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Temporality in Phenomenology: Utilizing the Principles in Practice for Significance of a Sex Research

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Abstract

This article aims to demonstrate how the researcher can utilize the principle of temporality in phenomenology as a method to explore and to reveal the human experience through its application in sex research. Although phenomenological studies have been increasingly adopted for qualitative inquiry in the field of social science, the idea of the horizon of temporality and its practical utilization is rarely demonstrated explicitly. In this study, the researcher has investigated the interpretation of marital experience of Chinese spouses in Hong Kong who have been assessed with sexual dysfunctions with attention to the couples' perspectives. Having adopted a synthetic qualitative research orientation in line with an interpretive research paradigm and with an emphasis on phenomenological principles, this article elicits the research paradigm, its philosophical orientation and the related research principles for a framework of utilizing temporality and its application for research.

Keywords

Temporality, Phenomenology, Lived Experience, Chinese Marriage, Sexual Dysfunctions

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This article aims to demonstrate how the researcher can utilize the principle of temporality in phenomenology as a method to explore and to reveal the human experience through its application in sex research. Although phenomenological studies have been increasingly adopted for qualitative inquiry in the field of social science, the idea of the horizon of temporality and its practical utilization is rarely demonstrated explicitly. In this study, the researcher has investigated the interpretation of marital experience of Chinese spouses in Hong Kong who have been assessed with sexual dysfunctions with attention to the couples' perspectives. Having adopted a synthetic qualitative research orientation in line with an interpretive research paradigm and with an emphasis on phenomenological principles, this article elicits the research paradigm, its philosophical orientation and the related research principles for a framework of utilizing temporality and its application for research. Keywords: Temporality, Phenomenology, Lived Experience, Chinese Marriage, Sexual Dysfunctions

When diagnosis is making towards sexual dysfunctions, physiological or biomedical models are usually adopted in the views that explain its etiology, such as the categorization in *Diagnostic and Statistical Manual of Mental Disorder* (American Psychiatric Association, 2013). Biological aspect dominates our understanding of sexuality that has developed to conceal our views of the individual, relational and psychosocial dimensions of sexual expression that may eventually prove stultifying to sex therapy in the professional field. In general, critiques of the physiological definition of sexual dysfunctions refer to its overemphasis on the penile-vaginal intercourse, reproduction, orgasm and sexual performance imperatives. In other words, it promotes genital function as the centerpiece of sexuality with a biological reductionist approach and a mind-body split, stripping the phenomena of context (Birke, 1999; Good, 1994; Grace, 1998, 2000; Nicolson, 1993; Tiefer, 1996, 2010). Hence, the physiological model of sexual dysfunction has to be re-examined and expanded that pave the way for the background of this study about sexual dysfunctions (Kwan, 2014).

With the concern focused on sexual functioning, sex therapy has been adopting an approach of clinical expert making diagnosis and advocating treatment. Besides, clinical practitioners may also apply a client-driven approach in addressing comprehensive and genuine needs of the clients, who are situated in their own contexts. Hence, the human experience is prime concern for understanding the meanings of sexual dysfunctions prior to deliberating the treatments. This research attempted to investigate the marital experiences of Chinese spouses in Hong Kong who had been assessed with sexual dysfunctions, whereas the significance of sexual dysfunctions was investigated at the dyadic level. The interpretation of the spousal experiences in the present study was specific to clinical social work in a wider socio-cultural context. It had been working towards a bio-psycho-socio-cultural model of understanding that was articulated by the principles of descriptive phenomenology and philosophical hermeneutics, and the results of the study were published with an overview (Kwan, 2015). However, the most striking part of the study, “temporality of sexual dysfunctions” in marriage

had not been fully elaborated, and I would like to seize the following part of this article in focus of this original idea for the experience and meaning of sexual dysfunctions in alignment. Interpretivism is adopted as the research paradigm for this study with the objectives of understanding a complex world of lived experience from the view of the persons who live it (Schwandt, 1994).

Phenomenology

Phenomenology is usually considered as part of the interpretive research paradigm (Clark, 1998; Guba & Lincoln, 1994; Monti & Tingen, 1999). In this research, qualitative measures with emphases on the principles of descriptive phenomenology and philosophical hermeneutics in the traditional movement of phenomenology are used to investigate different aspects of the sexual dysfunctions interpreted by the spouses in Hong Kong.

Key Features of Traditional Movement of Phenomenology for Research Significance of the Conceptual Framework

Phenomenological methods can be understood as phenomenological attitudes in execution or as phenomenological attitudes in action. There are some key features that are essential for research.

Epoché and Phenomenological Reduction

The focus of Husserlian phenomenological methods is on epoché and phenomenological reduction (Husserl, 1973), two edges of the blade, as the former stresses putting aside unexamined or unreflected presuppositions while the latter the residuum after putting aside the presuppositions. Regarding human experience, Husserl adopted a skeptical attitude that arises from caprice. In other words, this attitude is a kind of wonder that is directed towards the most obvious or mediocre sense taken for granted. Parenthesis, exclusion, putting it out of action or in phenomenological terms, epoché, is to set the key words or concepts into brackets or parentheses and not to affirm the existence of the referents. It is not to doubt the existence of them; rather, it is only not to affirm them. The aim is to leave them aside or put them by and not to accept the unexamined arbitrary natural beliefs that are accepted habitually or taken for granted, including the prejudices of daily life, familiarity with existence, and various views and interpretations of the world. Hence, the sense of epoché is also refraining from judgments.

