'See Me as I see Myself:' A Phenomenological Analysis of Grade Bump Requests

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Abstract

At the end of every semester, some students will boldly email me asking for their grade to be bumped. These requests and their motives seem closely tied to academic entitlement, which has mostly been studied quantitatively. Creating a dialogue with this published literature, this research seeks to uncover the lived meanings of a grade perceived as unjust. Using a Heideggerian life-world approach, I analyzed an email archive to explore how students are projecting lived understandings of themselves that are at odds with their grades. In their plaintive plea to change their grades, the students are seeking affirmation of their self-understanding, demanding to be seen and valued as they see themselves. These results are discussed in light of the literature reviewed and directions for future research are proffered.

Keywords: grade bump, academic entitlement, qualitative, phenomenology

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'Véame Como me Veo a mí Mismo:' Un Análisis Fenomenológico de las Solicitudes de Aumento de Calificación

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Resumen

Al final de cada semestre, algunos estudiantes me enviarán un correo electrónico valientemente pidiendo que su calificación sea aumentada. Estas solicitudes y sus motivos parecen estar estrechamente vinculados con el derecho académico, que en su mayoría se ha estudiado cuantitativamente. Creando un diálogo con esta literatura publicada, esta investigación busca descubrir los significados de una calificación percibida como injusta. Utilizando un enfoque vida-mundo Heideggeriano, analicé un archivo de correo electrónico para explorar cómo los estudiantes proyectan entendimientos vividos de sí mismos que están en desacuerdo con sus calificaciones. En su suplicante demanda de cambiar sus calificaciones, los estudiantes buscan afirmación de su autocomprensión, exigiendo ser vistos y valorados como se ven a sí mismos. Estos resultados se discuten a la luz de la literatura revisada y se ofrecen instrucciones para futuras investigaciones.

Palabras clave: aumento de calificaciones, derecho académico, cualitativo, fenomenología.

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S ome students will audaciously ask their professor to raise their grade, providing multiple reasons why they feel entitled to a higher grade: a desire to keep their scholarship or pursue graduate school, just shy of an 'A', or just because they want it. On social media, grade bump requests have appeared in forums with teachers debating whether this is ever warranted, discussing their frustration and resentment of even being asked (Quora, n.d.) and providing practical considerations of when and under what circumstances a grade bump should be given (Reddit, 2007). Some professors even publish their reply detailing why the request is denied and why the student should never ask (Engel, 2013; Patton, 2015). Yet, sparse published scientific literature exists on the specific request of grade bumps; one article expands on the practical advice and ethical considerations of granting this request by framing the decision within ethical ideologies (Dukewich & Wood, 2016). While grade bumps are part of the larger debate on grade inflation (Caruth & Caruth, 2013), I am interested in the specific instance when a student asks for this bump and not the reasons why grades are inflated or whether higher grades have been granted.

I sought to explore how these requests reveal certain understandings of what the grades mean to students and how these are revelatory of the students' projects (see Heidegger, 1927/1962) of themselves. These requests and their motives seem closely tied to academic entitlement (AE), which measures both a sense of expecting a high grade and diminished personal responsibility. This study seeks to dialogue with the AE literature by phenomenologically analyzing emails from students requesting a higher grade. I aim to shed light on the students' purpose and intentions of asking for a grade bump and how these requests reveal the lived meaning of a grade perceived as unjust.

Literature Review

AE is defined as a stable trait that describes a student's "sense of deserving more than others" coupled "with (often) little consideration of one's qualities or performance" (Singleton-Jackson, Jackson, & Reinhardt, 2011, p. 232). When validating an AE scale, Chowning and Campbell (2009) identified two subscales: entitled expectations and externalized responsibility. The former describes "specific, relatively inflexible, entitled

expectations about professor behaviors and grades" (p. 985). The latter describes the degree to which students believe the teacher is responsible for the students' learning and holding others responsible for one's performance in class. The relationship between these two constructs is mixed with one study finding a moderate correlation (Turnipseed & Cohen, 2015) but two finding no significant correlation (Bonaccio, Reeve, & Lyerly, 2016; Chowning & Campbell, 2009). These two components of AE appear to be two different, but interrelated, ways of attuning to one's grades.

In a validation study, Chowning and Campbell (2009) used student-generated open-ended responses to situations that might evoke AE to predict students' reactions to both appropriate and inappropriate actions. In one vignette, students described how they would respond to their final grade being just below the cutoff (e.g., 89 is one point away from 90). Instructors rated the appropriateness of the collected responses that ranged from accepting the grade earned and believing the instructor to be fair and honest (both deemed appropriate by instructors) to expecting the teacher to bump the grade up or believing perfect attendance entitles one to an A (both deemed inappropriate). Students with low AE rated the instructor-deemed inappropriate responses as less appropriate than the instructor-deemed appropriate responses. In contrast, high AE students rated the instructor-deemed appropriate and inappropriate responses similarly. Additionally, entitled expectations positively and significantly predicted the likelihood of engaging in instructor-deemed inappropriate behaviors. Hence, students with high AE do not make a distinction between what instructors would deem appropriate and inappropriate responses and are more likely to engage in the latter.

Regarding perceptions of teachers, students with high AE reported greater offense when teachers lectured the entire class period, failed to make the class interesting, called on an unprepared student, and asked questions that no student knew the answer to (Knepp, 2016). AE also positively predicted students' perceptions of instructor bias (Linvill & Grant, 2017). These differences in perceptions are also affecting teachers' well-being. Teacher-reported uncivil behaviors fully mediated the relationship between AE and teachers' strain and burnout (Jiang, Tripp, & Hong, 2017).

Another area of the literature explores how AE impacts academic performance and outcomes. Knepp (2016) found that higher externalized

responsibility, but not entitled expectations, significantly predicted lower student and schoolwork engagement. Perhaps not surprisingly, both AE subscales weakly, negatively, and significantly correlated with final course grades (Bonaccio et al., 2016). If students forsake personal responsibility for their academic work and perceive the grade as given (and entitled to), rather than earned, their engagement and final grades suffer. AE also significantly predicts college cheating (Stiles, Wong, & LaBeff, 2018) and less unethical views of cheating (Elias, 2017).

While Bonaccio et al. (2016) also found externalized responsibility significantly negatively predicted final grades, this was not the case after controlling for the Big 5 personality traits and general mental ability. Bonaccio et al. (2016) found agreeableness, openness, and conscientiousness were negatively correlated with entitled expectations, but externalized responsibility was not correlated with any of the Big 5 traits. Turnipseed and Cohen (2015) found positive and significant correlations between the dark triad personality traits (Machiavellianism, Psychopathy, and Narcissism) and both subscales of AE.

Low self-esteem was negatively, weakly, and significantly correlated with externalized responsibility but not entitled expectations (Chowning & Campbell, 2009). Sohr-Preston and Boswell (2015) found academic dishonesty positively predicted AE, while internal locus of control and positive family functioning negatively predicted AE. Self-concept, as a composite measure of both self-esteem and self-efficacy, was not a significant predictor. They also found an interaction effect whereby AE was highest in those with both low internal locus of control and low positive family functioning. Moreover, parent over-involvement (i.e., helicopter parents) positively predicted students' AE which in turn predicted counter-productive academic behaviors (Mahbod & Fouladchang, 2018). Additionally, student-rated parental warmth and parental psychological control were negative and positive predictors respectively of externalized responsibility (Turner & McCormick, 2018). Thus, students' AE is not an isolated individual trait, but part of a larger social pattern influenced by psychological well-being, parents, family functioning and perhaps even becoming a group norm (Hong, Huang, Lin, M.-P., & Lin, H.-Y., 2017).

The Current Study

Most of the literature explores quantitatively how AE is related to personal individual factors (e.g., personality, self-concept) and its consequences (e.g., grades, engagement). In a qualitative analysis, Singleton-Jackson, Jackson, and Reinhardt (2010) illuminated the myriad ways in which students act as 'consumers' bringing an entitled expectation with respect to their understandings of professors (e.g., students deserve to pass, teachers should raise grades; professors work for students) and of themselves as shoppers of education (e.g., credit and grades are paid for). Singleton-Jackson et al. (2011) noted two definitions of AE had been proposed at the time. The first, described above, entails a sense of preferential treatment and lack of personal responsibility, which is captured by Chowning and Campbell's (2009) widely used scale. The second definition includes three aspects: students' sense of deserving a reward that is not based on academic merit, diminished sense of personal responsibility, and expectations about teachers beyond those of providing educational opportunities and instruction (Jackson, Singleton-Jackson, & Frey, 2011). Since then, other definitions have emerged (see Luckett, Trocchia, Noel, & Marlin, 2017). Taking up Singleton-Jackson et al.'s call for future research to further explore and define this construct, this study takes a closer look at one specific instance of AE: the request to raise one's grades. By analyzing an archive of student emails asking for a grade change, I aim to illuminate the purpose of these requests by exploring students' understandings of themselves and others as well as their expectations about grades. How are students' expectations revelatory of the aims they have for themselves?

Method

Data Collection and Sample

The data comprise an archive of 16 emails I, as the professor, have received from students who have inquired about changing their grades. Emails were received between Fall 2013 to Spring 2019 from students attending one of three universities. Emails were included if students inquired about their grade and asked if it could be changed. The grades in question could be for any assignment, but most emails concerned the final course grade. The

supporting quotes were anonymized. This research was registered as exempt by the University's Institutional Review Board.

Approach

The analysis was informed by a phenomenological approach, which is characterized by a focus on describing the essences of everyday lived experiences (see Giorgi, 1985; von Eckartsberg, 1998). Phenomenology "tries to give a direct description of our experience as it is, without taking account of its psychological origin and the causal explanations which the scientist… may be able to provide" (Merleau-Ponty, 1945/2005, p. vii). The analysis is not focused on elucidating what precedes and gives rise to AE or what contributes to or causes a student to request a grade bump, but rather seeks to illuminate how such a request is revelatory of a stance before a world that is challenged. How must a student understand themselves, their role as a student, the meaning that grades have for them such that this grade bump request is made? What are the students' intentions when sending such a request?

The analysis specifically draws from Heidegger's (1927/1962) interconnected notions of *projecting* and *understanding*. For Heidegger, human beings are characterized as 'being ahead of themselves', aiming towards possible ways we can be. These telic futural projections are disclosive of certain understandings. Certain ways of looking (projecting) are related to ways of apprehending (understanding). For example, a student's understanding that an 'A' is desirable is revelatory of the projects they have for themselves; it is desirable given one's project to be a good student, to apply to graduate school, to make their parents proud, among others. If one gets a 'B', the understanding that one has fallen short is interconnected with the student's future possibilities they have envisioned for themselves. If the student has other projects, such as passing the class with a 'C' or getting one's degree, the 'B' is no longer understood as falling short, but understood as having surpassed one's goal. This study answers the following question: What are the invariant projects and understandings that comprise what is at stake for students requesting a higher grade?

The data were interrogated from an inductive frame of reference, seeking to take the ontic particulars (specific examples or instances) as manifest in the emails themselves and arrive at the essential structures that

comprise this phenomenon by using imaginative variation (Wertz, 1985). The emails provide the particular ways in which students understand the situation of receiving a lower-than-expected grade. These specific instances and those that can be imagined as other possible ways of understanding this situation will be transformed into the essential elements or structures that characterize the phenomenon. These transformations will be expressed in terms of van den Berg's four essential fundamentals or stances of meaning: body, world, other, and time (1972). The results detail the telic horizons out of which a student makes such a request, where the possible future projects that students have for themselves are shaping their understandings of themselves, others, and the world.

Data Analysis

Drawing from a Heideggerian life-world approach (Landrum, Guilbeau, & Garza, 2017), the analysis aimed to illuminate how the students project certain understandings of themselves and perceive a disconnect with their grade. Data were read and interrogated in light of how the students' understandings of their grades are reflective of their various projects. Using thematic moments analysis (Garza, 2004), the parts or moments of the emails that were revelatory of the students' lived understandings of grades were identified and transformed to shed light on the students' projects. These transformations were then grouped into themes aiming to elucidate the lived meanings of grades, elaborating on what is at stake for the students and their visions of themselves.

Results

The following figure depicts the general form of the requests that I have received from students. The form is depicted as an email on an electronic device as I have never been asked to change a grade by a student in person. The students may find this request is easier to make when they do not have to face the teacher. Without the possibility of being looked at, the electronic device renders their body absent. This may offer the chance to hide one's embarrassment and seek refuge behind a screen to possibly avoid con-fronting this head on, face-to-face. The email does con-front in the sense that 'con' could be taken up as 'with': the student is attempting to bring the

teacher's view of them in line with theirs. 'Con' can also be defined as persuading someone to believe something or do something, typically deceptively: the student is engaging in a misdirection, to deflect the teacher's attention away from their failing and towards their strengths; in some instances, students will even request that grades be bumped, asking the teacher to lie about the grade the student earned.
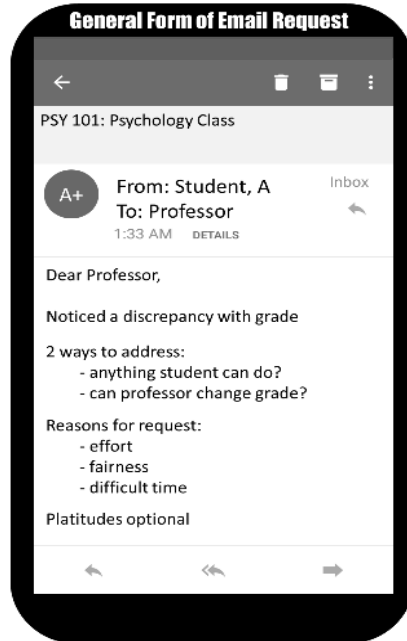

Figure 1. Depicts the general form of the email request demanding a grade change.

Generally, the emails begin with a statement that their grades are lower than expected, with some expressing surprise and dismay. The students will offer ways to address this discrepancy and provide reasons why they are requesting a grade change. Some emails will include various platitudes about how much they enjoyed the class, learned so much, had a great time, etc. The results below are grouped into four themes with supporting quotes: Lived Disparity, Need for Recognition, Redress, and Justification.

Lived Disparity

In the emails, students are noting a disparity in their final grade and the one they were anticipating.

> "Though I wasn't expecting the A- which I was working towards, I also was not expecting the solid B."

The perceived unjustness of the final grade is understood in light of the students' own self-concept. Their understandings of themselves as hard-working, an 'A' student, never missing a class or assignment, struggling and/or hardship are not reflected in their final grade. This suggests that these students understand their grades as either an affirmation or denial of their projective sense of self, their concern with the possibility that they are seen by others as they see themselves. When there is a disconnect, the possibility of an unshared sense of self emerges, whereby the students' sense of self is not co-perceivable by others and is not part of the shared social reality. This lack of correspondence occasions a moment of self-questioning: 'Am I not the student I thought I was?'

> "I should have earned a 91 on my final, not a 70."

The students' requests to bump their grade is a claim that they are as they see themselves and a demand that the professor affirm this vision. This perceived grade unfairness is always occasioned when the students' expectations are higher than the grade earned; no student has yet requested a grade be bumped down, expressive of an unworthiness of being given a grade too high.

Need for Recognition

This claim to be seen in accordance with their own understanding reveals a need to be recognized and given credit for what they have done over the course of a semester. In perceiving a disparity, students feel unvalued in their efforts, unrecognized for their performance or progress.

> "…at least show you that I was a serious student in your class."

"By me not doing my work, it looked as if I did not care, but I do."

The request is sent in the hopes of forestalling the understanding that they have fallen short. The email is a demand: 'See me as I see myself.' Implicit in these demands to share their self-understanding, the student is questioning the teacher's understanding: 'You agree, right? I worked hard this semester' or 'You don't want me to not attend grad school/lose my scholarship, right?'

"having a b- will only lower my GPA and prevent me [from] being in the program."

The email is sent in the hopes that their grade, as given by the teacher, can be brought into line with their self-understanding and once again affirm their sense of who they are. The student is inviting the teacher to share in their future goals and self-identity. The students perceive a disconnect between their self-understanding and how they are viewed by others. The email is a plea for the teacher to revise their view and bring it in line with how the students view themselves; the student demands that 'reality' conform to their vision rather than a call to transform themselves in light of that vision.

Redress

For the student thus challenged, the lived unjustness of the grade must be righted. For these students, it is not just a grade, but their identity as a smart student, a good student, an A student that is in question. Their grades are part of the future self they are aiming towards: going to graduate school, maintaining one's scholarship, applying for an internship program, passing this class, among other possibilities. For some, the expected grade is not just what they are owed, entitled to, deserving of, but the disconnect is one in which they feel they have been robbed, that something was taken from them.

"Is there anything that can be done to get **my** points back?"[emphasis added]

The student feels the need to right the lived injustice, to bring their vision into the shared world with others as the foundation of their place within it. The lack of correspondence must be redressed so that the actual grade matches the expected one - the grade must be brought in line with their expectations. In order to right this perceived wrong and come to terms with the disparity, students attempt to address the problem in two ways: a) what can the student do to raise their grade (e.g., extra credit, resubmit an assignment); b) can the teacher raise the grade? These two solutions are not mutually exclusive, with some students asking for both in the same request.

> "I was wondering if there was anything I could do, or any way that you would be able to bump my grade up to a B+?"

The first solution is an offer to rectify the situation by working to right the perceived discrepancy and a second chance to demonstrate their self-understanding and correct the teacher's misperception of them.   This instrumental orientation is an attempt to once more prove one's effort and hard work in the class by offering to complete *extra* work. 'Just in case you didn't notice the first time, let me demonstrate how hard I can work.' The student is extending an invitation to the teacher to re-assess them, to bring the teacher's evaluation of them in line with their own understanding. The student seeks to demonstrate, prove and gain recognition for their work, at last.

The second solution belies an understanding that the grade is given by the teacher, rather than earned.

> "Seeing that I am only 1 point away from an A, would it [be] possible to bump my grade from an A- to an A?"

The students want to be rewarded for their struggle, understanding the grade to be a reflection of how hard they worked. In this view, the grade is not a reflection of mastery but rather of one's efforts. The grade is not only part of the students' identity but an understanding of belonging to a certain group or deserving of a title (an 'A' student, a passing student). This attempt to redress the situation is a non-instrumental demand entailing a global transformation of their place in the world alongside others to

conform with their pre-emptive understanding; the student demands that the teacher bestow the grade title upon them, to just 'make it so.' The demand for the teacher to raise their grade, no matter how small the bump, is an attempt to claim the title without the work; the student is demanding that others conform to their understanding rather than seeing it as a call to transform themselves. Yet, this request undermines the significance of the (earned) grade through the arbitrariness of simply adding one point out of thin air.

Justification

The move to re-dress (as in dress anew) the lived disparity is an attempt to not only cover over but re-cover (like one might re-upholster a piece of furniture) and reframe the situation by focusing on specific qualities or aspects. While not all students included this in their email, most students highlighted their hard work, how they struggled mightily throughout the semester, and that they did everything that was asked of them to redirect the teachers' focus to their efforts. In the present moment, students attempt to deflect away from their failings; the misdirection is an attempt to preserve their current understanding.

> "I worked hard in this class and was really hoping to get at least an A-"

In calling the teacher's attention to what they have done, the students are casting themselves in the most favorable light, indicative of a project of putting their best academic face forward. In this insistence on being viewed in the best possible light, students are also covering over what they have failed to do, being selectively closed off to the possibilities that the grade is earned and reflective of their academic performance.

> "Though my quiz grades were not what I had wanted them to be, I believe I only missed one class and possibly one lab at most, but I was the first in class every other day and participated often to show that I was still working hard."

While some students acknowledge their low grades or missed assignments, they quickly redirect the focus to their hard work in the hopes the teacher will overlook those failings or look the other way. The move to redirect and reorient the professor's gaze to their best self is part of a larger attempt to justify their demand. Some students call attention to their hardships and the struggles they faced during the semester.

> "I was very overwhelmed due to the workload of taking 19 credits"

> "I have been going through family issue due to mom [sic] illness"

Students appear to be rewriting the semester by claiming that 'if only' this hardship had not befallen them, they would have performed better. The students are inviting the professor to reimagine with them the possibilities of how the semester could have gone. In this imagined and rewritten past, the students are holding onto the certain and unquestioned future outcome of their anticipated grade. The expected aimed-at grade and future selves are indubitable and irrefutable for the student; the past is ambiguous, undetermined, pending and unresolved. The present is part of a deflected now, a misdirection to focus on their best selves. This misdirection is also a fantastical claim that the path to the aimed at self is and remains clear and attainable.

Whether a focus on effort or hardships, students feel the need to explain why the grade change is warranted and how their current grade is unfair. It is a further attempt to solidify their sense of self and present themselves as worthy of the expected grade. The grade once again emerges as an affirmation of their self-understanding. One way the re-dress is manifest is an attempt to cover over their weaknesses, re-cover with a focus on their strengths and recover their initial pre-emptive self-understanding.

There are many ways one can imagine students addressing the lived disparity, that I as the teacher would probably not be privy to, that students would keep private and not share with me. All of these are attempts by the student to persevere their sense of self. Some of these possibilities include self-handicapping, perceiving the teacher as unfair, claiming their work in the class amounted to 'pearls before swine.' All of these are extrinsic and non-identity reasons to account for why the disparity exists in the first place. It is a project that forecloses on the possibility that they are other

than how they pre-envisioned. If the student questions their work or identity and sees the unexpected grade as a chance to work harder next time, to improve their study skills, or just an opportunity to reflect on what they could have done differently to earn the grade they were expecting, the lived disparity is not coupled with a need for the teacher to recognize them as they see themselves or need for the teacher to redress the situation.

Discussion

The results shed light on how students' understandings of grades are revelatory of the projects they have for themselves and others regarding their place in the academic world. The literature is mostly concerned with identifying individual traits that coincide with AE (e.g., Chowning & Campbell, 2009; Sohr-Preston & Boswell, 2015) as well as exploring the consequences of these entitled attitudes and behaviors (e.g., Bonaccio et al., 2016; Knepp, 2016; Linvill & Grant, 2017). By focusing on the lived meanings of the grade and exploring the purpose of these requests, the results reveal how students are taking a stance when confronted with a lower grade and how these requests are a claim before a world that challenges their self-understanding.

The analysis of the situation of requesting a higher grade reveals that students are invested in others seeing them academically as they see and understand themselves. Students have an abiding concern with preserving and maintaining their own self-understanding when faced with a world, as manifest in the grade given by the teacher, that fails to match up with and affirm this understanding. This lived discrepancy occasions the need to reassert and demand agreement with one's understanding and the need to correct the error to recover this initial sense of self.

The first three themes (Lived Disparity, Need for Recognition, and Redress) appear to be essential to the phenomenon. Using imaginative variation (Wertz, 1985), if one of these themes is missing, the phenomenon drastically changes. If one feels the grade is in line with their expectations or is higher than one's expectations, no protest or request is made. If the student feels their work, effort, or performance is being captured or understood accurately (from the students' point of view) by the teacher, there is no occasion to demand a need to be seen in a certain way; the student does not feel misapprehended or that their view of self is unshared.

If the student takes this disparity as a chance to work differently, change the way one studies, etc., the student would not demand that extra work be given or the grade bumped in order to resolve the disparity. In this situation, the power to change the disparity is seen as lying within the students themselves and no attempt to reach out to the professor is made.

The last theme, Justification, does not appear to be essential in that not all students made a plea to focus on their efforts or hardships in a bid to prove they were worthy of the demand. This theme appears to portray one of the many ways in which students attempt to resolve the lived disparity, focus on specific qualities and be seen in a certain light as well as ways to re-dress and re-cover the situation. In all of these attempts, students are also attempting to recover and regain their original sense of sense that was stolen from them with the lower-than-expected grade.

Drawing from van den Berg, the results can be rendered in light of the four fundamental dimensions of experience. In the current study, the *body* was revealed in its absence. By making these requests electronically, students did not have to face the teacher nor did they have to be seen. The demand and plead to be seen as they see themselves took place behind a screen, in a faceless encounter. Upon seeing a grade that was lower than their expectations, the students' *world* and their place in it was challenged and threatened. The students realize that their sense of self is unshared by *others*. As the demand unfolds over *time*, the students orient to the present moment as an opportunity to deflect attention away from their weaknesses and towards their strengths; the past is pending and mutable where aspects can be ignored, work resubmitted, and fantastical reimaginations of *what if* are enacted. The future outcome of getting the grade they expect is irrefutable and certain.

