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Regular Article

Hermeneutic Phenomenology: Bridging Western and Japanese Perspectives and Languages

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Abstract

This article offers the reader methodological insights emerging from a hermeneutic phenomenological study that examined the meaning of the woman-midwife relationship in Japan. The methodology of hermeneutic phenomenology was chosen because it is well suited to reveal women's and midwives' lived experience that is often taken for granted in day-to-day maternity care settings. However, implementing the methodology was not without its challenges. These challenges included whether hermeneutic phenomenology, based on Western philosophy, could be appropriate for conducting a study involving a researcher and participants who identify as Japanese. Further, while the study required final write up in English, the interviews were conducted in Japanese. Utilizing hermeneutic phenomenology relies on language as the tool for accessing the phenomenon of enquiry. However, Japanese culture is less expressive and, relative to Western cultures, values non-verbal communication. Beyond verbal expression, language also conveys unique influences of each culture. Although it may be challenging to conduct research between different cultures, and their unique ways of thinking and languages, it is not an impossible situation and can be rewarding. The value of using hermeneutic phenomenology for a Japanese centered study helped to convey the meaning of the woman-midwife relationship in Japan. This article details the unique process of the study, in terms of the philosophical foundation and languages, to provide methodological insights and advances for future cross-cultural qualitative research.

Keywords

qualitative research, hermeneutic phenomenology, cultural differences, midwifery, translation of text

Introduction

This article presents how a study, which examined the meaning of the woman-midwife relationship in Japan, used a hermeneutic phenomenological approach. We explain how Western and Japanese perspectives and language differences were bridged; and, more specifically, how challenges that arose in using a Western methodology in a Japanese context were overcome. Hermeneutic phenomenology is originally based on Western philosophy which is unfamiliar for many Japanese (Kida, 2000). Therefore, the researchers had to consider the unfamiliarity and supplement the Western methodological study with the Japanese worldview prior to, and throughout, the study. Additionally, the study used two languages—Japanese and English. The final thesis was written in English as per the university requirements; however, Japanese was used for the purposes of data collection.

Translating the participants' stories from Japanese into English posed a potential problem in terms of accurately capturing the participants' lived experiences. Because of these issues, the study process involved a range of methodological challenges. This article presents the methodological insights gained through the study process in order to contribute to future cross-cultural qualitative research.

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Summary of the study

Before discussing the methodological insights, we briefly introduce the study. The purpose of doing so is not to discuss the findings of the study in-depth; rather, to give context to the following discussion regarding methodological challenges. The unique methodological journey occurred while Japanese and Western researchers, based on a Western university, explored the experiences of Japanese women and midwives living in Japan.

Background

The study attempted to reveal the meaning of the womanmidwife relationship in Japan, which cannot be captured with statistics or quantitative studies. Japan is recognised as the safest country in the world in which to be born, and to give birth, because of the low neonatal and maternal mortality rates (King, 2018; UNICEF, 2018). However, there are serious social issues around childbirth in Japan. For example, the number of women who committed suicide during pregnancy and within one year after birth, which is not included in the maternal mortality rate, was double the number of maternal deaths caused by childbirth in Tokyo (Takeda, 2017). Mothers also suffer from postnatal depression, and an increase in baby/ child abuse has been reported (Japan Association of Obstetricians and Gynecologists, 2017). Such situations suggest that the meaning of "safe," as evaluated by the mortality rates, is too narrow and that women do not equate their birth experience only with clinical outcomes and numbers. The statistics may represent the quality of medical services but not the quality of care or experience. Therefore, the study employed qualitative methods to develop a better understanding of women's birth experience.

Globally, midwives are expected to undertake the primary role in maternity care, and midwifery care is considered key to improving the quality of women's birth experience (Horton & Astudillo, 2014; United Nations Population Fund, International Confederation of Midwives, & World Health Organisation, 2021). Research further shows that care and safety are sustained by human relationship between women and midwives (Hunter et al., 2008; Noguchi, 2002). For that reason, the study sought the meaning of the woman–midwife relationship in Japan with the potential to help broaden the meaning of safety of childbirth and to improve women's birth experience in Japan. The research question of the study was "What is the meaning of the woman–midwife relationship in Japan?"

Choice of methodology and methods

To understand the lived experience of women and midwives in Japan, the study utilized hermeneutic phenomenology which aims to reveal the meaning of a human experience in the everyday world (Smythe, 2011; van Manen, 2016). The phenomenological approach seeks to uncover how a person

sees the world and how they experience it. Phenomenology deals with the lifeworld in which the person is living, and the reality in the lifeworld is described as *lived experience* (van Manen, 2016). A phenomenological stance is that the essence of the lived experience is concealed within our experiences.