Upon the idea of epoché, the phenomenon of “sexual dysfunctions” is bracketed in this sense for sake of veering round from the etiology or the concepts of “cause and effect” in pathological terms to the human experience (i.e., in particular, turning our views to the insiders’ experience of the spouses). On the other hand, the judgement or the standard of *DSM V*, which implies the criteria of normality, is putting out of action, too. Meanwhile, the manifold of experience of the spouses is shown through the description of their intentionality that turns to be multifaceted phenomena.

Intentionality

This study seeks the human experience that is necessarily governed by consciousness and its directed objects. For phenomenology, consciousness is an intentional act that is always directed to objects, and the relationship between them, namely intentional correlation, is intentionality (Husserl, 1970). The intentional act can involve many objects simultaneously,

and at this moment, its true object is the unity of the interrelationship amongst various constituent objects, instead of many discrete objects and their concatenation. In accord with phenomenology, every object is an intentional object or an object being intended, and every intentional act has its quality, whereas its intentional object is the regarding matter. For the prolific nature that characterizes the intentional act, intentionality also implies the multiplicity of data and manifold sense of every object in concern, and the goal of research is to study such multiplicity with organization. Then, this study aims to explore manifold sense of “sexual dysfunctions” upon the spousal experiences, wherein the investigation is to expand the meaning or the significance of sexual dysfunctions stretching beyond clinical diagnosis or pathological definitions.

Temporality

In phenomenology, “past and future” have their references not in the existing world but in the “potentialities of consciousness” which are actually nothing but the manifold possibilities of our life situations. “Time” is a more intricate analysis pertaining to intentionality in phenomenology (Heidegger, 1927/1996; Husserl, 1964). With reference to the intentional act, the temporal object showing at “present” is a primordial impression; the temporal object showing the “past” is the object of retention; and the temporal object showing the “future” is the object of protention. Instead of being discrete temporal units in linear conception of time, this stream of living presence presumes as part of its structure a domain of immediately conscious past and a domain of immediately conscious future. These retentive and protentive outreaches might guide our intentional act even further into the settled past and distant future that forms a temporal horizon. The temporal horizon in this sense is described not only as process horizon or as consciousness horizon, but also as a life horizon or stream of life. In this conception of temporal horizon as the horizon of our life processes, the phenomenology explains how various instances of our living experiences can comply with one another to constitute a comprehensive life-context. In addition, every impression embedded with reminiscent mode and protention for future draws research interest. Such insight offers guidelines to remind the researcher that the impression of the participants’ experience is to be related to their temporal past (e.g., retention or memory) and temporal future (e.g., protention or hope), constituting the context of understanding. The emphasis of the temporal horizon of the participants’ experience also underlined the data analysis of this study. Temporality is the major idea that I would like to draw attention for interpretation of the significance pertaining to sexual dysfunctions in this article, and it would be elaborated further with the participants’ experiences told in the part of findings.

Reflecting Personal Pre-Understanding

Interpretation of experience presumes that research is value-laden, and the researchers inevitably bear their biases, prejudices and assumptions to the study and they colour the findings (Heineman, 1981; Lincoln & Guba, 1985; Taylor, 1987). Husserl (1973) and Heidegger (1927/1996) also emphasized prejudices, presuppositions, assumptions and pre-understanding in the process of understanding that did matter to be aware. I should make critical self-reflection and expose my personal orientation that brought me to this research topic in this way. The influences for my stance, certain personal experiences and the interests come before this study.

As a “Marital Social Worker.” As a social worker served in the family service setting of Hong Kong, I used to have my major duty in marital work usually for distressed couples with various marital problems. After receiving sex therapy training, my clinical experience of

working with sex problems in marriage increased alongside with the marital work. However, it should be admitted that the clientele of my work was often distressed couples flooding of complaints about their undesirable relationship that nearly shape my understanding of the linkage between undesirable marriage and the sex problems in relationship, and this preoccupation was examined.

Training of Sex Therapy. Following Susan Lee, a student of Helen Kaplan, who adopted a rather pathological view to the sex problems and behavioral approach for treatment, I had been pre-occupied with standardized assessment of the sex problems (refer to *DSM IV*) and treatment was designed accordingly. Moreover, medical views of the sex problems are predominant in the field of sex therapy in Hong Kong as observed that can be compared with the situation of U.S. (Tiefer, 2000). With deliberation of clinical concern, I always ask myself as a social worker for sex therapy, what should I treat and who have the rights to speak for the treatment goals?

Multidisciplinary Training for my Own Perspective. According to my academic background of philosophy and psychology in addition to social work, searching for meanings of phenomenon through evidences is always my perspective in studying human experience. The issues of universal (“logo”) versus particular (“doxa”) often presume my frame of understanding and investigation that has been brought to this study for discussion.

Methodology of the Present Study

Participants

Concerning the orientation of clinical social work intervention for sexual dysfunctions and the role of marital relationship in the experience of the spouses who had been assessed with sexual dysfunctions in Hong Kong, research for a detailed examination of marital experience at the dyadic level was conducted with attention to the couples’ perspectives. In this qualitative research, eight spouses assessed with sexual dysfunctions and their partners in heterosexual marriage were recruited to provide personal accounts of their marital experience and perceived significance of sexual dysfunction in marriage. The part of findings in this article would show their interpretation in the dimension of temporality. With regard to confidentiality, pseudonyms in the real cases were adopted for the following spousal interpretations.