Return to the Literature

AE measures the degree to which students expect high grades, particularly when they forsake personal responsibility. This study reveals that entitlement is understood not just as what is owed, as seen in the demand for a higher grade, but also entails a sense of being robbed of one's points. This was revealed in several instances where students described *their* points, as in the ones they are entitled to, and a feeling that they were stolen. The grade is inaccurate and they have been robbed of the

opportunity to have a grade that reflects their sense of who they are as a student.

Sohr-Preston and Boswell (2015) found that self-concept (self-esteem + self-efficacy) was not a significant predictor of AE. Indeed, the current results revealed that it is not about how good or bad one feels about oneself or one's confidence or lack thereof to perform well, but how their sense of self is tied up with the meaning of the grade. By treating self-concept as an *independent* variable, the students' sense of self is isolated and separate from their identity as a student, the meaning of grades, and the deservingness of being seen in a certain light. The students who make these requests view the grade as external confirmation and affirmation that who they think they are is indeed shared and reflected in how the teacher views them. Indeed, it is possible to imagine that students are facing an identity crisis where their self-esteem is being questioned; they are unsure about themselves upon receiving an unexpected grade. The request expresses an attempt to reassert, reaffirm, and maintain their sense of self while protesting the unfairness of this unexpected mark. The unexpected grade occasions the questioning of one's sense of self, the accuracy of the grade ('that can't be right'), and the request to be re-evaluated considering one's effort. These grade change requests shed light on the lived meanings of grades as being interconnected and affirming one's self concept, their identity as a student, and a recognition of their hard work.

My results shed an interesting light on Chowning and Campbell's (2009) finding that students with high AE rated both instructor-deemed appropriate and inappropriate responses as equally appropriate. Two of the appropriate responses were deserving of the grade earned and expecting the professor to be honest. For the student requesting a grade bump (an instructor-deemed inappropriate response), they would accept the grade they earned if the grade was in line with their expectations. The lived disparity in a grade that is lower than what they are entitled to is one that they are unwilling to accept until the injustice is righted. Furthermore, the student who reaches out with this type of request could also believe the instructor is fair and honest and will do the right thing by changing the grade to truly reflect what the student feels they deserve (such as the instructor-deemed inappropriate belief that perfect attendance deserves an A).

Another similar instructor-deemed inappropriate response was "I would expect the professor to be a kind, gentle, understanding person and bump me up" (Chowning & Campbell, 2009, p. 990). This sheds some interesting light on how the students who request a grade bump are anticipating how their teacher will receive the request as well as an understanding of the type of professor they are dealing with. While my data did not include this explicit sentiment, it is tacitly there in that students probably reach out to professors for whom they feel are at least open to this consideration, will view the request favorably, or anticipate the professors can be persuaded. If the request is not granted, the student can claim the professor is mean, unkind, and not understanding, thereby preserving their view of themselves as a good student and entitled to a higher grade. There is also a sense that these students are not anticipating or not concerned (maybe even have not considered this as a possibility) that the request itself will change or alter (for the worse) the impression the professor has of them.

There are some striking similarities between my own experiences with receiving these emails and the story in Singleton-Jackson et al. (2011). The first author recounts a story when she, as the teacher, was approached by a student (at a mall!) complaining about the unfairness of the course due dates and how they were not satisfactory nor convenient for the student's schedule. While the student admitted that no effort had been made to contact the teacher or the teaching assistant, Singleton-Jackson describes that she ended the conversation after it became clear the student was going to persist until the teacher saw it from the student's point of view. Luckily, my students have not opted to continue persisting in the demand to change their course grade. In only one instance did a student carry on an email conversation with three replies until she dropped the matter by saying she 'understood.'

I am certain that students can and do persist in their entitled expectations in ways that would not be shared with me as the professor. This persistence in demanding that one comes around and the inability to be dissuaded or adopt another's point of view describes an incalcitrant holding on to one's pre-emptive understanding that one is a good student. My results reveal that entitled expectations (one AE subscale) is also tied up in an understanding that one is a good student deserving of a high grade and a project of being invested in others (particularly the teacher) seeing them as they see

themselves. The students feel they are entitled to this understanding, never questioning how they see themselves.

Regarding externalized responsibility, it seems that it is not that one's effort is necessarily disconnected from high grades, as many of the students in this study called attention to their hard work, but rather an understanding that hard work or the work that they did do should be taken into consideration for the final grade. I have not (yet) experienced students debating the merits of assignments or feeling that the assignments did not allow them to demonstrate what they learned. The student with a lower-than-expected grade feels that their hard work, not what they learned, is what matters. To acknowledge that the grade is based on learning would also mean admitting that one did not learn the material and perhaps they are not in as strong a position as the teacher to be the judge of this outcome. Believing the grade is based on hard work, the student is the better judge of how much time they spent and how much effort they invested in the course.

Implicit in both my and Singleton-Jackson's experiences is a sense that the students have an expected future goal and not only complain but demand the teacher change their view to be in line with the students'. For the student, the teacher becomes the instrument by which the future anticipated goal is reached rather than seeing themselves as the instrument to effect the goal by changing one's schedule to accommodate and manage one's time to complete the assignments or changing one's work habits to learn the material and earn better grades. In both cases, the student does not see themselves as instrumental to obtaining one's goal (this is seemingly related to self-efficacy which was not predictive of AE). By viewing the teacher as the person with the power to change the grade, the less-than-expected grade is perceived as unjust given that their understanding of themselves is not reflected nor shared by the teacher. From the students' point of view, they have done everything asked of them, worked hard, tried hard, etc. The student who demands a grade bump does not question their own self-understanding but questions the teacher's. If the student acknowledged that they had the power to change the outcome, it would require a re-understanding of oneself: 'Maybe I'm not the student I thought I was.' The 'externalized responsibility' component is manifest in the persistence to be seen as one sees oneself: the student, reluctant to consider another perspective or acknowledge one might be wrong, reaches out to the professor with a plea. This plea is an attempt to preserve, maintain, and

affirm their own private view of themselves by having it coincide with the world's perspective of them as manifest in the teacher's understanding and the grade they are 'given'.

Limitations and Future Research

The data only include emails that I have received from my students taking my psychology classes. While female teachers receive more student requests to change their grades and ask for extensions compared to male teachers (El-Alayli et al., 2017), it is also important to remember that students have some expectation and understanding about how their request will be received. Whether this is assuming the teacher is open, responsive, understanding and perhaps these are more commonly associated with female teachers, future research should explore students' perceptions of teachers when asking for these types of instructor-deemed inappropriate requests.

There are multiple definitions and scales for AE (see Andrey et al., 2012; Chowning & Campbell, 2009; Jackson et al., 2011; Kopp, Zinn, Finney, & Jurich, 2011) pointing to the complexity of this phenomenon as well as the need to solidify our understanding. The current results, while limited to just one entitled response, do include a dimension of students wanting their hard work to be reflected in their grade, but went a step further to elucidate how this is revelatory of the students' projects. To continue this goal of fully fleshing out this phenomenon, I propose that we consider the many situations where AE may emerge. Most of the literature on entitled expectations is concerned with grades (4 of the 5 questions in Chowning and Campbell's (2009) widely used subscale concern exams and grades) and the current study is no exception to this.

As Grubbs, Exline, Campbell, Twenge, and Pargament (2018) indicate, psychological entitlement is part of the larger construct under which AE is just one domain. Luckett et al. (2017) expanded our understanding of this construct by identifying three domains where entitlement is manifest: grades, behaviors, and service. Future research should expand on these AE domains to elucidate how entitlement is manifest in other student demands. Using imaginative variation, AE could also be manifest in what instructors might deem appropriate ways: a student could be expecting a class to be challenging and the class does not live up to their expectations. A student

could be expecting to take a class from a specific teacher, but the class is full. Other areas to explore include Singleton-Jackson's story (Singleton-Jackson et al., 2011) about changing course due dates and the vignettes created by Chowning and Campbell (2009) including students' surprise when an exam in an introductory required class covers material from the textbook and the lectures. These situations are revelatory of students' projects and understandings they have of themselves. When the students' (entitled) expectations are not met, students will look for anyone else responsible but not hold themselves accountable. To do so would require that the student re-understand themselves, to acknowledge that their hard work, being a good student, or however they see themselves is not shared, validated, or affirmed by others. The student who demands the world around them be changed has had their self-understanding threatened. Future research should aim to elucidate how students' understandings of these situations are revelatory of their projects and their concerns.

Conclusion

As a professor, these entitled attitudes and behaviors can be dispiriting but if we recognize where these students are coming from, how they are understanding the role of education and how they view themselves, then we can begin to see how the student has a project of being invested in the other seeing them as they see themselves. While I only had one student persist in the grade bump demand, I am not convinced that my replies changed the students' view of themselves. The aims and projects that teachers have for their students and the ones students have for themselves may be increasingly diverging, as evidenced in several studies (e.g., Chowning & Campbell, 2009) as well as anecdotally with teachers expressing their concerns about the threat that this poses to higher education (Engel, 2013; Patton, 2015; Singleton-Jackson et al., 2010; 2011). It might behoove universities and administrators to take note and provide incoming students with an orientation session detailing the expectations and role of teachers as well as focusing on internalized responsibility (Buckner & Strawser, 2016). Teachers might also address this concern in the syllabus or on the first day of class and adopt specific rules to help curb these behaviors (see Jiang et al., 2017). Given that some literature suggests a relationship with parents (over-involvement and family functioning; Mahbod & Fouladchang, 2018;

Turner & McCormick, 2018) and the possibility of this becoming normative behavior (Hong et al., 2017), this phenomenon seems to be a larger systemic concern beyond just the student and their understanding of school. Future research can explore how students are embedded in larger social and cultural circles that are influencing these entitled expectations.

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Phenomenological Analysis of Professional Identity Crisis Experience by Teachers

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ABSTRACT
The topicality of the problem under research is predetermined by the need of psychology and pedagogy for the study of the process of professional identity crisis experience by teachers and development of a system of measures for support of teachers' pedagogical activity and professional development. The objective of the study is to describe the content of the process of professional identity crisis experience by teachers. The principal method of study of this problem is the phenomenological method, which provides for exploration of the main aspects of the experience process. The results of phenomenological method application for the analysis of professional crisis experience make it possible to state that the professional crisis issue is a specific life situation for labourer where in the alteration of the teacher's general view of life occurs. The experience of professional identity crisis manifests itself in the polarization of evaluations of the main parameters of the professional and the Self-image (the external activity evaluation, interest in the activity, the control over professional activity and professional situations, professional prospects). Transformation of the notional field of a teacher's consciousness and reflection (the content of the activity, relation and the proper behaviour in general) are distinguished as the mechanisms of professional crisis experience. The materials of the article may be useful for teachers, psychologists, and heads of educational institutions in the process of planning and implementation of activities on educational process psychological support.

Introduction

A specific feature of the present-day economic situation in the world in general and in the country, in particular, is the transformation of the existing social institutes which produces changes in every field of social life and a serious

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re-evaluation of social relations system. The permanent education system reformation, the change of the educational paradigm, introduction of Federal State Education Standards (FSES), the change of approaches to the arrangement of educational process, the change of organizational and legal status of the educational organization (including all consequences) result in the change of the content-related and technological aspects of education. The guaranty of successful educational system transformation and achievement of the goals set is a freely and actively thinking teacher, able to fore see the results of his/her activity and model the educational process. Special significance for his/her activity and professional development under the new circumstances is given to the ability of permanent self-identification, self-formation as a professional, designing of new professional development routes and crossing psychological barriers of this search.

However, as may be seen from the research practice, the majority of teachers experience adaptation problems in the rapidly changing social and economic and professional circumstances. Unreadiness to re-evaluate their part in the present-day educational process and inability to solve the occurring professional problems (which may include internal and external conflicts, crisis situations, stress etc.) may provoke serious social and psychological trouble with teachers: from the increase of internal dissatisfaction up to the boost of social confrontation and aggression. Disaffection with work, internal conflicts, the feeling of the loss of sense of work, the loss of professional prospect in many cases become the factors in creasing the number of obstacles on the way to the teacher's professional development and evoking the experiencing of professional crisis by the teachers.

Professional identity crisis is a kind of "transitional" point, bifurcation point, and crossing this point predetermines the further route of professional and personal development, providing the transfer to the further stage of professional establishment or causing stagnation of the teacher, as well as his/her professional degradation.

The crisis is a short-term life period accompanied by cardinal reformation of the subject of activity, the change of activity (Symanyuk & Devyatovskaya, 2015). The crisis affects the field of the professional directionality of personality: motivation, needs, values, senses; it "forces" the individual to build up the boundaries of its value- and sense-focused field, actualizes the process of experience. The key specific features of professional identity crisis experience process are: 1) localization in time and space; 2) non-stability of vision and thinking of oneself as a professional, the loss of professional identity; 3) vague temporal professional prospects or absence of the prospect, with consequent actualization of the need for choice of further professional life development; 4) actualization of life-sense emotions which manifest themselves in decreased aspiration for self-development, self-affirmation, self-actualization, the feeling of his/her own uselessness and worthlessness; 5) persistent affective response, tension (Sadovnikova, 2014).

The rise of professional identity crisis is characterized by the generation of self-diffidence, inner conflict, awareness of the necessity of self-revaluation, the vaguenessof life goals, the lack of understanding of how to live on, the loss of feeling of novelty, being behind the times etc. It is possible to state that professional identity crisis is the situation of "impossibility" to implement the

internal professional concept, the situation when the individual is set a "sense-making task" which requires solution (Sadovnikova, 2009).

With all the diversity of professional crises, the issue of solution of the professional crisis and definition of its essence remains unresolved as of today.

Professional identity crisis concerns the identity consciousness stratum and causes the transformation thereof (similar to the identity crisis); therefore, studying the way of solution of the professional crisis by the identity, it is reasonable to use the category of "experience". It is the category of experience that makes it possible for a researcher to reveal the content of the internal activity starting in the consciousness of a person which found itself in a professional crisis situation; the activity which makes it possible to eliminate the conflict between existence and consciousness.

Methodological framework

Research methods

The following methods have been used for the research: theoretical (literature analysis, modelling); empirical (phenomenological semi-structured interview, content-analysis); mathematical statistics and graphical results presentation.

Experimental facilities for the research

Experimental basis for the research w were the educational institutions of Sverdlovsk oblast of the Russian Federation.

Research stages

The problem research was carried out in 3 stages:

— At the first stage of the research theoretical analysis of literature sources on the problem of professional crisis, the experience was made. The content of the phenomenological semi-structured interview was developed.

— At the second stage of the research empirical data was collected.

— At the third stage of the research content-analysis of teachers' self-reports was performed and mathematical analysis of data with graphic results presentation was performed.

Results

Experience is an internal work on the restoration of mental balance and elimination of the conflict between the existence and the consciousness characterizing the uniqueness of an individual's internal world, its consciousness, and life in general.

Taking this fact into consideration, the traditional psychological measurement for research of the experience contents is impossible to use. To research the content of professional crisis experience it is purposeful to refer to the strategies of qualitative research, where phenomenological analysis belongs.

Let us consider the essence of phenomenological approach and its value for professional identity crisis experience research.

Today, the phenomenological approach is of a special topicality in the research of the structure of some experiences, the senses and a person's attitude

to something (Ulanovsky, 2012). It suggests the implementation of the "first person" methodology postulating the idea of non-reductibilityof experience. Its subject is the live experience, subjective practical knowledge, consciousness data, phenomena and phenomenal data (Varela & Shear, 1999; Ulanovsky, 2012).

Considering this fact, the phenomenological method "is a special method of description and analysis of a person's proper experiences based on the reflection and the principles of obviousness and absence of prerequisites; the method developed in the framework of phenomenological tradition and used today in the altered form as a qualitative research strategy" (Ulanovsky, 2012). The phenomenological method is referred to the qualitative research group due to the fact that it uses qualitative date – the words and utterances of the natural language reflecting the riches and depth of human experience. The phenomenological method focuses on the description of a subject's experiences, but not on the utterly observed actions and behaviour.

Let us consider the procedural aspects of the phenomenological method.

The phenomenological research uses three main data collection sources: test subjects' reports obtained in through research interview or presented in writing; reflexive self-reports of the researcher; personal documents and general cultural texts that contain anextended description of certain experience (Ulanovsky, 2012).

A test subject of phenomenological research may be any person having an appropriate experience and capable of giving at least a minimal description of such experience. The number of subjects in phenomenological research may differ. Some works point out the possibility of the use of extended reports of a single subject (Dukes, 1984); while the other works describe research wherein more than 300 subjects had taken part (Ulanovsky, 2012).

To study the professional identity crisis experience by teachers, we have developed a semi-structured phenomenological interview. The questions of the interview covered several aspects of professional identity crisis experience by teachers:

"General view of life and experiences prior to professional crisis development" – this block was aimed at the clarification of professional development situation prior to the professional crisis development. The teachers were offered to describe their view of life, prospect, attitude towards the profession and themselves. It was suggested to list the events preceding the development of the professional crisis.

"Experiences accompanying the professional personality crisis" – this block makes it possible to explain which aspects of professional life provoked the understanding that the teacher had faced the crisis situation, how the teacher had been perceiving the crisis situation if the teacher had the feeling of internal emptiness, the arrested development.

"Value- and sense-focused field transformation" – this block made it possible to explain the way the subject's priorities had been changing in the process of professional crisis experience, how the values re-evaluation occurred, where the teacher saw the sense of his/her professional development (professional activity) before the crisis, how the teacher changed while

experiencing the process of the crisis, how he/she saw his/her professional future.

"Overcoming the professional crisis" – this block is aimed at the detection and explanation of the professional crisis duration and what factor saided to overcome the crisis (personal qualities, social resources, etc.) etc.

The phenomenological interview is allowed to be conducted in the form of a written essay (Ulanovsky, 2012). The subjects were offered to recall their experiences related to the professional identity crisis and answer a number of questions concerning their professional development and professional activity. The performance of the task was not limited to the temporal framework, but in average it took the subjects 2.5 hours to complete the task.

In total, 25 teachers of secondary educational institutions took part in the research; the average working experience amounted to 8.6 years. All the subjects were female, the average age was 28.4.

In the context of our research, teachers with the experience of the professional crisis were of particular interest (it is one of the most important prerequisites of phenomenological research strategy application). Therefore, from the general sampling, we have selected 20 teachers having had such experience.

The research results processing required qualitative data analysis according to the following plan:

Marking the statements, the primary acquaintance with the text and pointing out significant statements, utterances completed in terms of their sense concerning the professional crisis experience. The boundaries of such statements are any distinguishable sense changeover and changes in the narration (Giorgi & Giorgi, 2003).

Adjustment of content-analytical categories selected based on theoretical literature analysis and primary acquaintance with the subjects' responses. As a result, the following categories and subcategories were distinguished:

Category A – general view of life prior to the professional identity crisis.

A1 –image of profession;

A11 – social significance of the profession;

A12 – interest in the activity;

A13 – creative self-actualization possibility;

A14 – professional prospect availability;

A2 –image of Self in the profession;

A21 – proactive attitude;

A22 – subjectivity, self-confidence;

A23 – self-identification with the profession;

A24 – self as viewed by others;

A3 – general emotional background;

A31 – exhilarated emotional background;

A32 – calm, smooth emotional background.

Category B – general view of life within the professional identity crisis.

B1 – image of profession within the period of crisis;

B11 – low social significance of the profession;

B12 –lack of interest in the activity;

B13 – routine nature of the activity;

B14 – lack of professional prospect;

B2 – image of Self within the period of crisis;

B21 – loss of control of activity and professional situations;

B22 – development arrest;

B23 – professional identity loss;

B24 – negative external evaluations of the activity;

B25 – self-esteem drop.

Category C – crisis experience.

C1 – emotional sufferings,

C11 – anxiety, fear;

C12 – anger, irritation;

C13 – sadness, emptiness;

C14 – desperation, hopelessness,

C15 –stress,

C2 – value and sense sphere transformation;

C21 – life sphere hierarchy change;

C22 – change of sense content of work;

C3 – reflection;

C31 – internal world reflection;

C32 – activity content reflection;

C33 – social environment reflection.

Category D – crisis overcoming activity.

D1 – the use of social resources;

D2 – personality resources actualization;

D3 – hobbies and interests;

D4 – change of the workplace;

D5 – change of profession;

D6– change of the type of activity.

In the process of statements encoding, we acquired a list of statements related to various aspects of professional crisis experience. Conditional name–codes were assigned to the statements to reflect their main idea.

Analysis and interpretation of the obtained data required calculation of subcategories percentage ratio and the research results description in the context of previously formulated theoretical views of the essence of professional crisis experience.

Let us consider the obtained results analysis.

In the process of the subjects' responses analysis, we have distinguished a total of 686 statements describing professional identity crisis experience by teachers.

The first direction of work with the teachers' self-reports was an analysis of the subjects' responses characterizing view of life prior to the crisis (Figure 1).
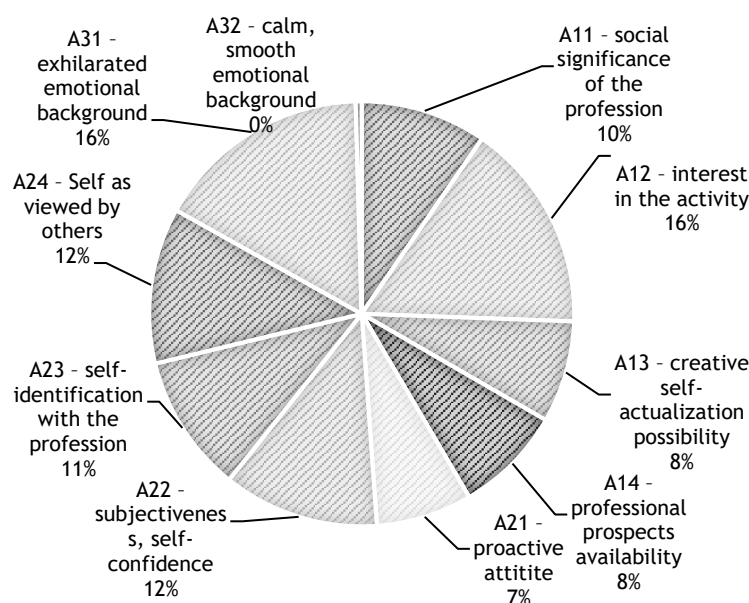

Figure 1. Correlation of the characteristics describing teachers' view of life prior to the professional crisis experience

Generalization of the responses allowed us to make a conclusion that the subjects described the time before the crisis as happy, bright, and interesting. The professional prospect and the future were clear. Here are some of the categories mentioned in the subjects' responses: "to be awarded a higher category", "develop myself as a teacher", "enormous prospect", "changing the stereotypes of impossibility to provide children with a high-quality education" etc.). All the teachers pointed out that they had seen the purpose of their work, perceived professional tasks with enthusiasm, inspiration ("the value of communication with parents and children", "children need me", "I wanted to pay more attention to the content of the work", "I sincerely believed that love for children is the most important characteristic for a teacher", "I saw the purpose in teaching the future generation" etc.). Probably, it is the way that the tendency to idealize the pre-crisis professional past manifests itself in the situation of the actual and/or past crisis.

The second direction of the teachers' responses analysis was determining the correlation of the categories characterizing general view of the teachers' life within the period of the professional identity crisis (Figure 2).
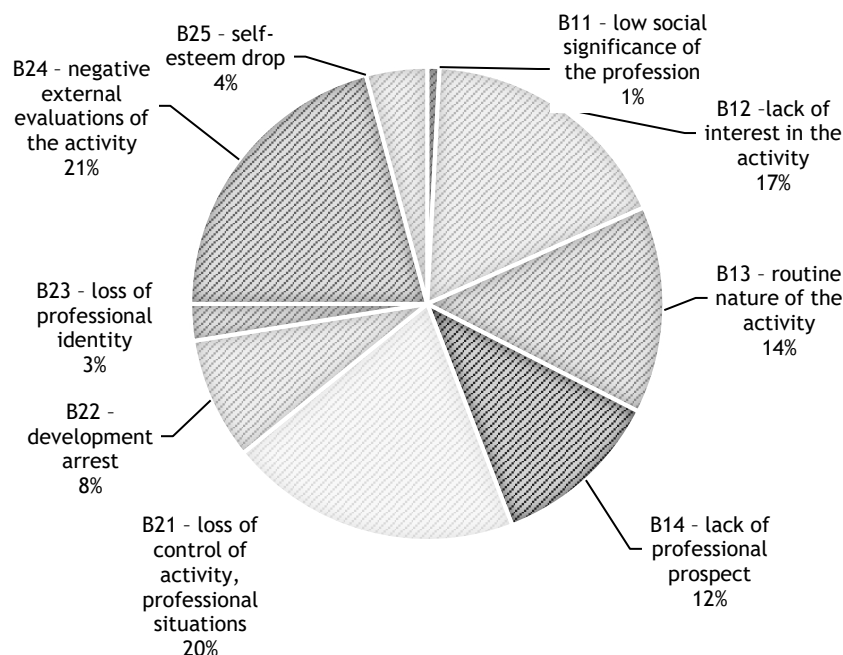
Figure 2. Correlation of the characteristics reflecting general view of life of the teachers within the period of professional identity crisis

Analysis of the teachers' responses characterizing professional crisis experience allowed us to make a conclusion that under critical circumstances teachers become keenly aware of their activity evaluation. Many people pointed out the occurrence of negative external evaluations: "the fear of disapproval", "I felt an odd fish", "I shall never become good enough", "perception of a colleague as a competitor", "gossip, pressure", "the lack of understanding from the superiors", "non-acceptance of me as a colleague" etc. (subcategory B24, 21%). Pedagogic activity suggests permanent feedback from the pupils, parents, colleagues and professional community in general. The job evaluation is valuable for teachers, and in the pre-crisis period description subcategoryA24 "Self as viewed by others" is frequently encountered (12% of indicators), however prior to the crisis the accent was made on acknowledgement, and positive evaluations, which is contrary to the crisis period, where the negative ones are emphasized.

