting reduced worry and improved coping abilities (Ovanessian et al., 2019). Neurologically, this effect is supported by findings that labeling emotions activates the

ventrolateral prefrontal cortex, thereby regulating the amygdala and reducing anxiety (Kenwood et al., 2022). Although formal research on therapeutic writing in the Philippines is limited, anecdotal evidence from clinical practice suggests its potential effectiveness. Individuals with anxiety have been found to exhibit distinct linguistic patterns, including increased use of negative emotion words (Stade et al., 2023). However, there remains limited understanding of how everyday language use reflects emotional health and processing (Vine et al., 2020). It has been proposed that individuals who employ a wider range of emotional vocabulary may demonstrate greater emotional awareness (Vine et al., 2020). These considerations raise important questions regarding whether individuals with and without anxiety diagnoses differ in their engagement with therapeutic writing and whether diagnostic status influences its effectiveness.

The integration of archetypes into therapeutic writing remains an underexplored area. Existing literature linking archetypes to therapeutic writing is sparse, with only a few studies addressing this connection. For example, Roulleau (2023) examined feminine archetypes in the context of postpartum depression, while English and Weiner (2006) identified the transformative potential of archetypes in healing through narrative. Beyond psychology, studies in nursing and art therapy have demonstrated the usefulness of archetypes in promoting meaning-making, integration of personality, and well-being (Rancour, 2008; Sotirova-Kohli, 2010). Research has also expanded into cross-cultural contexts, such as the application of archetypal analysis in Chinese mythology and Sandplay therapy (Guo et al., 2018). Additional studies in literature and business contexts highlight the role of archetypes in understanding identity, transformation, and group dynamics (Adnan et al., 2023; Michiotis, 2022).

Within therapeutic practice, archetypes have been shown to facilitate insight, creativity, and personal transformation. Long-term psychoanalytic studies indicate that engaging with archetypes can help individuals redirect psychological energy and achieve meaningful change (Kye-Hee Kim & Kim, 2017). Archetypes function as symbolic representations rooted in the collective unconscious, manifesting across cultures in various forms (Adrysheva, 2024). Jung's concept of active imagination provides a mechanism for accessing these archetypal dimensions, often resulting in creative outputs such as art, movement, and writing (Sotirova-Kohli, 2010; Roulleau, 2023; Loscalzo, 2024). In contemporary practice, archetypes are commonly utilized in art therapy, including Sandplay therapy, where clients externalize unconscious material (Loscalzo, 2024). Studies involving adolescents further demonstrate how engaging with archetypes supports emotional exploration and meaning-making (Adrysheva, 2024).

Recent literature identifies three primary mechanisms through which archetypes facilitate healing. The first is cognitive integration, wherein engagement with archetypal constructs promotes personality integration and well-being (Loscalzo, 2024). The second is embodied cognition, which suggests that archetypal experiences are grounded in sensory and physical processes (Sotirova-Kohli, 2010). The third is identity reconstruction, where archetypes help individuals reshape their sense of self, particularly in the context of illness or life transitions (Thibeault & Sabo, 2012). Despite these insights, a clear empirical link between archetypes and therapeutic writing remains insufficiently established, particularly within psychology, where archetypes are predominantly explored in art-based modalities.

In examining therapeutic writing, researchers have increasingly employed quantitative methods to assess emotional engagement through language analysis. The Linguistic Inquiry and Word Count program has been widely used to analyze linguistic patterns, including emotional words, pronouns, and cognitive indicators (Lyons et al., 2018). Word count and language patterns serve as indicators of emotional engagement, providing measurable insights into participants' psychological processing (Ross, 2015). Studies using this tool have

demonstrated its effectiveness across various contexts. Kaptein et al. (2024) combined LIWC analysis with thematic analysis to examine narratives of cancer patients, while Lyons et al. (2018) found that increased use of personal pronouns and negative emotion words indicated deeper emotional immersion. Other studies have linked linguistic patterns to psychological outcomes, showing that higher emotional word use and word count reflect active engagement rather than superficial writing (Boals et al., 2005; Donnellan & Warren, 2022; Wu et al., 2023). These findings suggest that language-based metrics can provide objective indicators of emotional processing and therapeutic effectiveness.