Regarding the background of the participants, all of them were Hong Kong residents. At the time of this study, their age ranged from 28 to 63. The years of their marriage were within the range of 1 year and 13 years. Five of the participants had received secondary education and the others attained post-secondary educational level or above. Six of them had at most two children, and the others did not have any children. The occupation of the participations varied as they were working in the field of information technology, accountancy, business and finance, police, mechanic technician, clerical staff, teachers or private tutors. One participant retired and two of them were housewives. Seven participants were Christians and the others did not show any specific religious belief.

Procedure

The study was characterized by in-depth interviews without preset responses, closer encounters with the participants, examinations of the findings without predetermined codes or categories, seeking informant feedback upon the interpretation of the data, and critical discussion between the researcher and peer on the interpretation of the data.

Individual interviews and joint interviews were conducted by the researcher with each couple at the initial stage, but there were four couples (among eight couples) who accepted

with joint interviews only, whereas the other four couples were willing to participate in both individual and joint interviews. The choices and preferences for the arrangement of the participants' interviews were respected at all times during the interview process, although only if the depth of each interview and the research ethics were maintained.

Critical Role of Qualitative Researcher

This qualitative inquiry of interpretive research paradigm had focused on people's self-interpretation within the webs of meaning brought about by the cultural processes of intersubjectivity. The key metaphor was the interpretation of text. It involved the kind of reflexivity of the researcher with phenomenological attitude in practicing qualitative study for understanding, followed a part-to-whole logic of interpretation and argumentation. Moreover, it included deconstruction and critical examination of the underlying assumptions in any form of cultural text, considered human beings governed by particular histories as understood within particular cultural assumptions that could be critically evaluated (Gadamer, 1987, 1997). This approach encouraged the researcher to make empirical inquiry into cultural pragmatics. Not only were the self-interpretations important, but also the texts of living or historical enactment of texts of identity by the spouses assessed with sexual dysfunctions and this group in the Chinese culture could be subjected to interpretive analysis. The textual analysis could be extended from the texts of narratives to enacted texts of human action in social context. In understanding of another person's story or action, no one had the final authority, and social interpretation and critique implied an irreducible plurality that was consistent with the perspective of interpretive social sciences viewing culture as multi-vocal (Rabinow & Sullivan, 1987).

Researches employing qualitative methods are collecting data through human interaction and this process inherently involves sensitive issues associated with any type of human interaction, such as embarrassment, anger, violation of privacy, misunderstandings, and conflicts in opinions and values (May, 1991). Due to the nature of the "give and take" relationship between the researcher and the participants in this study, the researcher was able to steer consciously the ethical issues that arisen by following the participants' preferred style in dealing with ethical dilemmas (Rosenblatt, 1995). Approval from Survey and Behavioural Research Ethics Committee within the Chinese University of Hong Kong was gained prior to data collection of the research.

In this qualitative inquiry, the researcher was the tool, and one major issue facing individuals and couples conducting in-depth interviews was distinguishing between roles. Where were the boundaries between providing the necessary emotional support for sake of in-depth qualitative inquiry and starting to deliver therapeutic intervention? Rosenblatt (1995) noted that boundaries might be blurred when individuals become emotionally distraught during the interviewing processes and the researcher tries to intervene. It had been adopted for this study that the ethical and responsible approach to deal with the individuals and couples in need of therapeutic support was to make referral with the consent of the participants. Although participants commonly experience therapeutic effects during in-depth interview (Daly, 1992; May, 1991; Rosenblatt, 1995), for instance, some participants expressed their insight gained during the interview process, it was conducted for research purposes without establishment of mutually agreed case goals with the clients and the intervention plan in respect that could be provided by comprehensive therapy or clinical social work intervention. Yet intrinsic to in-depth interview was utilization of basic counseling skills, such as listening, being non-judgemental, bracketing personal reactions, supporting, knowing when to back off, and realizing when something had been misunderstood (Rosenblatt, 1995). Empathy was equipped with the researcher of this study as a social work researcher for joining the participants so as to

facilitate the interviewing process. However, it had been underscored that interaction processes with therapeutic effects, such as in-depth interviewing, did not equate to therapeutic intervention for sake of clients' well-being. In fact, the nature of the research interviews in this respect had been explained to all the participants prior to the conversations; however, some participants (e.g., Charles, Andy, and Ching) had asked for advice or intervention during the interviews. The difference between the roles of researcher and therapist was explained gently with them and they showed understanding.

Plan of Data Analysis: The Cycle of Interpretation

The records of the conversations were transcribed and checked against the records in order to ensure their accuracy. Through the process of transcribing the conversations, the experiences described were transposed to written text. The transcripts were then examined and divided into statements with a process of "horizontalization" that all aspects of the data were treated with equal value (Creswell, 1998). Then, these statements were organized into clusters of meaning, or essential themes using a cut-and-paste method. Through a process of writing, reflecting and rewriting, themes were explored and refined. Great care was taken with the writing to make it clear and evocative. Direct quotes from the participants were cited to illuminate meanings and to elucidate the themes with participants' descriptions of their marital life experiences adding significance to the part, from the part to the whole and back to the part that deepened the understanding of particular instant. The procedures involving in general qualitative data analysis had been utilized (Miles & Huberman, 1984; Patton, 1990; Taylor & Bodgan, 1998). Key steps for coding and meaning making of a bottom-up approach were as follows:

Within Case Analysis

1. Identify meaningful units for coding
2. First level coding or basic categories of responses (e.g., space, time, self/body, human relationship, feeling, behaviour, coping, belief or expectation)
3. Tabulation and examination of first level codes: elimination of repetitive response in attribute analyses; profiles of the codes
4. High level coding (combine related codes to form higher-order codes): temporal perception of sexual dysfunction; perception of sexual dysfunction in relational context; spousal relationship and relationship with others; self-perception
5. Search for broad themes and patterns; perceived relationships amongst different themes of the experiences; hidden phenomena; relationships between themes; emerging themes
6. Overall picture and conclusion in this case