Another category of frequent occurrence in the subjects' responses was the category "loss of control over activity, professional situations" (subcategory B21, 20%): "Ican do no right", "emptiness, and no new ideas", "I will never manage to do as I intend to", "I cannot make a decision" etc. The manifestations of subjectivity and self-confidence, characteristic for the perception of pre-crisis situation (subcategory A22 – 12% of indicators) are lost during the period of crisis which is one of the main sources of frustration alongside with the negative external evaluations.

A vague temporal professional prospect or absence thereof (subcategory B14, 12%),along with the subsequent actualization of the need for choice of

further professional life scenario manifested themselves in the following responses: "do I need this profession", "will it be interesting in future", "I wanted to change my job", "a sombre professional future", "the professional future is unchanging and it is only going to become worse" etc. During the pre-crisis period, the image of the profession also included both professional prospect and self-actualization prospect (subcategories A13 and A14 − 8%). As it is shown above, the professional prospect vagueness is one of the attributes of experiencing a professional identity crisis.

It should also be pointed out that the subjects indicated the lack of interest towards the profession during the period of professional crisis (subcategory B12, 17%) and routine nature of the activity (subcategory B13, 14%).

Comparison of the teachers' views of life prior to and during the professional identity crisis makes it possible to come to the intermediate conclusion that the image of the profession and the professional Self are formed up according to dichotomic principle. The teachers point out the same key moments but the crisis situation abruptly changes the sense of the situation evaluation from positive to negative. Neutral judgments in crisis description are not common for teachers; they are inclined to polar evaluations. It is possible that the polarization of professional situation evaluation is one of the mechanisms of professional identity crisis perception by the teachers at the primal stages of professionalization experiencing the professional expectations crisis. Evaluations categoricity, separation into "black" and "white" may also serve as an indirect testimony of deficient level of professional self-actualization, the immaturity of professional thinking.

The next direction of analysis was the determination of correlation of the characteristics describing the essence of professional crisis experiencing (Figure 3).
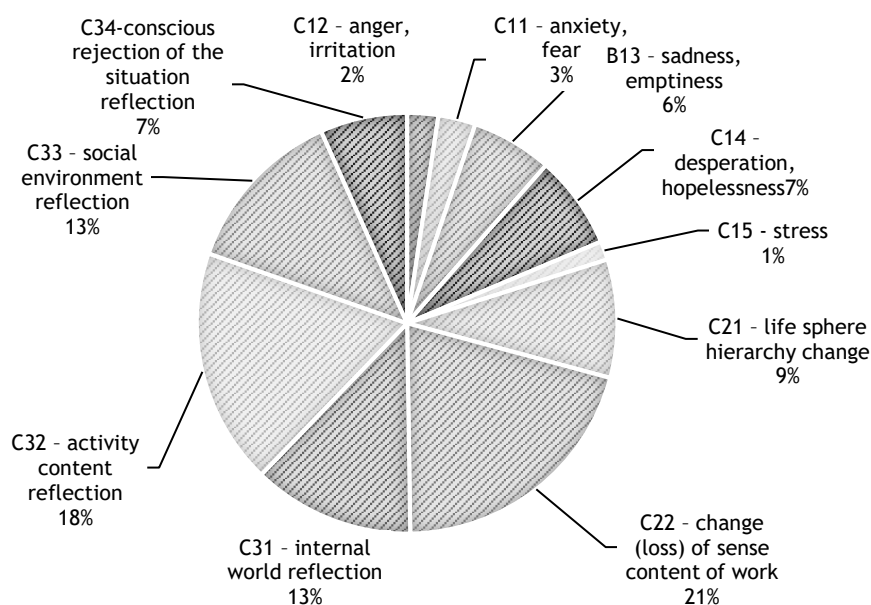
Figure 3. Correlation of the characteristics describing professional crisis experiencing by teachers

As may be seen from Figure 3, the principal aspect of the experience is related to the change of the sense content of the work (subcategory C22, 21%). Many teachers pointed out that: "it seemed that I was forgetting everything", "I no longer took the copy-books home to review them there", "I cannot understand if I need it all", "I came to respond to the parents' requirements in a lesser degree", "now I make myself go on through force of will, I perform my professional duties by habit, automatically", "now the purpose is to protect my own child from everything that happens in the kindergartens", "educational system greatly disappointed me", "now I perceive my activity in a different way" etc.

For many teachers professional crisis experience is accompanied by professional activity content reflection (subcategory C32, 18%), after that the internal world reflection (subcategory C31, 13%) and social environment reflection (subcategory C33, 13%) actualize.

Analysing the emotional content of experience we can note that the dominating emotions were "desperation and hopelessness" (subcategory C14, 7%). The teachers pointed out that: "I felt internal depletion", "emptiness", "I felt theemotional burnout", "the feeling of hopelessness, that nothing can be changed", "the desire to resign, abandon everything", "submission" etc.

In general, the results under category C comply with the source theoretical model of crisis experience. It is a particularly peculiar fact that the negative emotions which form general crisis course background are not registered by the teachers as often as the value and sense transformation and reflection. It can be explained by the fact that the emotional self-regulation of teachers is professionally developed, and the reflection and value aspects, being higher level mechanisms, are predominant.

An important constituent of the analysis was the analysis of correlation of the characteristics disclosing the process of professional crisis management (Figure 4).

As may be seen from the diagram, the majority of the answers fall into subcategory D2 – personality resource actualization. The teachers pointed out that in order to solve the professional crisis they required "patience and serenity", "I understood that if I cannot change the situation I should change the attitude to it", "self-confidence', "optimism", "confidence in my knowledge and abilities", "stress-resistance", "confidence that the crisis will come to an end, motivation" etc.

Quite important for professional crisis management were the social resources (subcategory D3, 26%). The subjects' self-reports contained the following answers: "I cooperated with other specialists", "I asked the family and the older teachers for help, we talked it over, clarified the situation", "I spoke to the person who knew the job features very well", "I spoke to the superiors who supported me with kind words".
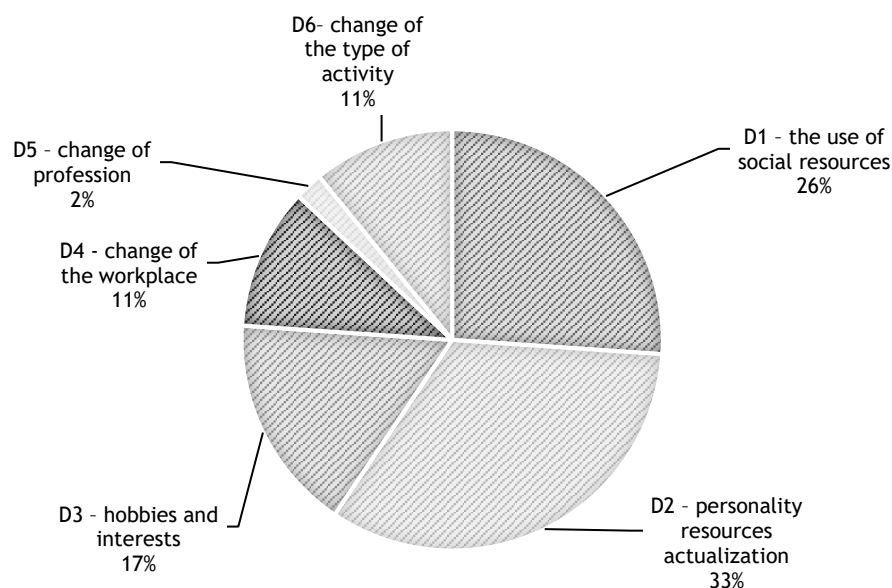
Figure 4. Correlation of the characteristics reflecting the activity of professional crisis overcoming by teachers

Personality resource engagement and seeking social support are, in our opinion, quite a constructive way of crisis overcoming, due to the fact that they allow the teacher to retain his/her professional status and stay in the profession.

Another constructive way out of the crisis is, in our opinion, subcategory D6 – change of the kind of activity (11%). This category encompasses the following answers: "at that period I submitted papers for higher education", "I understood that I had to do something and overcome the crisis situation", "I was suggested an interesting part-time job", "change the activity", "I participate in contests and win"etc.

So, the phenomenological analysis helped us disclose the content of the process of professional crisis experience by teachers.

Discussions

The category of experience is encountered in the works of both domestic and foreign researchers. Thus, the category of experience is most closely related to life philosophy within the framework whereof experience is an important attribute of human life, determining its character. However, the life of an individual, its culture, to which it belongs, as well as the social environment wherein it generally lives, set a kind of "boundaries", "standards" and even "depth" of the experience. At the same time, the experience is a psychical attribute. Experience is always something personal; the reflection of the whole human personality. Experience reflects and discloses the fullness of psychical aspect, including the person's values, senses, and beliefs (Dukhnovsky, 2005).

In the Russian psychology, it was L.S. Vygotsky (2001) who first applied the category of experience as one of the basic, primary characteristics of consciousness. According to him, experiences are analytical units within the process of cooperation between the personality and the environment. Experience

is by definition the unit in an indecomposable form representing, on the one hand, the environment (the emotions experienced), and, on the other hand, the way it is experienced. L.S. Vygotsky (2001) considers experiencing an activity of psychological world recreation aimed at the establishment of the sense correspondence between the consciousness and the objective reality.

According to S.L. Rubinshtein (1998) experience, in the specifically emphasized sense of the word, may refer to a psychical phenomenon which became an event in the personality's internal life. Experience is determined by personal context due to the fact that the things significant for a person become an experience.

A.N. Leontiev (1981) pointed out that the way a person experiences a subject within the objective reality is determined by the person's attitude towards this subject – by the content of its activity implementing this attitude. Experience manifests itself on every instance of human activity but it is neither this activity nor the reason thereof, because, prior to becoming a reason, it is a consequence itself.

After the introduction to the composition of personality sense within the context of activity theory by A.N. Leontiev (1981), this category analysis within the activity approach can be found in the works of F.Ye. Vasilyuk (1984).

According to F.Ye. Vasilyuk (1984), the essence of experience is as follows: when a person experiences a loss it had suffered, the main thing for its relatives is the care of how such person would manage to withstand the suffering, the ordeal, overcome the crisis and restore mental balance, psychologically cope with the situation. Here some active, resultative process is implied, actually transforming the psychological situation, an experience-action. The need for survival arises within a person on especially critical life occasions when it is impossible to continue the previous mode of life and implement the internal necessities of the life (motivation, aspiration, values). Such critical situations in a person's life are stress, frustration, conflict and crisis. The experience becomes a restoration work for a person experiencing a critical situation, and its purpose is acquiring the sense of further life. Phenomenological prerequisite of experience is the situation of the impossibility of the desired changes, thesatisfaction of needs, achievement of goals, implementation of values etc.

Analysing the present-day state of psychology, L.R. Fakhrutdinova (2012) points out that the difficulty of experience essence disclosure is caused by thecultural and historical context of the development of this category. Analysing experience process phenomenology, the author also considers the category of "experience" from the viewpoint of its priority and belonging to the context of conciseness as a primary element having the status of an independent, primary basis phenomenon.

In general, three aspects using the term "experience" may be distinguishedin psychological research (Asmolov, 1990):

1. Experience as "any appellative real-life phenomenon directly presented in the subject's consciousness and acting for such subject as an event of his/her own individual life".

2. Understanding of experiences as aspirations, desires, and wishes directly representing within an individual consciousness a process of the choice of

motivations and activity objectives made by the subject and therefore participating in the determination of the activity processes.

3. Experience, like any form of activity occurring in the critical situation of the impossibility of the achievement of the leading motivation and life expectations by a subject, a collapse of ideals and values. The result of this activity is the transformation of psychical reality.

As may be seen from the theoretical analysis, the category of experience is not used within the context of professional crisis study. In turn, the necessity of addressing the category of experience in the professional identity crisis research is predetermined by the fact that professional crisis is not only a stress situation for a personality, however,it certainly is. The professional crisis is a situation when an individual is unable to implement its professional plans, a situation where it is impossible to live, implement the internal need of life, situation when a "sense-making task" that needs to be solved is set before the individual. It is the category of experience that allows a researcher to disclose the content of the internal activity deploying in the consciousness of a person that found itself in the situation of professional crisis; activity helping to eliminate the conflict between the actual reality and the consciousness.

Conclusion

Thus, the article provides the results of phenomenological analysis of professional identity crisis experience by teachers. The main conclusion of this research is the fact that the situation of professional identity crisis initiates an experiencingprocess in a person's consciousness. Generalization of the teachers' feedback made it possible to state that the time prior to the professional crisis was described by the subjects as happy, bright, interesting and meaningful. Professional assignments were perceived by the teachers with enthusiasm and inspiration.

During the crisis situation, teachers start to acutely perceive theevaluation of their activity, feel the lack of control over the activity and professional situations. Manifestations of subjectivity and self-confidence specific for the perception of the pre-crisis professional situation become lost within the period of crisis, which is one of the driving experience sources alongside with the negative external evaluations.

A bleak temporal professional prospect or the absence of the prospect and the subsequent actualization of the further professional life scenario choice is another aspect of professional identity crisis overcoming by teachers. During the pre-crisis period, the image of the profession included both professional plans and the possibilities of self-actualization. It should also be noted that the subjects pointed out the lack of interest in the activity and the routine nature of activity within the professional crisis period.

Comparison of characteristics of the teachers' view of life prior to and during the professional identity crisis period let us make a conclusion that the images of theprofession and professional Self are built according to the dichotomic principle.

Besides, in the process of the research, it was found that the principal aspect of the teachers' professional identity crisis experience by is related to changes in the sense context of work. For many teachers, professional crisis

experience is accompanied by reflection of professional activity content, and after that, the internal world and social environment reflection is actualized.

Self-reports analysis also revealed the presence of negative emotional experiences. However, a matter of particular interest is the fact that the negative emotional experiences which constitute the general background for the course of crisis are registered by the teachers not as often as the transformation and reflection of the value and sense sphere. It can be explained by the fact that the emotional self-regulation of teachers is especially developed and the reflexive and sense aspects of the experience, being higher level mechanisms, prevail.

An important component of the analysis was revealing the characteristics that disclose the process of overcoming the professional crisis. As may be seen from the results, the professional identity crisis is overcome through personality resources actualization and search for social resources. Personality resources actualization and search for social support are, in our opinion, quite a constructive way of crisis management due to the fact that it facilitates the teacher to retain his/her professional status, and stay in the profession.

The results obtained add to the ideas of the essence of experience. A doubtless novelty of the research is disclosure of specific psychological features and mechanisms of professional identity crisis experience by teachers.

The research results may serve as a basis for designing the system of psychological and pedagogical support of teachers' professional development and activity.

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Disclosure statement

No potential conflict of interest was reported by the authors.

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A Critical Overview of Interpretative Phenomenological Analysis: A Contemporary Qualitative Research Approach

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Abstract

Context: Interpretative Phenomenological Analysis (IPA) has become a dominant qualitative research methodology in many academic disciplines. The desire to understand the theoretical underpinnings of this research approach is evident.

Objective: This paper is aimed at providing an overview and limitations of IPA. This paper will hopefully equip researchers when deciding on the appropriate research methodology to their research topic.

Methods: A range of literature on qualitative research approach and phenomenology is reviewed. The relevant literatures on the theoretical underpinnings of IPA are examined.

Results: The article illuminates that IPA represents a highly useful methodology in providing a rich and nuance insight into the experiences of research participants.

Conclusion: IPA is a forward-looking research approach that adopts a flexible and versatile design to understand people's experiences.

Keywords: Interpretative Phenomenological Analysis (IPA); Phenomenology; Qualitative research

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Introduction

Interpretative Phenomenological Analysis (IPA) has become a dominant qualitative research methodology in many academic disciplines. Its emphasis on convergence and divergence of experiences, as well as its mission in examining detailed and nuanced analysis of the lived experience of small number participants [1], is particularly appealing to many researchers. IPA is an integrative hermeneutic phenomenology [2] first proposed by Jonathan Smith [3] in a paper that argued for an experiential approach in psychology that could equally dialogue with mainstream psychology. But its structured approach and qualitative orientation seems to appeal to other disciplines in human, social and health care research [1,2]. IPA has two primary aims: to look in detail at how someone makes sense of life experience, and to give detailed interpretation of the account to understand the experience [1]. The desire to know more about this qualitative research methodology has intensified.

The aim of this paper is to provide an overview and limitations of IPA which has risen in popularity in many academic disciplines due

to its useful methodology in studying existential experience [2]. This study provides insights into this growing area of qualitative research approach. The paper begins with a brief overview and rationale for qualitative research approach. It will then go on to introduce the philosophical foundations of phenomenology. Then followed by the theoretical underpinnings and criticisms of IPA. The paper concludes by bringing together some thoughts for future researchers who might use IPA as their preferred research methodology.

Qualitative Research Approach

IPA is a qualitative research approach. Qualitative research explores and understands the meanings people assign to their experiences [4,5]. Qualitative inquiries seek to shed light on meanings that are less perceptible. They also seek to investigate complexities of our social world. They are inductive and share similarities in exploring 'what' 'why' and 'how' questions, as opposed to 'how much' and 'how many' preferred by quantitative studies. What's more, qualitative research is designed to study people's life experiences and deliberately shuns quantitative

preoccupation with measuring, counting and prediction in favour of describing, exploring, understanding and interpreting how a phenomenon [2].

There are multiple and diverse epistemological roots for qualitative approaches, but they converge in the context of how meaning making takes place [6,7]. Researchers attempt to study things in their natural settings and attempt to make sense of, or interpret the meanings people assign to their experiences in everyday language [5]. The uniqueness of the qualitative inquiry is its experiential understanding of the complex interrelationships among phenomena and its direct interpretation of events. Therefore, the emphasis is upon seeking to explore the patterns of unanticipated and expected relationships in cases or phenomena [8,9]. Researchers achieve this by exercising their subjective judgement whilst making it visible how their preconceptions shape the knowledge produced through personal reflexivity in a form of self-analysis and self-evaluation during the research [7,8].

Furthermore, qualitative research seeks to understand the inside perspectives of the participants from the participants themselves. It is therefore emic and idiographic. The research questions determine the data-collecting strategies. Data is analyzed inductively to understand the meanings the participants assign to their experiences. Moreover, the interpretive nature of the approach enables the researcher to derive insights from the respondents by employing curiosity, open-mindedness, empathy, and flexibility to listen to people narrating their stories in their own natural settings to identify how their experiences and behaviours are shaped by the context of their social, cultural, economic and historical worlds [2]. Moreover, qualitative research can be used to explore less known or less understood topics or phenomenon to help bring to the forefront unexpected knowledge. Furthermore, the approach is suitable when a detailed in-depth view of a phenomenon is needed to explore a complex process and to illuminate the multifaceted nature of human experience [4].

Introducing Phenomenology

Phenomenology is an approach began by Edmund Husserl and later developed by Martin Heidegger that seeks to study the lived human experiences and the way things are perceived and appear to the consciousness [1,2,10]. Phenomenology has evolved into a relatively mature qualitative research methodology during the last decades of the twentieth century largely due to a seismic shift from mainly deductive quantitative research to inductive research. Phenomenology has attracted growing interest in everyday experience in the domain of public and professional practice including nursing, education, psychology, and social work [10]. Though such interest has also contributed to the proliferation of the approach with little consensus of what constitutes the methodology. Heated debates have ensued about the appropriate ways to undertake phenomenological research. However, two broad categories can be identified: descriptive and hermeneutic. These follow the broad philosophical traditions of Husserl and Heidegger, respectively [2].

The general focus of the descriptive phenomenological approach is to examine the essence or structure of experiences in the way

it occurs to our conscious. Thus, descriptions of the experiences are anchored rigorously to the data without the influence of any external theory. This approach is based on the philosophy of Husserl's phenomenology which involves the principles of epoché, intentional analysis and eidetic reduction. Put simply, the researcher is required to adopt a phenomenological attitude and bracket or put aside past knowledge or presuppositions [2].

A sharp departure from the above is the ideas from hermeneutic or interpretative approach which is based on the principles that reduction is impossible and thus, rejects the idea of suspending personal opinions in favour of interpretation of experiences. Thus, research findings are suffused with philosophical, theoretical, literary and interpretative lenses resulting to an aspect of human experience grounded on unrestricted imagination and metaphorical sensibility. Heidegger, Gadamer, Ricoeur and Lavinas are the key figures of this approach [1,2].

Furthermore, four contemporary phenomenological approaches which do not easily fit the Husserlian and Heideggerian or the descriptive-hermeneutic divide have been identified: Life world approaches; first person accounts; reflexive, relational approaches; and Interpretative Phenomenological Analysis (IPA) [2].

Lifeworld is a descriptive and/or hermeneutic research approach used to explore how everyday experience shows itself in the lifeworld of individuals. This approach strives to find the intentional relationship between the conscious, social, perceptual, and practical experiences by analyzing time, space, and the taken-for granted presentation of experience. The key philosophers of this approach are Husserl, Heidegger, Sarte, Merleu-Ponty, Schutz, van den Berg, and two contemporary philosophers: Dahlberg and Ashworth [2].

In the first-person approach, researchers use their own subjective experiences and descriptive or hermeneutic approaches to examine the quality and essences of a phenomenon. The approach is inspired by the ideals of Husserl who believes that access to the world is through consciousness as experienced from the first-person perspective. The first-person approach incorporates concrete narrative descriptions of momentous events with theoretical discussion and/or literary flourish thus, catapulting personal reflection to a detailed and deep analysis that embellishes experiences [2].

In reflexive-relational approaches, data and/or meanings are seen to emerge out of the context or dialogue between the researcher and the participant who is regarded as co-researcher in the embodied dialogical encounter. Researcher reflexivity and researcher-participant (inter-)subjectivity is celebrated. These approaches can be drawn from any of the major philosophers of phenomenology work, but the works of Gadamer, Gendlin, Levinas and Buber are particularly appreciated because of their dialogical and empirical spirits [2].

Introducing IPA

As seen from the above, various phenomenological inspired research approaches use different approaches ranging from pure description to interpretation [11]. However, a modern way of

conducting a phenomenological research is IPA. IPA is particularly attractive because of its commitment to explore, describe, interpret, and situate the participants' sense making of their experiences [1,12]. The main theoretical underpinnings of IPA: phenomenology, hermeneutics, idiography [1] is next discussed.

IPA and Phenomenology

IPA seeks to understand the lived experience by integrating the works of four major phenomenological philosophers: Husserl, Heidegger, Merleau-Ponty, and Sartre to illuminate phenomenology as a singular and pluralist endeavour existing in a continuum. One of the striking features of IPA is a detailed and systematic analysis of consciousness. Like Husserl, researchers primarily seek to capture the participants' experiences of a phenomenon by bracketing their fore-knowledge [1]. To identify core structures and features of human experience, Husserl encouraged the questioning of natural attitude through phenomenological reflection and dissuaded things being taken for granted. Husserl believed that this could be achieved by consciously setting aside our previous knowledge and to detach ourselves from prejudices, prior understandings and our own history [2]. Therefore, given that the basis of IPA is the examination of the thing itself; thoughtful focus and the careful examination of experience in the way it occurs to the participants proposed by Husserl is essential [1,2].