The study specifically used the approach introduced by Max van Manen (2016), who combined methodological theory with a practical approach to develop a hermeneutic phenomenological inquiry based on the phenomenology of Heidegger (1927/2010) and other philosophers. His methodological structure differs from technical procedures of other qualitative research, such as coding and methods comprised of a step by step procedure. Writing is considered the most critical component of the analytic method in van Manen's (2014, 2016) phenomenology. In the study, therefore, the text was produced through writing and rewriting of the interview transcript, and further interpreted to bring clarity and seek the depth of the lived experience of the study participants. In the methodology, the phenomenon itself appears to consciousness, and language is the tool to access that world (van Manen, 2016).

Giles (2011) further claimed that the element of relationship is always already there; and, ontologically, social beings cannot exist in any other way. Such sensitivity towards relationships is, therefore, fundamental for understanding human experience. As long as midwives care for women when they give birth, a relationship exists between them; and the relationship is an integral part of woman's birth experience, no matter how much she is aware of it. The woman-midwife relationship is also a lived experience of midwives in everyday midwifery practice. Nevertheless, the experience is often taken for granted within maternity care settings, and what this relationship means for women, midwives, and women's birth experience has not been clarified in Japan. Therefore, the study attempted to understand the meaning of the relationship between Japanese women and midwives through their lived experience using a hermeneutic phenomenological approach. The study involved individual interviews with 14 mothers and 10 midwives across Japan. Ethical approval (AUTEC 16/429) for the research was granted by Auckland University of Technology Ethics Committee.

Study findings

The hermeneutic phenomenological approach revealed four themes: 1) Seeking a connection, 2) Being present, 3) Having a voice, and 4) Sensing a peace of mind and trust. The women and midwives of the study in the dominant maternity care context, described as an assembly line care, often struggled to make a connection with one another, leaving women feeling helpless and alienated. However, some women and midwives, especially in a long-term relationship, described that by sharing time, experience, and understanding, they were able to feel present to each other. Such a relationship enabled the women to have a voice, and the mutual understanding

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established between the women and their midwives allowed the midwives to advocate for the women for whom they cared. Furthermore, the positive relationship always embraced the women and midwives with a feeling of safety and trust, which were described as key emotions contributing to women's positive birth experience.

The study found the significance of the woman-midwife relationship is that it provides psychological safety for both women and midwives in maternity care. Women require both clinical and psychological safety to have a positive birth experience, as the experience affects their lives after the event. Further, a positive relationship with a midwife instils confidence in women as mothers. Conversely, it is difficult to ensure woman-centered and respectful care without developing the relationship because the woman-midwife relationship is the foundation of midwifery care. Having a positive relationship should be considered a basic human right for all the women in maternity care. Nevertheless, the current maternity care system in Japan limits many women and midwives from developing a relationship. The study recommends midwifery continuity of care in Japan to ensure opportunities to better develop the woman-midwife relationship. The shift from the current maternity care to the relationship-based care requires radical changes, but it is vital to improve women's birth experience and foster improved long-term social and psychological outcomes for women in Japan.

Methodological Challenges

In achieving the study findings outlined above, two major methodological challenges were faced: 1) conducting a hermeneutic phenomenological study within a Japanese worldview, and 2) conducting the study between two different languages, Japanese and English. In the following sections of this article, the first author, a Japanese midwife, will be expressed using first person language (I, my, me) to describe her methodological journey.

Hermeneutic phenomenology within a Japanese worldview

First, for this hermeneutic phenomenological study involving a Japanese researcher and participants, it was impossible to put aside a Japanese worldview as it would unavoidably influence and underpin the study. That is, Japanese ways of thinking and being needed to be recognized in order to understand the experience of Japanese women and midwives within the philosophical approach.

Hermeneutic phenomenology as a research methodology has been informed by a long philosophical tradition (van Manen, 2016). However, it has been said that there is no philosophy in Japan and there is some discussion about why Japanese do not have or need philosophy (Inoue, 2008; Kanno, 2003). Heidegger claimed that the idea of philosophy is Western (Kida, 2000), and van Manen (2016) stated that phenomenological human science is a Western research method that distinguishes it from Eastern meditative techniques. While the hermeneutic phenomenological approach seemed best suited for the study aim, the information above raised concerns about whether it is appropriate or even possible to conduct Japanese research using a Western philosophical methodology.

However, further searching revealed a field of study called Japanese philosophy (Davis, 2019). Heidegger was influenced by Eastern and Japanese thoughts (Asano, 2009; Kawahara, 1992), and several modern Japanese philosophers learned phenomenology directly from Heidegger. Hence, philosophy is not a concept that Japanese can never understand or use; rather, Japanese are said to be generally unfamiliar with philosophy. In fact, there are some Japanese studies applying phenomenology, following European philosophers (Iwata, 2014; Izumi, 2006; 2007; Nishimura, 2018). While these studies did not mention or deal with the differences between Western and Japanese approaches, I could not help but feel the need to acknowledge the differences in the ways of being, thinking, and knowing, as Heidegger and van Manen discussed earlier. As long as the study is based on hermeneutic phenomenology, the differences of philosophical approach could affect the methods and interpretive analysis; and, consequently, the quality of the study. The following section explores what we understand about Japanese worldview, as distinct from a Western worldview, and how that possibly affected the study.

