



Using phenomenological research methods in qualitative health research

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Abstract

Investigators who use phenomenological approaches to understand experiences of human healing, caring, and wholeness need to consider the differences that exist between descriptive and hermeneutic phenomenology. In this article, these two approaches are compared and contrasted with respect to roots, similarities, and differences. Guidelines are offered to assist prospective investigators in selecting the approach most suitable to personal cognitive style and beliefs about the ways humans experience and find meanings during transitions through wellness and illness to advance health knowledge in a holistic view.

Keywords: caring; healing; interpretive approaches; phenomenology; wholeness.

Introduction

A fundamental component of holistic care is caring for the bio-psychosocial and spiritual well-being of individuals, families, and communities. Holistic caring draws from Western and traditional health care practices as well as clinicians' and patients' experiences, emotions, health beliefs, and values. The concepts of *healing* and *wholeness* are central to holistic caring. Holistic care relieves immediate discomfort and enhances the lifelong discovery of meaning and personal potential for the one caring and the one cared for (Cowling, 2000).

Scholars of contemporary holistic care, including Watson (1999), Parse (1998), and Koloroutis (2004) asserted that clinician-patient relationships that promote, restore, or maintain healing and wholeness must go beyond physical ministrations and encompass understanding and gratification of the client's psychosocial and spiritual needs.

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Investigators seeking to develop knowledge that embraces ideals of holistic caring are challenged to understand human experiences in health and illness and identify caring needs of patients who come together in contemporary health care settings. The interactions inherent in holistic clinician-patient transactions may be explored through phenomenological inquiry. Yet investigators may be unsure of which phenomenological approach will best guide their inquiry of caring, healing, and wholeness. This article is intended to provide guidelines for researchers as they decide between descriptive and hermeneutic phenomenology. Information is offered on their similarities and differences in philosophical roots, key assumptions, and methodological applications.

Phenomenology

Phenomenology is often considered central to the interpretive paradigm (Clark, 1998; Denzin & Lincoln, 1998; Koch, 1995). It is considered a philosophical discipline and a research method (Geanellos, 1998; LeVasseur, 2003; Lopez & Willis, 2004). *Webster's Collegiate Dictionary* (Mish, 2002) defines *phenomenology* as:

- (a) the study of the development of human consciousness and self-awareness as a preface to philosophy or a part of philosophy;
- (b) a philosophical movement that describes the formal structure of objects of awareness and of awareness itself in abstraction from any claims concerning existence;
- (c) the typological classification of a class of phenomena;
- (d) an analysis produced by phenomenological investigation. From Greek *phainomenon*, appearance. (p. 869)

As it has unfolded throughout the past 100 years, phenomenology as a philosophical perspective has thrown light on previously ignored phenomena of the human experience, reformulated philosophical questions, and penetrated thought in almost all fields of scholarship (Tymieniecka, 2003). At the core of phenomenology lies the attempt to describe and understand phenomena such as caring, healing, and wholeness as experienced by individuals who have lived through them (Draucker, 1999; Geanellos, 1998; Maggs-Rapport, 2000; Moran, 2000; Orbanic, 1999; Swanson & Wojnar, 2004).

The *Encyclopedia of Phenomenology* (Embree, 1997) identifies seven unique perspectives: (a) descriptive (transcendental constitutive) phenomenology that is concerned with how objects are constituted in pure (transcendental) consciousness, setting aside questions of any relationship of the phenomenon to the world in which one lives; (b) naturalistic constitutive phenomenology that is concerned with

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how consciousness constitutes things in the world of nature, assuming that consciousness is part of nature; (c) existential phenomenology that is concerned with concrete human existence, including issues of free choice or actions in life situations; (d) generative historicist phenomenology that is concerned with how meaning, as found in human experience, is generated in historical context of collective human experience over a period of time; (e) genetic phenomenology that is concerned with the genesis of meaning of things within individual experience; (f) hermeneutic (interpretive) phenomenology that is concerned with interpretation of the structures of experience and with how things are understood by people who live through these experiences and by those who study them; (g) realistic phenomenology that is concerned with the structures of consciousness and intentionality, assuming they occur in a world that is to a large degree external to consciousness rather than being brought into consciousness. The two approaches that guide the majority of phenomenological investigations in nursing are descriptive and hermeneutic (interpretive) phenomenology because they are concerned with understanding phenomena foundational to nursing science. The philosophical basis and assumptions of these approaches are described in the subsequent paragraphs.