Husserl's thesis on phenomenology has been criticized by many for being too philosophical, conceptual and difficult to decipher [1]. Moreover, the notion that the ultimate human experience can be examined by setting aside pre-conceived knowledge has been dismissed as simplistic and unattainable [13]. Furthermore, pure experience advocated by Husserl is elusive and inaccessible because experience is usually witnessed after the event has already happened [1].

IPA has emerged by identifying more strongly with hermeneutic traditions and utilizing the works of Heideger, Merleau-Ponty, and Sartre to explore and interpret personal lived experience of the participants. The works of these philosophers complement each other and collectively contribute to a mature, multi-faceted and holistic phenomenology. For example, Heidegger's and Sartre's phenomenology are focused on existentialism, and Merleu Ponty's centres on embodiment [1]. Together, these authors have formulated the argument that we are embedded in the world of language and social relationships and that we cannot escape the historical accuracy of all understanding [2].

Heidegger suggested Dasein to represent the unique existence of human beings or literally being there in the world to express the inter-relationship and inter-connectedness of human experience [2,13]. Heidegger argued that the primary concern for existential phenomenologists is to investigate and interpret existence as it is humanly experienced [13]. Therefore, the IPA researcher embarks on studying Dasein by immersing himself/herself in the world of the participants through a lens of cultural and socio-historical meanings [14]. Or to examine what Heidegger terms as throw-ness. In that Dasein is thrown into this pre-existing world of people and objects, language and culture, and cannot be meaningfully detached from it. Thus, Heidegger's work

invites IPA researchers to ground their stance in the lived world of things, people, relationships and language, and question knowledge outside interpretation because interpretation of people's meaning-making of their experience is fundamental to phenomenological inquiry. His work also prompts IPA researchers to be reflexive in their interpretation in relation to their fore-understanding of the phenomenon being investigated [1].

As already noted, Merleau-Ponty focused much of his work on subjectivity, embodiment and our relationship to the world [1]. Thus, he linked phenomenological description to the human existent as a bodily being or 'body-subject' [15]. At the core of his philosophy is a protracted argument about the pivotal role perception plays in understanding and engaging the world [2]. Thus, Merleau-Ponty suggested that humans are unique and different from everything else in the world, and therefore use their holistic sense to engage with the world. He also argued that empiricism has failed to adequately conceptualize the mechanisms of perception and judgement, and that it is essential to acknowledge human existence in shaping the elementary principles of knowing the world. The lessons IPA researchers can take from Merleau-Ponty's work is how he portrays the vital role the body plays in knowing about the world. While it is acknowledged that different phenomenologists place different emphasis on the role of sensation and physiology in relation to intellectual or rationale domain, the place of the body as essential element in experience cannot be overlooked [1].

Furthermore, Sartre's existential phenomenology is about understanding human existence as opposed to understanding the world. Central issues of Satre's work also covered human freedom and responsibility and the psychology of human action [15]. In Sartre's view, human nature is more about becoming than being therefore; there is freedom of choice as well as responsibilities for our own actions. That said, he acknowledges that certain human complexities require the individual's life, his biographical history, and the social situation to be taken into consideration. Sartre's work offers IPA researchers the most comprehensive glimpse of what a phenomenological analysis of human experience should look like in the context of personal, social relationships, and moral encounters [1].

IPA and Hermeneutics

The next major theoretical underpinning of IPA is hermeneutics, which is the art and science of interpretation or meaning. Meaning in this context is deemed as something fluid that is continuously open to new insight, revision, interpretation, and reinterpretation [1,10]. IPA employs four influential philosophers: Heidegger, Schleiermacher, Ricoeur and Gadamer to advance the thesis of hermeneutic phenomenology [1].

Ricoeur linked phenomenology and hermeneutics by explaining that experience and meaning are closely intertwined. Thus, meaning in his view is indispensable to experience. Hence, for both Ricoeur and hermeneutics experience and language is co-emergent. Language is not only used for descriptive purposes, but as an expressive force of experience. Experience reveals itself only when it is expressed in poetic, figurative and rhythmic language. Thus, through interactive and textual interpretation,

hermeneutic theorists utilize their subjective expressions to reconstruct original meanings during textual interpretation. Hermeneutic phenomenology therefore embraces the literary and poetic aesthetic application of language that emanates from the process and product of research [10].

Furthermore, Heidegger illuminates that our being in the world presents us with fundamental interpretative situation that compels us to ask questions about our world [10]. Thus, IPA believes that Heidegger's concept of appearance of being captures the essence of interpretation well. The notion is that there is a phenomenon out there ready to be explored but requiring the detective work of the researcher to bring it to light using his/her prior experience, assumptions or preconceptions to make sense of the experience once it is revealed [1].

Significantly, Heidegger and Gadamer believed that all understanding assumes an essential element of presumptions and interpretation [15]. Thus, making sense of the respondents' narratives requires the IPA researcher to engage in close interpretation, but the researcher may not necessarily be conscious of his/her preconceptions beforehand. But the complex and dynamic way they unpack the relationship between interpretation and fore-understanding may reveal a more robust and cyclical reflexive bracketing [1].

An IPA researcher is also said to engage in 'double hermeneutic', in that the researcher is making sense of the participants' sense making. Therefore, the researcher assumes a central role in analysis and interpretation of the participants' experiences [1]. Therefore, the researcher intuitively seeks to probe the surface meanings by reading in between the lines for deeper interpretation [2]. The dynamism of interpretation and reflection resounds excellently with the hermeneutic circle model that deals with the dynamic relationship between the 'part' and the 'whole' at numerous levels for a holistic analytical interpretation. In relation to IPA, the 'part' corresponds to the encounter with the participant in a research project, and the 'whole' the drawing of knowledge and experience of the researcher [1].

Idiography

IPA is also said to be fundamentally idiographic, in that it is committed to the detailed analysis of a phenomenon under investigation [16]. It takes great care of each case, offering detailed and nuanced analysis, valuing each case in its own merits before moving to the general cross-case analysis for convergence and divergence between cases [1]. Researchers are required to carefully follow this idiographic approach throughout the analytic process for a meticulous detailed examination of the convergence and divergence between the participants' experiences.

In view of all that has been discussed so far, one may understand that IPA is indeed a forward-looking research methodology that has the potential in understanding and interpreting the experiences of people [17,18], because it offers practical and accessible guidelines in conducting phenomenological research [1,19,20]. However, it has methodological limitations and need to be considered.

Criticisms of IPA

IPA has been criticized for being riddled with ambiguities as well as lacking standardization [21]. Others also point out that it is mostly descriptive and not sufficiently interpretative [12,22,23]. But the increasingly large quantity of publications that outline the theoretical, methodological and philosophical underpinnings of IPA has been pointed out to the critics [1].

The most vigorous criticism of IPA is that the methodology suffers from four major conceptual and practical limitations. Firstly, IPA like many phenomenological studies gives unsatisfactory recognition to the integral role of language [7]. But in their rebuttal of this criticism, they accept that meaning making takes place in the context of narratives, discourse, metaphors etc., and whilst the primary purposes of IPA are to gain insight into experience, it is always intertwined with language [1].

Secondly, questions have been raised whether IPA can accurately capture the experiences and meanings of experiences rather than opinions of it. Whilst phenomenology as philosophy is associated with introspection allowing the philosopher to explore his or her experiences through 'phenomenological meditation', phenomenology as a research approach relies on the accounts of participants and the experiences of researchers. Yet, the critical unanswered question is whether both the participants and researchers have the requisite communication skills to successfully communicate the nuances of experiences. Moreover, phenomenological research is suitable with the most eloquent individuals [7]. This may be particularly the case when interviewing people about sensitive issues such as mental illness. But the criticism could be seen as elitist, suggesting only those having access to the right level of fluency are allowed to describe their experiences. However, it is sensible for readers hoping to use IPA for future projects to note this criticism and take extra attentiveness to collect rich and exhaustive data from participants.

Thirdly, the fact that IPA, like other phenomenological inquiries focuses on perceptions is problematic and limiting to our understanding, because phenomenological research seeks to understand the lived experiences but does not explain why they occur. An authentic research inquiry seeking to understand the experiences of its participants will also seek to explore the conditions that triggered the experiences which are located in past events, histories or social-cultural domain [7]. But, Smith et al. [1] have argued that IPA uses hermeneutic, idiographic and contextual analysis to understand the cultural position of the experiences people.

Finally, the assertion that IPA is concerned with cognition exposes it to criticism because some aspects of phenomenology are not compatible with cognition and the role of cognition in phenomenology is not properly understood [7] However, Smith et al. [1] rebuff this by arguing that the IPA's prerequisite of sense-making and meaning-making which encompass formal reflection clearly resonates with cognitive psychology.

In summary, it has been shown from above that even in the presence of solid philosophical foundation; many IPA studies are still conducted badly. Consequently, readers who are planning to adopt IPA are advised to take active steps to give voice to the experiences of the participants, followed by sufficient interpretation of their narratives. Though, it is important to bear in mind that IPA is fundamentally a subjective research approach, so two analysts working with the same data may come up with different interpretations [1,22].

Conclusion

This study has argued that qualitative research in general and IPA specifically offers flexible and versatile approach to understanding people's experiences. This paper has provided a valuable contribution to our understanding of IPA, future researchers who are motivated in providing interesting and detailed insights into the subjective lived experiences of people [1] might consider IPA as their preferred research methodology.

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An Interpretative Phenomenological Analysis of Schema Modes in a Single Case of Anorexia Nervosa: Part 1– Background, Method, and Child and Parent Modes

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An Interpretative Phenomenological Analysis of Schema Modes in a Single Case of Anorexia Nervosa: Part 1

Background, Method, and Child and Parent Modes

by **David J. A. Edwards**

Abstract

Within the schema therapy model, schema modes are the shifting experiential states that individuals experience, and identification of these is central to case conceptualization and the planning of interventions. Differences in the naming and descriptions of modes in the literature suggest the need for systematic phenomenological investigation. This paper presents the first part of an interpretative phenomenological analysis of schema modes within the single case of Linda (20), a young woman with anorexia nervosa. The analysis, which is based largely on transcripts of seven therapy sessions, yielded phenomenological accounts of her experience of a number of modes. In this, the first of two papers, a phenomenological account of her Child and Parent modes are presented and discussed.

This is the first of two papers reporting on a study which aimed to identify and examine the psychological structure of schema modes within a single case, that of Linda, a young woman with anorexia nervosa treated with schema therapy (ST). Developed by Jeffrey Young during the 1980s, ST expanded on Beck's cognitive therapy by integrating experiential interventions with imagery and chair dialogues and an emphasis on a therapy relationship in which the therapist offered an honest and genuine presence and explicitly assumed a reparenting role. ST was intended for cases that did not respond to brief interventions, usually because of long-standing characterological problems (Behary & Dieckmann, 2013; Young, 1990; Young & Flanagan, 1998; Young, Klosko, & Weishaar, 2003; Young & Lindemann, 1992). Subsequently, randomized controlled trials provided evidence that ST is an effective approach for treating challenging cases of this kind (Bamelis, Evers, Spinhoven, & Arntz, 2014; Farrell, Shaw, & Webber, 2009; Giesen-Bloo et al., 2006; Jacob & Arntz, 2015). A schema therapy approach to eating disorders, the focus

of the present papers, is also well established (Archonti, Roediger, & de Zwaan, 2016; Ohanian, 2002; Simpson, Morrow, van Vreeswijk, & Reid, 2010; Waller, Kennerley, & Ohanian, 2007).

ST is one of several therapies that focus on the multiplicity of internal voices or self-states which underlie experience and behaviour. Appreciation of such multiplicity is not new. It can be found in Origen (born circa 185 CE) (Jung, 1946/1954) and in Durand, a French hypnotherapist, whose 1868 work is cited by Ellenberger (1970), and there is a large literature examining the implications of such multiplicity (Assagioli, 1965; Berne, 1961; Hermans & Dimaggio, 2004; Jung, 1948/1969, Rowan, 1990; Rowan & Cooper, 1999; Schwartz, 1997; Watkins & Johnson, 1982). The different modes of experience are memory-based, and their cognitive, sensory, motor and vocal features reflect the way in which they have been shaped by earlier experiences (Stiles, 2011). In ST, these states are called schema modes (Flanagan, 2010, 2014), defined as "the moment

to moment emotional states and coping responses – adaptive and maladaptive – that we all experience" (Young, Klosko, & Weishaar, 2003, p. 37). Schema modes are therefore phenomenological categories of experience that play a significant role in the process of unfolding experience and behaviour in any individual case.

Some modes are adaptive, contributing to healthy functioning, while others are maladaptive and give rise to psychological distress, and chronic psychological and behavioural problems. The ST model shares the perspective of Stiles (2011, p. 368) who points out that conflict and/or disconnection between different voices "underlies many forms of psychopathology". "A dysfunctional schema mode", write Young et al. (2003, p. 40), "is a part of the self that is cut off to some degree from other aspects of the self" so that an individual's psychological responses are not integrated. Schema therapists listen for these different states, identify and name them, help clients see the nature of the conflicts between them, and work strategically to resolve the conflicts and promote corrective experiences (Behary & Dieckmann, 2013; Flanagan, 2014; Kellogg & Young, 2006).

The ST model offers an approach to classifying the many and diverse states of human experience into broad categories that are of practical relevance clinically. These are called schema modes, and there are four basic categories, each of which can be divided up into subcategories (Young et al., 2003). Firstly, in "Child" modes, individuals experience the world through an implicit memory system that developed mostly in their infancy and early childhood (as documented, for example, by attachment researchers). In the Vulnerable Child (VCh) mode, for instance, individuals experience vulnerability, embedded in early maladaptive schemas (EMSs), problematic cognitive-emotional patterns that incorporate negative beliefs about self and others. These arise from early childhood experiences of invalidation, inconsistency, neglect, or abuse, in which significant developmental needs were not met. The Young Schema Questionnaire (YSQ), developed by Young in 1990 and subsequently revised and refined, measures 18 such themes (Schmidt, Joiner, Young, & Telch, 1995; Simard, Moss, & Pascuzzo, 2011) and has been used to investigate EMSs in eating disorders, the focus of these papers (Sheffield, Waller, Emanuelli, James, & Meyer, 2009; Waller, Shah, Ohanian, & Elliott, 2001).

Secondly, Dysfunctional Parent modes are introjects, demands and rules (Demanding Parent – DemP) or disdainful, critical attacks (Punitive Parent – PunP) taken literally from the words of parents or other authority figures and perpetuated as entrenched habits of self-critical or demanding self-talk. The third category – Coping modes – covers habitual patterns of shutting down emotional distress in the VCh mode, processes traditionally referred to as "defence mechanisms" (Freud, 1896/1962), "security operations" (Sullivan, 1953) or "defensive, pain reducing postures" (Maslow, 1962/1968, p. 205). There are three broad subcategories: in avoidant modes, individuals shut down or distract from painful emotional states; in overcompensator modes, they "act as if the opposite of the schema were true" (Young et al., 2003, p. 276), appearing to be strong and in control; in surrender modes, they implicitly accept negative beliefs associated with the EMSs and expect that their needs will not be met, and so relate to others in compliant and appeasing ways.

The fourth mode category, the Healthy Adult (HA), is one of mature and integrated human functioning. It includes the capacity for reality-oriented reappraisal of thoughts and attitudes that is an important focus in cognitive behavioural therapy (CBT) and existential therapy (Yalom, 1989). However, unlike the "Adult" in Transactional Analysis (TA), which Berne (1961) defined as a rational problem-solver, the HA is conceptualized as what Carl Rogers (1967) called a "fully functioning person", with the capacity not only for rationality but also for reflective thought, mature judgment, mindfulness, engagement with emotions (one's own and those of others), empathy, compassion and the capacity to care.

Schema therapists use this framework to develop a case conceptualization and will typically explain to their clients (a) how Parent and Coping modes interfere with the capacity to connect with and be guided by emotional responses, with the processing of painful emotions, and the resolution of losses; (b) how EMSs, as disowned distressing experiences in the VCh, are the source of distorted perceptions of present situations; (c) how Coping modes may masquerade as mature functioning, and as such displace the HA by creating what Winnicott (1965) called a "false self"; (d) how Coping modes become inflexible and limit the individual's capacity to deal maturely with everyday challenges, or how rapid shifts between modes make behaviour inconsistent and unpredictable, which is confusing both for the affected individuals and for those with whom they interact (including their therapists). Schema therapists aim to help their clients

(1) build/strengthen the HA;
(2) access and heal the VCh and other Child modes, such as the Angry Child (ACh), that carry dissociated memories of emotional distress;
(3) eliminate Dysfunctional Parent modes, and
(4) modify or weaken Coping modes.

Therapists offer an empathic, caring relationship in a style referred to as limited reparenting that aims to provide corrective experiences, but also challenges dysfunctional attitudes and behaviour through empathic confrontation.

Schema modes are not meant to be imposed on clients, but to be allowed to emerge experientially. Therapists not only listen for the different voices and help clients differentiate them, but also use dialogue methods with imagery and chairwork to help clients experience, recognize and articulate the features of the different modes (Arntz, Bernstein, & Jacob, 2013; Kellogg, 2004, 2015; Young et al., 2003). They also allow the nature of conflicts between modes to be clarified and the beliefs and attitudes within specific modes to be articulated and re-evaluated. Imagery rescripting is a guided imagery technique where the therapist works with a memory of a distressing childhood event and promotes a corrective experience by, for example, introducing helpful figures such as the therapist him/ herself or the client as an adult to empathize with and protect the child (Arntz, 2011, 2012; Brewin et al., 2009; Edwards, 2007; Ohanian, 2002). These and other methods, including cognitive and behavioural inter-ventions, bring about changes within these modes or in the relationships between them.

While there is general consensus about the four broad categories of modes summarized above (although Flanagan, 2014, is an exception), there is nevertheless some diversity and inconsistency. One source of this is differences in definition. Parent modes, for example, are experienced as demanding and critical voices directed at the self. When the individual directs them at others, they are understood to be part of over-compensator coping modes (Lobbestael et al., 2007). However, Young et al. (2003, p. 277) define Parent modes as "usually self-directed", although they also make allowance for them to be directed at others. A second source of inconsistency lies in the scope of a particular mode category. Overcompensator coping, for example, initially referred to a state in which individuals present as strong, independent and emotion-ally invulnerable. However, with time, specific forms of overcompensation have been identified and named, including Self-Aggrandizer, Attention and Approval Seeker, Perfectionist Overcontroller, Suspicious or Paranoid Overcontroller, and Bully and Attack (van Genderen, Rijkeboer, and Arntz, 2012).

A third source of variation in the naming of modes results from the idiographic approach of clinicians in practice. As therapists attune to a particular mode in a particular client, they seek to find a name that best expresses its qualities in that client. Thus, although the terms Punitive Parent and Demanding Parent are widely used, there are references to compound terms such as "Demanding/Critical Parent" (Lobbestael et al., 2007, p. 85) or "Punitive/Critical Parent" (Young et al., 2003, p. 277), as well as additional terms such as "Guilt-Inducing Parent" (Jacob, van Genderen, & Seebauer, 2015) and "Disapproving Parent" (Young et al., 2003, p. 193). Similarly, when child states are accessed, terms such as "Lonely Child", "Abandoned and Abused Child"

or "Dependent Child" (Lobbestael et al., 2007) may be used to reflect the salient emotional quality of particular states.

Fundamentally, the identification and differentiation of modes is an idiographic process. That is, the various modes are derived phenomenologically by therapists in therapy sessions. This accords with Berne's (1961, p. 4) claim that Parent, Adult and Child, "ego states" central to Transactional Analysis (TA), were "not just concepts but phenomenological realities" that can be reliably discriminated from the language and behaviour of clients. Phenomenological research is based on identifying and explicating the patterns that underlie the structure of experience. To see these patterns calls for a capacity to perceive them – a psychological mindedness (Finlay, 2011), or what Husserl called "intuition" (Giorgi, 2014, p. 237). The widespread recognition of multiplicity already cited shows how the capacity to identify and work with multiple states is something that therapists learn. The claim that schema therapists learn to recognize modes as phenomenological realities is supported by the ease with which, within the schema therapy community, they use the language of modes to communicate about clients' experience and behaviour.

A schema mode can be thought of as what Merleau-Ponty (1942/1967, p. 220) referred to as "a structure of consciousness". There has been little formal research into the phenomenology of schema modes, and the kinds of inconsistencies referred to above point to the need for a programme of phenomenological research into the nature and psychological structure of different modes. Three decades ago, in setting out a programme for phenomenological research, Giorgi (1986, p. 165) described as appropriate questions to guide psycho-logical enquiry "How many types of perception are there? What styles of memorizing exist? ... How many kinds of depressive behaviours are there?" The aim of the present study was to identify and examine the psychological structure of schema modes within a single case, that of Linda, a young woman with an eating disorder. A second aim was to see whether this kind of idiographic phenomenological research could contribute to resolving some of the inconsistencies in the literature on schema modes. It was expected that detailed analysis of this kind would also allow some recommendations to be made that might be relevant to increasing the effectiveness of schema therapy in practice. To address these aims, several sessions of Linda's therapy were examined intensively, in many of which experiential work with guided imagery and imagery rescripting was prominent.

Method

Methodological Approach
Methodologically, the research is an application of

interpretative phenomenological analysis (IPA) (Finlay, 2011; Smith & Osborn, 2003). Brooks (2015, p. 644) points to IPA as "meticulously idiographic, requiring an in-depth examination of each case in its own terms before moving to the next case. ... IPA is not in principle averse to moving to more general claims, but such a move for IPA will be a slow, painstaking one". The present study is of a single case, and so it is indeed "meticulously idiographic". Nevertheless, the findings will be examined later in light of the many relevant observations in the existing literature, some of which have already been cited.

Research Participant
Linda (20) had met the criteria for Anorexia Nervosa, purging type (her BMI fell to 16.3) and was severely depressed. I saw her for 43 sessions over 15 months, and she also voluntarily entered a hospital programme between sessions 22 and 23. A CBT approach aimed at helping her stabilize her weight, develop a stable eating pattern, and stop the induction of vomiting had limited impact. ST was then gradually introduced and schema modes were identified and used as the basis for case conceptualization. In accordance with the University's ethical procedures, Linda gave informed consent for the use of the material for publication. To protect her privacy, a pseudonym is used and limited identifying information is included.

Sources of Data
A summary of the assessment process and process notes on all 43 sessions were available, with audio recordings made of the last 17 sessions, in several of which intense emotion-focused work took place. Sessions 28, 30, 32-35 and 40 had previously been transcribed as a basis for an extended case study (Edwards, 2016) and were the main source of data for the present analysis.

Qualitative Analysis Steps
The author, who also conducted the therapy, had already had several opportunities to engage with and reflect on the material after the therapy was over. He had included segments of the recordings as part of conference presentations and training workshops, and wrote an extended systematic case study, published in German (Edwards, 2016). For the purpose of the present study, the steps described below were followed:

Step 1: A data condensation was written that briefly summarized salient features of the case history.

Step 2: The selected session transcripts were read systematically and examples of identifiable modes were highlighted and clustered. In any form of therapy, dialogue between therapist and client is mediated by specific discourses. It is a normal feature of schema therapy for the language of schemas and modes to be used by the therapist, and communicated to clients. Linda used several of these terms and had learned to identify several of her modes. This served, therefore, as an explicit forestructure (Packer & Addison, 1989) for the therapist, and to some extent for Linda herself. However, if, as has been argued, modes refer to distinct, identifiable experiences, then these will be apparent from the material itself, particularly since emotion-focused experiential interventions featured prominently. For this research project, this language continued to be an explicit forestructure, and the categories of modes from within the schema therapy literature were used as *a priori* categories for interrogating the material. This is a common strategy in the thematic analysis of qualitative data. As has been shown above, these categories are phenomenologically grounded in an extensive clinical literature. At the same time, there was a careful focus on the actual phenomenology of the experiences in the transcripts, along with an openness to adding other mode categories to accommodate material that did not fit the existing ones. In presenting the different modes identified, there is extensive use of verbatim quotations as well as of psychologically rich descriptions. Several instances will also be referred to where mode language was used in the therapy in a manner that was imprecise or even incorrect and where the present analysis pointed to a more accurate classification.

