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# Phenomenological Psychology in Practice and Research: A Global Perspective on a Human Science

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PHENOMENOLOGICAL PSYCHOLOGY IN PRACTICE AND  
RESEARCH: A GLOBAL PERSPECTIVE ON A HUMAN  
SCIENCE

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Majoring in Psychology & Minor in Global Engagement

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“The task of phenomenology is to make explicit by the use of rigorous reflection on that which is lived out at the more implicit level. Phenomenology attempts to hold back prejudice and bias, including cultural habits and customs, theoretical and scientific concepts, and even personal styles, in order to reflect on the essence of a phenomenon as clearly as possible, and to describe it in general and understandable terms.” (Kunz, 1998, p. 24).

## **Introduction**

Edmund Husserl is a German philosopher who founded phenomenology. Phenomenology is a philosophy that states that scientific knowledge is directly related to human experiences (Landgrebe, n.d.). In the beginning of the twentieth century Husserl announced philosophy must turn to the things themselves for a true understanding of a phenomenon (Spiegelberg, 1994). What this entails is explicitly reflecting on the subjective experience, and the general essence of a human phenomenon. Husserl thought separating a phenomenon from the conscious experience of it caused problems.

His phenomenology founded a new approach in psychology that is used in the field today. Approaches in psychology during this time like behaviorism, which adapted to the natural sciences way of knowing, restricted understanding of human phenomena (the phenomenal field) to stimulus and response and to the physiology of an organism, ignoring what is given through experience (Viney & King, 2003). Husserl was responding to this positivist approach that has dominated the field of psychology (Giorgi, 2005). Behaviorism is one example of an approach limiting the scope of psychology because the characteristics of science are being defined by a natural science rather than a human science (Kunz, 2006). The study of conscious awareness of a phenomenon, or an intersubjective experiences of someone else experiencing a phenomenon is, the essence that is stripped with an approach like Behaviorism. The constructs to study do not change, therefore

studying joy, aggression, and depression would look at the frame of reference of the person before the research.

In this paper, I intend to explore the potential usefulness of phenomenology as an approach for enhancing practice and research in psychology. I will first review phenomenology through a historical perspective split into two sections. The reason I am beginning with the history is phenomenology in the United States is still in the background in psychology even though qualitative approaches are gaining traction in practice and research. Therefore, it is important to consider phenomenology as a movement in the twentieth century, and as a rising approach in psychology with a deep connection to philosophy. I will then describe how practitioners use the approach to guide the attitude toward, and understanding of, their client. Specifically, I will describe how it became useful for clinical psychologist in the 1950s because of its holistic approach to working with people with mental health challenges. Third, I will look at phenomenology in qualitative psychological research by reviewing several empirical studies about modern health concerns, such as diabetes and major depression. When dealing with these serious health concerns it is imperative to be clear and true to the lived-experience. I will conclude with an overview of how one might conduct an interview using the phenomenological approach, and with a brief discussion of the significance of this approach in psychology for guiding rigorous investigations into human phenomena.

## **The Phenomenological Movement**

### *Background and a Key Concept*

From 1901 to 1916 development in the Göttingen circle, which consisted of Husserl and his followers of philosophical phenomenological, followed the maxim “to the things themselves” that explicitly warns philosophers of being narrow-minded in regards to their approach to human

phenomena. Herbert Spiegelberg (1994) clarifies this maxim by stating it is, “the refusal to make philosophical theories and the critique of such theories the primary and at times, all-absorbing concern of philosophy” (p. 109). During this time Husserl wrote the bulk of what would later develop phenomenology into a humanistic science.

Spiegelberg came to the United States, and published his findings in the mid 1950s after spending most of his career in Germany under Alexander Pfänder – an associate scholar to Husserl in the Munich Circle that predates the Göttingen circle. Husserl is responsible for the Phenomenological Movement in Göttingen, Germany from 1901 to 1916 and continued his work in Freiburg, Germany until his retirement in 1928 (Spiegelberg, 1994, p. 70; Viney & Gold, 2003). The Göttingen circle is referred to as the second circle of scholars and students who considered themselves phenomenological philosophers. The philosophical approach in psychology began here, and spread to other regions of the world in the decades that followed.