Japanese philosophy and worldview. Japanese philosophy and worldviews are different from those located in the West. Japanese philosophy is, historically, a fusion of both indigenous Shinto and continental religions such as Buddhism and Confucianism, with modern Japanese philosophy influenced by Western philosophy. Kitaro Nishida (1911/1979) fused Zen and Western thought. Nishida insisted on pure experience in which there is no opposition between subjectivity and objectivity. His ontology derived from an understanding of absolute nothingness. Tetsuro Watsuji (1934/2007), a Japanese philosopher who learned from Heidegger, criticized Western individualism. His ethics say human beings are not living by themselves but are always in relation to others. In Japanese society, often characterized by collectivism, keeping harmony with others and being the same as others are of great value. Therefore, insisting on one's own ideas, existence, and ego is not preferable; an attitude that discourages Japanese from expressing their ideas. Japanese also value highly nonverbal communication and are commonly uncomfortable to express their feelings using words (Okoshi, 2005). I reflect on these differences drawing on my personal situation.

My husband is from a Western country, Canada, where he practiced a Japanese martial art called Aikido five days a week. He had many books about the history and philosophy of Aikido. After a few years, he moved to Japan and was excited about practicing his art at the home of Aikido. In Canada,

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according to my husband, when teachers introduce a new skill, they give a lot of information including the philosophy and way of performing the skill. He enjoyed these discussions with teachers and other students. In Japan, however, teachers demonstrate a skill at the beginning of class, and students start practicing the skill without any discussion. They endlessly keep practicing one skill. No one talks about the details of the skill and there is no talk of philosophy. The approaches are obviously different between Canada and Japan, although they play the same martial art. In Japan, Aikido is learned through the body rather than the language. This demonstrates how Japanese may be uncomfortable with experiencing and expressing languages. In a culture emphasizing the importance of non-verbal communication, Japanese believe it is disgraceful to express feelings and to explain "how" and "why" with words. This understanding meant that the study participants may not express much about what they experienced, although language is an important tool in hermeneutic phenomenology.

Another example of Japanese philosophy and practice is demonstrated in the American documentary film titled *Jiro dreams of sushi* (Iwashita et al., 2011). The movie follows Jiro, an 85-year-old sushi master chef, and provides a typical example of a Japanese way of knowing or learning. In this film, an apprentice is allowed to make *tamagoyaki*, an egg/omelette put on sushi rice after working under Jiro for more than a decade. He has practiced making *tamagoyaki* before and tries hundreds of times for another several months until Jiro says his *tamagoyaki* is okay. Jiro does not teach him exactly how to make it and how it should be. When Jiro finally says yes or good to the taste of *tamagoyaki*, the apprentice is called a sushi chef for the first time. This is probably not a surprising thing for Japanese but came across as unusual for many Western viewers.

It seems Japanese, like Jiro, believe that human beings can never reach the place, stage, or thing in a real sense with words. They believe that people understand or completely acquire the practice or skill only when they experience it or achieve it by their own effort. van Manen (2016) was also aware of cultural difference and stated:

One important difference is that western human science aims at acquiring understandings about concrete lived experiences by means of language, whereas eastern methods may practise other non-script-oriented reflective techniques. (p. 23)

Japanese traditionally learn work, art, and sports by watching and feeling rather than being taught or instructed. They usually learn only basic technical skills and knowledge at school and have on-the-job training after employment (Organisation for Economic Co-operation and Development, 2016). The same is true for midwifery education. The skills, knowledge, and wisdom of traditional midwives have been handed down and learned on the job rather than discussed or documented.

The necessity of verbalizing midwifery phenomena in Japan. The examples of Aikido and sushi chefs are not universal, but there

are some similarities in midwifery. Student midwives learn many skills under teachers' detailed instruction during nursing and midwifery education. However, even if students learn how to palpate a woman's abdomen and correctly tell the position of the fetus, they cannot say they have completely acquired the skill. To do so, would mean also telling the condition of the uterus, the amniotic fluid, and the fetus. Thus, communicating with the woman's body and the fetus through palpation is something they have to keep practicing. Moreover, in terms of palpation, I saw an experienced midwife warming up her hands with warm water every time before palpation or antenatal care and another experienced midwife performing a palpation to see whether the fetus was a boy or girl. Another midwife provided external cephalic version for a breech baby. However, we do not officially learn those things. We are expected to "look and learn" or "steal" the skills and wisdom from experienced people in practice rather than be taught. Experienced midwives are usually able to obtain more information than new midwives from one palpation. Skills are learned and deepened through repeated practice. In Japan, midwives may be considered as a type of artisan, because midwifery is a form of art and its essence is often beyond expression. This way of learning includes the expectation of experts or expressers towards learners or receptors to guess or catch the important elements of the skills and ideas. Unconsciously, the message, "I do not say much but please understand what I mean," is passed in Japanese communication. This would happen in data collection with Japanese women and midwives.