Cross-Case Analysis

1. Overall picture and conclusions for all cases: broad narratives and concepts
2. Watch out for exceptions
3. Looking for exemplar illustrations and decide what to put in the report
4. Peer check for the interpretation of the data
5. Feedback and comments from informants
6. Check for ideological biases and preoccupations

For sake of credibility and trustworthiness of the study, a peer with the training of sex therapy had been invited to discuss the statements, the related themes and interpretations. She was also an experienced social worker who had practiced sex therapy in a family service centre for more than eight years. When there were discrepancies between the peer and the researcher, critical discussion, reflection and negotiation were carried out until a consensus was achieved.

Follow-up sessions were conducted to the participants after the first draft of the study results was available in order to collect feedback and comments from them about the results of the study that had been revised and refined accordingly. When the researcher shared the findings with them, they all agreed with the themes arisen from their interpretations, wherein most of them expressed their insight of increased self-awareness towards the experience of sexual dysfunction in marriage. It was told that they were “not alone” and “learned more” about the experience of sexual dysfunction in marriage through the sharing.

Wholes and Parts

The meaning of wholes and parts is best described by Gestalt theory that is usually referred by the philosophers of phenomenology, Merleau-Ponty (1996) and Gadamer (1997). It does not only reject the view suggesting wholes consist of elements to which specific unifying factors supervene but it dismisses the conception of parts as elements primarily (Brett & Wertheime, 2005; Gurwitsch, 1964; James, 1950). The redefinition of the concept of part in terms of functional significance immediately involves a redefinition of the concept of whole.

If the meaning of a part is defined by its functional significance and hence, it is dependent upon and determined by its co-constituents, it is the contexture of the co-constituents that qualifies the part in concern. As the research interest of this study, the symptoms or pieces of experience in sexual dysfunctions of the participants were interpreted through the stories of the couples, from parts to wholes, wherein various themes had been shown that bestowed the multifold senses for these pieces of experience in sexual dysfunctions, from wholes to parts. The whole showed inherent and immanent in the parts wherein each part realized the whole at the place at which the part existed amidst its co-constituents. Parts were defined as constituents in context or “whole-parts”, while the whole was considered as the equilibrated and balanced co-existence of its functional parts in their thoroughgoing interdependence, i.e. the symptoms or pieces of experience in sexual dysfunctions of the spouses were showed through their complex life world that framed the significance of sexual dysfunctions in marriage. Based on the functionalistic conception and interdependence of wholes and parts, the question about priority of wholes or parts does not matter.

Findings

As results of the study, the stories of the couples showed through their marital life, experience of sexual dysfunctions and perceived significance of sexual dysfunction in marriage. Having examined across the eight cases, seven major themes arose from their interpretations: (a) there were diversified marital relationship and satisfaction for the spouses who had the experience of sexual dysfunctions in marriage; (b) the unique meaning and importance of sexual dysfunction in marriage was described upon the inter-subjective views of the couples through interactive perceptions; (c) the spouses did not adopt a physiological view towards the symptoms of the sexual dysfunctions or rather they interpreted their experience of sexual difficulties in light of socio-economic context (e.g., work stress, long work hour, burden of household finance, mortgage), relational context (e.g., relationship of marriage, interaction with spouse and relationship with friends) and temporal context (e.g., birth plan, past dreary experience and the related association), more than biological given; (d) they interpreted the

experience of sexual dysfunction embedded with structural time or in a horizon of temporality stretching through past, present and future, from the sphere of coitus to the sphere beyond coitus that juxtaposed with the linear time concept; (e) the spouses usually interpreted the significance of sexual dysfunction in view of their plan of reproduction; (f) stress arisen from busy life and occupied living condition in household and socio-economic context was a prominent feature of their marital life; (g) the spouses sought alternatives for sexual and relational satisfaction apart from coitus, e.g. masturbation, caress, hug, kiss or sweet words. The following part of this article is going to focus on the theme (d) pertinent to temporality of the sexual dysfunctions that is deemed to be the most striking and original chunk of this research.

Experience of Sexual Dysfunction as Interpreted: More than “Biological Given”

The Body in Everyday World

The physiological model of sexuality presents a mechanistic view of the body, in which “sexual response” is divided into a series of consecutive stages as part of a presumably universal “human sexual response cycle” supposed by Master and Johnson (1966), and later developed by their successor, Kaplan (1974). It is further consolidated in the *Diagnostic and Statistical Manual of Mental Disorders: DSM-V* with the phrases of desire, arousal, orgasm and resolution (American Psychiatric Association, 2013). This cycle is considered a “biological given” assumed to function within individuals despite cultural or historical significance. The physiological view of “human sexual response cycle” is the claim that what happens to be the psychological, interpersonal and family systemic of the sexual dysfunctions can ultimately be reduced to a biological or “disease” in the life-world.

However, according to the phenomenological examination of the couples interviewed in this study, participants revealed far more than the description of the “human sexual response cycle” with reference to their experience or significance of the sexual dysfunctions, which was interpreted as relevant to their marital life, not necessary to be reduced to biological given.