Step 3: The diverse material was condensed and then synthesized into an in-depth phenomenological rendering of Linda's experiences within each category. The extensive use of verbatim quotations contributes to communicating the lived experience of each mode by means of rich, thick descriptions. The inclusion of these verbatim quotations is also intended to allow readers to judge for themselves whether the material in fact fits the relevant categories. Within the account of each mode, specific themes were identified and articulated, if and where appropriate. The accounts were then shortened by removing repetitious material. Sessions are referred to as S1 (= session 1) and so forth. In extracts quoted verbatim, pauses are indicated by a dash (–), where repetition or superfluous material is omitted this is indicated by (...), and linking words are added in square brackets.

Step 4: Superordinate themes were identified that arose from the author's reflections on the whole process of engaging with the material. These were pertinent to understanding the nature of schema modes, the relationship between them, and conceptual challenges for those working with them clinically. Material relevant to each theme was gathered together and synthesized, and the theoretical concerns and questions raised by each were articulated.

Presentation of Results
The IPA yielded detailed descriptions of some modes, brief references to others, and several superordinate themes. Given the extent of the qualitative material being examined, and the commitment to presenting

experientially grounded arguments, the analysis (with the introductory material above) cannot be fitted into a single paper. The remainder of this paper presents an examination of Linda's experience within the Child and Parent mode categories. A second paper presents her experience of Coping modes and an examination of the superordinate themes that emerged from the data (Edwards, 2017).

Linda: A Case of Anorexia Nervosa

Linda was born after a labour that was long and hard. Reportedly, when the infant was put on her mother, her mother "could not handle it". Subsequently, her mother had been depressed and frequently irritable, physically shaking her child on occasion. The situation had been exacerbated by Linda's having severe colic for several months, and, at age two, being hospitalized with asthma. The emotional deprivation she experienced increased on the birth of her sister when Linda was two and a half. Linda reported various ways in which she coped with the resulting neglect, unpredictability and invalidation: in primary school, she recalls day-dreaming and living "*in this other world*", and later she became overly responsible and perfectionistic. She saw a psychologist for depression at age 17. The year thereafter, she gained weight following the introduction of insulin after she had been diagnosed with diabetes mellitus, and had a few more sessions with the psychologist for depression. At the same time, she also behaved rebelliously, and had begun inducing vomiting. The following year, away from home at University, she felt lost and isolated, and described the first semester of her second year as like "*going through hell*". She became anorexic and her BMI fell to 16.2. At home for the vacation, her parents made it a condition of her return to university that she receive psychological treatment. This then led to her consulting me. She had gained some weight, so that at assessment her BMI was 17.8, but she was still severely depressed and highly anxious, worrying a great deal. Although she was effective academically and in leadership positions in student organizations, much of her time was preoccupied with food and food rules, and her self-starvation regime was threatening her health. There was no room for fun and spontaneity, and her withdrawal and focus on food rules had alienated her from her family and friends, contributing to her loneliness and depression.

Linda's Child Modes

Vulnerable Child Mode

Vulnerable Child (VCh) states are characterized by distressing emotions such as disappointment, sadness, fear, shame and guilt associated with negative beliefs about self, others and the world. The source of these can most often be traced back to problematic childhood experiences. Three themes are prominent in Linda's VCh experiences: – (1) being a burden, to blame, responsible for causing others trouble, (2) being inferior, not good enough, unlovable, and (3) not being noticed, listened to, of interest to others. These themes are present in a dream Linda reported in S28. Her parents are quarrelling and her aunt and female cousin are present. She describes feeling "*terrible*" but later differentiated her feelings: "*Anxious and very stressed ... like almost* [it's] *your fault or that it rests on you. ... I don't know what I've done or what I did but ... like sometimes I just think I add to the burden or make things more difficult ...*". The dream locates these feelings within the dynamics of the family. She is aware that her mother always had "*a very quick tongue ... so there's a lot of talking and just stressing*". Her relationship with her cousin is competitive, while her aunt is "*nosy and asks a lot of questions*" including about what Linda has eaten. In a second scene of the dream, she and her cousin weigh themselves on a scale. Her cousin's weight is "*perfect*", but Linda is overweight and feels inadequate. "*Half the time nobody really knows who I am, and the other half the time I don't know how to get her out there*", she adds.

The same themes are evident in the following sessions. In S30, as we look into what underlies her need to be in control, Linda speaks of "*fear of not doing stuff right and getting into trouble ... everything you do is either wrong or not appropriate or ... and whenever she tried to explain herself ... she ... wasn't taken seriously*". In S34, another dream about her aunt leads Linda to reflect on her "*feeling of inferiority from that big family or being judged ...* [not] *measuring up*". Linda speaks of "*never quite meeting up or being ... the one who gets the awards or the one who people will want on their team*". In S35, Linda describes how this is triggered when, walking in town, she sees a young man she likes. He has a girlfriend, whom she sees as "*perfect*", and thinks, "*You're not worth it ... you're never good enough ...* [because he's] *interested in other people ... who are beautiful and fit and intelligent and hard-working; and I'm just not quite there*". An explicit theme of failure emerged during a psychodrama in S40. When I asked Linda, "Do you have to be a success?", her tearfulness intensified (the transcriber noted "heartfelt sobs") and after a while she said quietly, "*I don't know if there's room for failure*".

Emotion-focused questioning would deepen Linda's access to vulnerability in S33; when I gently enquire about the distress she is experiencing, she says, "*It's ... sore and ... it hurts my heart and I hate ... feeling* [like this] *because ... these questions come up ... are you ... worth love or worth it, or why are you alone?*" Implicit in the questions are the conclusions she has come to: that she is alone because she is worthless and unlovable. But this is too painful to face. When I say, "It's got nothing to do with you, has it? ... that you were some- how some horrible unlovable baby ...?", Linda's distress intensifies. I point this out and say, "That's hitting some- thing, because deep down you think ..." – and Linda

continues: *"I am* [unlovable], *and I just feel like a burden, so often I feel like everything I do is stepping on someone's toes or in the way or an inconvenience"*. Generally, she avoids these feelings, afraid that, as I suggest, "the bottom line in your life is you're defective and unlovable and nothing can be done about it". She concurs, *"... that's why I battle to not only expect love ... but to understand it and to receive it – that someone would love you and does love you* [is inconceivable]".

In these VCh states, therefore, Linda appears to be re-experiencing emotions and associated beliefs that reflect her experience of herself as a child who felt unnoticed, unloved, and invalidated, and believed that this treatment meant that there was something wrong with her. These states point to EMSs that are often a focus in schema therapy: Emotional Deprivation, Defectiveness/Shame, Social Isolation (the sense of not fitting in, differing from everybody else) and Subjugation (the sense that one's needs are not important and the focus needs to be on meeting the needs of others). Another less prominent theme that was noted was that of pessimism. In S35, in an imagery dialogue, the VCh says, *"It's not going to happen. Even though you say this, it's just not going to happen or it's just not ever going to work out"*.

These implicit beliefs were challenged experientially through imagery rescripting. In S34, when invited to visualize, she sees herself as a lonely child of six or seven. After some time, I suggest Adult Linda enter the scene, speak empathically to the child, and offer her care. In due course, Adult Linda stretches out her hand, then puts her arm around the child and Linda says, quietly and sensitively, *"Draw her close and she ... like buries her face in you ... holds you"*. When I ask if there is something she wants to say to her, Linda says, *"to reaffirm that it's not her fault and she is loved and ... she's got so much to give"*.

In S35, reflecting on her experience of imagery work, Linda makes the vulnerability she feels explicit: *"Just putting yourself in a place feeling that – all the emotions again and actually speaking to ... the child parts of me – [it's] as if I can actually hear them and actually speak to them, what they need to hear ... . But it leaves you feeling very raw and very vulnerable"*. Accessing this vulnerability also evoked spontaneous insights into developmental links. In S35, we review her beliefs that she is not interesting, not wanted, that something is wrong with her. Linda recalls how in primary school she had only a few friends, and concluded from this that *"if people could have someone else they would"*. On the theme of being a burden, she connects with her childhood illnesses: *"a one year old ... forever sick all the time and ... just not a healthy normal child, and ... when I was small I had asthma all the time and I was in and out of hospital"*. Being diagnosed with diabetes had re-evoked these feelings. Again, she felt as if she was a burden on parents who already had enough to deal

with without the additional demands imposed on them by her medical condition.

The sequence of imagery in the rescripting sessions (presented more extensively in Edwards, 2016) provided evidence that the meaning of these underlying memories and their associated schemas could be changed by the rescripting process facilitating corrective experiences.

Anger in Child Modes

Angry Child mode (AnCh) refers to experiences that occur with the activation of schemas arising from child-hood experiences of being unfairly treated or abused and experiencing anger about that (Young et al., 2003). Linda frequently experienced anger as one of several simultaneous emotional responses to her mother's unpredictability. For example, in S34, during dialogue work, she is in touch with herself at around six years old. Speaking for the Child, she says, *"I am hurt and I am angry and I feel betrayed and alone"*. My empathizing with these feelings cleared the way for her to visualize the VCh who was experiencing this, and then to reach out to her. As described earlier, Linda saw this little girl coming to her, Adult Linda, burying her face against her body and holding her close. Here, although the anger is a phenomenologically distinct experience among the other emotions, it is part of an overall VCh experience which incorporates a range of emotions. It does not present itself as a separate AnCh mode.

By contrast, there is a distinctive AnCh response in S33 and S35, where Linda expresses to me her anger towards the students she shares a house with. There is an appropriate basis for this, as they are untidy, noisy, and had so alienated the landlady that she would not renew the lease for the next year. She also feels an envious anger because it seems unfair that, while she is working very hard, they are just coasting, sleeping late, going out in the evenings. This is classified as AnCh, because Linda cannot express this anger and feels helpless and trapped and this emotional pattern has its origin in how she was parented. Linda's parents were not able to attune to her responsively, and so she did not learn appropriate expression of these emotions. As she observed in S34, her anger at her mother *"got internalised and kept inside"*. There are two modes here. The one that suppressed the anger is an overcompensator (to be examined in the second paper). This part "[acted as if] *life is simple and easy and then she can just push stuff aside and carry on like ... you're not affected"*. In the second mode is a Child who is *"angry ... because she* [the overcompensator] *shouldn't be having all that fun. She should be serious and ... deal with the stuff"*. Here the anger of the AnCh is directed at Linda's own coping mode (the overcompensator) which is perpetuating the experience of being ignored and invalidated. So there are two phenomenologically distinct sources of anger, the first being anger at her mother, and the second being anger at her own coping mode.

This experience of anger, unexpressed due to helplessness, comes into focus in S40 during a psychodrama dialogue dramatizing her ongoing "*battle*" with her eating disordered mode, her Anorexic Overcontroller (A-OC), to be described in the second paper. At one point she says to the A-OC, "*You don't belong here ... You've had your time and your time is over*". This looks like HA, as there is firmness and anger in her voice. But she is also tearful and helpless – as the transcriber noted, "speaks forcefully and convincingly through tears". This is an interesting mixed state in which the helplessness and desperation of the VCh and HA assertiveness are present together. At a later point in the session, while being coached by me to confront the A-OC, she spontaneously blurts out, "*You're a liar!*" This is the painful emotional charge of the AnCh, subdued by helplessness, but breaking through this time, rather than the clear assertiveness of the HA mode.

In S35, Linda describes experiencing an undifferentiated and pervasive anger: "*I've been very bitter and very ... angry the last few days ... angry at the place and where I am and ... with people around me*". This pervasive anger results from a build-up of unexpressed AnCh anger, and she copes with it by withdrawing (see the second paper).

Another distinct experience is of a defiant, impulsive anger that Linda recognizes as contributing to her experience of craving and bingeing. As we look at her bingeing in S32, I ask, "Who wants to eat that stuff?" Linda replies, "*Angry Child*", and continues, "*She wants to have it her way when she wants it and ... probably to be noticed and ...*". When I ask her to sit in the Angry Child chair, Linda continues, "*I want to be noticed. And I want to do what I want, when I want and I don't want any rules ... I don't even want consequences ... I hate having to be responsible ... having to think of things in advance ... having to care for myself ... . And sometimes it's just too much of an effort*". She locates this around age five or six, "*just wanting ... time and attention and competing with my sister*". In S33, she makes the same connection. Earlier in her life she had been strong and determined: "*I had so much discipline at one stage*" (an overcompensator). But this conflicted with "*that little child who doesn't want rules ... doesn't even want responsibility, doesn't want to make decisions about the future or anything*".

Currently, when in this mode, she not only binges, but also eats non-diabetic foods which are a threat to her health. Although, in this session, Linda and I refer to the "Angry Child", this is phenomenologically distinct from the AnCh experiences referred to earlier. Rather than being primarily a response to mistreatment, the "I want it now!" quality suggests a very young child who has not learned to delay gratification. This mode is characterized by impulsivity ("I want it now"), along with recklessness (with respect to health consequences), anger, entitlement, and defiance, and might best be

called her Defiant Child (DefCh) mode. Linda's mode is similar to states described in the literature. Young et al.'s (2003, pp. 309-310) "Angry and Impulsive Child" also includes anger, impulsiveness and recklessness. In this mode, Linda is reckless in that she will eat non-diabetic foods which can harm her, but she is not "devaluing", "abusive", or "enraged", which are other features Young et al. have described. Lobbestael et al. (2007) also differentiate Angry, Enraged, Impulsive and Undisciplined Child modes. But Young et al.'s case examples, referred to above, as well as Linda's own experience, demonstrate that these various features do not necessarily separate out into phenomenologically discrete modes.

To summarize, four phenomenologically distinct experiences of anger in the Child were evident. Firstly, there was anger as one emotion among others in the VCh. Secondly, there were distinct AnCh experiences, which arose from schemas, memories of how Linda had felt as a child in response to perceived neglect or unfair treatment, and were directed at those people whom she perceived as mistreating her. Thirdly, her AnCh anger is directed at her own overcompensatory coping that suppressed her AnCh. Fourthly, there was the DefCh – impulsive, entitled, defiant and reckless. These were not the only experiences of anger that were identified. However, others are located in Parent modes, to be examined next, or in overcompensator modes, to be examined in the second paper.

Healthy Child
A healthy, adaptive Child mode has been variously named "Happy Child" (Young et al., 2003), "Playful Child" (Bernstein, de Vos, & van den Broek, 2009) and "Contented Child" (Rafaeli et al., 2011). Linda experienced such a mode on several occasions. In S28, she says, "*I feel like there's so much inside me to offer but she just can't get it out there or get people to see*". Here the "*so much inside me*" is referring to the healthy potential that has been hidden since childhood. As therapy progressed, she increasingly accessed this. In S32, during dialogue work, she says to the VCh, "*You have worth, ... you deserve ... to be heard and to be taken seriously, ... to be loved and ... to have fun – to be able to make a noise when you want to and not be yelled at for it, or be scared to have friends over and ... it's okay to be upset or ... confused and* [you] *don't have to think of everything all the time in advance and be so responsible*". When I suggested she tell her mother that she is a normal little girl with normal human feelings, she saw the girl standing taller, "*she even seems to grow up a little bit ... she's happy and ... can approach people and speak to them. ... she uses what she's good at and she works hard, but she has fun and she lets go of things*". These features all reflect the potential that can develop when the child's needs are met. In S34, when she says of the child that "*she's got so much to give*", she refers to another potential – to give and to care. This

freedom and spontaneity also generalize to her current life. In S35, she tells me how she said to her friend, "*I feel like watching this movie, do you want to go?*" Even though this keeps her up late, she is glad to have done it. She also accepted an invitation to an informal group lunch on the lawn.

The terms "Happy", "Playful" and "Contented" Child capture some of the qualities of these experiences, but Linda's spontaneity and self-confidence and her sense of being a real person with her own unique individuality are better captured by the term authenticity (Kernis & Goldman, 2006). I therefore prefer to call this mode the Authentic Child (AuthCh) (Edwards, 2012). This both includes the spontaneity and creativity of the "Free Child" of TA (Trautmann & Erskine, 1997) and resonates with terms from object relations theories such as Winnicott's (1965) "true self", which is attained by "unfreezing the authentic self" (Rubin, 1998, p. 97), and Summers's (1999, p. 69) "buried self" which is the source of the child's "authentic experience".

Dysfunctional Parent Modes

Dysfunctional Parent modes have their early origin in attitudes and demands directed at children by parents or various other authority figures. Linda had a particularly prominent Demanding Parent (DemP) voice. Above, we examined her sense of being a burden on her parents, which gave rise to a voice that demanded that she "*should*" be "*normal*", "*should not*" be causing trouble. Living with awareness of what others appear to require of her was a prominent experience for Linda. In the early sessions (S8-S13), while preparing for and writing exams, Linda frequently described the pressure of her parents' expectations. In S16, she said that she was "*tired of hiding, tired of putting up a facade, of meeting others' expectations*". The hospital psychologist's report had independently noted "her fears around disappointing her parents". The demanding quality is evident when, in S33, she expresses concern "*that I'm not spending enough time studying and that I waste a lot of my time, and that I'm not ... productive in my studying and I ... can't get the results that I should be getting or that are higher and worthwhile*". These are realistic concerns, in as far as a bursary award depends on her marks. But the implicit parental demand exacerbates Linda's sense of "*pressure ... from home just being a financial burden and I've got to do what I can to not be that burden*". In S35, there is a similar DemP voice, "*Your parents have to pay and medical aid has to pay ... why can't you just be healthy and normal and live this life that's fine and your parents don't have to keep paying for everything?*"

However, these voices also have punitive and critical features. Her question in S35, "*Why can't you just be healthy and normal?*" is self-critical and blaming. The punitive aspect is more explicit in S28, when she refers to her mother's "*quick tongue*" and when she speaks of

specific rules that were made, particularly by her mother, and how she would be in trouble if she broke them. She says, for example, "*If you ate stuff that shouldn't have been eaten because she* [my mother] *was going to use it for our next meal or, or – so many rules about stuff in the kitchen*". And, in S30, she recalls "*fear of not doing stuff right and getting into trouble all the time and getting scolded*", while, in dialogue work, in the HA role, she counters the Parent mode by telling the Child that she should "*be able to make a noise when you want to and not be yelled at for it, or be scared to have friends over*".

Although punitive and demanding aspects of parent voices are typically separated in the ST literature, they tend largely to be concurrent in Linda's experience. The example above from S30 illustrates this: the Child is scolded (Punitive) and gets into trouble (Guilt-Inducing) for breaking rules or doing things that her parents discourage such as making a noise or having friends over (Demanding). As Young et al. (2003, p. 277) observe, many individuals "have a combined Punitive and Demanding Parent mode, in which they set high standards for themselves and punish themselves when they fail to meet them". During the sessions, Linda and I referred to these Parent voices in ways that reflected this ambiguity, using the terms "Demanding Parent," "Punitive Parent" and "Critical Parent" to try to capture the quality of Linda's experience in the moment. In S33, I used the phrase "Demanding, Critical Parent" several times as I showed her cards on which the formal definitions of PunP and DemP modes were printed. At one point, Linda referred to her "*critical expectations side*". The term "Coercive Parent" might better capture the combination of these features.

Conclusion

For the most part, the distinctions between the different kinds of modes described in the schema therapy model fit with the phenomenology of Linda's experience in these sessions. Many of her experiences of emotional states in the present were found to link to implicit as well as explicit memories of her childhood, of herself as a child, and sometimes of specific childhood episodes that were distressing or overwhelming. This is the kind of experience that the terms VCh and AnCh refer to in the theory on which schema therapy is based. Similarly, the experiences of having to meet others' expectations, and to be at risk for criticism or anger if she failed, could be sourced to experiences of her parents. This fits with the theoretical claim that the Parent modes are introjects of the attitudes and behaviour of either parents or other authority figures which persist and are "played back" like a recording. However, rather than experiencing this as a specific memory of a parent making a demand or criticism, Linda experienced it as a felt sense (Gendlin, 1978), an embodied experience whose meaning could be uncovered through emotion focused investigation.

A similar in-depth examination of Linda's coping and Healthy Adult modes will be presented in the second paper (Edwards, 2017), as well as of several important superordinate themes that emerged from the analysis.

Further conclusions and implications for further research and the practice of therapy will be presented at the end of that paper.

Referencing Format

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About the Author
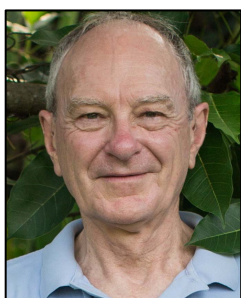
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Professor Edwards has over 100 academic publications in the form of journal papers and book chapters. These include several clinical case studies documenting the systematic treatment of conditions such as social anxiety, posttraumatic stress disorder, and disruptive behaviour problems. Several publications reflect his interest in case study methodology in the development of applied clinical science, and he is one of the editors of the recently published *Case Studies within Psychotherapy Trials: Integrating Qualitative and Quantitative Methods* (Oxford University Press). He has also written articles and book chapters on the history of imagery methods in psychotherapy and is the author, with Michael Jacobs, of *Conscious and Unconscious* in the series Core Concepts in Therapy (McGraw Hill, 2003). Many of David Edwards's publications are available in full text from his ResearchGate page at https://www.researchgate.net/profile/David_Edwards16/contributions

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Phenomenological Analysis of the Lived Experiences of Academics who Participated in the Professional Development Programme at an Open Distance Learning (ODL) University in South Africa

by **Anthony Kiryagana Isabirye and Mpine Makoe**

Abstract

Since online delivery of education has become a major approach to teaching in Open Distance Learning (ODL) institutions, it becomes critical to understand how academics learn to teach online. This study was designed to explore the lived experiences of academics who had participated in a professional development programme aimed at moving them from traditional distance teaching to online facilitation of learning. Giorgi's phenomenological psychological method was used to analyse and retrospectively examine the learning experiences of the participant academics in order to establish how they lived, behaved and experienced the training programme. The participants described their experiences in relation to distinct lived worlds that included the world in relation to self, others, time, and their environment. The academics' experiences and concerns provide insight into their skills development needs and the adequacy of the programme provided in addressing these and equipping academics for online teaching. The perspectives identified could serve to guide the development and promotion of professional development programmes for online teaching and learning.

Introduction

The proliferation of technologies has permeated every part of our lives, and the education sector is no different. With the incorporation of technologies into everyday teaching activities, it has become vital for Open Distance Learning (ODL) academics to acquire the necessary skills and knowledge to engage students in a technology-enriched environment (Jung, 2007; UNESCO, 2002). In this context, lecturers play a different role from those they are accustomed to in traditional print-based distance teaching. They thus require the relevant skills and know-ledge to design, co-ordinate and implement appropriate technology-enhanced teaching and learning programmes (Beetham & Sharpe, 2013; Laurillard, 2013; Tyner, 2014; Yang & Cornelious, 2005). In this technology-rich environment, the lecturer is expected to design relevant, interactive learning programmes and encourage students

to use technological tools to interact and collaborate with each other (Laurillard, 2013). To realise this, training of academics becomes a critical component of quality online teaching. The need for this is even more acute in distance learning, where there is a marked shortage of academics trained in the use of technology and Open Distance Learning (ODL) instructional strategies (Neo & Neo, 2001). A significant number of academics employed in ODL institutions are drawn from traditional sectors of education (Lockwood & Latchem, 2004). While some come from conventional universities, many have been working in a distance education environment for a long time. Despite their experience in the field, many of the latter group nevertheless cannot function effectively when faced with the task of using technology for the purposes of teaching and learning (Laurillard, 2013; Lockwood & Latchem, 2004).

The need for training of academics in ODL is dictated by the necessity to provide efficient, reliable and flexible technical and pedagogical support to distance students who study online. Such skills development is vital if academics are to keep up with evolving student needs and new ODL instructional strategies (Neo & Neo, 2001). The development of appropriate professional development programmes for academics is therefore a vital element in the survival and growth of distance education systems. Most institutions, including the University of South Africa (UNISA), the oldest and the largest ODL institution in Africa, are struggling to engage a significant number of students and staff in using technology for teaching and learning. At the same time, the few academics who are passionate about using technology in teaching are not appropriately trained, and nor are they self-motivated to bring about changes needed in learning delivery through online learning. This is further exacerbated by the fact that ODL students are physically and socially separated from their lecturers and their peers. This separation could compromise the quality of the education received if the lecturers are not professionally equipped to use the different teaching modalities. In general, academics in ODL institutions thus need training and assistance to enable the transition from print-based distance teaching to online teaching (Lockwood & Latchem, 2004; Taylor & McQuiggan, 2008; Wheeler, 2004). The justification for professional development is thus anchored in the need for the acquisition by academics of the skills and knowledge required to design, coordinate and implement academic teaching and learning programmes in the contemporary technology-rich ODL context (Lockwood & Latchem, 2004; Wheeler, 2004). To ensure that staff members are properly trained, UNISA management in 2011 recommended that academics should undergo mandatory training in the comprehensive use of the virtual learning environment (UNISA, 2011). Trained lecturers are bound to be confident when they use new methods of teaching and they are more likely to be innovative, with the further benefit that their students will also learn to be innovative (Neo & Neo, 2001; Weng & Tang, 2014).