These cultural ways of knowing and leaning may be reasons why Japanese midwives do not ostensibly or literally have philosophies or concepts of midwifery as Western midwives do. Japanese midwives seldom discuss the philosophies that underpin their practice. Therefore, the significance of midwifery may have not been well explored and documented in Japan, although it has long history. This does not mean Japanese midwives undervalue the significance of midwifery or the woman-midwife relationship. They have philosophical foundations in their practice among traditional and experienced midwives. Rather, they have not had a chance to express, or they are not familiar with expressing the philosophy underpinning their knowledge, skills, wisdoms, and passion in their own words. Or, they might have expressed it in different ways, or experienced it in different ways. Such Japanese ways should be respected; yet, the problem is that current midwives have lost opportunities to have enough experience to develop their practice and philosophy in the medical and obstetric-dominant maternity care system. It has been difficult to understand what midwifery is even among midwives in Japan. Hence, focusing on and externalizing their experience is a good path to understand the phenomenon, the woman-midwife relationship, before they may lose track of the essentials. While it may be challenging to collect externalized words from the study participants, the Japanese midwifery context added to the need to conduct the study with hermeneutic phenomenology.



Japanese midwives have been losing opportunities to take over, "steal" or develop the skills and wisdoms, and to understand (traditional) midwifery through their body and experience in current maternity care settings. While Eastern philosophy would have attempted to get it into the body with instinctive knowledge, Western philosophy would help Japanese midwives understand it by means of language. Otherwise, Japanese midwifery may not be able to deliver real value in society. Verbalizing and externalizing its value with language is necessary and gives rays of hope to the future of midwifery in Japan.

Belief in the power of language. As mentioned earlier, Japanese society is frequently referred to as a form of collectivism, in contrast to the individualism of Western cultures (Okoshi, 2005). Guessing what another person is thinking and feeling, without asking, is also valued. In Japan, a relatively homogeneous nation, it is anticipated that everyone has same or similar ideas and values (Nakane, 1967). This means that many things Japanese people do may be taken-for-granted as a common understanding. The same may be said in midwifery practice and philosophy in Japan. The taken-for-granted common understanding could be one reason why Japanese midwives do not discuss and document the philosophy of their practice or their relationship with women in their care. Understanding and documenting experiences is increasingly important for Japanese midwifery, a profession that is losing its autonomy under the dominant obstetric management of maternity care. The study afforded the opportunity and challenge to describe and interpret Japanese midwives' experiences with words.

While the study was expected to provide Japanese midwifery and birthing women with power of language, there have been endeavors to put the phenomenon and embodied experience into words. Nishimura (2018) studied the relationship between nurses and comatose patients through Merleau-Ponty's concept of embodiment. She found that the eyes (line of sight) of a nurse and a patient were entwined, that the feelings of touch (the patient's hand) were kept on a nurse's hand (after-sensation), and that a nurse felt the timing was synchronized between her and a patient during care. Nishimura's descriptions suggested that nurses and patients were interacting. The nurses even felt cared for by the patients through their communication. Natural science diagnoses comatose patients as consciousness disorder, but phenomenology describes what those patients are and the phenomenon as lived by the nurses. It also tells us the meaning of the relationship between nurses and the patients; thereby, demonstrating the power of language. Without knowing such aspects of the patients, our understanding of comatose patients or consciousness disorder would be limited.

In consideration of Japanese characteristics explored earlier, research designs involving observational or less verbal methods, such as ethnography or observational studies, could be seen as providing a more suitable research methodology. However, the study set out to value the participants' spoken lived experience. Adams and van Manen (2017) argued that "concrete, first-person descriptions of an experience are often the starting point for phenomenological reflection and exploration" (p. 784). Listening to the participants' own experiences could deepen or expand my interpretations regarding the phenomenon rather than relying on observation. Nishimura (2018) reached the same understanding when she researched Japanese nurses' interaction with their patients using the nurses' narratives. Likewise, the meaning of the phenomenon of Japanese relationships could be captured through the lived experience as described by the women and midwives. Japanese culture may have less expressive verbal communication, but what the participants describe is as valuable to that of any culture. Based on participants' stories and non-verbal expression, the study attempted to acquire insightful contextual descriptions that illustrate the meaning of the woman-midwife relationship rooted in Japanese culture and society.