### *Phenomenology and Reductionism*

Husserl and his followers made it evident reducing a phenomena into smaller parts will distort the meaning associated with the phenomena. Positivism claims the ability to falsify a hypothesis with certainty and precision. Positivism is a formal method for verifying empirical questions by eliminating metaphysical questions (“Oxford English Dictionary,” n.d.). Phenomenology in principle questions not only the method, but also the approach. The phenomenological reduction bears in mind reducing a phenomenon requires paying attention to the act of experiencing, and holding onto a presumption places the theory before the object of experience (Spiegelberg, 1992).

It is crucial to understand we are only aware of a phenomenon because we live through them, which is considered the first reduction in the phenomenological approach i.e. to consider how

consciousness is experiencing the phenomenon (Giorgi, 1970). A rigorous way to do empirical research in the human sciences, and to get at the subjects' lived-experience of the phenomenon is to acknowledge the metaphysical dimension before claiming an objective understanding of a phenomenon (Giorgi, 1970; Spiegelberg, 1994). Joining philosophy and psychology provides more insight into phenomena that lead to a rigorous human science, an open-minded practitioner, and attention to pertinent parameters of a phenomenon.

Identifying what passes through consciousness is the philosophical foundation of knowing about a thing. To put plainly, Giorgi (2009) claims, "To assume the phenomenological attitude means to regard everything from the perspective of consciousness, that is, to look at all objects from the perspective of how they are experienced regardless of whether or not they actually are the way they are being experienced" (p. 87). I will develop this idea further by explaining the attitude Giorgi (1970/2005/2009) and Kunz (1998/2006) adopt to research qualitative data and be a practitioner in psychology. They bridge phenomenological philosophy with psychology by making sense of Edmund Husserl (1859-1938), Martin Heidegger (1889-1976), Jean Paul Sartre (1905-1980), Maurice Merleau-Ponty (1908-1961), and Emmanuel Levinas (1906-1995). I will continue with the second part of the history section before diving into the practice of phenomenology in clinical psychology and qualitative research.

### **Bridging Philosophy and Psychology**

Around the same time that Husserl was developing phenomenology William James, who is considered the father of American psychology, considered the importance of experience to science. As early as 1894, James reflected on these ideas, which he referred to as cognitive acts in *Principles of Psychology* (Spiegelberg, 1994, p. 101). In this work, James acknowledged concepts like the stream of

consciousness, or “stream of thought”, and a descriptive attitude toward phenomena (Giorgi, 1970, p. 30; Spiegelberg, p. 100). James’ “hope of psychology” is implicitly connected to phenomenological psychology. James states, “When, then, we talk of ‘psychology as a natural science’ we must not assume that that means a sort of psychology that stands at last on solid ground. It means just the reverse; it means a psychology particularly fragile, and into which the waters of metaphysical criticism leak at every joint, a psychology all of whose elementary assumptions and data must be reconsidered in wider connections and translated into other term” (qt in. Giorgi, 1970, p. 50).

Giorgi (1970) and Spiegelberg (1994) make the connection between Husserl and James by stating how they were concerned with the same questions: the way of knowing (what can be gained from studying the lived-experience or a stream-of-thought?), and being as a source of knowledge (what significance does the essence of being have in science?). To summarize, in the late nineteenth and early twentieth century philosophy separated from psychology and attempted to reunite decades later because scholars in two circles thought it was a mistake to ignore the philosophical underpinning of scientific knowledge.

The stream of consciousness is a concept James kept even with the onset of behaviorism where consciousness made little impact and was dismissed as purely subjective in psychology during the late nineteenth century. Scholars in the field believe James contributed to Husserl’s later work. Spiegelberg (1994) claims that the phenomenological concept of intentionality was originally thought of by James rather than Franz Brentano (a philosopher). Spiegelberg (1994) defined Husserl’s intentionality as more than relatedness to an object i.e. a human being is always conscious of something beyond itself. Therefore it is possible to understand consciousness as directed toward an object whether it be real or imaginary (e.g. an idea or belief). It is common knowledge among

phenomenologists that consciousness is always conscious of something other than itself (Giorgi, 1970; Viney & King, 2003, p. 255), which simply means we, as human beings, are always aware of an object in space that can be real or imagined. James described the existence of the term, and Husserl ran with the idea and came up with a way to describe what consciousness is referring to, the main features of consciousness, and how to turn the raw data collected from individuals (and, specifically, from their stream of consciousness) into a universal form (eidos).

Psychology as a distinct field separate from any philosophy began with William Wundt when he founded the first psychology lab in Leipzig in 1879. The world-view, or the spirit of the time (*Zeitgeist*) shifted toward accepting the findings of psychology as a natural science because of its success with discovering a wide range of phenomena (Giorgi, 1970; Viney & King, 2003). It is important to note that, “Wundt believed that the experimental method had limited applications, and he spent the latter part of his life using the historical method to study social and cultural phenomena” (Giorgi, 2009, p. 18).