In general, feelings tune us into the life-world and give us a sense of where we stand (Taylor, 1987). Actually, feelings allow the interface with many other human essentials, such as thoughts or ideas, behaviors or physiology, which present multifaceted phenomenon for the human experience in the life-world. Some rather subtle feelings, thoughts or ideas, beliefs, behaviors or physiology present us with an all-pervasive sense of the existential predicament (e.g., experience of sexual dysfunction) in the world. They also pave the way for temporal understanding of the experiences as they are temporal per se upon the principles of phenomenology.

In *Being and Time*, a classic of phenomenology, the notion of moods is introduced in the context of discussing certain “essential structures” of humans (Heidegger, 1996). The notion of moods refers to our way of being “tuned in” to the current situation, “attunement,” that goes beyond the English word “mood.” Instead, it concerns how you are situated or disposed in your everyday involvements in the life-world. Heidegger notes that what make it possible for us to exist in a familiar everyday world is “always already” intelligible to us. In the other words, it is about the pre-reflective, pre-cognitive orientation making your day. As it is correlated with the past and future, it will be interpreted in the context of temporal dimension later.

Besides, Heidegger suggests that the “attunement” is usually shaped by our public involvement with others; “the ‘they’ prescribes moods” (Heidegger, 1996, p. 213). In the other words, the affective orientation discloses a shared world and aligns our responses so that we can be agents in everyday life situations. After all, our feelings, thoughts or ideas and beliefs,

behaviors or physiology are disclosive in the sense that we let things count for us in particular ways making meaning or significance. It is simply presupposed the phenomenon of “bodily attunement” inhabits the everyday life-world, wherein the relationship with others intertwined with various feelings, thoughts or ideas and beliefs, behaviors or physiology in a context of meanings. In the words of Judy (a participant of this study), “*My body responds consistently. If I have low mood, my body would be tight.*”

Spousal Interpretations of Bodily Attunements

There was a kind of *beliefs* underpinned within Charles’s life motto in terms of marital experience, “*If I can ‘settle it.’ why would I bother others! I have to be independent.*” This kind of belief functioned across the context of his work, sustaining family finance and even marital sex, in which he even generated a *feeling of failure* when he could not become *erect* and *ejaculate* in having intercourse with Hannah, his wife. Ironically, these companioned *ideas* did not help in *coping* with sexual dysfunction, and made Charles in mire of the interaction with Hannah during the process of sexual intercourse.

Candy described her *coital pain* pertaining to *fear*, “I’m afraid of pain, and be afraid of ‘don’t know what will happen next!’” The fear of coital pain was also constellated with the *anticipation of uncertainty* or the unknown future in the process of intercourse that interpreted a looming belief probably. Judy expressed,

Because it “hurt,” but I didn’t anticipate that this feeling of scare would affect my vagina, as if it was completely closed! I didn’t expect that my body would be that “consistent” to my feeling. “My scare would make my vagina so tight,” then “I started to comfort myself” but I couldn’t. It maybe because I also felt uncomfortable. There was no foreplay at all, immediately came to the “try.”

Her *fear* dominated her *bodily sphere* during *sexual intercourse* in *adjustment* with the husband; no foreplay increased her sense of pain. She complained her husband in the *relationship*.

During their interviews, Vera and Joey also had their similar description of “*fear*” regarding the feelings of having sexual intercourse with their husbands, which was painful to them. Vera said, “*I am afraid of pain! Simply saying...The pain was like ‘pushing’. It’s not comfortable, so I resisted it. That’s simple.*” Vera and her husband, Sam, also described their *relational interaction* during the process, “*Maybe he ‘dare not to’ as he is afraid of hurting me.*”; Sam told, “*I didn’t know how to do. She was hurt and cried.*”

Joey revealed, “*I think I am afraid of the ‘pain’. I thought it’s very painful... Actually, I found that when it got to some point, it’s stuck, as always.*” She added, “*I was scared! ‘What would happen with something put in,’ I felt like something is stuck there.*”

Andy preferred sex in solitude, sexual fantasy and masturbation, wherein his sexual objects were directed against animated cartoon figures that left him in the life-world over which he could assert control. He claimed, “*I am OK with masturbation. It is troublesome to have sex with female.*” He felt disturbed (of his self-containment) regarding sexual intercourse with his spouse.

Apparently, Ching’s sexual desire in marriage was interpreted as being full of *frustrations* and *grievances* against her husband, Keung. Sexual desire as natural *faded* in her point of view.

In addition, CT associated “*psychological hindrance*” with his failure in vaginal intercourse with Birdie, his wife, given his *erectile difficulty*. His *feelings of failure* and *self-*

doubt had been lingering since his ex-wife divorced him in the first marriage, consequently affecting his *erection* performance.

According to the spousal interpretations, their sexual difficulties were associated or intertwined with various feelings, thoughts or ideas and beliefs, behaviors or physiology, which showed their bodily attunement in the life-world, on the other hand, the sexual difficulties were presented through bodily attunement under the temporal horizon, (i.e., the sexual difficulties showed temporal bodily attunement for significance and meaning). It can be further explained that the temporal horizon as structural time shown in the spousal interpretations.

Linear Time vs. Structural Time: From the Sphere of Coitus to the Sphere Beyond Coitus

Structural Interpretations in Temporality

With reference to the principle of temporality pertaining to phenomenology, the interpretation of the couples assessed with sexual dysfunctions in the study go beyond the experience of the human sexual response cycle as surmounted through interpretation or phenomenological investigation of their specific “bodily attunement,” such as feelings, beliefs, copings, physiology, anchored during sexual difficulty and imprinted through retentive or protentive mode of intentions, and as understood in light of temporal horizon, stretching their significance of the sexual experience into the sphere beyond coitus. Indeed, this structural concept of time underpinned the interpretation of the couples in the study, playing a privileged role in giving us access to “beings as a whole.”