At the same time, we need to be reminded that although language allows us to share and understand the experience, it is impossible to reach an absolute understanding. Gadamer et al. (1960/2013) and Heidegger (1927/2020) maintained that there is no closure or completeness in our understandings. Hence, it is necessary to keep open to other interpretations and understandings. Especially for Japanese, it is potentially too risky to rely on only the words they speak. Also, Japanese have fewer facial expression and body language gestures than Westerners (Kagawa, 1997). Therefore, it is important to obtain other ways of expression such as pauses and meanings between or behind words.

The semi-structured interviews took up to two hours, and involved carefully listening to the women's and midwives' stories, without guiding them in what to say. I asked about women's experiences of pregnancy, birth, and postpartum; and midwives' experiences of daily care, rather than focusing on the experiences with midwives and women. They naturally discussed what midwives and women did and provided rich experiential stories. One reason why they freely and openly presented their stories was that they could objectively reflect and describe their experiences rather than talking about ideas. The participants also talked about their experiences and feelings indirectly. For example, they often used metaphor and thermal expressions, such as warm, cold, frozen, for feelings, atmosphere, and attitudes they experienced, instead of saying it was good or bad, or they felt happy or sad. Also, they did not directly complain when relating difficult experiences caused by care providers or the settings where they gave birth. The hermeneutic phenomenological approach played an important role in this respect and supported a reflection of their lived experience. Words are not almighty but are definitely helpful to understand their experiences. Ultimately, the study was an opportunity and challenge to describe and interpret the woman-midwife lived experiences through phenomenology expressed in language.



Working between two languages

Following data collection, the interviews were transcribed, and each text was crafted and edited. Crafting forms a condensed story that captures richness and meaningfulness of the experience (Crowther et al., 2017). After crafting and rewriting participants' stories, I translated them into English from Japanese. I had two stages of crafting the data because I worked with the data first in Japanese and later translated the texts into English. The major part of the crafting process was done at the first stage, but the translation also required certain amount of crafting and editing to bridge linguistic difference. Details of the translation process are described below.

Translation as relation. First, translation into English from Japanese was done in order to discuss the analysis with my supervisors who are Western English speakers, and for the purpose of the PhD thesis which was written in English. It was essential and helpful that my supervisors read those stories, understood my interpretations, confirmed whether those interpretations made sense, and discussed the meanings of the experience and interpretations with me. The accuracy of the translation was confirmed by a Japanese mentor, who was a midwife and a professor in a university in Japan. She has conducted a phenomenological study based on the philosophy of Merleau-Ponty (1945/2014), and has published her work in English (Matsuoka & Hinokuma, 2009). She checked two texts (a woman's and a midwife's story) between Japanese original texts and English translated texts. Her feedback was positive, and she assessed that I had an adequate skill and ability of translation.

While translating the texts, I also asked for help from English native speakers such as my friends (midwives, medical doctors, other PhD students), and my Canadian husband, to find the most appropriate English expressions by explaining the details of the situations, nuances, and my interpretations. Through shared discussion with my supervisors and many others, I gained multiple opportunities to reinterpret the texts, and to realize what were common for me and not for them, others, or outside Japan. This process challenged my pre-understandings. Unconsciously, my translation and interpretation occurred within the relationship with others.

With the realization and feedback occurring in English, I kept working with the original data written in Japanese in order to remain as close as possible to participants' experiences. At the same time, I sometimes back-translated into Japanese from English when I wanted to confirm the accuracy or rethink the meaning of the experiences. The method was inspired by Haruki H. Murakami (1979/2016), a Japanese novelist. Murakami writes a story in English first then translates it into Japanese to simplify the passages which gives his work a distinctive style (Tanaka, 2009). Back-translation was also employed in a hermeneutic phenomenological study of experiences of Japanese men during the transition to

fatherhood and presented in English by Iwata (2014). Including this approach, translation was always relational. This is probably taken for granted and not often openly discussed in the methodology. Yet, translation occurs in the reciprocal process between people, different languages, different backgrounds, and different understandings. The relation deepened the interpretation of what was translated in the study.

Translation as interpretation. Translating the stories became another significant process within the crafting, as it offered me another standpoint and realization. I re-crafted the stories by rethinking about what really needed to be conveyed in the stories and what was the essence of the experience beyond the linguistic difference. I was careful not to lose the original contextual meaning when translating the participants' experiences into English, but the translation process actually brought about a flood of phenomenological insights. Thus, translating the texts became a good opportunity to reach the meaning of the phenomenon because I tried to understand and focus on the meanings of the lived experience to keep the essence of the original texts between different languages and cultures. Translation is an interpretation. It would work better when the interpretation holistically keeps the essential meaning rather than when each single word is correctly, directly, or closely replaced into the word of another language.