The purpose of professional development in an educational environment is to change teaching approaches and practices. In higher education, a combination of innovation and technology can bring about positive change in terms of teaching and learning (Littlejohn & Pegler, 2015). Weurlander and Stenfors-Hayes (2008) found that medical lecturers who had participated in a professional development programme were not only equipped to use new teaching techniques or tools, but had also significantly changed their views on learning and what it meant to be a teacher. However, a number of studies on professional development initiatives in technology-enhanced teaching and learning found that many of the training programmes are deficient in terms of theoretical grounding, clarity of goals and acknow-

ledgement of context (Kearsley & Blomeyer, 2004; Laurillard, 2013; Taylor & McQuiggan, 2008). Instead, designers and implementers of professional development programmes tend to focus on individual features of an initiative, such as duration, format, and level of assessment, and in the process they ignore the critical link between theory and practice (Steinert et al., 2006). This is because many of these training programmes are in the form of seminars or workshops and are focused specifically on skill-based job-related training (Irani & Telg, 2002; Ramalibana, 2005; Taylor & McQuiggan, 2008). It has been observed that short, episodic and disconnected professional development programmes that are divorced from practice have little impact on teaching performance (Beetham & Sharpe, 2013; Kearsley & Blomeyer, 2004; Steinert et al., 2006).

Most research on professional development in education has focused on teacher development in conventional educational institutions. This has left academics in ODL struggling with a number of conceptual issues regarding the pedagogical strategies of teaching in an ODL environment and the facilitation of learning in the virtual environment. Since pedagogy is closely related to the technologies of teaching and learning, Beetham and Sharpe (2013) observe that the scope and style of teaching and learning tend to change as technologies change. Professional development for online teaching and learning should enable academics to acquire positive experiences in the process of learning how to teach in such an environment.

Soliciting information about their experiences is one way of finding out how academics experienced the world of training at UNISA. Human experiences, both negative and positive, can be used to inform professional development practice, according to Pajares (1992). The present study is accordingly designed to explore the lived experiences of academics who participated in the Virtual Learning Environment (VLE) training programme offered at UNISA. Giorgi's (1986) phenomenological psychological method was used to uncover how these academics experienced the training. Accessing the lived meaning of the academics' respective experiences of the VLE training programme required obtaining detailed descriptions that could only be elicited in sufficient depth and breadth by means of phenomenological methods.

Giorgi's Phenomenological Psychological Method

Central to Giorgi's phenomenological psychology is the lived experience of the individual as it is recalled to consciousness (Giorgi, 1986, 2009). In phenomenology, each distinct feature of the lifeworld comprises "the meaning of one element which is only understandable in relation to the situation as a whole" (Ashworth, 2003, p. 108). It is therefore important to point out that most human experiences depend on the meaning individuals attach to a situation. To obtain information about the

meaning UNISA academics attach to a Virtual Learning Environment training programme they participated in, face-to-face interviews were conducted with six UNISA academics. As emphasised by Giorgi (2009, p. 122), the aim of the data collection process was to elicit "as complete a description as possible of the experience that a participant has lived through". The interviews not only yielded detailed information about the participants' experiences, but allowed for spontaneous responses to reveal the natural feelings, behaviour and attitudes of the participants (Giorgi, 2009). The interviews were audio-recorded, transcribed verbatim, and code-named L1 to L6 in accordance with the order in which each lecturer was interviewed.

The research process in phenomenological psychology has four distinctive characteristics: (i) it is descriptive, (ii) it uses reduction, (iii) it looks for essences, and (iv) it focuses on intentionality (Giorgi, 1986). In analysing the data, we had to follow the naïve descriptions as given by the academics while taking into consideration the context in which their lived experiences were described (Giorgi, 1986; Giorgi & Giorgi, 2003). Secondly, as researchers, we had to ensure phenomenological reduction by bracketing all our preconceived notions and prejudices about professional development at UNISA. Reduction in Giorgi's analysis relates to the ideal of the researcher being open to taking the meaning of any experience exactly as it appears in the consciousness of the other. With regard to the essences, we looked for those unchanging characteristics of the phenomenon being investigated and, thus, for the essential qualities of the academics' experience of professional development as embedded in their consciousness, which is referred to as intentionality (De Castro, 2003; Giorgi, 1986). This fourth characteristic of phenomenology "refers to the intentional act by which every human being is related to the world and objects" (De Castro, 2003, p. 50).

Analytical Procedures

In light of the fact that individuals' lived experiences are closely related to their background, culture and history, noting the participants' respective backgrounds and professional contexts enabled the data to be situated appropriately (Van Manen, 1990). Data analysis in Giorgi's (1986) phenomenological psychological method is oriented towards capturing as closely as possible the manner in which the phenomenon under investigation has been experienced by the participants (Giorgi, 1986; Giorgi & Giorgi, 2003). This entails a rigorous step by step procedure whereby the raw data is segmented into units of meaning, restructured in terms of meaning clusters, translated into scientific language consistent with their central meaning, and the constituent themes common to all the participants' accounts eventually synthesised into a coherent description of the structure of the experience investigated.

L1's protocol will be used to illustrate how the data was processed using Giorgi's method of analysis.

> A black woman in her late 30s, L1 held a master's degree in accounting and worked as a full-time lecturer at a traditional university, although she also lectured part-time at the University of South Africa. Despite having obtained a master's degree through distance education, she had never experienced teaching through distance education until she was appointed as a part-time e-tutor. Her primary role as an e-tutor is to facilitate and support online teaching and learning. To equip her for this new role, she was required to undergo a two-week course of training to teach online. At the time of the interview, L1 had been engaged in teaching online for a period of seven months. Talking about her experiences, L1 conveyed her appreciation that she had been exposed to a programme designed to enable her to teach electronically from a distance.

Step 1: Getting to Know the Data
The starting point of Giorgi's method of analysis is to listen to the recordings (or read the transcripts) of the interviews several times in order to familiarise oneself with the data. This process enables researchers to get a global sense of all the transcripts and to understand the meaning of the experience from the respondents' points of view (De Castro, 2003) To ensure that researchers viewed the experience through the respondents' lenses, they had to assume a "phenomenological attitude" (Giorgi, 2009). This implied that we "bracket" our personal views on and knowledge about professional development programmes at UNISA and suspend any preconceptions or prejudices in order to allow us to be open to the phenomenon as experienced by the participants and see it afresh through their lenses.

Step 2: Identifying Meaning Units
The general sense that was grasped after reading the transcripts in the first phase of analysis was not interrogated, since this merely served as a basis for the second step (Giorgi, 1986). In this step, Giorgi suggests that the whole description should be broken into its constituent parts. The process of delineating parts is referred to as identifying meaning units. The meaning units express distinct aspects of the participant's experience and each only becomes meaningful in relation to the overall meaning structure (Ratner, 2001). A unit of meaning consists of "those words, phrases, non-verbal or para-linguistic communication which express a unique and coherent meaning ... clearly differentiated from that which precedes and follows" (Hycner, 1985, p. 282). During this stage, it is important to ensure that the identified meaning units are not interrogated in any way, as the aim is to accept the phenomenon as described (Giorgi, 1986).

Example of Meaning Units from Transcript L1

1. We went to UNISA to be trained to teach online/
2. During the first session we were supposed to familiarise ourselves with e-learning/
3. We were told how important e-learning is in a distance education environment/
4. We were told how important it was to use 'myUnisa' as a tool to facilitate online learning/
5. and the importance of facilitating learning in a more authentic, collaborative and inter-active way/
6. We were told that this was possible if we made use of 'myUnisa'/
7. The facilitators also wanted to find out our knowledge and skills with regard to the use of technology to facilitate learning/
8. It was really a good experience for me/

Step 3: Re-Grouping Meaning Units in Clusters

This phase was vital for gaining a fuller understanding of what the respondents had said by identifying units that were relevant to the study and building a coherent structure of the meaning of their experiences. What we looked for in the meaning units was the lived nature of the constituents of each participant's experience and the interrelationship between those constituents (Giorgi, 1989). Constituents that were found to be relevant were regrouped according to their intertwining meanings so that they could express the participants' lived experience more fully (Giorgi, 2009; Wertz, 1985). Ratner (2001) argues that this process usually includes the context, the discourse and certain background knowledge that makes the utterances identifiable. Giorgi and Giorgi (2003) posit that unearthing meanings that may not have been explicitly expressed by the respondents but can be intuited in their utterances enables richer description of the nuances of the participants' lived experiences.

At this point, the psychological intentions contained in the constituent meaning clusters of the participants' descriptions of their lived experience were developed (Giorgi, 1986, 1989; Ratner, 2001). This step involved the transformation of the participant's own first person expression into appropriate scientific language in the third person (Giorgi, 1989, p. 73).

> When L1 expressed in unit 162 that *"some of us had to overcome the fear of using technology"*, the unit was elaborated and rephrased as, *"She felt that she had needed more time in the training since she had to overcome her anxiety and fear before proper training could start"*.

Step 4: Transformation of the Meaning Units into Descriptive Expressions

As a continuation of the previous step, this step similarly involves understanding, judgments of relevance, and coherent organising of the constituents of the experience described. As such, it draws implicitly on the special interest of the researcher (Wertz, 1985) and requires that the elaborated meanings that emerged be expressed with "heightened psychological sensitivity with respect to the phenomenon under study" (Giorgi & Giorgi, 2003, p. 253). This step yields individual descriptions which serve as the basis of further analysis. However, to the extent that this process is essentially subjective, there are no categorically right or wrong formulations.

Below is the idiographic analysis of L1's descriptive account when she was asked about her experience of the professional development programme:

Idiographic Analysis of L1

L1 indicated that they were invited to attend a course in which they were **introduced to teaching online**. She reveals that, as a lecturer who was attached to a residential university, this course introduced her to teaching online. Through **exposure to practical** (authentic learning) activities she was equipped with the essential **knowledge and skills** required to teach online. She noted, however, that the training had its **anxious moments**. As a first-time user of computers for online teaching, L1 explained that she many a time experienced a **fear of technology** since she had to upload information on the internet.

It is through this process that themes were identified from each participant and then clustered into a number of general themes that appeared to be common to all the participants' descriptions (Pietersen, 2002). Common themes reflect the general experience of the phenomenon by the participants and are condusive to generalisation.

Step 5: Synthesis and Integration

Once the psychological structure of each description had been identified, the researchers identified statements that could be taken as true in most cases. Even though individuals have uniquely distinctive social experiences, when bound together in a particular context they are likely to share certain practices, perspectives and values (Ratner, 2001). It is during this phase that protocols which had something in common with each other were compared to establish the similarities and differences in meaning constituents (De Castro, 2003). Achieving universality beyond individual cases entailed examining all relevant possible variations of the academics' staff development experiences and views. Consequently it was possible to link identified themes to meaning units.

Existential Themes

Since there are no definitively clear ways of identifying phenomenological themes, all the general themes that emerged were grouped in accordance with Van Manen's (1990) four fundamental existential themes, namely *lived space* (spatiality), *lived body* (corporeality), *lived time* (temporality), and *lived human relation* (relationality or communality). Van Manen (1990) argues that these existential themes run across all individual lifeworlds irrespective of their particular historical, cultural or social situatedness. This is vital procedurally to the focus of phenomenology on perceiving the pattern of the lived experience of any given phenomenon. Ashworth (2003, p. 147) proposes several universal categories of lived experience he terms "fragments" (in that they "together do not yet constitute a full account of the essence of the lifeworld"), and suggests that these fragments not only enable "the detailed description of a given lifeworld", but that the study of any given lifeworld would "be enriched by analysis in terms of these parameters". He cautions, however, that these parameters should not be used as a kind of checklist, since such an approach may compromise the phenomenological attitude by pre-supposing an interpretative framework (Ashworth, 2003). In order to give a trustworthy account of the academics' lived experiences, it is of primary importance that the analysis remain faithful to the thematic meanings that emerged from the subjects' own accounts (Ratner, 2001).

The Lived-Space (Spatiality) Experiences
In phenomenology, lived space refers to a physical environmental locus that brings human experiences, actions and meanings together spatially (Ashworth, 2003; Seamon, 2013). Academics' interactions within the physical space constituting the training centre's lived space entailed the trainees' "moving" in training sessions. Through interaction among the participants and the trainers, the training resources in the training sessions, and the physical space, as provided for the purpose by the university, the individual trainees were oriented to online training, thereby making it possible for them to acquire the requisite skills and knowledge to teach online.

Orientation in the training space provided participants with opportunities to participate in practical development sessions. Participants reported that their initial training exposed them to a variety of skills and teaching approaches including the construction of authentic experiential tasks and doing assessment online. These practical experiences took the form of authentic learning tasks such as developing and recording audio podcasts, as well as editing and uploading the audio podcasts using Audacity software and the 'myUnisa' podcast server. These practical training sessions equipped the academics with the cognitive, affective and psychomotor skills and knowledge required to use online tools. Ashworth (2003) and Van Manen (1990) point out that experiential space is of great importance, since it is a rich source of information from which a particular experience derives its quality of meaning.

The Lived-Body (Corporeality) Experiences
While the lived space had to do with the experience of the physical places of training, the lived body had to do with the participants' bodily contained, enabled and enacted experience of their own subjectivity and its possibilities in the form of embodied practical and emotional experiences (De Castro, 2003; Van Manen, 1990). Phenomenologists perceive the body as linking individuals to the social and material world, and, as the locus of consciousness, as the primary medium of learning and knowing (Seamon, 2013; Yakhlef, 2010). The lived-body experiences of the academics in this study were characterised by their acquisition of online teaching skills and knowledge, their perceptions about online learning as a delivery method in ODL, and their experiences of learning. All of them were exposed to authentic online learning, which enabled them actively and collaboratively to work together. Even though the participants reported that they had learnt a great deal from the course, those who were uncomfortable using technology experienced technophobia, anxiety, and fear of failure. Indeed, several of the participants revealed that they would have preferred the organisers to have conducted a skills audit to establish the students' technology skill competencies before the start of the training programme. It was felt that this would have prevented their feeling inadequate and "being ashamed" in the presence of their colleagues.

While participation as a bodily practice has been given little attention in the course of exploring professional development and knowing processes (Yakhlef, 2010), it is through active participation that individuals moved from being merely observers of what occurs in their communities to becoming fully involved in the training programme. Through this process, they were able to construct their own identities as transitioning from novices to proficient users of technology in teaching. They mapped out the processes involved in the units that were to be taught – in the form of organised sketches (storyboard) – before uploading the sketches online. The online designs were then tested, reviewed, and adjusted as needed. Participants revealed that they were able to evaluate themselves, while at the same time developing their own ability to facilitate online learning. However, they were concerned that the intervention lacked a mechanism for ascertaining whether they had learnt the skills they were supposed to. Moreover, the participants would have preferred to have had more subject content in the training intervention, to improve and deepen their existing knowledge.

The Lived-Time (Temporality) Experiences
In describing their lived-time experience of the training programme, reference was made to the time required

for participants to accomplish their practical training and enable them to master the online teaching skills, as well as their need for interaction and engagement with each other during the process of staff development (McLoughlin & Oliver, 2000). Whilst the UNISA staff development programme was presented over a period of only two weeks, all participants reported that the short duration of the training intervention acted as an obstacle to their expected change. The participants would have preferred a longer period for the intervention as a whole and additional follow-up sessions as a support mechanism. In particular, they pointed out that they should have been given more time during the orientation phase in order to carry out practical exercises and learn more about the technology. These findings confirm the thrust of Ely's (1990) framework of staff development, which advocates long periods of time and continuity if an intervention is to yield the intended outcomes.

While participants in the present study perceived the facilitator's teaching orientation as a major determinant of the effectiveness of any staff development intervention, they also pointed to the significance of the duration of the orientation period, which they had all experienced as impeding effectiveness by being too short. They perceived the programme as being conducted as a finite process as opposed to a continuous learning process in which they would be continuously supported and supervised, stimulated and empowered to enable them increasingly effectively to incorporate e-teaching skills into their own tertiary-level teaching routine. The participants indicated that a longer training intervention would have enabled quality orientation, better training and learning, and improved performance.

The Lived-Relational (Communality) Experiences
The participants' lived-relational experiences manifested in their relationship with their facilitator and amongst themselves, as well as in their expressed need for a supportive environment. During their training, they met and interacted with facilitators and colleagues. However, they felt the need to relate to and engage with each other through follow up sessions, community of practice groups and supportive environments. Participants noted the need for a positive and supportive Virtual Learning Environment (VLE). To ensure that participants have such an environment, the facilitator should be able to implement and facilitate a collaborative, problem-based dynamic, and promote self-directed learning (Laurillard, 2013; McLoughlin & Oliver, 2000; Tyner, 2014). As noted by Erasmus and colleagues (2012), effective professional development programmes are guided by facilitators with knowledge of and skills in group processes and dynamics, as well as knowledge of how different people learn. The presence of these features will not only help trainees to overcome their initial difficulties in the training programme, but they will also induce motivation for transformation (Erasmus, Loedolff, Mda, & Nel, 2012).

Most participants were concerned that they had attended a single training session in an entire year, after which they were expected to implement what they had learnt on their own. They indicated that, due to the absence of follow-up sessions, they did not have an opportunity to hear real-life stories concerning the challenges and successes of their colleagues and to share and reflect on their own experiences. This consequently denied them the much-needed support from colleagues that could enhance learning, help them hone the acquired online teaching skills, and address any challenges they might experience. Sharing their experiences would also enable them to assess the adequacy of their progress with regard to the implementation of their newly acquired skills, and to judge whether these were having the desired impact on their practice. Although participants practised the learning activities through collaboration and team work, they felt that they would have liked to work with people in their own subject areas. This way they would be able to interact regularly, share resources and help each other to improve their online teaching practice in their mutual academic field.

Implications for Practice

Giorgi's phenomenological approach provided a useful perspective that helped illuminate some of the most critical issues that may assist professional development programme designers and facilitators to improve the way they provide training. The lived experiences of the academics provided useful insights that could be used to improve and promote the VLE training programme. The findings suggest that time is a crucial factor in ensuring the effective implementation of the programme. Being introduced and exposed to authentic learning was also reported as a positive experience that needs to be incorporated in the VLE training programme. Professional development experiences not only promote knowledge and skills acquisition, but are also instrumental in building social support and relationships with fellow academics (McLoughlin & Oliver, 2000; Neo & Neo, 2001; Tam, 2015). It is upon such relationships that future professional growth and collaboration among the academics could be built. This is particularly important in relation to the academics' concern that the training intervention focused exclusively on online learning delivery methods and neglected to relate these to subject content. It was therefore felt to be important that subject content and methods of teaching online be given equal attention in the training programme.

For a successful professional development programme to take place, all the phases, including the orientation, the learning and the performance phase, need to be given enough time, since change does not occur overnight. It became evident that time as a factor should be apportioned to the entire training session, as it was observed that a week or two is not enough to master the techniques of online teaching and learning. Over-

coming the initial fear of technology and executing the authentic learning tasks requires additional effort and time (Dori & Herscovitz, 2005). For academics to adopt online teaching, they need more than just some quick exposure to the training programme. They need time to master the skills taught, and they also need time to successfully learn, experiment, adapt and reflect on their teaching practice in an online environment. It is also believed that, if the programme extends over a longer period of time, socialisation among academics will be encouraged, which has the potential to create a permanent support base even after completion of the training (Ely, 1990; Tam, 2015). Changing academics' instructional methods requires a longer period of time and continuity if training is to achieve the intended outcomes (Dori & Herscovitz, 2005; Ely, 1990). In sum, professional development needs to be envisaged as a continuous lifelong process in which participants are supported and supervised, stimulated and empowered in a manner that enables them to incorporate skills, knowledge and values to enhance innovative teaching and learning (Collins, 2004; Hemmington, 2009; Leu & Ginsburg, 2011).

The success of professional development depends on a supportive context that involves the entire university – its managers, academics, students, professional and administrative staff (Collins, 2004; Leu & Ginsburg, 2011). A supportive university environment in the form of its policies should acknowledge the importance of professional development; and managers should act as champions of professional development because they have the authority to influence change (Hemmington, 1999; Leu & Ginsburg, 2011; Ramalibana, 2005). The findings suggest that professional development should be planned and implemented in such a way that it empowers academics with technical, pedagogical and transformation skills (Gulamhussein, 2013; Wheeler, 2004). Leu and Ginsburg (2011) maintain that incorporating a pedagogical aspect in the design of a staff

development programme acts as a bridge between the academics' knowledge of the subject matter and their knowledge and skill in planning and managing their interactions with the students in ways that facilitate learning.

The ultimate objective of academic staff development is to enhance quality student learning. The improvement in the teacher's knowledge and skills is closely related to student attainment (Darling-Hammond, 1994; OECD, 2009). Academics' professional development is thus inextricably linked to their professional performance and daily practice, which in turn influences students' performance (Desimone, 2009; OECD, 2009). It is in this respect that tertiary institutions can therefore be said to have a responsibility to their students to plan and implement professional development programmes to steer academics through the complexities of teaching and learning, recognising that these require a lifelong learning perspective in order to enable academics to adapt to rapid changes and evolving constraints and needs (Gulamhussein, 2013).

It is therefore imperative that the university hierarchy view professional development as an integral component of academics' work which they need to be involved in throughout their careers. What emerged in this study is that academics' experiences and perceptions of the VLE training programme were shaped in relation to their own hopes, frustrations, intentions and histories. The context and circumstances of the individual's life thus influenced his or her understanding of the lived meaning of the phenomenon of learning in the setting of a mandatory professional development programme. The participants' experiences contributed significantly to gaining understanding of their professional development journey and how particular aspects of the training could be improved, and could be of use generally in guiding the development and promotion of both effective and sustainable professional development programmes.

Referencing Format

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Insights on the Process of Using Interpretive Phenomenological Analysis in a Sport Coaching Research Project

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Abstract

Interpretative Phenomenological Analysis (IPA) is a qualitative research methodology used to understand participants' subjective realities through personal interpretations of their lived experiences and the meanings they attach to these experiences (Smith, 2011). IPA has been used predominantly in health psychology, with rising interest within the field of sport psychology and coaching. This article seeks to describe insights about the processes of IPA by a research team using the methodological approach for the first time. These experiences are shared against the backdrop of research exploring the lived experiences of Masters athletes within the context of coached competitive swim programs. We describe how the multiple facets of IPA influence the refinement of the research question, the planning and implementation of data collection, and data analysis and interpretation. We elaborate on our perceptions of the complexities of IPA and make recommendations for how future research teams might smoothly navigate the rigorous research process to yield rich in-depth data and interpretations.

Keywords

IPA, Qualitative Research Methodology, Sport Coaching, Data Collection, Individual Level Analysis, Group Level Analysis

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Interpretative Phenomenological Analysis (IPA) is a qualitative research methodology used to understand participants' subjective realities through personal interpretations of their lived experiences and the meanings they attach to these experiences (Smith, 2011). IPA has been used predominantly in health psychology, with rising interest within the field of sport psychology and coaching. This article seeks to describe insights about the processes of IPA by a research team using the methodological approach for the first time. These experiences are shared against the backdrop of research exploring the lived experiences of Masters athletes within the context of coached competitive swim programs. We describe how the multiple facets of IPA influence the refinement of the research question, the planning and implementation of data collection, and data analysis and interpretation. We elaborate on our perceptions of the complexities of IPA and make recommendations for how future research teams might smoothly navigate the rigorous research process to yield rich in-depth data and interpretations. Keywords: IPA, Qualitative Research Methodology, Sport Coaching, Data Collection, Individual Level Analysis, Group Level Analysis.

Interpretative Phenomenological Analysis (IPA) is a qualitative approach to understanding participants' lived experiences in order to describe what a topic is like for them within a specific context (Larkin, Watts, & Clifton, 2008; Smith, 2004). However, IPA extends simple description and makes sense of participants' lived experiences by developing an interpretative analysis of the description in relation to social, cultural, and theoretical contexts. Thus, the analyst offers "an interpretative account of what it means for the participant to have such concerns within their particular context" (Larkin et al., 2008, p. 113). Insights and lessons learned about processes involved in IPA by a group of researchers exploring lived experiences of Masters athletes within coached environments may help advance this methodology within our field of research.