Husserl also criticized the experimental method, and came to the conclusion after World War I that science must be rooted in a specific philosophical understandings because positivism and natural science are incapable of answering questions about meaning and value (Spiegelberg, 1994. p. 75). Wundt and James were criticized by the two circles for practicing psychologism. Specifically, in 1905 at the *International Congress of Psychology* in Rome, James was confronted by phenomenologists and told that his approach fitted the description of psychologism. In short, Psychologism reduces our individual consciousness to: “only the marionettes either of psychological mechanisms or of an external history” (qt. In Kunz, 2006, p. 242). To provide a more clear definition, psychologism is, “the



tendency to explain matters in psychological terms, especially when they are considered to be better or more properly explain in other ways” (“Oxford English Dictionary,” 2016).

According to the phenomenological perspective, the approach that ought to be employed by psychologists consists of first finding the intentional structures of consciousness. Husserl would define phenomenological psychology as, “the study of the fundamental types of psychological phenomena in their subjective aspect only, regardless of their imbeddedness in the objective context of a psychophysical organism” (Spiegelberg, 1994, p. 134). What this means is his method focuses on the preliminary steps of understanding consciousness. In other words, Husserl provides a method for finding meaning and value by acknowledging the subjective experience without solely relying on main-stream ways of knowing. As stated by Giorgi (1970), “The difficulty is that both methods [behaviorism and introspection] already imply a disruption of experience and behavior; they have developed from viewpoints that considered either behavior or experience as self-enclosed entities” (p. 194). In contrast, the phenomenological perspective considers behavior and experience as aspects of the same situation.

In addition, the phenomenological approach to psychology came about because popular approaches in psychology were rejected by phenomenologists. Freud’s psychoanalysis was viewed as deterministic because he rejected the notion of free-will (Spiegelberg, 1994; Viney & King, 2003). Wundt’s focus on introspection was viewed as reductionist and as ignoring vital components of human experience (Viney & King, 2003). And, finally, John Watson’s behaviorism (a development from James’s functionalism) was viewed as limiting the content of empirical research because it was only concerned with objective science through a natural science point of view (Viney & King, 2003). Phenomenologists believed the consciousness of a human being is beyond the scope of a natural

science because consciousness is anything but natural therefore an approach that considers values and meaning was born.

### **Practitioners of Phenomenology in Clinical Psychology**

In the following section, I will describe phenomenological psychology as an approach to the practice of clinical psychology. To describe this approach I will review work by more contemporary leaders in phenomenological psychology. This includes people like Donald Snygg (1904-1967) and Carl Rogers (1902-1987) who influenced phenomenology to progress in the United States. Discussion of a modern practitioner and teacher of phenomenology in the United States, George Kunz (1998/2005) concludes this section. Here I will describe Kunz's view about the ethical components of phenomenology, which he learned from the French philosopher of phenomenology, Emmanuel Levinas.

#### *American Foundation of Phenomenological in practice: Donald Snygg*

Donald Snygg has been described as a pioneer of phenomenological psychology in the field of clinical psychology in the United States (Spiegelberg, 1972). Snygg announced that there needs to be a new, personal approach for psychology. His belief was that, "behavior is completely determined by and pertinent to the phenomenological field of the behaving organism" (qtd in. Spiegelberg, 1972, p. 146). This aligns with thinkers like Husserl. A theme of phenomenology is the subjective experience is too important to be ignored or deemed as controlled.

Snygg claims in order to study human motivations it is important to recognize, "the crucial importance of the phenomenal field as the *frame of reference* for the individual's behavior, with the phenomenal self at its center" (Spiegelberg, 1972, p. 147). The reason why the phenomenal field is seldom considered is that there are few areas in which it is imperative one is accurate with his or her

description of another person's lived-experience. Snygg himself with years of experience found only "later did the needs of counseling, teacher education, and therapy add further weight to the case for the exploration of the phenomenal field" (Spiegelberg, 1972, p. 148). He is worth mentioning because Spiegelberg (1972) credits him as the pioneer in the American scene. Snygg's call for phenomenology to be viewed as a complement of behaviorism remains a landmark in the establishment of phenomenology in America (Spiegelberg, 1972, p. 148).