Gadamer (1997/2007) argued, "the true task of translating means translating only the meaning-content in the text" (p. 177). In Gadamer's book, translated into English from German, it is stated that a free translation of his thought and not just of his words are performed following Gadamer's preference, and changes and additions are made to clarify the meanings that are "unspoken but self-evident in the German but not in English" (Gadamer, 1997/2007, p. 194). There were basically no major changes and additions through the translation of my study but, if necessary, information or resources were added for readers. Moreover, in the dialogue between Heidegger and Japanese scholars, Heidegger (1958/2000) maintained that he could not understand some Japanese words in German or English. This can happen between other languages too. By recognizing the limitations, I interpreted the meaning of the experiences of Japanese women and midwives as clearly as possible in the English language.

However, I chose to directly use some Japanese words in the study. For example, I used the Japanese term *anshin* ($\dot{\Xi}$ $\dot{\Box}$)—an expression of the participants' emotional state. The most commonly expressed emotions by the participants *anshin* and trust—were at the core of the woman—midwife relationship. *Anshin* means "a feeling of security or safety" and "peace of mind." *Anshin* (*-suru*) is also a verb and, in that case, it is translated as "I am relieved, reassured, or at ease," depending on the situation. The word, at times, indicates more than one meaning and does not align with one English word or phrase. Since I felt the danger and difficulty of translating the word into one word or meaning, I used *anshin* in its original form. Likewise, I believe some Japanese words most closely



conveyed the participants' feelings in the Japanese context when interpreting their lived experiences. However, using too many Japanese words in English research can be a problem. Therefore, the balance of, and reasons for, using different languages was carefully examined throughout the study.

Linguistic challenges of translating Japanese into English. Japanese grammar structure, honorific expressions, and specific phrases and metaphors were difficult points for me to translate into English. Amemiya (2007) claimed that traditional Japanese language does not have a subject. For instance, it is natural for Japanese conversations to develop without identifying who or what are grammatical subjects; pronouns and names, such as I, vou, he, she, we, they, or even "midwives," are often left out of the conversation. This was the case for the participants' narratives. Therefore, I had to supplement who did something or what was so. Although often implied and could easily be guessed, I sometimes needed to carefully think about who it was that the participant was referring to. When the texts were returned to the participants, it was possible to confirm it. However, I later questioned whether "midwife" could have meant a midwife or midwives in English. For example, the noun banana is just "banana" in Japanese. When expressing "I like bananas" in the language, people do not care if they like "bananas," "a banana," or "the banana." Japanese express "banana ga like" (ga is a postpositional particle of Japanese) meaning "(I/you) like banana" unless you want to talk about specific bananas. At the same time, "banana" appears like a subject, but there is no subject in this sentence.

Furthermore, Japanese language has multiple grades between casual and honorific expressions. One midwife kept using super honorific expressions towards women for whom she cared. It might have been her personal characteristic, but it sounded like a distance established between her and the mothers. It was difficult to translate her different way of talking from that of other participants. Japanese also often use passive tense for humble expressions which is not equivalently compatible with English. There were some difficulties when I translated Japanese sayings and metaphors into English. For instance, a woman said, "(I did) draw a hazure lot" (I drew a losing lottery ticket) in the interview. She meant that the midwife she met was not a good one among many midwives in the hospital. Yet, she did not say that, and she even stated that the midwife was kind. However, her phrase implies that she was disappointed; she thought that which midwife she met was a matter of luck and she was unlucky. It seems that she does not think she had a choice. The readers might be able to guess from the phrase or her descriptive experience, but I struggled with such phrases when translating. However, the process provided me with opportunities to further develop my thinking and interpretation.

Including the examples above, I tried to interpret, as much as possible, the uniqueness and nuance of the participants' narratives. The translation process was a challenge for me, as English is my second language (professional translators

usually translate from their second language into their first language). It was very time consuming, although equally interesting. I did not consider outsourcing the translation process to a professional service or anyone else. I probably felt that I knew the best translation of the stories, including the meanings between and behind the language because I directly heard their stories, faced the tellers of the stories, and was with them in certain moods or atmospheres. Translating the texts was a notably important process to obtain the meanings and insights of their experience, and I felt I could achieve convincing, accurate, and satisfying translations. My biggest learning in this area is that it is possible to convey the meanings between different languages by carefully treating the texts from both sides of the languages. Still, absolute interpretations, expressions, and understandings are never reached even within the same language; therefore, understandings need to be filled by focusing on the experiences which tell us the meaning no matter which language is used.