Using Interpretative Phenomenological Analysis

IPA is informed by three key positions: phenomenology, hermeneutics, and idiography (Smith, Flowers, & Larkin, 2013). Phenomenology describes the "what" and "how" of individuals' experienced phenomena, develops descriptions of the essences of experiences, but does not explain or analyze descriptions (Creswell, 2013). Hermeneutics is a theory of interpretation concerning textual meaning, as in the techniques used in speaking and writing that divulge the intentions and context of the speaker/writer (Smith et al., 2013). Finally, idiography relates to details and thorough analysis of small cases, which differs from mainstream psychologocial studies that are nomothetic in nature (Smith et al., 2013).

Smith (2004), a pioneer in IPA research in health psychology, noted that four key characteristics of IPA research stem from the three positions noted above. Firstly, IPA is idiographic because a detailed analysis of one case occurs before moving onto the next. Secondly, IPA is inductive, meaning research questions are broadly constructed to allow for unanticipated themes to emerge. Interplay between induction and deduction in data analysis may exist; however the inductive approach takes precedence. Thirdly, results are discussed using existing literature, creating an interrogative element. Finally, IPA researchers are influenced by their biographical backgrounds and knowledge of extant literature and must interpret data through their own lens when developing themes (Smith, 2004).

Larkin and colleagues (2008) recommend that researchers be open to adjusting their ideas and responsive to interpretations of data based on participants' responses. Researchers should understand that participants' experiences are within a specific context, which relates the person to the phenomena at hand (person-in-context) (Larkin et al., 2008). Aligning with an interpretative tradition, IPA includes a double hermeneutic: the researcher tries to make sense of the participant trying to make sense of their experiences (Smith, 2004; 2011). Readers interested in knowing more about the philosophical underpinnings and history of IPA development are referred to Smith (1996) and Smith and colleagues (2013).

Smith (2011) developed guidelines for judging the quality of IPA studies. He noted that IPA studies should have a clear focus that provides detail of a particular topic, the analysis should be descriptive and interpretative and include both convergence and divergence in themes, and papers should be carefully written to account for these guidelines. Although helpful, these guidelines specifically aid with assessing *products* of IPA research, and can only provide indirect judgment on the *process* of research (Smith, 2011). The process of IPA research, especially with regards to research in sport psychology and coaching, has not been clearly explored.

Interpretative Phenomenological Analysis in Sport Studies

In a critical analysis of 293 IPA studies in health psychology between 1996 and 2008, Smith (2011) found only seven sport and exercise related studies using IPA methodology. Since then, several IPA studies in sport psychology and sport coaching have been published (e.g., Caron, Bloom, Johnston, & Sabiston, 2013; Levy, Polman, & Nicholls, 2009; McDonough, Sabiston, & Ullrich-French, 2011; Tamminen, Holt, & Kacey, 2013; Tawse, Bloom, Sabiston, & Reid, 2012). These studies varied in purpose. In each article, authors briefly described multiple steps in the analysis process that enabled them to create themes, explore convergence and divergence in participants' data, and develop interpretations. The difficulties encountered in the process were not described, thus, the reader is left with a series of somewhat similar steps of gathering and analyzing data (albeit some incongruency as well) and questions regarding the effort of using the methodology. Giorgi (2011) criticized Smith's methodological procedures in IPA since "IPA's hesitation to claim fixed methods makes the possibility of replication of IPA studies impossible" (p. 195). While we are not suggesting methods need to be fixed, a more detailed account of processes involved in IPA by a team of researchers would enable first-time users of this approach to gain a deeper understanding of the basic steps and challenges involved.

To elaborate on the processes used by the five studies in sport psychology and coaching, data analysis began in all cases with analysis of each participant's transcript. Most papers noted that the primary researcher kept a reflective journal. In certain studies, one author did the complete analysis while co-authors became involved at a broader level (i.e., deciding what categories were included into themes or classifying themes of each athlete into groups of collective themes; Caron et al., 2013; McDonough et al., 2011; Tawse et al., 2012). In another

study, researchers used peer debriefing by having both second and third authors independently conduct IPA analyses on all transcripts (Levy et al., 2009), but descriptions of how this was accomplished were vague.

Use of IPA methodology in sport psychology and coaching appears to be on the rise. Still, there has been little exploration of the actual process of conducting IPA in new domains. The lack of transparency of the process, perhaps due to space restrictions in published manuscripts, leaves other researchers unsure of the mechanics for using this methodology within sport psychology and coaching research, especially when in research teams. It is not always clear that the citations included in these manuscripts (e.g., Smith et al., 2013) are meant to substitute the explanation of their individualized processes of IPA. Therefore, the purpose of this paper is to describe insights and lessons learned about the processes involved in IPA by a research team using the methodological approach for the first time. These experiences are shared against the backdrop of research using IPA to explore lived experiences of Masters athletes (i.e., older adult athletes, all over 45 years-old) within the context of coached competitive swim programs. We elaborate on our team's experiences navigating steps of the research process, beginning with the identification of our research question and ending with data analysis. We offer general insight on using IPA while providing recommendations for other research groups considering IPA. Team-based or consensual qualitative research has been examined elsewhere (e.g., Guest & MacQueen, 2008; Hill et al., 2005), but not within IPA research. This paper is not meant to be a matter-of-fact guide on how research groups may conduct IPA in the sport psychology and coaching domain, rather we hope that sharing our experiences might be viewed as our introspection on using IPA. Further, readers might find our sharing informative and illustrative of our concerted efforts using this methodology for the first time.

This paper is timely on a professional level as our team's doctoral student researcher presented our methodological steps and recommendations at a conference (Rathwell, Callary, & Young, 2014) and received many questions and feedback from students and professors alike who were interested to know more about the process of using IPA, its challenges and remunerations. Consequentially, the doctoral student researcher wrote a reflection on his presentation and the questions asked. The doctoral student researcher's reflections, presented as quotes, are used to scaffold discussion throughout this paper. Deliberations and introspections by all three team members on the mechanics of how we employed IPA became integral to our discussion.

Our Experience

Preparing the IPA Study

Our team discovered IPA while developing research questions and seeking an approach to best answer them. Grounded theory and phenomenology were originally researched, but we wanted a methodology for interpreting meaning from experience. As we read further into IPA, the scope of the approach helped refine our research questions, participant selection criteria, and method of data collection. Our research question changed from:

    a) From the perspectives of sport participants, what are the psycho-social particularities of coaching older adults?

to:

b) What are the lived experiences of older adult athletes with coaches, and how does this translate into understanding what they need and want from their coaches?

While this interrogative shift may appear minor, it created an emphasis on the lived experiences of participants, framed broadly and openly, further encouraging us to explore how participants perceive their situations (Smith & Osborn, 2003), which enabled us to clarify our selection criteria when recruiting participants.

Typically, IPA involves detailed analysis of verbatim accounts of a small number of participants (typically under 10), usually through semi-structured interviews (Larken et al., 2008; Smith, 2004). IPA researchers are interested in relatively small sample sizes so they can explore each case with the necessary time, energy, and rigour required for this type of analysis (Smith & Osborn, 2003). Purposive sampling techniques ensure a homogenous sample of participants with common characteristics and experiences (Smith & Osborn, 2003). We included 10 participants in our study and strove for a degree of uniformity across cases, whereby all athletes were between 45 and 65 years of age, from one sport (swimming), and had a competitive focus. To ensure these criteria were met, we created a screening page that was delivered with the recruitment text given to athletes. Only athletes who fit the screening criteria and expressed interest were selected. Apart from age and sport qualifications, participants' were screened to ensure they were registered for competitions, trained for competitions with registered coaches, and believed training was integral for success in competitions.

Next, we needed to develop our semi-structured interview guide. We feel there is value in sharing the evolution of our guide as this was not described in any IPA article we have read. Here we encountered our first challenge of using IPA. While developing this guide, it became clear that each member of our research team had various experiences that influenced the types of questions we wanted to ask. For example, the first author had a background in qualitative research in coach development and lifelong learning; the second author focused his research in coaching leadership behaviours; and the third author had a relatively quantitative research portfolio, especially focusing on Masters athletes and understanding coaching effectiveness. For this reason, as the principle investigator, I suggested we each reflect on this topic and write about our own experiences, assumptions, and biases as a bracketing exercise. Indeed, researchers have motives and biases based on their own biographies and contextual experiences (Fontana & Frey, 2005), and it was deemed important to our research team to explore these motives and understand their impact.

Moustakas (1994) suggests *bracketing* allows researchers to set aside their experiences and take a fresh perspective. Assumptions and implications should be clear and explicit when interpreting data in IPA studies (Chamberlain, 2013). However, Allen-Collinson (2009) noted it is impossible to bracket one's biases completely, but the process allows researchers to suspend their assumptions and "adopt a more self-critical and reflective approach in research" (p. 286). We did not want to suspend our biases from the research (bracketing out biases), as IPA includes an interpretative element. Instead, we wanted to understand how our taken-for-granted assumptions about the topic might inform our approaches (bracketing in biases).

We answered the following questions, in approximately five pages double-spaced per researcher: "What are my beliefs about coaches? How have my previous experiences shaped these beliefs? What are my beliefs about Masters athletes and how they train, or their coaching needs? Why do I think that?" Before writing, as recommended by Moon (2006), we looked over the questions and reflected on them. After reflecting, we wrote our personal experiences regarding the questions, left them for a few days, and finally reflected on our reflection. In this way, we deepened our reflection on the topic (Moon, 2006). We also explored each of our

methodological research backgrounds to further understand our epistemological approaches and clarify how we wanted to proceed with this study. By bracketing our experiences, we showcased potential biases that shaped our interpretation of the data, but were also able to bracket in how our experiences might enrich the interpretations. We recommend this bracketing exercise as it was an essential tool used in multiple stages of our research project.

After we bracketed our experiences and beliefs, we resumed our task of developing and refining our semi-structured interview guide. While all members of our research team took part in creating the guide, we first invited our doctoral student researcher to independently think of questions to help him learn how to strategically ask questions based on the study's purpose and methodology. When considering the construction of an interview guide, Smith and Osborn (2003) recommend exploring broad areas and then sequencing the guide so that it covers the most sensitive topics later in the interview. By doing so, researchers have time to build rapport with participants so that they feel comfortable speaking in depth about the most pertinent subjects. Akin to Tawse et al.'s (2012) approach, we constructed open-ended questions with prompts to help trigger participants' specific experiences related to each research question. "Good interview technique therefore often involves a gentle nudge from the interviewer rather than being too explicit" (Smith & Osborn, 2003, p. 61). As the doctoral student researcher on our team noted:

> A particular challenge that I faced was to create questions that were phrased in a fashion to capture subjective realities of the participants without pushing my agenda. For example, when I first sat down and was staring at a blank paper, my thought was to ask, "What coach behaviours are important to you?" Upon reflecting on this question and consulting my bracketing document, I noticed that this question was riddled with my biases from my prior research on coaches' leadership behaviours and was not phrased in an appropriate manner to capture our participants' subjective realities. As such, I revisited my questions and re-structured them in a way that was better suited for IPA research.

Examples of these refined questions were: "What does having a coach mean to you?" and "What is important to you about having a coach?" We note that it is important when constructing an interview guide that researchers should always question the integrity of their interview questions by referring back to their bracketing document. Further, it is ethically important to phrase questions in a manner that is not leading and that is open to participants' ideas of what is most important (Callary, 2013).

Collecting Rich and Personal Data on Participants' Lived Experiences

We invested significant time constructing our interview guide to ensure that the wording and sequence of questions were well constructed. Despite feeling confident collecting data, interviews did not originally go exactly as planned. As the doctoral researcher noted:

> At the beginning of my first interview, I soon realized that all the participant was speaking about was broad, group-based, hypothetical accounts. I became aware very quickly that acquiring the type of accounts that are needed for IPA would require some work.

Fortunately, we had identified potential probes that would facilitate the procurement of lived experiences and the meanings participants attributed to them. Smith and Osborn (2003) discuss

funneling, a technique to go from a respondent's general views about a topic to more specific experiences. Utilizing probes, the student noted:

> I was able to construct a three-step process that salvaged the interview and resulted in the acquisition of very rich data to work with. The three-step process adhered to the following sequence: (1) personalize, (2) understand meaning, and (3) acquire lived experience.

For example, the researcher asked a participant, "What does having a coach mean to you?" A typical answer would be, "Oh, you know us Masters athletes, we just want someone who makes us feel confident." This answer did not capture a lived experience, nor was it personal or specific, but a comment about the broader cohort. To personalize the response, a funneling probe ensued, "I am understanding that feeling confident is something that most Masters athletes want. Is this something that *you* want?" The participant would reply, "Oh yes, it is incredibly important to me that my coach makes me feel confident." To understand the meaning of the experience or phenomenon, the researcher asked the participant next, "Can you describe what you mean when you say 'feeling confident'?" The participant would reply, "Feeling confident for me is to know that my coach believes in me and that I can accomplish what I set my mind to as long as I put in the effort." Still, there remained a final step which involved eliciting an example from the participant by asking, "Can you give me an example of when you felt your coach believed in you, and that made you feel like you could accomplish a goal within the context of Masters swimming?" At this point, the participant would provide a lived experience that profoundly exemplified their original answer. This process helped facilitate the discussion to reach a deeper, personal level of description and illustration.

We used another strategy to ensure rich and personal information by prompting participants ahead of their interview about the importance of discussing their personal experiences. The researcher instructed, "I want you to understand the point of this interview is to capture your specific lived experiences; therefore I am going to encourage you to use 'I' statements instead of 'we' statements. This is your time to speak about your own experiences, wants, and needs without having to consider others."

Data collection continued smoothly with 10 participants, with each interview lasting approximately one hour. We collected a total of 140 single spaced pages of transcripts. Individual transcripts were sent to each participant to confirm that they faithfully represented the conversation. No participants indicated problems with transcripts.

Analyzing the Data

The analysis of our qualitative data followed a sequential manner, beginning with analysis at an individual-level (i.e., person-by-person) for each of the 10 individuals before proceeding to a group-level analysis that brought together data spanning all 10 individuals.

Individual Level Analysis

Each interview transcript was entered into NVivo 10 computer software program (Qualitative Solution and Research, 2010) and subsequently coded through this program. Smith and Osborn (2003) noted that a meticulous case-by-case analysis of individual transcripts can be a lengthy process. IPA dictates that each interview will be analyzed separately to find emerging themes before examining across the interviews (Smith, 2004). Via a literature review of other IPA studies in sport (e.g., Caron et al.,2013; McDonough, et al., 2011; Tamminen et al., 2013), and our research on IPA methodology (e.g., Larkin et al., 2008; Smith et al., 2013)

we determined that each team member would separately read the transcript of the first interview as a whole. Then each member completed a line-by-line analysis of the transcript to code for the participant's experiences based on the research questions. Coding allowed each researcher to find patterns in the text and place those pieces of text together in meaningful categories (Patton, 2002). Thus, each member separately organized coded texts into inductive themes. We analyzed data in three ways (Smith et al., 2013): (i) descriptive experiences; (ii) the manner in which participants described their experiences (i.e., their use of the word 'I' versus 'they', pauses, laughter); and (iii) our interpretations about how participants understood the experiences they described. Patton (2002) noted that when more than one person is analyzing data, a coding scheme may be developed independently and then compared to discuss similarities and differences. Thus, the three members compared and contrasted the resulting analyses of the first transcript. Discussion continued until an agreed set of themes and supporting quotes were identified.

A *consensus chart* of codes, which included code names and operational definitions grouped together under themes, was created for participant one. This was crafted by merging similar codes from each of the three researcher's separate analyses, while also allowing for unique codes to remain. Next, one team member performed a second analysis of participant one's transcript and deductively verified the positioning of codes amongst the identified themes. Many codes transferred easily into the consensus chart. Finally, all team members scrutinized the quotes related to each theme in the consensus chart and provided feedback about coding and interpretations. When disagreements arose about the placement of quotes in themes, alternate points of view were discussed by all three researchers, and in each case were resolved by a consensus decision on where to place the quotes. After completing participant one, this entire process was repeated for the transcript of participant two, allowing for novel themes to emerge.

Once all three team members agreed on the analysis process of the transcripts, all three members read the remaining transcripts (participants three through 10) and immersed themselves in the data, but only one member performed a line-by-line analysis of the data to code for inductive themes for lived experiences. Co-researchers reviewed the themes and supporting codes and provided feedback, often raising ideas for alternate themes. All three team members met and discussed the data. We resolved any disagreements by a consensus decision. One by one, a consensus chart for each participant was created. Each time, one team member performed a second analysis of each transcript and deductively placed their quotes amongst the identified themes in their specific consensus chart. All team members reviewed each consensus chart and associated quotes, and met to discuss any disagreements. These were resolved by a consensus decision. Each participant had between 57 and 125 quotes that fit into approximately 6 themes. This process for individual-level analysis lasted 10 weeks, with a 2-3 hour long meeting weekly, preceded by 2-3 hours of preparation time weekly per research team member.

Group Level Analysis

As recommended by Smith and Osborn (2003), one team member listed all themes that were coded in each transcript, examined all themes' operational definitions to find ones that were similar across all participants, and combined similar themes under five broad higher-order themes. Smith (2011) recommends four or five themes, in order to give justice to each theme in writing manuscripts. The team met and discussions continued until we reached 100% agreement on the names and operational definitions of the themes and how sub-themes fit under the higher-order themes. We then created a coding chart to use for the group level analysis.

Next, one team member reorganized the themes in NVivo 10 to fit the agreed upon coding chart, which created a "code book" of all the quotes in each higher-order theme according to the sub-theme that the quotes supported. This book was 193 pages long with a total of 686 quotes. Separately, all three team members checked each quote to ensure it fit its new theme (Smith & Osborn, 2003). Operational definitions were carefully created to account for the various sub-themes. The group met to discuss quotes that did not properly fit in their new themes and operational definitions, to better place these quotes within the new structure. During group-level analysis, when group members worked together towards finding consensus and fit of supporting quotes in these higher-order themes, much time was spent expanding, delineating and delimiting operational definitions pertaining to these higher-order themes to ensure their coherency with constituent supporting quotes. In the end, each resultant theme had between 90 and 205 quotes from all 10 participants. Through NVivo's Node Summary Report, the number of quotes and number of participants who were quoted were recorded in each theme to provide evidence of the prevalence and density of themes, as recommended by Smith (2011). See Table 1 for a breakdown of themes and sub-themes. The analysis at the group level lasted five weeks, with a 2-3 hour meeting weekly, with 2-3 hours of preparation time per team member weekly.

Table 1. Number of Quotes per Theme, Sub-Theme, and Participant

Theme	Benefits of having a coach (92)		Characteristics of the coach (205)			Instruction (163)		Planning structural elements (136)		Competition (90)		Total
Sub-theme	Swimming (49)	Non-swimming (43)	Experience (95)	Attributes (63)	Behaviors (47)	Feedback (84)	Strategies (79)	Practice (113)	Program (23)	Prep for comp (71)	During comp (19)	686
Name												
Whitney	2	0	6	12	11	5	6	12	2	9	3	68
Beth	12	2	14	14	3	2	5	21	0	4	0	77
Martin	7	3	6	0	0	18	4	16	1	3	3	61
Jordan	6	1	7	5	7	16	10	12	0	3	1	68
Darren	3	2	12	14	12	2	15	9	2	10	2	83
Catherine	2	22	3	2	0	8	7	2	4	3	2	55
Max	2	1	25	8	2	14	18	16	9	13	1	109
Lorna	2	5	6	3	3	6	5	4	1	11	5	51
Justin	2	5	6	1	3	5	2	8	2	5	2	41
Kelly	11	2	10	4	6	8	7	13	2	10	0	73

Note. All numbers represent the number of quotes in each theme/sub-theme

Challenges and Strategies in IPA Data Analysis

The team analysis process was not without challenges. Although it was important to put aside the coding from the previous transcripts in order to respect the convergences and divergences in the data (Smith et al., 2013), we found it very difficult to "forget" what we had coded in past transcripts. A helpful strategy we used was to challenge our coding and ask ourselves whether we created specific codes because they were emerging inductively from that specific data set, or whether we had deductively coded it from an established theme in a previous transcript and/or a bias identified in our bracketing document. In doing so, we were better able to inductively code each transcript.

Having multiple coders also proved challenging at times. Each coder invested a significant amount of time creating his or her own interpretation, which led each to want their

interpretation to remain. We did not encounter any impasses in coming to consensus with our analyses. However, we did spend considerable time developing sound operational definitions for themes, which enabled us all to feel confident in where we placed the quotes. We spent roughly 40 hours in meetings analyzing the individual and group levels. These meetings largely happened over Skype, as we did not reside in the same city. Therefore, it was important to be patient, open to other interpretations, and to welcome challenges to each of our analyses.

We returned several times to our bracketing document to review how our biographies influenced our interpretations. With our bracketing documents in hand, we engaged in open dialogue and challenged each other's interpretations while presenting other viable interpretations. For example, we wrestled with one higher-order theme, initially calling it "coaching behaviors," in which "leadership style" was a sub-theme, as per the doctoral student researcher's past research experience in coach leadership. This was changed to "coach attributes," in which particular characteristics of the coach were analyzed, as per the first author's past research experience in coach biographies. In doing so, we separated coach behaviors into its own higher-order theme as "coach behaviors that maximize efficiency and hold athletes accountable," as per the third author's interest in coach effectiveness. However, none of us were completely satisfied with how the quotes fell into these higher-order themes. We finally came to consensus by arriving at a new category entitled "characteristics of the coach" that included sub-themes: "personal attributes of the coach" (shortened to "attributes" in Table 1), "coaches' accumulated experiences and resources" (shortened to "experiences" in Table 1), and "behaviors that exemplify coach credibility" (shortened to "behaviors" in Table 1), in which all our various interpretations fit.

Further, we debated various individual quotes and their placement within themes. For example, one quote debated was:

> What I really look for is a coach that understands what you as an individual want from the Masters program. Because everybody comes at it from a different perspective. At the club, we have people who are highly competitive, we have some people who have no interest in entering in a competition whatsoever, some of them are there for improving their times, others are there for fitness, weight control, whatever it might be.

As we discussed where to place this quote, we consulted our bracketing documents to understand each other's areas of expertise and biases. One team member suggested this quote could fit under a theme regarding "giving individualized coaching" in which coaches must learn to manage athletes while understanding that each person brings their own biography, and a long one at that, to their perceptions of what they learn at the pool. This biography is based on experiences throughout their lifetimes that influence the ways they perceive new knowledge and learn (Callary, Werthner, & Trudel, 2011; Jarvis, 2009). Another team member suggested that using this lifelong learning lens limited how coaches could interpret athletes' motivational inclinations. He suggested the quote could be interpreted as "autonomy supportive" coaching: The coaches may be attempting to reinforce athletes' persistence in swimming by providing information and opportunities consistent with self-determined motives (Mageau & Vallerand, 2003; Pelletier, Fortier, Vallerand & Brière, 2001). Another was concerned that this would lead to subsequent discussion framed within a motivational (e.g., self-determination; e.g., Mageau & Vallerand, 2003) rather than a pedagogical paradigm. In particular, he invoked references to broader pedagogical literature (e.g., Rink, 2010) that encouraged an explicit focus on teaching/technical functions when examining aspects of effective teaching. Our limitation as first-timers to IPA was that we largely kept the level of analysis to content, instead of micro-analyzing text in terms the language used.

We achieved the following consensus: at the individual-level analysis, we left this quote under "giving individualized coaching," but, with the group-level analysis, this particular quote was placed as part of the higher-order theme entitled "Instruction," sub-theme "Coaching strategies," with an operational definition of "the implementation of techniques and strategies coaches use to facilitate athletes' learning in the course of the instructional environment."

In presenting our experience using IPA methodology at a conference (Rathwell et al., 2014), several researchers asked why we did not parcel the data to write various articles under each of our own interpretations using different literature sources. We problematize and rhetorically questioned the etiquette involved in attempting to reach consensus on interpretations when using IPA? To us, it was important to consider the double hermeneutic process of researchers making meaning of the participant making meaning of their experiences. For this reason, we chose to challenge our own individual biases, take note of how they guided our interpretation, and strove for consensus on interpretations.