Descriptive Phenomenology

Edmund Husserl (1859-1938), a German philosopher and mathematician, is considered the founder of phenomenology as a philosophy and the descriptive (eidetic) approach to inquiry (Benoist, 2005; Draucker, 1999; LeVassueur, 2003; Maggs-Rapport, 2000). Husserl's central insight was that consciousness was the condition of all human experience. He sought to explain how to overcome personal biases, which stand in the way of achieving the state of pure consciousness. His insights launched a new philosophy and a new approach to scientific inquiry (Moran, 2000).

In *Logical Investigations*, Husserl (1970) defined *phenomenology* as “the science of essence of consciousness” and focused on defining the concept of *intentionality* and the meaning of lived experience, from the first-person point of view. An important tenet of the Husserlian approach to science was the belief that the meaning of lived experiences may be unraveled only through one-to-one transactions between the researcher and the objects of research. These transactions must involve attentive listening, interaction, and observation to create representation of reality more sophisticated than previous understandings (Husserl, 1970).

In his later works, Husserl (2001) presented an ideal of transcendental subjectivity—a condition of consciousness wherein the researcher is able to successfully abandon his or her own lived reality

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and describe the phenomenon in its pure, universal sense. According to Husserl, the state of transcendental subjectivity may be accomplished by employing the process of bracketing, which involves consciously and actively seeking to strip away prior experiential knowledge and personal bias so as not to influence the description of phenomenon at hand (Tymieniecka, 2003). The process of bracketing has been described as (a) separating the phenomenon from the world and inspecting it; (b) dissecting the phenomenon to unravel the structure, define it, and analyze it; and (c) suspending all preconceptions regarding the phenomenon, and confronting the subject matter on its own terms, to ensure that the researcher holds in abeyance any preconceived ideas while he or she is listening to, interacting with, and analyzing the stories of the participants (Giorgi, 1999; LeVasseur, 2003). To this end, some scholars of descriptive phenomenology have even proposed that researchers should withhold an in-depth literature review prior to investigation, in an attempt to neutralize personal biases, preconceptions, and personal knowledge (Deutscher, 2001). Others, however, have questioned whether ignoring the literature makes much sense when personal experience or bias cannot likewise be summarily dismissed (Swanson-Kauffman, 1986). In fact, the literature itself may even serve as a source to neutralize personal bias.

Husserl believed that through bracketing it is possible to gain insight into the common features of any lived experience. He referred to these features as universal essences or eidetic structures and considered them to represent the true nature of the phenomenon under investigation (Deutscher, 2001; Giorgi, 2000a; Lopez & Willis, 2004; Luft, 2003). Therefore, Husserl argued, if the description of lived experiences were to be considered scientific and generalizable, strict adherence to the principles of descriptive phenomenology had to be employed, and commonalities were to be identified among research participants.

Last, a central tenet of Husserl's phenomenology was that human beings are free agents responsible for influencing their environment. The converse, however, that the environment influences lived experiences and individual freedom was, at best, a peripheral concept to Husserl's teachings (Deustcher, 2001).

To summarize, descriptive phenomenology is a complex philosophical tradition and a method of inquiry. It calls for exploration of phenomena through direct interaction between the researcher and the objects of study. It calls on investigators to set aside preconceptions through the procedures involved in bracketing. As the phenomenologist aims to define the phenomenon under investigation he or she uses several frames of reference including: the transcendental subjectivity

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(neutrality and openness to the reality of others), eidetic essences (universal truths), and the lived-world plane of interaction (researcher and participants must interact). The lived experience itself, as described by participants, is used to provide universal description of the phenomenon (Tymieniecka, 2003); the ultimate test of the quality of a descriptive phenomenological investigation of caring, healing, or wholeness would be testimony from the participants themselves that the investigator's universal description of the phenomenon captured their personal experiences.