At the beginning of the study, I was apprehensive about my ability to collect meaningful data in one language and not lose important meanings of the original data through translation. However, while not an ungrounded concern, me fear, ultimately, was overcome with careful awareness and became a strength of the study. The interpretations were rewritten, reinterpreted, and rethought until adequate convincing interpretations, which were explicit, rigorous, and comprehensive were achieved. The hermeneutic phenomenological approach which involved the journey detailed in this paper, enabled a more nuanced interpretation of women's and midwives' lived experiences. To answer the research question, the study had to take a long way around to understand Japanese way of being, which even as a Japanese research myself, I was not aware of, and was required to translate the data and interpretations. Researchers may apply methodology without such considerations, but, for the current study, the detour deepened understandings of the methodology and the results of the analysis. Including cultural differences, every study would have its original journey even if using the same methodology and methods. Recognizing and recording the challenges would be important for future research.

Conclusion

Japanese ways of knowing are at times different from Western ways of knowing, in that knowledge is developed through unspoken action. Therefore, for Japanese to uncover the phenomenon in the same manner as Western researchers may present challenges. However, in the current Japanese midwifery context, it was important to understand and interpret the woman-midwife phenomenon in and through language, so as to give voice to Japanese women's and midwives' experience. The study was indeed challenging, but through respecting traditional Japanese epistemologies, it was successfully completed; and, in doing so, revealed the lived experience of these Japanese women and midwives. Working



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with multiple languages in a study can be challenging, but in the current study translation worked as an important process to interpret the participants' experience and deepen understandings. Caring for and working between different thoughts and languages may be complex and time consuming, but such sensitivity towards culture, values, and languages is fundamental for understanding human experience.

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References

- Adams, C, & van Manen, M. A. (2017). Teaching phenomenological research and writing. *Qualitative Health Research*, 27(6), 780-791. https://doi.org/10.1177/1049732317698960
- Amemiya, T. (2007). Gengo to tetsugaku: Nihongo no tetsugakuteki köyö [Language and philosophy: Philosophical effect of the Japanese language]. *Tokyo Kaiyö Daigaku Kenkyū Hökoku*, 3, 5-12. https://oacis.repo.nii.ac.jp
- Asano, A. (2009). Haidega to shukyo [Heidegger and religion]. Nihon Daigaku Daigakuin Sogo Shakai Joho Kenkyuka Kiyo, 10, 49-60. https://atlantic2.gssc.nihon-u.ac.jp/journal
- Crowther, S., Ironside, P., Spence, D., & Smythe, L. (2017). Crafting stories in hermeneutic phenomenology research: A methodological device. *Qualitative Health Research*, 27(6), 826-835. https://doi.org/10.1177/1049732316656161
- Davis, B. W. (Ed), (2019). The Oxford of handbook of Japanese philosophy. Oxford University Press.
- Gadamer, H.-G. (1997/2007). The Gadamer reader: A bouquet of the later writings. Northwestern University Press. (R. E. Palmer, Trans.).
- Gadamer, H.-G. (1960/2013). *Truth and method*. Bloomsbury Academic. (J. Weinsheimer, & D. G. Marshall, Trans.).

- Giles, D. (2011). Relationships always matter: Findings from a phenomenological research inquiry. *Australian Journal of Teacher Education*, 36(6), 80-91. https://doi.org/10.14221/ajte. 2011v36n6.1
- Heidegger, M. (1927/2010). Being and time: A revised edition of the stambaugh translation. State University of New York Press. (J. Stambaugh, Trans.).
- Heidegger, M. (1958/2000). Kotoba ni tsuite no taiwa: Nihon-jin to touhito tono aidano [A dialogue on language: Between a Japanese and an inquirer. Heibonsha. (T. Takada, Trans.).
- Horton, R., & Astudillo, O. (2014). The power of midwifery. *Lancet*, 384(9948), 1075-1076. https://doi.org/10.1016/S0140-6736(14)60855-2
- Hunter, B., Berg, M., Lundgren, I., Olafsdóttir, O. A., & Kirkham, M. (2008). Relationships: The hidden threads in the tapestry of maternity care. *Midwifery*, 24(2), 132-137. https://doi.org/10. 1016/j.midw.2008.02.003
- Inoue, K. (2008). Katachi naki mono no katachi, koe naki mono no koe [The shape of things with no shape, the voice of things with no voice]. *Basho*, *7*, 1-18. https://kansai-u.repo.nii.ac.jp
- Iwashita, K., Pellegrini, T., Gelb, D., Iwashita, K., & Pellegrini, T. (2011). *Jiro dreams of sushi [Motion picture]*. Magnolia Pictures.
- Iwata, H. (2014). Experiences of Japanese men during the transition to fatherhood. *Journal of Transcultural Nursing*, 25(2), 159-166. https://doi.org/10.1177/1043659613515712
- Izumi, S. (2006). Bridging western ethics and Japanese local ethics by listening to nurses' concerns. *Nursing Ethics*, 13(3), 275-283. https://doi.org/10.1191/0969733006ne874oa
- Izumi, S. (2007). Nursing ethical concerns in end of life care: Using hermeneutics approach. *Journal of Japan Academy of Nursing Science*, 27(4), 72-80. https://doi.org/10.5630/jans.27.4 72
- Japan Association of Obstetricians and Gynecologists (2017). Ninsanpu mentaru herusu kea manyuaru: Sango kea eno kireme no nai sien ni mukete [Expectant and nursing mothers' mental health care manual: Towards seamless support of postpartum care]. Author. http://www.jaog.or.jp/wp/wp-content/uploads/ 2017/06/jaogmental_L_0001.pdf
- Kagawa, H. (1997). Gokaisareru nihonjin: Gaikokujin ga tomadou 41 no gimon [Misunderstood Japanese: 41 questions that bewilder foreigners]. Kodansha International.
- Kanno, K. (2003). Nihon ni tetsugaku nashi to iukoto [The meaning of 'no philosophy in Japan']. *Soshi*, *5*(5), 23-30. https://ci.nii.ac. jp/naid/40006782024
- Kawahara, E. (1992). *Haidegā sanjutsu [Honouring heidegger]*. Nansosha.
- Kida, G. (2000). *Haidega "sonzai to jikan" no kochiku [Formulation of Heidegger's "being and time"]*. Iwanami Shoten.
- King, A. (2018, February 21st). Japan the safest place to give birth: UNICEF. Nikkei asian review. https://asia.nikkei.com/Politics/ International-Relations/Japan-the-safest-place-to-give-birth-UNICEF
- Matsuoka, E., & Hinokuma, F. (2009). Maternity homes in Japan: Reservoirs of normal childbirth. In R. E. Davis-Floyd, L. Barclay, J. Tritten, & B.-A. Daviss (Eds), *Birth models that*