Upon the dialogue with continual clarification with Charles, he reflected that an imprinted belief passing through his work aspect and personal life sculpted him into an independent and competent person: “*I should not bother the others*”; “*be self-reliant*.” The “relic” of this belief was excavated through back to the age of his primary school when the other boys were bullying Charles and he tried to isolate himself from friendship. As reflected by Charles during the interviews, he associated Hannah’s negative words during their sexual intercourse with those of the boys in childhood that still lingered, affecting his “performance” in marital sexual intercourse negatively when he needed to coordinate and to blend with his partner, Hannah, instead of isolating himself. In his view, he had no difficulty in masturbation which would not “bother the others,” but, when he need to coordinate with Hannah in sex, encountering teasing words, he “retreated” in both senses of body (penile erection) and mind with respect to relational context, wherein he interacted with Hannah and also his teasers in temporal context. Ironically, the beliefs upon which Charles leaned for counteracting against the teasing in his past and for striving for self-independence and competence at work and so forth cannot function as a universal maxim for him; at least, it is not “workable” for having sexual intercourse with his wife as it involves a partnership with another. He also challenged himself as a “competent man” unless he could adopt another standard for his sphere of marital sex, allowing flexible play of values in various life-worlds for him, e.g., self-competency for the work-world, and partnership for marital sex-world; otherwise, the sense of challenge to “potency” in marital sexual intercourse would acquire a deeper sense of uncertainty along the path of his personal growth then.

According to Candy’s description, her coital experience was associated with “fear” of the “pain”: “*I feel like sitting on pins. It’s uncomfortable. I feel uneasy*.” Upon the open dialogue with her, such kind of “fear” was not only limited to the sex context in marriage, it was across the areas of which “she was not familiar with it” and “she was not willing to do it” (e.g., the strange tasks at her work). She expressed the fear of innocence, “*fear of not knowing what would happen and how things would happen*,” that could even be traced back to the

experience of certain stressful events, such as examinations, tests, presentations, choir performance or even running in races since her primary school age. These pieces of her past experience lingered across different contexts of Candy's life, blurring the future. Along her stream of consciousness regarding all these "fears," she was invited to compare her sexual coitus with her previous experiences of being examined in which she gained the insight that these were all task-oriented or goal-oriented experiences; hence, she cried out, "*I still could not treat sexual intercourse as a kind of enjoyment...I made it a task (a matter of success or not)!*" Sexual intercourse had been "working" for Candy's birth plan, highlighted in the context of work with emphasis on her future protention.

As expressed through his sexual fantasy, Andy liked to hide himself in the life-world with animated cartoon figures wherein he restored control that was interpreted as pertaining to his relationship difficulties arising from "compulsive disorder" and child abuse by his father; meanwhile, he also favored this means of self-entertainment instead of sex involving a "real" partner. Couple sex was interpreted as loss of self-control with unknown anticipation or protention wherein he withdrew as "snowman" or "wooden man," cutting off the affective linkage with others since his emotional complex in the past.

Andy's wife, Ming, also shared the significance of non-consummation and her hurt, in light of a temporal horizon with regards to her intimate relationships and religion. Her heartbroken feeling of non-consummation in her marriage was anchored and traced back to her past, wherein her ex-boyfriend dumped her previously. At the time, she had premarital sex to her deep regret. She did not release herself until she was invited to church and consoled by religion but the feeling remained. Ming was waiting for a "legitimate sex," as blessed by church, where she was released initially, but it failed in the present marriage. The significance of Andy's "sexual dysfunction" in marriage sensitized Ming's heartbroken feelings pertaining to her feeling of regret in her past relationship, wherein the "blessed" legitimate sex had not restored. Ming's emotions interacted with Andy's reluctance, resulting in a sense of negative emotions for the failure (of consummation) embedded with incessant uncertainty in the marital future.

Although the case of Vera was quite simple comparatively, she explored her fear of coital pain as being related to uncertainty; such pain could be managed once expectations were under control. The anticipated gradual progress was also understood in a temporal context. She said, "*I can foresee...Everything is under my control! And it is different when it's by myself. So it's OK using dilator.*"; "*I was afraid! I didn't know what she (the doctor) would do... I was ok after knowing it!*"

The experience of "hypoactive sexual desire" in the marriage of Keung and Ching could be simply interpreted as a long-standing marital conflict, new hatred piled on old grievances, intertwined with various issues, such as in-laws, Keung's affairs, parental burden, undesirable partnership in the marriage, together with their hopelessness of the future marital relationship. As time went by, sexual desire had subsided without notice. Ching sighed,

I did not think of it (sex) anymore. I knew maintaining our marriage was important. I did hope our relationship could be improved. It would be beneficial to us as well as the children. We did try hard, but seems not effective.... We tried to unload ourselves adjusting the hope a little bit, just tried to let go some minor issues. As the matter of fact, my husband was very stubborn... I did not want to be unhappy thus I tried my best to avoid him and just focused on children.

Keung also expressed, "*I did not think sex life was important to me after so many years as I did not need it for so many years. It sounds poor, but the truth was there would not be any surprise or difference.*" Both also anticipated a desperate future.

In the case of Kurt and Joey, Joey had great fear of the painful experiences of sexual intercourse, which was associated with the process of reproduction or dilation of vagina, i.e., the experience of sexual intercourse or vaginal intercourse was understood in projection of dilating the vagina during the process of reproduction that induced great pain to her:

Then I was told it got to open to 10 degrees when giving birth and 10 degrees mean size of 10 fingers! I cannot imagine! Really cannot imagine... Well, I think I am afraid of giving birth when I think of something.