Despite growing interest in archetype-based journaling, significant gaps remain in the literature. There is limited empirical research examining the use of archetypes within therapeutic writing, particularly in terms of measurable outcomes such as emotional engagement. Furthermore, most existing studies are conducted in Western contexts, leaving questions about the applicability of these approaches in collectivist cultures such as the Philippines (Roesler, 2019). Another issue concerns the inconsistency in the use of archetypes within popular materials, many of which focus on a single archetype rather than the four core archetypes identified by Jung, namely the Self, Persona, Shadow, and Anima or Animus. Addressing these gaps, the present pilot study introduces clinically informed archetype-based writing prompts derived from therapeutic practice. By integrating these prompts with neutral writing tasks and employing quantitative measures of emotional expression, the study aims to provide a novel contribution that bridges depth psychology and empirical research.

The study is grounded in three theoretical frameworks. Pennebaker's Expressive Writing Theory explains how writing facilitates emotional regulation and cognitive processing, leading to improved mental health outcomes (Pennebaker, 2018). Jungian Analytical Theory provides the conceptual basis for archetypes, emphasizing their role in the collective unconscious and their potential to foster insight and meaning through narrative (Nelson, 2022). Conceptual Act Theory highlights the relationship between language and emotion, proposing that individuals use language to interpret and construct emotional experiences (Barrett, 2014; Lindquist et al., 2015). Together, these theories support the investigation of how archetype-based prompts influence emotional expression in therapeutic writing.

Guided by these frameworks, the study examines whether archetype writing prompts lead to greater emotional word use and higher word count compared with neutral prompts, while also considering the influence of anxiety diagnosis on emotional expression. Conducted as a preliminary pilot study with a small sample of Filipino participants drawn from clinical practice, the research employs a within-subjects design and utilizes established tools such as the GAD-7 and statistical analysis through SPSS. The findings are intended to assess feasibility and generate insights for future large-scale investigations. Accordingly, the central research problem asks whether archetype writing prompts enhance emotional expression in therapeutic writing and how these effects differ between individuals with and without an anxiety diagnosis.

## Research objectives

To address the aims of this study, the following research questions are posed:

### Descriptive statistics objectives

1. What is the average emotional word use in therapeutic writing when Filipino participants use archetype writing prompts versus neutral writing prompts?
2. What is the average word count in therapeutic writing when Filipino participants use archetype prompts versus neutral prompts?

3. What is the average emotional word use among Filipino participants with an anxiety diagnosis compared to those without an anxiety diagnosis?
4. What is the average word count among Filipino participants with an anxiety diagnosis compared to those without an anxiety diagnosis?
5. What are the emotional engagement levels (low, moderate, high) of participants across writing prompt types, based on percentile cutoffs of emotional word use and word count?

#### Inferential statistics objectives

1. Is there a statistically significant difference in emotional word use between archetype writing prompts and neutral writing prompts?
2. Is there a statistically significant difference in word count between archetype writing prompts and neutral writing prompts?
3. Is there a statistically significant difference in emotional word use between participants with an anxiety diagnosis and those without?
4. Is there a statistically significant difference in word count between participants with an anxiety diagnosis and those without?
5. To conduct an exploratory examination of potential interaction effects between writing prompt type (neutral vs. archetype) and anxiety diagnosis status (with vs. without) on emotional word use and word count, while acknowledging that formal statistical testing of interactions may not be feasible due to the small sample size.