Hermeneutic (Interpretive) Phenomenology

Husserl's successors included Heidegger, Kierkegaard, Sartre, and Merleau-Ponty. Over time they modified, critiqued, and further developed Husserl's approach. Their reactions against some of Husserl's central tenets created considerable diversity in philosophical positions among phenomenologists. These differences in perspective ultimately engaged scholars from nursing and other disciplines in lively debates about criteria for acceptable indicators of rigor in qualitative inquiry (Benner, 1994; Moran, 2000; Van der Zalm & Bergum, 2000).

Heidegger (1889-1976), a student of Husserl, sought to answer the question of the meaning of being. He believed that humans are hermeneutic (interpretive) beings capable of finding significance and meaning in their own lives (Draucker, 1999). Herein lies a pivotal difference between descriptive and hermeneutic phenomenology. For Husserl, context was of peripheral importance; for Heidegger, context was a central concern. Heideggerian phenomenology is based on the perspective that the understanding of individuals cannot occur in isolation of their culture, social context, or historical period in which they live (Campbell, 2001; Draucker, 1999; Geanellos, 1998; Orbanic, 1999).

In relation to understanding human experience, hermeneutic phenomenology goes beyond knowledge of core concepts and essences. Heidegger (1962) introduced the concept of *dasein* (the human way of being in the world) to emphasize that individuals cannot abstract themselves from various contexts that influence their choices and give meanings to lived experience. Therefore, Heidegger's phenomenology attempts to address the situatedness of individual's *dasein* in relation to the broader social, political, and cultural contexts (Campbell, 2001). Therefore, when we consider what is it like to experience caring, healing, and wholeness we cannot ignore the lives people live outside of being ill or well. In fact, their very experience of health is in the context of family traditions, community values, and the broader sociopolitical context.

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The assumptions of *dasein* and *situatedness* form the basis for *preunderstanding* or, as Heidegger (1962) called it, a *forestructure of understanding*. The *fore-structure of understanding* consists of: *fore-having* (all individuals come to a situation with practical familiarity or background practices from their own world that make interpretation possible); *fore-sight* (the sociocultural background gives a point of view from which to make an interpretation); *fore-conception* (sociocultural background provides a basis for anticipation of what might be found in an investigation; Benner, 1994).

Heidegger assumed that the *forestructure* is closely linked with how one understands the world and that such understanding is linked with how one interprets reality. Consequently, hermeneutic phenomenologists maintain that before conducting inquiry of such phenomena as caring in nurse-patient transactions, a researcher must reflect on his or her past experiences of caring or being cared for, preconceptions about healing and wholeness, and biases about what it means to be a patient or nurse, so that during the interpretive process, they can more clearly access the *forestructure of understanding* held by the study participants (Benner, 1994).

According to Heidegger, the interpretive process is circular, moving back-and-forth between the whole and its parts and between the investigator's *forestructure of understanding* and what was learned through the investigation. Heidegger (1962) referred to this process as entering into a *hermeneutic circle of understanding* that reveals a blending of meanings as articulated by the researcher and the participants (*coconstitutionality*; Koch, 1995). The goal of hermeneutic inquiry is to identify the participants' meanings from the blend of the researcher's understanding of the phenomenon, participant-generated information, and data obtained from other relevant sources.

Benner (1994) summed up Heideggerian assumptions of hermeneutic phenomenology as: (a) human beings are social dialogical beings; (b) understanding is always before us, in the shared background practices of the human community, within societies and cultures, in the languages, in our skills and activities, and in our intersubjective and common meanings; (c) we are always ready in a *hermeneutic circle of understanding*; (d) interpretation presupposes a shared understanding between the researcher and the participants; (e) interpretation involves the interpreter and the interpreted in a dialogical relationship (p. 71).

To summarize, hermeneutic phenomenology is a research methodology useful for describing human experience of caring, healing, and wholeness in relation to historical, social, and political

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forces that shape meanings of wellness, illness, and personhood. Hermeneutic phenomenology is grounded in the belief that the researcher and the participants come to the investigation with forestructures of understanding shaped by their respective backgrounds, and in the process of interaction and interpretation, they cogenerate an understanding of the phenomenon being studied.