The debate between empirically validated treatment versus the practitioners' alternative treatment has also been a heated debate. John Norcross, the President of the Psychotherapy division of psychology, "emphasized the person of the therapist, *the therapy relationship*, and the non-diagnostic characteristics of the patient" [italics for emphasis] as most valued in the field (Levant, 2004, p. 221). In summary, approaching an individual for the sake of helping him or her must not be limited to empirically valid findings. Instead, the practitioner's own intuition, experience in the field, and knowledge of the situation should be considered in tandem:

Whether clinicians operate from a single theoretical perspective or are more eclectic, we bring to bear all that we know from the empirical literature, the clinical case studies literature, and prior experience, as well as our clinical skills and attitudes, to help the client who is sitting in front of us. This is what is often referred to as *clinical judgment*. Some condemn clinical judgment as subjective. To them I say that clinical judgment is simply the sum total of the empirical and clinical experience and skill that clinicians bring to bear on the clinical enterprise. It is their duty to understand and treat the particular, unique person before them.

Practitioners know that the unique variables are at least as important as, if not more important than, the common characteristic that enable diagnosis. (Levant, 2004, p. 222)

In this field accountability is crucial therefore it is expected that a practitioner is providing care by acknowledging evidence-based research that has undergone validity testing. The problem is this approach assumes everything has been discovered, but when trying to understand a patient *a priori* knowledge may be of little help to the individual – as stated above there are always unique variables likely to change the ideal situation into something incomparable.

*Development of Phenomenology in Client-Centered Therapy: Carl Rogers (1902-1987)*

The humanistic approach is the “third force” that challenged behaviorism and psychoanalysis (Viney & King, 2003). Phenomenology as a third force (a human science or an authentic way to practice psychology) came to mind for Carl Rogers at the University of Rice in Texas late in his career; for him the “third force” is phenomenology because it is capable of complementing behaviorism and psychoanalysis. Like Snygg, the limitation to the main-stream approaches came about late in Roger’s career as a clinician for children in Rochester, New York (Spiegelberg, 1972). Spiegelberg (1972) claims, “These years not only taught him the defects of a narrow psychoanalytic and coercive approach but also showed him the significance of considering the client’s perspective” (p. 151). In client-centered therapy Rogers explicitly states how phenomenology is used to get to the hidden, missed meaning. “Rogers’ final theory of personality and behavior states even more explicitly that the phenomenal field is an essential part of the structure of the person; it is the world to which the individual reacts, in this sense ‘reality’” (Spiegelberg, 1972, p. 152). He made a, “systematic use of it in therapy, assigning the therapist the task of being a phenomenologist entering into the patient’s phenomenal frame of reference” (Spiegelberg, 1972, p. 153). Early development of this even suggests empirically valid evidence is limited when dealing with the reality of the individual.

Roger at the University of Wisconsin approaching the therapist as a subject with an attitude directed toward the client became a significant factor for him and other practicing therapists. In one sense it is the client's perspective of how attuned the therapists is with his or her client. Spiegelberg (1972) in summary states Rogers measured subjectivity is because, "certain factors in the therapist's attitude, when perceived as such by the client or patient, make the decisive difference for the therapeutic change in him" (p. 153). The most drastic case in which this measurement is useful is when a therapist works with a schizophrenic. The reasoning is: asking directing questions is out of the question, so it is imperative for the therapists himself, "to start the process by communicating to the patient some of his own experience with regard to the situation and the patient. To this extent one might say that such a theory is no longer exclusively client-centered but bi-centered, or bipolar, consisting in an effort to explore two phenomenal worlds and having them interact for the benefit of the client" (Spiegelberg, 1972, p. 154). In practice how likely is it for a practicing clinician or therapists to abide by strict guidelines where the methodology is dependent on the unique individual?

*The ethical responsibility of the practitioner*

Kunz, a professor at the Seattle University, follows Emmanuel Levinas's philosophical writings on phenomenology. Kunz interprets Levinas's "call for responsibility" as the "fundamental feature" of the human psyche (Kunz, 1998, p. 4). According to Kunz, Levinas, in a sense, transcends early phenomenology.

As practitioner of Husserl's phenomenological method, Levinas locates the *interruption* of intentionality of "consciousness of..." by uncovering that which is more fundamental than any epistemological and ontological project. Prior to knowing, the face of the Other reveals herself as "otherwise than being," "beyond essence," to be further and higher than being known. Yet

(here's the disturbing part) from this infinite distance, the face of the Other commands me to approach with infinite responsibility. Levinas uses the idea of "infinity" when referring to the Other as always more than... my knowing, and my ability to fulfill my responsibility (Kunz, 2006, p. 243-244).