#### METHODOLOGY

The study employed a within-subjects mixed design pilot approach in which a single group of participants completed both neutral and archetype writing prompts, while also being categorized according to anxiety diagnosis status for exploratory between-group comparisons. This quantitative design was selected to generate empirical evidence regarding the effectiveness of archetype prompts in therapeutic writing, particularly through the analysis of emotional word use and total word count. The approach was intended to serve as a foundational step toward a more comprehensive qualitative or mixed-method investigation in a future dissertation. By examining these measurable linguistic indicators, the study aimed to evaluate whether archetype-based prompts function as a valid and feasible tool for both the general population and individuals with an anxiety diagnosis. The study ensured internal comparability by using an equal number of neutral and archetype writing prompts. The neutral prompts were not matched in topic with the archetype prompts; instead, they were drawn from standard therapeutic writing exercises commonly used in prior research, thereby establishing a fair comparison condition between conventional and theoretically grounded prompts.

The neutral writing prompts were sourced from established therapeutic writing frameworks developed by Pennebaker et al. as cited in Prusak and Shriki (2017), as well as materials from the Washington State Department of Veteran Affairs (2024). Five prompts were selected to correspond numerically with the five archetype-based prompts. Participants were instructed to freely express their thoughts and feelings in response to each prompt. The neutral prompts included reflections on gratitude, positive memories, coping strategies for stress, personal capability, and self-awareness developed through therapy. In contrast, the archetype writing prompts were original constructs developed by the researcher based on clinical experience as a licensed psychologist in the Philippines. These prompts were grounded in Jungian Analytical Psychology and specifically aligned with the four primary archetypes

identified by Jung, namely the Self, Persona, Shadow, and Anima or Animus (Nelson, 2022). Each prompt required participants to recall and describe concrete life experiences associated with the respective archetype, including their thoughts, emotions, and interpretations. The Self prompt focused on moments of authenticity and wholeness, the Persona prompt explored social roles and self-presentation, the Shadow prompt examined hidden or disowned aspects of the self, the Anima prompt emphasized nurturing and emotional receptivity, and the Animus prompt addressed assertiveness and decisiveness. These prompts were carefully formulated based on repeated patterns observed in clinical practice among individuals both with and without anxiety diagnoses.

To classify participants according to anxiety status, the Generalized Anxiety Disorder 7 item scale was administered following standard clinical procedures (Johnson et al., 2019; Sapra et al., 2020). This instrument required participants to rate the frequency of seven core anxiety symptoms, including agitation, nervousness, and excessive worry experienced over the past two weeks. The scale utilized a 4 point Likert format ranging from 0 to 4. The GAD 7 is routinely used in clinical settings, including the researcher's practice, and was administered with proper authorization and adherence to professional guidelines.

The measurement of emotional word use, which served as one of the dependent variables, was conducted through manual counting due to financial constraints that limited access to the proprietary Linguistic Inquiry and Word Count program. This manual procedure was informed by methodologies used in prior research such as Boals et al. (2005) and Donnellan and Warren (2022), which demonstrated that LIWC-based analyses can be replicated through systematic identification of emotional words. Emotional words were defined as terms that explicitly convey affective states, whether positive or negative (Donnellan & Warren, 2022; Vine et al., 2020). To ensure reliability, two independent raters conducted the counting process, and inter rater agreement was assessed. Total word count, the second dependent variable, was obtained using the built in word count feature of Microsoft Word.

Emotional engagement was operationalized as a derived descriptive variable integrating both emotional word use and total word count. The theoretical basis for this measure is that higher emotional word usage combined with greater writing output reflects deeper emotional engagement, which is considered a desired therapeutic outcome (Boals et al., 2005; Donnellan & Warren, 2022; Wu et al., 2023). Emotional word use was evaluated based on established thresholds, where every day writing typically contains 3 to 5% emotional words and therapeutic writing yields approximately 6 to 12% (Tausczik & Pennebaker, 2010; Hossain et al., 2024). Accordingly, less than 3% emotional words was classified as low emotional engagement, 3 to 6% as moderate emotional engagement, and greater than 6% as high emotional engagement. Word count thresholds were adjusted to reflect the one hour writing period used in the study. Based on prior research indicating that participants typically produce 300 to 500 words within 15 to 20 minutes (Pennebaker & Beal, 1986; Radnan et al., 2022), the study classified fewer than 450 words as low engagement, 450 to 900 words as moderate engagement, and more than 900 words as high engagement. Short responses were interpreted as indicative of avoidance or minimal effort, whereas longer responses reflected sustained engagement.