Key Distinctions Between Descriptive and Hermeneutic Phenomenology

In the preceding section, fundamental features of descriptive and hermeneutic approaches to inquiry were described. Because both approaches emphasize the importance of understanding human lived experiences, both are useful for guiding inquiries of interest to holistic nursing science. The key distinctions between the descriptive and interpretive approach lie (a) in the emphasis on describing universal essences (descriptive phenomenology) versus understanding the phenomena in context (interpretive phenomenology); (b) viewing a person as one representative of the world in which he or she lives (descriptive) versus a self-interpretive being (interpretive); (c) a belief that the consciousness is what humans share (descriptive) versus a belief that the contexts of culture, practice, and language are what humans share (interpretive); (d) an assumption that self-reflection, and conscious “stripping” of previous knowledge, help to present an investigator-free description of the phenomenon (descriptive) versus the assumption that as prereflexive beings, researchers actively co-create interpretations of phenomena (interpretive); (e) the assumption that adherence to established scientific rigor ensures description of universal essences or eidetic structures (descriptive) versus the assumption that one needs to establish contextual criteria for trustworthiness of co-created interpretations (interpretive), and finally; (f) the assumption that bracketing ensures that interpretation is free of bias (descriptive) versus the assumption that preunderstanding and co-creation by the researcher and the participants are what makes interpretations meaningful (Koch, 1995).

Data Analysis: Descriptive Versus Hermeneutic Phenomenology

Descriptive Phenomenology

The steps consistently outlined as essential in the descriptive phenomenology method of inquiry include (a) bracketing, (b) analyzing, (c) intuiting, and (d) describing (Colaizzi, 1978; Giorgi, 1970; Swanson-Kauffman & Schonwald, 1988). Although these steps are considered distinct components of descriptive phenomenology, each moment of the investigation entails a blend of bracketing, analyzing, intuiting, and describing to produce a true understanding of the phenomenon under study (Swanson-Kauffman & Schonwald, 1988).

Bracketing

According to Wall, Glenn, Mitchinson, and Poole (2004) bracketing is an investigator's attempt to achieve the state of transcendental subjectivity (neutrality) by putting aside prior understanding or preconceptions about the phenomenon under investigation. Bracketing may be accomplished by using the field notes as a reflective "diary" to write down the investigator's observations, assumptions, and confusions; by seeking critique for the investigator's insights from methodological experts or others who might have personal or professional experience with the topic under investigation; and by maintaining an ongoing sense of caution about the role personal bias plays when making sense of data.

Analyzing

Rigorous analysis of data constitutes the second component of the descriptive phenomenological investigation. Colaizzi's (1978) method may be used to guide the analysis. It consists of the following seven steps:

- (1) Reading and rereading the participants' descriptions of the phenomenon to acquire a feeling for their experience and make sense of their account.
- (2) Extracting significant statements that pertain directly to the phenomenon.
- (3) Formulating meanings for these significant statements. The formulations must discover and illuminate meanings hidden in the various contexts of the investigated phenomenon.
- (4) Categorizing the formulated meanings into clusters of themes that are common to all participants; referring these clusters to the original transcriptions for validation and confirming consistency between the investigator's emerging conclusions and the participants' original stories; not giving into the temptation to ignore data which do not fit or prematurely generating a theory which conceptually eliminates the discordance in findings thus far.
- (5) Integrating the findings into exhaustive description of the phenomenon being studied. Employing a self-imposed discipline and structure to bridge the gaps between data collection, intuition and description of concepts. Describing includes coding segments of text for topics, comparing topics for consistent themes, and bridging themes for their conceptual meanings. Based on this description a prototype of a theoretical model about the phenomenon under investigation is formulated.
- (6) Validating the findings by returning to some participants to ask how it compares with their experiences.

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(7) Incorporating any changes offered by the participants into the final description of the essence of the phenomenon (Colaizzi, 1978, pp. 48-71).

Data analysis may also involve referring to the researcher's reflective journal and field notes and debriefing and discussing findings with colleagues who are experts in the phenomenological approach and/or personally or professionally familiar with the topic studied.