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work (pp. 213-238). University of California Press. https://doi. org/10.1525/california/9780520248632.003.0009

Merleau-Ponty, M. (1945/2014). *Phenomenology of perception*. Routledge. (D. A. Landes, Trans.).

Murakami, H. (1979/2016). Hear the wind sing. Vintage.

- Nakane, C. (1967). Tate shakai no ningen kankei: Tan'itsu shakai no riron [Japanese society: A practical guide to understand the Japanese mindset and culture]. Köbunsha.
- Nishida, K. (1911/1979). Zen no kenkyū [A study of good]. Iwanami Shoten.
- Nishimura, Y. (2018). Katarikakeru shintai: Kango kea no genshōgaku [The telling body: Phenomenology in nursing]. Kōdansha.
- Noguchi, Y. (2002). Monogatari toshiteno kea: Naratibu apurōchi no sekai e [Care as a story: Towards the world of narrative approach]. Igaku Shoin.
- Okoshi, A. (2005). Nihon oyobi nihon-jin [Japan and the Japanese]. Chōeisha.
- Organisation for Economic Co-operation and Development (2016). Japan: Boosting growth and well-being in an ageing society (Japanese version). OECD Publishing.
- Smythe, L. (2011). From beginning to end: How to do hermeneutic interpretive phenomenology. In G. Thomson, F. Dykes, & S. Downe (Eds), *Qualitative research in midwifery and childbirth phenomenological approaches* (pp. 35-54). Routledge.

- Takeda, S. (2017). Ninsanpu no jisatsu: Sono jittai [Suicide of expectant and nursing mothers: The actual situation]. Japan Association of Obstetricians and Gynecologists. http://www.jaog.or.jp/wp/wp-content/uploads/2017/11/11643745157d48555ead55ae19d42a0a.pdf
- Tanaka, M. (2009). Murakami Haruki no buntai, honyaku kenkyū:
 "Kaze no uta wo kike" niokeru "yōni" wo chūshinni [A study of Haruki Murakami's literary style and translation: A focus on "like" in "hear the wind sing"]. Nagasaki Kokusai Daigaku Ronsō, 9, 9-21. https://niu.repo.nii.ac.jp
- UNICEF. (2018, February 28). Japan is the safest place to be born according to our new report. But where is the most dangerous? Find out → http://uni.cf/actnow#EveryChildALIVE [Tweet]. https://twitter.com/unicef/status/968969252064714752
- United Nations Population Fund, International Confederation of Midwives, & World Health Organisation (2021). *The state of the world's midwifery 2021*. https://www.unfpa.org/sowmy
- van Manen, M. (2014). *Phenomenology of practice: Meaning-giving methods in phenomenological research and writing*. Left Coast Press.
- van Manen, M. (2016). *Researching lived experience* (2nd ed.). Routledge.
- Watsuji, T. (1934/2007). Ningen no gaku toshite no rinrigaku [Ethics as the study of man]. Iwanami Shoten.