According to Levinas, and later, Kunz, this philosophical approach is applicable to practitioners dealing with people with mental health challenges because it teaches them to have a responsibility to their patient or client as they try to understand their lived-experiences. The human psyche "was not originally the center of the self, the center of the personality", but rather, "The *psukhe* was the soul or spirit gradually breathed into and sustained by the life and love of others, by parents, family, tribe, by those whom the *psukhe* was to be responsible, ultimately by the Spirit of the universe" (Kunz, 1998, p. 10). This approach also gives practitioners the responsibility of understanding what assumptions underlie the practice of psychology. Western psychology has assumptions that drives underlying human behaviors that are implicit and normative. The psyche is viewed as essentially self-centered and seeking its own survival. Acknowledging underlying assumptions about the functionality of the psyche is something a practitioner should consider before even addressing underlying assumptions a practitioner may have about human phenomena and experiences that their clients might be going through. In addition, this perspective suggest that what matters more than the fundamental component of the psyche is the simple fact that there are multiple views about what drives human behavior. Therefore getting to the lived-experience is more important than focusing on probability or social constructs about what behaviors or feelings are normative.

## The Phenomenological Method in Qualitative Research

Amedeo Giorgi has been in the field of psychology since 1958, and since 1986 he has been a research professor at Saybrook University in San Francisco, California (Stones, 2016). His method of phenomenology in qualitative research is explicit, detail oriented, and similar to others methodologies. I will describe the steps in his method for phenomenological research in psychology after introducing four studies from researchers around the globe that use a similar methodology to study human experiences.

Karin Dahlberg is a professor dedicated to combining caring and science into a single field. She is from the School of Health and Caring Science at Linnaeus University in Växjö, Sweden. In a lifeworld study on diabetes by Johansson, Österberg, Leksell, & Berglund, (2015) the phenomenological method made explicit by Dahlberg is used. Jonathan Smith is currently a professor of psychology at the Birkbeck University of London. He too developed a methodology called Interpretative Phenomenological Analysis (IPA) with an emphasis on it being adaptable for researchers seeking to understand the lived experience of their participants; he collaborated with a colleague in the second study that will be presented below (Smith, 2016).

Finally, Max van Manen began his profession teaching grade school in the Netherlands. He became a Canadian citizen in 1973 where he worked for several years on the pedagogy of phenomenology (van Manen, 2016). I will describe one study about depression by Danielsson and Rosberg (2015), that drew from van Manen and Dahlberg's research. After going through these three empirical examples, I will highlight the pieces of each that came from Giorgi's writing on the phenomenological method.

*Lifeworld experience: Living with diabetes: Method by Dahlberg*

In order to provide comprehensive care a person suffering from diabetes should be given knowledge about how to deal with the change. It is common for health care providers to have, “a pre-planned programme that defines patients’ needs” with little emphasis on the “existential element of the disease” (Johansson, Österberg, Leksell, & Berglund, 2015). Learning to live with diabetes is not straightforward, and the purpose of the study by Johansson and colleagues (2015) was to provide a deeper understanding of how one has gone through the transition. The reason why Johansson and colleagues (2015) use the phenomenological method for conducting their study is that it allows for greater clarity about the lived-experience of having diabetes. Knowledge about the symptom of diabetes can be limited in its usefulness. In their research, Johansson et al. (2015) examine multiple cases of people living with type I and II diabetes in Sweden. The knowledge they hoped to gain could be capable of giving a practitioner a more in-depth understanding of the common obstacles that people with diabetes live with, and this knowledge can then be shared with his or her client.

The phenomenological method they employed combined multiple lived-experiences into distinct categories of meaning. The method they followed specifies how to gain a universal meaning of the “essence of the phenomenon,” rather than just a basic description of the experience. The categories Johansson et al. (2015) discovered from combining multiple case studies are: (1) “Handling changes in the body”, (2) “incorporating the illness and its treatment into daily life”, (3) “Manoeuvring between fear and control”, and (4) “Taking responsibility for acquiring and applying new knowledge” (p. 4-6). The restructuring of the lived-experience into essential parts (i.e., forming constituent, see Johansson et al., 2015 for more information) allowed for a scientific description of transformative body experiences to be possible.