Intuiting

Consistent with Husserl's assumptions about the importance of transcendental consciousness (remaining open to the reality of another's experience) intuiting ultimately leads to an innate sense of what it might be like to "live in the participants' skin." As accounts are generated, the investigator's intuition is "fed" by more and more data through attentive listening, deep critical reflection about commonalities across participants, and a concerted effort to understand "what it must be like." The intuitive process leads to the investigator owning a sense as if he or she had personally lived the participants' experience. Intuiting balanced with bracketing involves a conscious attempt to honor insights about emerging evidence while simultaneously refraining from prematurely foreclosing on the researcher's own hunches about the emerging concepts (Swanson-Kauffman & Schonwald, 1988). This "dance" between intuiting and bracketing can prove to be an all-consuming cognitive task for the descriptive phenomenologist.

Describing

The end point of descriptive phenomenological investigation is to present a theoretical model representing the essential structures of phenomenon under study (Colaizzi, 1978). Swanson-Kauffman and Schonwald (1988) referred to such model as a "universal skeleton that can be filled in with the rich story of each informant" (p. 104). Consistent with the Husserlian tradition, if the true structure of the phenomenon is identified, then anyone who has experienced the phenomenon should be able to identify their own experience in the proposed description.

Hermeneutic (Interpretive) Phenomenology

Based on the Heideggerian beliefs, Diekelmann, Allen, and Tanner (1989) devised a step-by-step process of analyzing narrative text. The analysis is typically done by an interpretive team and involves seven steps: (a) reading the interviews to obtain an overall understanding; (b) writing interpretive summaries and coding for emerging themes; (c) analyzing selected transcripts as a group to identify themes; (d) returning to the text or to the participants to clarify disagreements in

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interpretation and writing a composite analysis for each text; (e) comparing and contrasting texts to identify and describe shared practices and common meanings; (f) identifying patterns that link the themes; and (g) eliciting responses and suggestions on a final draft from the interpretive team and from others who are familiar with the content or the methods of study. Benner (1994) summed up the steps involved in hermeneutic analysis as (a) isolating paradigm cases, (b) identifying repetitious themes for within and between cases, and (c) selecting exemplary quotes to illustrate themes. This is accomplished by (a) reading each transcription as a "case"; some cases will immediately stand out as paradigmatic; those cases can be used to draw the investigator's attention to various aspects (themes) of the individuals' experience. Other cases may be of paradigmatic importance because of their similarities or deep contrasts; each case is a source of themes; (b) rereading and working up cases to isolate repetitious themes; and (c) identifying exemplary quotes to illustrate themes. The goal of hermeneutic inquiry is to identify the participants' meanings from the blend of the researcher's understanding of the phenomenon, participant-generated information, and data obtained from other relevant sources.

Selecting the "Right" Approach

Although it may be clear to an investigator that a phenomenological approach is well suited for exploration of concepts central to holistic nursing, selecting the most suitable method can prove challenging. Beck (1992), Lopez and Willis (2004), and Swanson-Kauffman and Schonwald (1988) suggested that descriptive phenomenology is more useful for inquiry that aims to discover universal aspects of a phenomenon that were never conceptualized or incompletely conceptualized in prior research. Benner (1994), Draucker (1999), Koch (1995), and Parse (1999) suggested that interpretive phenomenology is most useful as a framework for examining contextual features of a lived experience as generated from a blend of meanings and understandings articulated by the researcher and participants.

Nonetheless, discourse and debate abound regarding potential discrepancies in the original intentions of Heidegger and Husserl and modern-day applications of their philosophical principles in phenomenological research (Crotty, 1997; Darbyshire, Diekelman, & Diekelman, 1999; Paley, 1997, 1998, 2005). While some point out deep concerns about naïve drifting away from the philosopher's intent, others advocate adapting phenomenological principles to address real-world issues (Caelli, 2001; Giorgi, 2000b) or propose methods of inquiry (Benner, 1994; Colaizzi, 1978; van Manen, 1997).

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Given the noteworthy differences in opinion, researchers need to carefully examine the philosophical and methodological underpinnings of descriptive and hermeneutic approaches. In addition, the researchers need to self-reflect about their own ontological and epistemological beliefs before they decide which approach to use. Those who tend to seek similarities in human experiences, look for patterns, seek universals, and ultimately aim at finding solutions may be more suited to a descriptive mind-set. Alternatively, those who tend to relish nuances, appreciate differences, embrace ambiguity, and seek uniqueness in contextualized lived experiences may be more given to an interpretive mindset.