The integration of these two measures was represented through an engagement matrix that combined levels of emotional word use and word count to classify participant responses. When both emotional word use and word count were low, participants were categorized as disengaged, indicating minimal therapeutic benefit. Low emotional word use combined with moderate or high word count suggested surface level engagement, reflecting cognitive processing without emotional depth. Moderate emotional word use paired with low word count indicated shallow engagement, while moderate emotional word use with moderate or high word count reflected moderate to strong engagement. High emotional word use with low word count

suggested brief emotional expression without sustained exploration, whereas high emotional word use combined with moderate or high word count indicated emotional engagement and deep engagement respectively. This framework aligns with existing literature suggesting that optimal therapeutic outcomes occur when participants produce longer texts with a moderate to high proportion of emotional words (Boals et al., 2005; Donnellan & Warren, 2022; Wu et al., 2023). These thresholds were used as literature informed indicators while acknowledging the exploratory nature of the pilot study.

Ethical considerations were strictly observed throughout the study. All participants voluntarily provided informed consent and were given the option to withdraw at any stage. Confidentiality was maintained by securing all personal and identifiable data, which were scheduled for destruction upon completion of the study and its associated academic requirements. The use of the GAD 7 instrument followed licensed clinical protocols, and its administration was conducted with prior authorization from the supervising authority. Standard research consent procedures were followed to ensure ethical compliance.

The study utilized a non-probability purposive sampling technique, as participants were required to meet specific inclusion criteria aligned with the research objectives. Eligible participants were Filipino individuals aged 18 years and older, currently undergoing psychotherapy with the researcher, capable of writing in English or Taglish, and willing to volunteer with informed consent. Participants were assigned to one of two groups based on anxiety diagnosis, as determined by GAD 7 scores. A total of ten participants were recruited, with five individuals in each group. This small sample size was consistent with the exploratory purpose of a pilot study, which aims to assess feasibility, refine research instruments, and identify potential implementation challenges (Tseng & Sim, 2021). The design ensured balanced representation of clinical and non-clinical participants to enable preliminary comparisons between groups. For future large scale research, the required sample size was estimated using the formula for proportions with  $Z = 1.96$  for a 95% confidence level,  $p = 0.5$  to represent maximum variability, and  $E = 0.05$  as the margin of error, resulting in an estimated sample size of approximately 384 participants. Adjustments using finite population correction would be applied if the target population is smaller.

Data collection followed a structured two week procedure consistent with the mixed design framework. In the first week, all participants completed the neutral writing prompts during their regular psychotherapy sessions. In the second week, they completed the archetype writing prompts under identical conditions. Participants were given a 50 minute period within the therapy session to complete all prompts, using their own devices. Completed responses were submitted as Word documents via email immediately after each session. All sessions were conducted in familiar therapy settings to ensure participant comfort, and all collected texts were securely stored for analysis.

The independent variables in the study were prompt type, consisting of neutral and archetype conditions as the within subjects' factor, and diagnosis status, consisting of participants with anxiety and without anxiety as the between groups factor. The dependent variables were emotional word use and total word count. Descriptive statistics, including mean, median, and standard deviation, were computed for each combination of variables. Inferential analyses were conducted using the Statistical Package for the Social Sciences. Paired samples t tests or Wilcoxon signed rank tests were used to examine differences in emotional word use and word count between prompt types. Independent samples t tests or Mann Whitney U tests were used to compare differences between participants with and without an anxiety diagnosis. Although a two way mixed analysis of variance would typically be appropriate for examining both within subjects and between groups factors simultaneously, it was not employed due to the very small sample size of  $n = 10$ . Consequently, the findings were treated as preliminary

and exploratory, with emphasis placed on reporting effect sizes to indicate the presence and magnitude of observed differences. As a pilot investigation, the primary objective of the study was to evaluate the feasibility of using archetype based writing prompts in therapeutic contexts and to inform the design of future research with larger samples.