Her temporal projective experience could be seen in that she equated sexual intercourse with dilating process of reproduction. “It’s actually ‘the same thing!’” she said. Although Joey was not sure when was the “limited belief” imprinted in her past experience, she could still recall an event or sharing with her close friend who told the process of giving birth, while Joey was scared at that time, she could remember.

During the open dialogue with Judy pertaining to her experience of vaginismus as an episodic anxious behavior in a temporal context, she clutched an emotion of fear associated with the episodic situations of vaginismus; meanwhile she would also experience stomachache. She revealed that it would probably occur at the other non-coital scary moments, (e.g., giving a performance in church or in examinations). Overall, she found it most insightful to connect the experience of vaginismus with a past event when she was left at about the age of 11: (She clenched her hands inadvertently), “I recalled that I sit there and wait, and feeling fearful when waiting!” The episode mattered to her as she explored that she did not know “where to go next” (with protention of the future), being abandoned, and yearning for companion at the time to give her a helping hand that seemed to share the similar situation; likewise, in sexual intercourse, she also expected the sense of “togetherness” through sharing with her husband, Gary. Judy continued,

Maybe they are correlated! In both situations, I experienced strangeness! And I didn’t know what to do... (went on pondering) Yes! I didn’t know what to do after the penis got in! I did have this kind of feeling...He grumbled me that it was me not let him get in, and then he was not satisfied in the process, furthermore he hid and ignored me, and my anxiety continued or worsened. Without a harmonious relationship, the problem of vaginismus would continue to exist... I need the feeling of love, I didn’t have this feeling at all times, then it was hard for me to relax.

CT attributed his “sexual dysfunction” to a sense of “psychological hindrance” from the end of his first marriage carried forward to the present:

I knew Birdie then. Since my divorce, I barely had sex, not even masturbation. There was a strong psychological hindrance. Then we got married and we failed having sex. The failure leads to a lack of confidence in myself...Is that my problem? I got a thought that is me who cannot make it. I asked myself many times. When I got that thought, after many times trying and failed, my confidence dropped. When it was lack of confidence, I could not do it for sure.

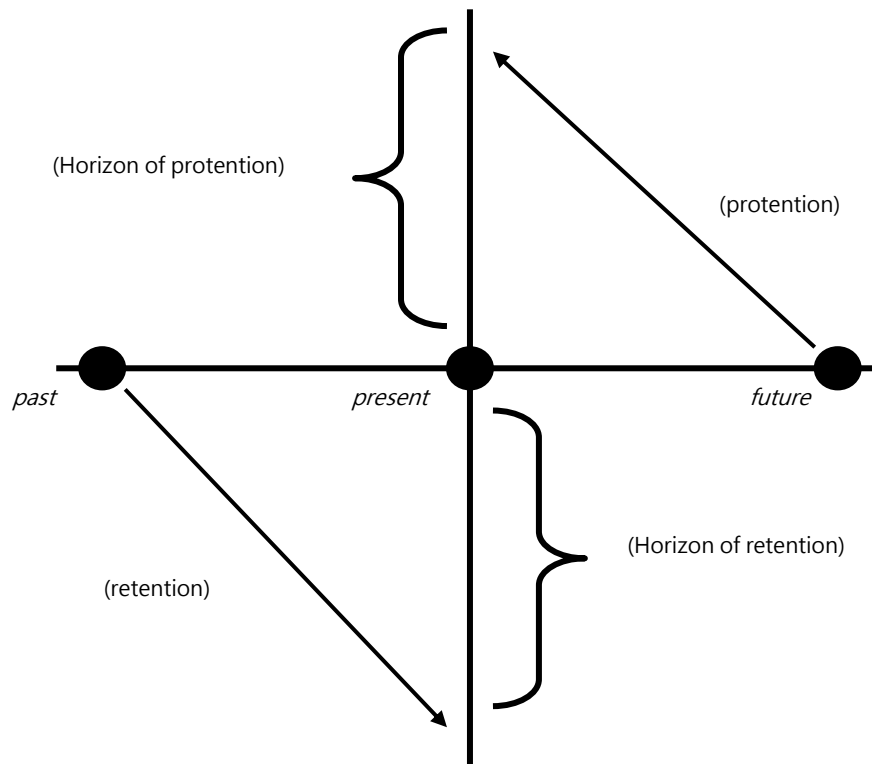
CT had a strong psychological hindrance for his erectile difficulty and the reason of “failure” in first marriage. CT had not settled his “psychological hindrance” of his first marriage yet as there was a lot of “question marks” to him,

Why could she treat me like that? Proposed a divorce on my birthday? Why would it be right after I told her I lost my job by email? It was less than 2 weeks when I got the letter from lawyer. And that was New Year's Eve which I got to wait for 4 days until I could get the letter and got known of what it was about. How could I live those 4 days?

CT could not figure it out, and the “psychological hindrance” was described in line with that of the failure in vaginal intercourse with Birdie; meanwhile, he pursued a new relationship, with an emphasis on mutuality and partnership, and new forms of sex, seeking alternatives for the present marriage.

As interpreted by the couples interviewed in this study, the impression of the participants' experience was related to their temporal past (e.g., retention or memory) and temporal future (e.g., protention or hope), constituting the context of understanding (see Figure 1).

Figure 1.