Phenomenological Research Examples

In 1982, Swanson-Kauffman (1986) set out to explore what it is like for women to miscarry. The state of the science at the time was that there were no published studies of how women experienced early pregnancy loss. The author herself had never miscarried, and she had minimal experience caring for women who experienced miscarriage. At that early point in her program of research she had intellectual curiosity, a desire to bring this hidden phenomenon to light, and an ultimate goal of developing supportive interventions to help women heal after loss. To “get at” women’s common experiences of miscarriage and recovery it was necessary to talk to women and gather multiple accounts of what women went through when they miscarried, what supported their healing, and what responses and actions of others they considered caring and helpful. Therefore, descriptive phenomenology was the most appropriate approach.

Broussard (2005) wanted to understand what life was like for women who lived with bulimia nervosa. Being adamant that no one could possibly understand why a woman would engage in bulimic behaviors without insight into the context of the bulimic woman’s life she chose to use hermeneutic phenomenology. She stated: “My experience in maternal-child nursing, breastfeeding and lactation, and bulimia nervosa prompted this inquiry, and this philosophical position (Heideggarian) was selected because it was most congruent with the research purpose of interpreting and understanding the experience of actively bulimic women” (p. 43).

Through in-depth inquiry into the experiences and the life contexts of 13 women who were actively bulimic she was able to interpret what motivated and sustained women to engage in bulimic behaviors. Through merging her forestructure of understanding with the bulimic experiences shared by participants, together they were able to co-create a new interpretation, from the inside out, of what it was like to live a life where bulimia made sense.

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In 2004, driven by utter curiosity, a desire to fill a gap in clinical knowledge, and the ultimate goal of developing a clinical intervention, Wojnar (2005) embarked on exploring what it was like for lesbian birth or social mothers (also known as comothers) to experience miscarriage. There was no published literature on lesbian mothers' experiences with early unexpected pregnancy loss. The author had never miscarried, and although she was familiar with heterosexual experiences of miscarriage from clinical and research experience, she had little knowledge of lesbian health and childbearing experiences. Therefore, descriptive phenomenology was the most appropriate approach to bring this hidden phenomenon to light.

To sum it up, the three investigators selected the most appropriate approach based on their worldviews, professional knowledge of the phenomenon, and the long-term research objective. Whereas Broussard (2005) sought to solely understand the participants' contextualized experiences, Swanson-Kauffman (1986) and Wojnar (2005) wanted to gain sufficient knowledge of the universal aspects of the phenomenon to ultimately intervene. When the primary goal was to appreciate the holistic context of participants' experiences and finding meanings in what participants said and received hermeneutic phenomenology was selected. Conversely, when the researchers' goal was to describe universal essences of phenomena with an ultimate goal to develop caring interventions that promote healing in clinical practice, descriptive phenomenology was selected.

Conclusion

Descriptive and interpretive phenomenological methods may be used to illuminate knowledge relevant to holistic nursing practice. Previous scholarly works and the authors' experiences with conducting phenomenological inquiry suggest that descriptive phenomenology is most helpful to guide studies that aim to describe the universal structures of phenomenon and when the researcher's ultimate goal is to develop clinical interventions. Alternatively, interpretive phenomenology is most useful when the goal is to interpret contextualized human experiences. Such interpretations are a blend of meanings and understandings articulated by the researcher and the participants. Interpretive phenomenology is particularly useful for understanding how context influences, structures, and sustains experiences.

It is important to bear in mind that phenomenological analysis is a cognitive process, and each researcher has a different thinking style. One investigator's way of thinking and making sense of the world may seem clear to some individuals with similar ways of thinking, yet somewhat confusing to others. In other words, those who tend to see similarities in human experiences and look for

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patterns and universal features of phenomenon, and who aim at moving their program of research toward designing therapeutic interventions, may be more suited to a descriptive mind-set. Conversely, those who appreciate differences and embrace ambiguity, and view humans as individuals who can have their needs satisfied only from within their own individual framework, may be more given to an interpretive mindset. In conclusion, although discourse continues about philosophical traditions and their interpretation and application in phenomenological research, it is clear that both approaches may contribute to the advancement of holistic caring.

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