In the *International Journal of Qualitative Studies on Health and Well-being*, Dahlberg makes the argument that qualitative research should be given a higher priority when dealing with diagnoses. She too is against positivism, which she defines as, “atomism, reductionism” and as illustrating the urge to divide complex wholes into groups of small and separate parts (Dahlberg, 2013, p. 1). In the lifeworld study the lived-experience is analyzed as a whole before themes or meaning units are made explicit, whereas atomism is a doctrine suggesting that phenomena be broken down to small parts before examining the lived-experience of having diabetes. Approaching the same participants through a different frame of reference would likely limit what could be known about the full experience of living with diabetes. It is likely that another approach would seek out better or more efficient ways to diagnose someone with diabetes, rather than focusing on promoting the health and well-being of the patient. Dahlberg (2013) warns that “Diagnoses are even contra productive as they give no clues to understanding a person’s health resource or how he/she can be supported in strengthening his/her health processes” (p. 1). Dahlberg (2013) stresses the self-image and identity of the individual can change because of what a diagnosis says therefore it is imperative to support research on what to do with what is being experienced after the process is done.

*Lifeworld experience: Living with major depression: Method by Smith*

Smith (2004) founded Interpretative Phenomenological Analysis (IPA), a derivative of the descriptive phenomenological method by Giorgi (2009). The publications by Dahlberg and Giorgi in *Indo-Pacific Journal of Phenomenology* are explicit about the foundation of phenomenological philosophy in their methodology (Giorgi, 2010). Smith (2004) claims the approach is still focused on making sense of the personal and social world of the individual rather than merely describing how a phenomenon is affecting the individual. The qualitative approach by Smith is characterized as being

detail orientated, focused on the individual's frame of reference, and working beyond a simple description. The focus of IPA is to find the themes that emerge. The importance of this method is it benefits those in the health profession to figure out why a diagnosis is ineffective. Smith (2004) acknowledges the importance of the approach in health psychology, but its practicability is endless because it is simply getting at the lived-experience of any type of phenomenon.

Rhodes and Smith (2010) research a case study of depression, in which they then structure such concepts as "being in the pit" as a universal experience of depression (Rhodes & Smith, 2010). The participant in this study describes his depression as if he is in a pit. The usefulness of case studies where the research dives into the details of the lived-experience is they can be compared with other case studies for a deeper (and, eventually, more universal) understanding. Smith's IPA focused on how, "The very detail of the individual brings us closer to significant aspects of a shared humanity, and the particular case can therefore be described as containing an 'essence'" (Smith, 2004, p. 43). In the research by Rhodes and Smith (2010), only a single participant was in the study, which limits the ability to identify and confirm potentially universal themes. However, the topic of depression is fairly common on a global scale, and there is limited research on the first-person perspective.

Like the lifeworld study on diabetes, Rhodes and Smith (2010) develop themes from the interview. This study is oriented more toward understanding how other researchers should approach a participant because the themes discovered are particular to a single participant. Clearly the theme of dying is evident, and can be expressed universally, but ultimately the goal of research on depression is to alleviate the person's pain. What is unique about this particular study is how Rhodes and Smith (2010) describe how they analyzed the raw data (the interview), and how they developed meaning units after reviewing the interview. The trouble with this type of study is it does not provide

a useful framework for a practitioner to help someone who is suffering from depression. It does provide a framework for a researcher who wishes to do a similar study, however. In the last section Rhodes and Smith (2010) state how, “When we approach someone with ‘depression’ we should attempt to bracket, to put aside, our assumptions, our stereotypes of depression as a general ‘thing’, and explore with the person their unique experiences” (p. 408). I will argue this “Implication for therapy” is actually part of the phenomenological philosophy, which should be a given when conducting research if using the phenomenological approach.

*Lifeworld experience: Living with major depression: Method by Dahlberg*

In a global context, major depression is prevalent without a clear method of relief. Danielsson and Rosberg (2015) acknowledge this global issue and believe a phenomenological method is capable of validating the Basic Body Awareness Therapy (BBAT) for several health issues. “BBAT involves both activating and experiencing one’s body through movement, acknowledging that these experiences touch different dimensions of existence” (Danielsson & Rosberg, 2015, p. 2). There were 15 participants in this study and it involved semi-structured interviews, like in the previous single study. The aim of the study was to examine a treatment prevalent throughout the globe. BBAT is a way of knowing one’s body through movement that gets at the physical, physiological, and psychological dimensions. It captures the lived-experiences in three ways by focusing on the material body, the constant circulation of the systems in the body i.e. blood pressure and temperature, and cognitive aspects like attention and emotions (Danielsson & Rosberg, 2015). The influence of this type of treatment is widespread: “Eastern movement traditions such as tai chi chuan and Zen meditation and by Western traditions such as dance and movement pedagogy” are rooted in BBAT (Danielsson &

Rosberg, 2015, p.2). Clearly broad themes can be brought to light by looking into treatment from across the globe.