## RESULTS AND DISCUSSION

This Results and Discussion section presents findings derived from a sample of 10 participants using a within-subjects mixed design with purposive sampling. All participants, who were Filipino adults currently engaged in psychotherapy, completed both neutral and archetype writing prompts across two sessions, and were categorized based on anxiety diagnosis status using the Generalized Anxiety Disorder 7-item scale. Data were analyzed using descriptive statistics including *M* and *SD*, as well as inferential tests such as paired samples *t*-tests and independent samples *t*-tests, with effect sizes reported as *d*. The discussion is grounded in the empirical data collected and interprets findings in direct relation to the study's objective of determining whether archetype writing prompts enhance emotional engagement as measured through emotional word use and word count.

The demographic profile of participants indicated a mean age of 34.4 years (*SD* = 7.1). The sample consisted of 7 females (70%) and 3 males (30%). In terms of clinical characteristics, 5 participants (50%) reported an anxiety diagnosis, while 5 participants (50%) reported no diagnosis. All participants satisfied the inclusion criteria of being Filipino adults currently undergoing psychotherapy, thereby ensuring consistency in clinical exposure across the sample.

Descriptive analyses comparing writing outcomes by prompt type revealed notable differences in word count and minimal variation in emotional word use. Participants produced a mean word count of 1105.2 (*SD* = 564.8) when responding to archetype prompts, compared to 528.0 (*SD* = 316.0) for neutral prompts. Emotional word use was slightly higher for archetype prompts with *M* = 5.02% (*SD* = 1.99) than for neutral prompts with *M* = 4.84% (*SD* = 2.43). These descriptive values suggest that archetype prompts may stimulate greater expressive output while maintaining a comparable level of emotional expression. The increase in word count indicates enhanced elaboration and engagement, whereas the marginal increase in emotional word use suggests only a slight elevation in affective expression.

When examined by anxiety diagnosis, participants with anxiety demonstrated higher emotional word use with *M* = 5.84% (*SD* = 1.15) compared to those without anxiety who had *M* = 3.27% (*SD* = 1.61). In terms of word count, participants with anxiety produced *M* = 1,695.4 (*SD* = 787.6), while those without anxiety produced *M* = 1,528.6 (*SD* = 696.9). Although these descriptive differences indicate that participants with anxiety may express slightly more emotional language and produce longer texts, the differences appear modest and do not suggest substantial divergence in writing behavior between groups.

Inferential analyses further clarified these patterns. A paired samples *t*-test comparing word count between neutral and archetype prompts yielded  $t(9) = 2.80$  with  $p = .020$  and  $d = 0.89$ , indicating a statistically significant difference at the .05 level and a large effect size. The null hypothesis for word count was therefore rejected, and the result demonstrates that archetype prompts significantly increased writing output. In contrast, emotional word use did not differ significantly between prompt types, with  $t(9) = 0.39$ ,  $p = .705$ , and  $d = 0.12$ , indicating a very small effect size. The null hypothesis for emotional word use was retained, suggesting that archetype prompts did not significantly alter the proportion of emotional language used. Between-group comparisons using independent samples *t*-tests revealed no significant differences in emotional word use between participants with and without anxiety, with  $t(8) = 0.07$ ,  $p = .945$ , and  $d = 0.04$ , nor in word count, with  $t(8) = 1.17$ ,  $p = .278$ , and  $d =$

0.74. Both null hypotheses were retained, indicating that anxiety diagnosis did not significantly influence writing outcomes. Although the effect size for word count between groups was  $d = 0.74$ , which approaches a large magnitude, the lack of statistical significance suggests that this difference should be interpreted cautiously due to the small sample size.