Linear Time vs. Structural Time

The human sexual response cycle, incorporated the consecutive phrases of desire, arousal, orgasm and resolution, presumed a linear concept of time. The linear concept of time characterizes time as a sequence of “*nows*” primarily, where it should be inscribed that the *nows* are not parts from which time is pieced together into a whole (Sandbothe, 2001). The common understanding of time realizes only the time that reveals itself in counting as a succession of *nows*. In accord with this understanding of time, there turns up the concept of time as a sequence of *nows*, which has been particularly defined as a unidirectional irreversible sequence of *nows* one after the other. The interpretation of this compartment of time thus experiences advance towards what makes this time itself possible. The human sexual response

cycle as a human experience can be construed as staging within a particular period of time in life with discrete beginnings and ends, constituting a particular sexual sphere of experience.

According to a phenomenological examination of temporality, time is constantly there in such a way that in all our planning, precaution, our compartments and all the measures we take, such an expecting stance, expresses itself by means of the present protention; meanwhile, we are able to express with understanding when we retain something bygone, i.e., we explicitly recollect it as we somehow retain it as something bygone or the self-expression of the retention of something past. Time, as such, expresses itself with the determinations as expecting, retaining, and enpresenting; thus, what is brought out here is time in a more original sense, a structural concept of time (Heidegger, 1988). The experience presented or interpreted in the unity of expecting, retaining, and enpresenting can be validly asserted to be original time. It turns to provide the horizon for the understanding of experience in general. These retentive and protentive outreaches guide our intentional act even further into the settled past and distant future that forms a temporal horizon. In this conception of a temporal horizon as the horizon of our life processes, phenomenology explains how various instances of life experiences comply with one another to constitute a comprehensive life-context. In addition, every impression embedded with reminiscent mode and protention for future that draws research interest. Experience or human consciousness inevitably lives in the temporal mode; therefore, temporality or structural time in the experience also realizes ideation of self in the situation, i.e., sexual dysfunction in marriage. In the other words, in-depth examination of temporal events helps to realize the self-perception according to unity of consciousness in time although seldom did the participants articulate their “self” in words during the interviews. Life is the manifestation of time (structural time).

Discussion

For the present study with reference to sexual dysfunctions in marriage, the concepts of “normal sexual function,” “cause and effect” or an etiological assumption were left aside or put by refraining from judgments (epoché) specifically, according to the principle of descriptive phenomenology as adopted in this qualitative inquiry, and the meanings of the spousal interpretations were shown with intentional multi-faceted phenomena, antecedents and consequences through structural concept of time in light of temporal-spatial horizon for understanding.

In the light of descriptive phenomenology and philosophical hermeneutics, the marital experience of persons assessed with sexual dysfunction is embedded with the temporal structure as epistemological necessity explicated in the present study, in which past (i.e., retention, personal background or memory), present (i.e., impression) and future (i.e., protention, anticipation, purpose, or hope) intertwined for an interpretation of experience. Perceptions of experience at a particular time period are related to a person’s historical background and future projection, and his/her relationships make sense of the experience. With reference to the five temporal dimensions proposed for a pre-understanding of marital experience of the spouses assessed with sexual dysfunctions prior to this study (i.e., being without sexual disturbances, onset and suffering from sexual disturbances, being assessed with sexual dysfunctions, happening afterwards and future projection), the demarcation of the stages was not discrete and blurred as shown in the present study according to the interpretations of the spouses. Most often, they were moving forward and backward along their own frame of temporal dimensions, presuming a structural concept of time in light of temporal horizon for understanding instead of linear concept of time. The interpretation of the couples assessed with sexual dysfunctions in the study had gone beyond the experience of the human sexual response cycle that was surmounted through interpretation or phenomenological investigation of their

“bodily attunement,” such as feelings, beliefs, copings, and physiology associated with sexual difficulty and imprinted through a retentive or protentive mode of temporal intentionality, and was understood in light of temporal horizon, stretching their significance of the sexual experience (or the meaning of sexual difficulty) into the sphere beyond sexual intercourse, (i.e., contextualizing the sexual difficulty in the horizon of temporality). Besides, “time” for the spouses is not a time order or sequences of the events; it has been shown in their interpretations as a rather primordial perception upon a structure, i.e., temporal structure.

The horizon of temporality provides a methodology and direction for research significance and in-depth phenomenological investigation of human experiences, which show multifaceted phenomena and manifold senses of meaning. From bodily attunement to transcendence of the particular sexual difficulties, the strategy proposed and demonstrated in the present study shows that temporality is not only a philosophical idea or phenomenological attitude, but also a research method in action for sake of the study of lived experience with thickened interpretation.

The findings of the present study, which related to the spousal interpretations of a specific kind of marital experience, pursued a bio-psycho-social model of understanding juxtaposed with the physiological model or human sexual response cycle that have been proposed since the work of Master and Johnson (1966), and *DSM V* (American Psychiatric Association, 2013), for sake of expansion of understanding towards the experience of the couples assessed with sexual dysfunction. The presentation of such a model is not sparse in nature with reference to bio-psycho-social perspectives coalesced; it is supported and presumed with the principles of descriptive phenomenology and philosophical hermeneutics in dimensions of time, space or situated contexts, self (body) and others (relation) that intertwine for interpretation of the marital experience structurally.

For future research, more participants or couples can be recruited for expansion of the present study in term of enhancing its strength and folds as well as the consideration of the saturation level, therefore, the idea of “temporality of sexual dysfunctions” in marriage can be further founded on enriched information. By the way, this idea would also be utilized in line with other sexual “abnormality”, e.g. sexual addiction, searching in favour of the significance of human experience in light of temporality.

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