Approaches in psychology seek to alleviate problems through dialogue and discussions. Body awareness therapy is able to touch on the physical aspects of being by focusing on movement. A theme of *opening towards life* emerged because of, “the focus towards specific features of the concrete body, which shifts the attention and breaks through ruminating thoughts” (Danielsson & Rosberg, 2015, p.6). The concrete body is often times thought of less. In this study the participants were forced to acknowledge their own movement even if it meant felt both pleasurable and disturbing feelings. At times it “shook things up, challenging the participant’s experience of numbness and dissipation” (Danielsson & Rosberg, 2015, p.7). Overall, the theme of an opening toward life emerged because it “removed the bubble” through physical activity and mental focus. Rather than just investigating the lived-experience to provide for practitioners the approach sought out a treatment for depression. Therefore the authors of this study played the role of a researcher and a practitioner, combining theory, research, and practice together.

#### *Psychological Methodology in Qualitative Research from Phenomenological Philosophy*

Each of the studies reviewed above can be linked to Giorgi’s method for phenomenological research in psychology. Giorgi (2009) outlines a specific process to carry out during an interview that will make it scientifically rigorous. According to Giorgi (2009), this method can be applied to qualitative research or in practice. The trouble with this method is the person conducting the interview must either record or write the full description of a phenomenon given by the subject, and acknowledge the duration is a significant factor that cannot necessarily be predetermined (Giorgi, 2009). I will briefly review how Giorgi draws from Husserl to get a subjective, and then objective

description of experience. Giorgi (2009) claims utilizing his methodology is one way to analyze a description of an experience in a concrete way that comes up in an interview.

The phenomenological method aims to describe the experience of the other person with the most detail. A face-to-face interview is the only situation I believe this method can be used. The reason for this there must be a way to write or record the situation the other person is describing. "The descriptions provided by the experiences are an opening into the world of the other that is shareable... while the descriptions come from others, the analyses, the meaning discrimination, and intuitions into eidetic data take place in the consciousness of the analyzer" (Giorgi, 2009, p. 96-97). Here bridging philosophy and psychology is necessary because what is manifested and brought to light in one's subjective consciousness is the starting point for following a phenomenological approach.

Collecting the full description of a lived-experience during the interview is the **first step** before analyzing the data. A description may come from a recording, having the participant write down his or her experience (this is seldomly used), or writing the dialogue down (which requires a high level of competence). Giorgi (2009) reminds us to ask, "In their account, is the participant revealing an aspect of how he or she was present in the situation?... If not, it is perfectly legitimate to try to steer the subject back to describing himself or herself in the situation that is being focused upon" (p.122). Depending on the phenomenon being studied the level of rapport (i.e., connection to the subject) may be significant factor to bear in mind. In general, the data collection process is working with the subject to understand a specific situation by asking directing questions.

Once the interview is over, the description is analyzed by the interviewer, this is the **second step**. The description is meant to be the raw data that can be evaluated by a second or third

researcher if one feels the interpretation is done inadequately— only one person is needed for the analysis. Reading the entire dialogue is the first step before diving into the analysis. “The phenomenological approach is holistic since it realizes that meanings within a description can have forward and backward references” (Giorgi, 2009, p. 128). The initial data analysis step to “read for the sense of the whole” is what Giorgi recommends for a broad range of research (Giorgi, 2009). What is less obvious during this stage is that the person analyzing the data must also then take an attitude of the phenomenological reduction. Giorgi (2012) explains phenomenological reduction this way, “The researcher still considers what is given to her but she treats it as something that is present to her consciousness and she refrains from saying that it actually is the way it presents itself to her” (p. 4). Giorgi (2009) then notes that “whenever a description is concrete and sufficiently rich, the noetic-noematic correlation can be applied to it” (p. 105).