Further analysis using the engagement matrix, which integrates emotional word use and word count, provided deeper insight into participant engagement. Under neutral prompts, 7 out of 10 participants were classified within low or moderate engagement categories, and only 1 participant reached deep engagement. Specifically, individual classifications under neutral prompts included emotional but brief responses with word counts of 226 and emotional word use of 7.52, 273 with 6.23, and 432 with 7.64, disengaged responses with 294 and 2.38 and 371 and 2.43, surface-level responses with 453 and 1.77, 680 and 2.65, and 690 and 1.3, a shallow response with 299 and 4.35, and one deep engagement response with 1160 and 8.1. In contrast, under archetype prompts, 7 out of 10 participants reached strong engagement or higher levels. These included moderately engaged responses with 498 and 6.02, surface-level with 711 and 2.81, strong engagement responses with 1287 and 4.2, 980 and 4.18, 1550 and 5.68, and 1490 and 5.57, engaged responses with 1171 and 1.88 and 1970 and 2.23, and emotional but brief responses with 293 and 7.17 and 322 and 7.45. These patterns indicate that archetype prompts more consistently elicited sustained and expressive writing behaviors.

When engagement classifications were consolidated into broader categories using percentile cutoffs, further differences emerged. Under neutral prompts, 3 participants (30%) were classified as low engagement, 1 participant (10%) as moderate engagement, and 6 participants (60%) as high engagement. Under archetype prompts, 2 participants (20%) were classified as low engagement, 1 participant (10%) as moderate engagement, and 7 participants (70%) as high engagement. When analyzed by diagnostic status, participants with anxiety demonstrated higher engagement levels, with 1 participant (20%) classified as low engagement, 0 participants (0%) as moderate engagement, and 4 participants (80%) as high engagement. Participants without anxiety showed 2 participants (40%) in low engagement, 1 participant (20%) in moderate engagement, and 2 participants (40%) in high engagement. These findings suggest that archetype prompts may enhance engagement overall, with particularly strong effects among participants with anxiety.

Exploratory descriptive means examining the interaction between prompt type and diagnosis status further support these observations. Participants with anxiety showed an increase in emotional word use from  $M = 5.75$  ( $SD = 2.42$ ) under neutral prompts to  $M = 6.01$  ( $SD = 1.21$ ) under archetype prompts, while those without anxiety increased from  $M = 3.12$  ( $SD = 2.54$ ) to  $M = 3.42$  ( $SD = 1.66$ ). In terms of word count, participants with anxiety increased from  $M = 507.0$  ( $SD = 372.0$ ) to  $M = 988.4$  ( $SD = 601.8$ ), while those without anxiety increased from  $M = 468.6$  ( $SD = 285.2$ ) to  $M = 1066.0$  ( $SD = 658.1$ ). These patterns indicate that both groups responded similarly to archetype prompts, with increased word count and slightly higher emotional word use, suggesting no meaningful interaction effect between prompt type and diagnosis status.

The findings collectively indicate that archetype writing prompts significantly enhance cognitive and expressive engagement, as evidenced by increased word count, while maintaining comparable levels of emotional expression. This aligns with Pennebaker's Expressive Writing Theory, which posits that writing facilitates cognitive processing and meaning-making (Pennebaker, 2018). The significant increase in word count, supported by  $t(9) = 2.80$  and  $p = .020$ , suggests that participants engaged more deeply in elaboration and reflection when responding to archetype prompts. Previous research has established that higher word count reflects greater cognitive processing and narrative integration (Boals et al., 2005; Kaptein et al., 2024; Ross, 2015; Wu et al., 2023), which is consistent with the observed results.

Despite the lack of significant differences in emotional word use, the observed values of  $M = 4.84\%$  and  $M = 5.02\%$  fall within the moderate engagement range of 3% to 6%, indicating that participants were emotionally engaged at a therapeutically meaningful level (Tausczik & Pennebaker, 2010; Hossain et al., 2024). This suggests that archetype prompts were as effective as neutral prompts in eliciting emotional expression, even if they did not significantly increase it. This pattern supports the notion that cognitive engagement can occur independently of increases in explicit emotional language, as noted by Boals et al. (2005).

The absence of significant differences between participants with and without anxiety suggests that archetype prompts are broadly applicable across clinical and non-clinical populations. This finding supports the idea that therapeutic writing interventions need not be diagnosis-specific to be effective (Ovanessian et al., 2019). The universal and symbolic nature of archetypes may facilitate engagement across diverse individuals, consistent with Jungian theory and findings by Adrysheva (2024).

The engagement matrix findings further reinforce the effectiveness of archetype prompts in promoting deeper levels of engagement. The shift from predominantly low or moderate engagement under neutral prompts to predominantly strong or high engagement under archetype prompts indicates that these prompts facilitate sustained reflection and expressive depth. This is consistent with prior research suggesting that structured and guided writing tasks enhance engagement compared to unstructured approaches (Nyssen et al., 2016). The higher proportion of participants with anxiety achieving high engagement, specifically 4 out of 5 participants or 80%, suggests that structured archetype prompts may be particularly beneficial for individuals experiencing anxiety.

Overall, the results demonstrate that archetype-based writing prompts are effective in enhancing cognitive engagement in therapeutic writing, as evidenced by significantly increased word count and higher engagement classifications. While they did not significantly increase emotional word use, they maintained a therapeutically adequate level of emotional expression. These findings contribute to the emerging literature by providing preliminary empirical evidence supporting the use of archetype prompts within therapeutic writing frameworks. The results address the research objectives by demonstrating that archetype prompts can enhance expressive output and engagement regardless of anxiety diagnosis. These findings offer both theoretical and practical implications, particularly in integrating Jungian concepts with empirical therapeutic writing methods. As a pilot study, the results provide a foundation for future research with larger samples and more robust statistical designs, thereby preparing the groundwork for subsequent investigations into the clinical effectiveness and scalability of archetype-based writing interventions.

## CONCLUSION

This study examined the effectiveness of a novel set of archetype-based writing prompts in facilitating emotional engagement during therapeutic writing. The results showed that the prompts were sufficiently effective: they clearly enhanced the cognitive aspect of engagement—as seen in longer, more elaborated writing—and were equally effective as neutral prompts in eliciting affective engagement, as measured by emotional language use. Interestingly, this pattern was consistent regardless of whether participants had an anxiety diagnosis, suggesting that archetype-based writing can support cognitive reflection across different populations. These major results reflect some of the existing literature and pave the way for further explorations.

These findings have several implications. First, the archetype writing prompts can be further refined to include affect-focused instructions, so that both the reflective and emotional dimensions of engagement are more fully and simultaneously activated. Second, beyond

measuring word count and emotion word use, it would be valuable to analyze the narrative content of the writings themselves through thematic analysis or a mixed-method design. This would allow a deeper understanding of how individuals, particularly within a collectivist and Asian cultural context, use archetypal imagery to process their inner experiences and construct meaning.

More broadly, the study contributes to expanding the understanding of Jungian archetypes beyond Western conceptualizations. There is a need to explore how archetypal narratives manifest in Filipino culture and localities. In collectivist cultures, meaning-making and integration processes often occur through shared stories, where communal identity takes center place.

Future research can therefore build upon this work by (1) developing and refining archetype prompts to deepen affective engagement, (2) conducting thematic analyses to explore emerging patterns in written narratives, (3) adopting mixed-method approaches to integrate quantitative and qualitative insights, and (4) testing the intervention with larger or specific populations to understand its reach and resonance.

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