These terms come directly from Husserl. According to Husserl, noetic refers to “a correlation between the act and an object with a focus on perceiving”, and noematic is “the same correlation with a focus on perceived object”, noesis “the act of perceiving”, and noema “the object of perception,” can be applied to the description to make it objective. In other words, someone else reviewing the passage will see the act of perceiving the same as the researcher did, although the analysis itself is subject to vary (Giorgi, 2009; Spiegelberg, 1994; “Oxford English Dictionary,” 2016). For example, in the case study by Rhodes and Smith (2010) the noesis of their single participant is an emotion toward being “in a pit” (“the act of perceiving”), whereas “the pit” (“the object of perception”) will be the noema as it is perceived by the participant. These two terms can be related to others with similar experiences, and understood by others who read about the experiences.

To simplify, the first step in phenomenological psychology, according to Giorgi (2009), is collecting information, typically through an interview, about a lived experience, and focusing on understanding the experience in full. The second step then consists of breaking down the whole into meaning units. These “units of meaning” are merely marks indicating when the meaning of the experience shifts. The basic criteria for this is: (1) make a mark when the meaning shifts – this does not necessarily mean at the end of a sentence, (2) assume the phenomenological attitude, (3) keep in mind the particular phenomenon being investigated, and (4) refrain from diving into the meaning of the units – it is meant to be a “spontaneous activity” (Giorgi, 2009, p. 130). The reviewer of the semi-structured interview on people doing BBAT with depression will still bracket his or her assumptions of the meaning of the meaning units although they will be in segments now.

There are **three additional steps** to follow, which Giorgi (2009/2012) goes over extensively:

(3) In the next step, the researcher transforms the data, still basically in the words of the subject, into expressions that are more directly revelatory of the psychological import of what the subject said. In other words the psychological value of what the subject said is made explicit for the phenomenon being studied. The use of the method of free imaginative variation is critical for the completion of this step... (4) The direct and psychologically more sensitive expressions are then reviewed and with the help of free imaginative variation an essential structure of the experience is written. (5) The essential structure is then used to help clarify and interpret the raw data of the research. (Giorgi, 2012, p. 6)

The third sub-step out of the five described above requires using Husserl’s principle of free imaginative variations specifically. In basic terms, it is removing the investigated phenomenon from the unit of meaning to see if it still makes sense (Giorgi, 2009).

## Conclusion

For my paper I chose to investigate phenomenology to discover first what it is, and then to see if and how it could be useful for practice and research in psychology in the United States. I found it imperative to do my research paper on the methodologies used in psychology rather than try to adapt the phenomenological approach in an empirical study of my own. The reason being, which I hope is clear in the first section, is this specific method in research is rooted in the philosophy of Edmund Husserl and others who came before and after him, and their philosophical approach requires a clear understanding of methods and assumptions that inform them. Although phenomenology has been used to study global problems like universal health concerns, I did not feel I could adequately use this method without closely examining and comprehending its basic components and its historical roots.

Phenomenology is of great use when trying to compare the narratives of multiple individuals going through the same situation, sharing the same emotions, or living with the similar concerns about the past, present, and future. In my opinion, phenomenology is useful because it can describe and analyze a plethora of human phenomena in such a way that themes emerge about pieces of phenomena, and about their metaphysical components in particular, and how they are shared across individuals. Unlike other sciences, where the number or percentage of incidents of a mental or physical health problem is the focus, phenomenology considers a universal theme about how a mental or physical health problem is felt in one's body, or made meaning of by an individual, to be the foundation for understanding what the phenomenon is.



The reason why I began with the practitioner in psychology is they had the greatest influence in the beginning of the phenomenological movement. In the United States in particular the movement started with the clinical field. Obviously other methods are easier, quicker, and simpler to use. In the health care profession taking shortcuts is either unethical or dangerous to the client. Therefore my assumption is phenomenology must be capable of being authentic and valid if it has been used by practitioners since the 1950s.

I introduce the empirical studies second because it is evident the approach is useful for guiding a researcher. Clearly the examples used are considered with health related issues although the approach is not limited to this field of research. These examples though demonstrate how the method can be applied to give a deeper and more full understanding of a lived-experience, which when applied will benefit people.

I conclude on the method in order to make a distinction between phenomenology as an approach and a method for investigating the content of a phenomenon. Practitioners use the principles behind phenomenology to guide their own behavior toward an individual. In contrast, a researcher uses it as a guide for a formal method that provides the most objective and empirical qualitative data. Many aspects overlap, which is why I considered it important to describe both. Finally, in order for a practitioner or researcher to adopt the phenomenological approach it is also necessary to understand the philosophical connection. My research focuses on the necessary components of phenomenology before looking at the content of what is being studied.

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