We appreciated the rigor of our team process in which aspects of coding and interpretation needed to be defended at formative stages. In essence, other team members were a check-and-balance to ensure a degree of confidence in our preliminary interpretations. We all felt that if we could not respectfully convince our team members of the data analysis at formative stages (including the anticipated discussion of such data and how emerging themes might be framed within extant literature), or if we could be swayed to accept a different but more suitable interpretation, then our initial analyses were likely not strong enough to present to readers in a manuscript. Moreover, in an empirical world that is wary of data disaggregation (i.e., when researchers take a large/main dataset and fragment it into individual parts, often called duplicates or parcels, which are then published separately; e.g., Huston & Moher, 1996), we became convinced that this formative search for consensual interpretation among team members, although tedious at times, resulted in an overall more-ethical and informed decision by the team.

Our experience, wherein all members were involved formatively in most steps of the IPA process, also encouraged us to contemplate advantages and challenges of using IPA in a group setting, rather than as a methodology for one researcher. We reflected on the degree to which each researcher was involved at each step. It is not clear whether a research team would yield similar products if one principal investigator conducted all lower level analyses, while co-investigators "waited in the wings" to conduct higher-order analyses. Our contemplation derives from a lack of discussion in manuscripts regarding the difficulties of team analysis in IPA. For this reason, we have attempted to be as transparent in our process as possible. Future researchers may consider these procedural challenges and ask themselves how to deal with team analysis.

Final analysis of our data rests in the write-up of manuscripts. Smith and Osborn (2003) noted: "The division between analysis and writing up is, to a certain extent, a false one, in that the analysis will be expanded during the writing phase" (p. 76). Smith (2011) notes the importance of being transparent, providing an interesting and well-evidenced analysis (from several participants) of four or five themes, and showing prevalence of themes with the density of the theme clearly demarcated. For participant samples over eight, there should be extracts from at least three participants for each theme to illustrate variation and detail of prevalence, or evidence of the density of the themes (Smith, 2011). Finally, there may be formal theoretical connections made between the text and outside sources, but this is usually created after the emergent analysis (Smith, 2004), perhaps through a discussion in a manuscript. These guidelines were used in writing manuscripts. However, since these manuscripts delve into the particular findings of the research, we deemed a discussion of this topic beyond the scope of this article. It should be noted that we allowed two research team members to each take the lead on writing one of the two results-oriented manuscripts, thus giving precedence to his or

her interpretation and micro-analysis of the data. The lead researcher on each manuscript developed the purpose of the article, and we moved from our charts of themes to an interpretive account of the participants' experiences by together discussing which themes were particularly important in developing this purpose, and then giving creative license to the lead author to interpret these themes. However, the other two team members, like in the process of initial data analysis, weighed in on and questioned the interpretations, which we feel strengthened the papers. These manuscripts are currently under review, which may present challenges in the form of peer-reviewers with their own lens of interpretation on the articles.

Conclusions for researchers interested in using IPA

Based on the thorough description of our analysis, it is apparent that IPA is rigorous and produces a plethora of rich data. With almost 200 pages of analysis including almost 900 quotes, within a total of five higher-order themes, we certainly were swimming in data.

This was our team's first foray into IPA and we plan to continue using this methodology because of its ability to yield rich results. However, we do not consider ourselves experts on this topic as there is still much to learn about conducting IPA research. We also do not mean for this manuscript to be a "how to" manual for conducting IPA. Nonetheless, we consider our insights to be valuable learning material for others who would like to engage in such research. We must note that the process was time-consuming and laborious not only for one researcher, but for a team of researchers as well. As described above, all members were heavily involved in data analysis. From the perspective of training graduate students in the art of qualitative research methods, it is a great learning tool, but one that requires time and energy on the part of both the supervisor and student. We therefore caution graduate students, but also encourage them to pursue scholarly understanding of this methodology because of the richness of the data and thoroughness of the approach. Perhaps, due to time constraints, we advise students to consider using a smaller sample size. For example, three participants is an acceptable number and will likely still produce ample data for a thesis (Smith & Osborn, 2003).

Despite our cautions, we recommend IPA when investigating the lived experiences of a specific population. From the perspective of a new professor and supervisor, the practice has allowed one team member to hone her skills in teaching qualitative approaches and in facilitating learning for students in a measured and controlled, yet demanding manner. Learning the process and rigor of IPA has also allowed our doctoral student researcher to understand a new methodology. Moreover, because of the rigor involved, he gained a deeper understanding of qualitative approaches altogether. The use of multiple researchers throughout the data collection and analysis provided the doctoral student researcher with an equal voice in the research. He remarked that the process of finding consensus in our analyses protected his voice, which was not drowned out by senior researchers. Finally, another team member, who has generally used quantitative research approaches, appreciated how IPA encourages presentation of quote prevalence and frequency to supplement researchers' interpretations of the valence of participants' experiences. In sum, the results produced when following IPA are incredibly rich and allow for an in-depth understanding of the particular phenomenon being investigated. For these reasons, we encourage future sport coaching researchers to consider IPA as a valuable qualitative option.

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Fathering a Child with Autism Spectrum Disorder: An Interpretative Phenomenological Analysis

by **Claudia D. Martins, Stephen P. Walker and Paul Fouché**

Abstract

Raising a child with an autism spectrum disorder (ASD) is a stressful experience and has been associated with poor maternal mental health and increased maternal emotional distress. However, the experiences of fathers of children with ASD are largely unexplored and the coping strategies these men employ to cope with the challenges they face have received little research attention. This research aimed to explore the phenomenological experiences of fathers of preschool children with ASD by gaining a better understanding of the manner in which these individuals attempted to cope with their situation. A multiple, single-case study design was employed and five participants were recruited via two local paediatric practices. Semi-structured interviews were conducted with the participants and data were analysed making use of Interpretative Phenomenological Analysis (IPA). This analysis yielded three superordinate themes, which were labelled as follows: (a) the experience of fathering a child with ASD, (b) challenges of fathering a child with ASD, and (c) coping with fathering a child with ASD. The results suggest that the fathers of children with ASD experience their parental role as stressful. The participants in the current study related the stress they experienced to a number of challenges associated directly with their children's behaviour, as well as to the effects that parenting a child with ASD had on their own wellbeing and functioning. The participants reported making use of a number of coping strategies in order to deal with the challenges they faced. The participants used both problem-focussed and avoidant coping strategies. The results are discussed and recommendations made with regard to future research.

Introduction

The past decade has witnessed a dramatic increase in the number of children diagnosed with Autism and Autism Spectrum Disorders (ASD). According to Moore (2008), 1 in 1000 children were reported to be diagnosed with ASD in 1994, while Pottie and Ingram (2008) reported ASD prevalence as high as 6.7 children in every 1000 in the United States of America during 2007. Furthermore, evidence from a number of European countries including Denmark (Lauritsen, Pedersen, & Mortensen, 2004) and England (Baird et al., 2006), as well as from countries across Asia (Sun & Allison, 2010) suggests that the

past 10 years have witnessed a noteworthy global increase in the prevalence of ASD diagnoses. It is debatable whether or not the actual incidence of ASD is on the rise. However, what appears obvious is that ASD diagnoses are being made more frequently worldwide. Matson and Kozlowski (2010) noted that while numerous theories have been formulated regarding the increase in ASD diagnoses, the broadening of the diagnostic criteria, improved assessment methods and a heightened awareness of autism symptoms appear to be primarily responsible for the increased prevalence of ASD diagnoses.

Dimensional conceptualisation of ASD

The international increase in the prevalence of ASD diagnoses may, in part, be due to a shift from the categorical conceptualisations of ASD as presented in the DSM-IV and ICD-10 classification systems to a more dimensional understanding of these disorders (Volkmar, State, & Klin, 2009). The dimensional conceptualisation of ASD proposes that the core features of ASD, namely (*a*) social skills deficits, (*b*) communication difficulties, and (*c*) restricted interests and repetitive behaviours, occur along a continuum rather than being indicative of discrete, independent syndromes or disorders (First & Tasman, 2004). Support for the dimensional approach to conceptualising ASD can be found in the research literature. For example, following a meta-analytic study Macintosh and Dissanayake (2004) concluded there was insufficient evidence to support the validity of Asperger's syndrome as being distinct from High Functioning Autism. In addition, Szatmari and colleagues (2009) reported that individuals diagnosed with Asperger's syndrome exhibit similar developmental trajectories from early childhood through adolescence to those trajectories shown by individuals diagnosed with autism. Furthermore, Posserud, Lundervold and Gillberg (2006) reported that 2.7% of a non-clinical sample of 9430 Scandinavian children between the ages of seven and nine years were classified as having achieved high scores on certain domains of the Autism Spectrum Screening Questionnaire (ASSQ) as rated by their teachers and parents. These authors concluded that symptoms characteristic of autism are thus more common in the general, typically-developing paediatric population than was previously thought.

The view that ASD may occur along a continuum as opposed to being composed of a series of related, yet clearly differentiated, developmental disorders would appear to be borne out in recent research. It could thus be reasoned that individuals diagnosed with autism or another ASD and their families may be expected to have similar experiences and face similar challenges. Consequently, in the ensuing literature review, as well as in the remainder of the article, no differentiation will be made between autism and other ASDs. The term ASD will also be used to refer to individuals diagnosed with any autism spectrum disorder.

ASD related difficulties in children's functioning

Deficits in social interaction and communication, as well as evidence of an atypically restricted range of interests, are often already apparent in toddlers with ASD (Charman & Baird, 2002; Charman et al., 2005; Landa & Garrett-Mayer, 2006; Lubetsky, Handen, McGonigle, 2011; Yirmiya & Charman, 2010). However, it is most often during interaction with institutions and networks outside of the family environment that the full impact of ASD-related difficulties on the child's functioning becomes evident. A disproportionately high prevalence of learning difficulties has been reported amongst children with ASD (Nicholas et al., 2008). In addition, Baird and colleagues (2006) found that from an early age, children with ASD generally performed below their scholastic potential even when controlling for IQ and learning difficulties. These learning deficits or impairments appear to be specifically associated with ASD and can generally not be attributed to disruptions of cognitive systems or causes aside from ASD (Meirsschaut, Roeyers, & Warreyn, 2010). The difficulties that individuals with ASD experience in acquiring basic scholastic competencies are further complicated by problems in other functional domains. Children with ASD frequently find it difficult to effectively regulate their behaviour and emotions (Bromley, Hare, Davison, & Emerson, 2004; Posserud et al., 2006) and are generally less effective at comprehending the finer nuances of spoken language, less effective at interpreting social cues and have difficulty asserting themselves socially (Szatmari et al., 2009). As a result these children may find it particularly difficult to function effectively within the rule-governed and socially complex environment that characterises most formal educational settings. These behavioural difficulties, combined with elevated rates of learning difficulties and scholastic under-performance, often result in children with ASD being suspended from mainstream education or dropping out because they are unable to function effectively within the system (Ashburner, Ziviani, & Rodger, 2010; Prior, 2003).

Parenting children living with ASD

Children with ASD face numerous challenges in various domains of their functioning. These challenges appear to impact upon these individuals from childhood, through adolescence and into adulthood. Consequently, parenting a child with ASD is usually very demanding. Liptak, Stuart and Auinger (2006) found that parents of children with ASD reported a higher frequency of paediatrician visits for health problems unrelated to ASD than were reported by parents of children who did not suffer from ASD. Long-term medication regimens and the practical implications of having to administer medications on a daily basis have also been identified as placing particular demands on the time and financial resources of many parents of children with ASD (Lee, 2009). These parents also often have additional responsibilities with regard to ensuring that their children receive an array of specialist interventions and adjunct therapies (Koydemir & Tosun, 2009; Myers, Mackintosh, & Goin-Kochel, 2009).

The daily tasks of limit setting, promoting autonomy and facilitating communication between the child and others have been found to place particular strain on parents, specifically mothers, of children with ASD (Osborne, McHugh, Saunders, & Reed, 2008). Parents of children with ASD may also find that the demands of caring for their children cause them to live a routine, rigid and socially-isolated existence that prevents them from pursuing fulfilment in other areas of their lives (Meirsschaut et al., 2010). In addition, the restricted social interaction skills and behavioural difficulties that many children with ASD exhibit make it difficult for parents to interact with their children, thus limiting the fulfilment that parents experience during these interactions (Konstantareas & Homatitus, 1992; Sukhodolsky et al., 2007). Parenting a child with ASD confronts individuals with particular challenges that have been associated with elevated levels of caregiver burnout (Tehee, Honan, & Hevey, 2008), reduced psychological wellbeing (Kuhn & Carter, 2006), increased social isolation and lower levels of perceived family cohesion (Higgins, Bailey, & Pierce, 2005).

The available literature thus suggests that parenting a child with ASD could be considered to be a source of significant and chronic stress (e.g., Higgins et al., 2005; Kuhn & Carter, 2006; Meirsschaut et al., 2010; Osborne & Reed, 2010; Tehee et al., 2008). A few studies indicate that parents of children with ASD report higher levels of stress and parenting burden than is reported by the parents of children without ASD. Weiss (2002) compared the levels of self-reported stress of parents of children with ASD, parents of children with mental retardation and parents of typically developing children. In this study, the parents of children with ASD reported similar levels of parenting stress to those of the parents with mentally retarded children, both of which were significantly higher than the levels of stress reported by the parents of the typically developing children. However, the parents of children with ASD reported significantly more negative effects of stress than was reported by the parents in the other two groups. Similarly, mothers of children with ASD have been found to report both higher levels of parenting stress and higher levels of psychological distress compared to the mothers of children with non-ASD related developmental delays (Estes et al., 2009). In a large population-based study conducted by Montes and Halterman (2007), parents of children with ASD were reported to be more highly stressed than parents in the general population. It would thus appear that parenting a child with ASD is a uniquely challenging and stressful experience.

The elevated levels of stress that are reported by parents of children with ASD have been widely associated with a higher incidence of mental health problems, elevated psychological distress and lower levels of wellbeing (Benson, 2010; Benson & Karlof, 2009; Davis & Carter, 2008; Dunn, Burbine, Bowers, & Tantleff-Dunn, 2001; Estes et al., 2009; Hastings et al., 2005; Meirsschaut et al., 2010; Montes & Halterman, 2007; Pakenham, Samios, & Sofronoff, 2005; Phelps, McCammon, Wuensch, & Golden, 2009; Smith, Seltzer, Tager-Flusberg, Greenberg, & Carter, 2008). This situation is not unique to the parents of children with ASD as the connection between stress and reduced psychological wellbeing has been widely documented in the broader psychological literature (e.g., Dyson & Renk, 2006; Hatch, Mishra, Hotopf, Jones, & Kuh, 2009; Morrison & O'Connor, 2005; Turner & Lloyd, 2004). However, exposure to chronic life challenges or stressful events does not necessarily result in reduced psychological wellbeing or negative mental health outcomes (Bergdahl & Bergdahl, 2002; Morris, Ciesla & Garber, 2010). Lazarus and Folkman (1984) have proposed that the manner in which individuals appraise situations that they are faced with largely determines the levels of stress they experience, the manner in which individuals attempt to cope with the challenges they face, and the impact that the specific situations have on their psychological wellbeing.

An integrative conceptual framework of stress and coping

Building on the work of Lazarus and Folkman (1984), Moos and Holahan (2003) proposed an integrative conceptual framework of stress and coping in which dispositional and contextual aspects of the coping process are considered to be complimentary. Dispositional views of coping are those that emphasise the "individuals' habitual interactions with their environment as well as the cognitive and behavioural coping responses or skills individuals employ to manage specific stressful encounters" (Moos & Holahan, 2003, p. 1387). In contrast, contextual perspectives on coping "assume that more transitory, situation-based factors shape individuals' coping appraisals and their choice of specific coping responses" (Moos & Holahan, 2003, p. 1388). The framework of stress and coping proposed by Moos and Holahan (2003) consists of a number of systems that are thought to function in a transactional manner. Two primarily dispositional systems, namely the environmental system and the personal system, form the basis of this particular conceptual framework. The environmental system is made up of stable conditions outside of the individual such as finances, social support networks and ongoing environmental stressors. The personal system is characterised by the enduring personal characteristics of the individual, which are thought to mould the specific coping responses they employ. Specific components of the personal system may include preferred coping styles

and personality traits, as well as cognitive abilities and preferences. The environmental and personal systems are hypothesised to act as a backdrop for the third component of the framework, namely transitory environmental conditions. Moos and Holahan (2003) claimed that transitory environmental conditions "provide opportunities for learning and the potential for personal development or decline" (p. 1293). It would thus appear that life events, educational or self-development opportunities and situational changes provide the context within which the more enduring elements contained in the environmental and personal systems influence how individuals attempt to cope with the challenges they encounter. These components of the framework (i.e., environmental system, personal system and transitory conditions) are all viewed as influencing the specific cognitive appraisals individuals make regarding stressors, as well as impacting upon the specific coping behaviours and strategies these individuals implement.

The role of cognitive appraisals in the reported stress and coping of parents of children with ASD

The integrative conceptual framework of stress and coping (Moos & Holahan, 2003) provides a useful theoretical context for understanding how parents and caregivers of children with ASD cope with their situations. A number of studies have highlighted the role of cognitive appraisals in the stress that parents of children with ASD report, as well as the effect that this stress has on their wellbeing. Self-perceptions with regard to parenting competence and coping ability have been shown to be directly related to levels of parental stress in mothers of children with ASD (Phelps et al., 2009). Stuart and McGrew (2009) reported that negative appraisals of caring for a child with ASD were strongly associated with increased caregiver burden and marital distress. In addition, a study comparing the functioning of mothers of children with ASD, mothers of mentally retarded children and mothers of typically developing children suggested that positive perceptions of control and self-efficacy increased the coping ability of the mothers of children with ASD or mental retardation (Weiss, 2002). The appraisals that parents of children with ASD make about the challenges that face them, as well as their appraisals of how effectively they are equipped to meet these challenges, would appear to have an effect on the levels of stress and emotional distress experienced by these parents.

Transitory environmental conditions as a component of Moos and Holahan's conceptual framework of stress and coping

The literature makes very little reference to variables that could be classified as transitory environmental conditions (Moos & Holahan, 2003) in relation to parental stress and coping in ASD. However, Pakenham et al. (2005) report that temporary increases in stress predict maternal distress. Benson and Karlof (2009) noted that stress proliferation or "the tendency for stress to create additional stressors" (p. 350), mediated the effect of the severity of children's symptoms on maternal depression in a study of mothers of children with ASD. The chronic nature of ASD may make the role of transitory environmental conditions in parental stress and coping less obvious than in situations where exposure to stressors is more time limited.

The environmental system as a component of Moos and Holahan's conceptual framework of stress and coping

According to Moos and Holahan (2003), the environmental system (one of the primary dispositional systems in their framework) consists of stable conditions within the individual's environment such as ongoing environmental stressors, the availability of financial resources and social support networks. Hastings et al. (2005) noted that parenting a child with ASD is a source of chronic stress, especially as there is very little that the parent can do to impact directly upon the stressor. In addition, parents of children with ASD are confronted by the same educational, behavioural and social challenges their children face (e.g., Ashburner et al., 2010; Nicholas et al., 2008). The many challenges associated with parenting a child with ASD would thus seem to represent an ongoing environmental stressor. This view is supported by the finding that child problem behaviours were found to be strongly predictive of maternal stress levels, as well as predicting maternal emotional distress (Pakenham et al., 2005).

The interaction between stressors and coping has also been hypothesised to be influenced by the physical resources that individuals are able to access (Moos & Holahan, 2003). However, very little attention appears to have been paid in the literature on coping and parenting a child with ASD to the impact of physical resources such as socioeconomic status and access to support services. In one study investigating coping in mothers of children with ASD, Pakenham and colleagues (2005) found that age and socioeconomic status were predictive of maternal adjustment. Older mothers and mothers of higher socioeconomic status were found to report higher levels of emotional wellbeing and lower incidences of mental health problems.

Moos and Holahan (2003) highlighted social support and social networks as an aspect of the environmental system that may significantly impact on coping. Social support has been reported to have a positive

impact on the wellbeing of parents of children with developmental disabilities in general and ASD in particular. Weiss (2002) found that higher levels of social support were related to a reduction in incidences of negative stress effects amongst mothers of children with ASD and mental retardation. Dunn et al. (2001) found that social support moderated the relationship between stress and negative mental health outcomes in both mothers and fathers of children with ASD. Higher levels of social support were associated with lower levels of marital distress. Similarly, Pakenham et al. (2005) reported that higher levels of social support strongly predicted better marital adjustment in their sample of women with ASD children. Social support has been reported to influence parental emotional wellbeing at various stages of parenting children with ASD. Stuart and McGrew (2009) found that higher levels of social support were directly related to reduced family and parental burden in a group of parents whose children had recently been diagnosed with ASD.

The personal system as a component of Moos and Holahan's conceptual framework of stress and coping

The final component of the integrative framework of stress and coping proposed by Moos and Holahan (2003) is the personal system. This system consists of enduring personal characteristics including an individual's preferred coping styles. A number of studies have explored the effect of different coping styles in the parents of children with ASD. Coping styles or coping responses generally appear to have an influence on the wellbeing of parents of children with ASD. Dunn et al. (2001) found that coping styles moderated the relationship between the stressors associated with parenting a child with ASD and negative outcomes in both mothers and fathers. Pakenham and co-workers (2005) reported that coping strongly predicted emotional wellbeing among mothers of children with ASD. Coping would thus seem to influence the effect that stress has on the emotional and psychological functioning of individuals raising children with ASD.

Forms and styles of coping and their effects on parental wellbeing

A body of research in ASD has focussed on the effect that different forms of coping or different coping styles may have on parental wellbeing. Problem-focussed coping has been linked to increased maternal wellbeing (Smith et al., 2008). Problem-focussed coping has also been shown to predict weakly, yet significantly, maternal psychological adjustment (Pakenham et al., 2005). Not making use of problem-focussed coping has also been associated with increased marital distress in both mothers and fathers

of children with ASD (Dunn et al., 2001). In addition, employing avoidant means of coping has been associated with reduced parental wellbeing and poor mental health outcomes. Avoidant coping styles have been related to increased parental stress and negative mental health outcomes (Hastings et al., 2005), as well as strongly predicting negative maternal wellbeing (Pakenham et al., 2005; Smith et al., 2008). Furthermore, Smith and colleagues (2008) reported that mothers of children with ASD who make relatively little use of avoidant coping styles report higher levels of positive maternal wellbeing than those who engage in predominantly avoidant styles of coping. Literature suggests that one form of problem-focussed coping, namely reframing or positive reinterpretation, may be particularly effective in coping with the challenges of parenting a child with ASD. Positive reframing has been defined as "attempts to construe and restructure a problem in a positive way while still accepting the reality of the situation" (Moos, 1993, p. 15). Smith and colleagues (2008) found reframing to be strongly predictive of maternal wellbeing, while Hastings and co-workers (2005) reported that reframing was associated with lower levels of depression in both fathers and mothers of children with ASD.

Research demonstrates, however, that problem-focussed coping is not consistently superior to avoidant coping. Hastings and colleagues (2005) found that problem-focussed coping was not significantly associated with parental stress or mental health in parents of children with ASD. Similarly, Stuart and McGrew (2009) reported that while avoidant coping predicted marital difficulties amongst parents of children with ASD, it was not predictive of individual caregiver burden.

Parenting a child with ASD is considered to be a stressful undertaking that is purported to negatively impact on parental wellbeing and increase the risk of negative mental health outcomes. In addition, the manner in which parents attempt to cope with the challenges they face would seem to influence their wellbeing. Furthermore, theoretical frameworks such as the integrative conceptual framework of stress and coping proposed by Moos and Holahan (2003) appear to be useful for understanding the research literature on stress and coping in parents of children with ASD. However, the efficacy of various approaches to coping in the context of parenting a child with ASD is not clear. Lazarus and Folkman (1984) considered problem-focussed coping to be a more effective means of dealing with stressors than avoidant coping. However, while the literature on coping amongst parents of children with ASD reviewed in this article suggests that problem-focussed coping, particularly reframing, is associated with more positive parental wellbeing than avoidant coping, this trend is not

consistently evident. Hasting et al. (2005) also cautioned that the established conceptualisations of coping on which many coping questionnaires are based may not be adequate for fully understanding the range of coping strategies employed by parents of children with ASD.

The need to explore meaning-making and specific coping methods of fathers of children with ASD

The role of coping and its effect on the psychological wellbeing of parents of children with ASD appears to be well established. However, it seems that the specific processes involved in coping with parenting a child with ASD are less clearly understood. In addition, the vast majority of studies investigating stress and coping amongst parents of children with ASD have made use of predominantly female samples. Moreover, the few studies investigating gender differences in this regard have tended to be inconclusive or contradictory (e.g., Davis & Carter, 2008; Gray, 2003; Hastings et al., 2005). The need thus exists to develop a better understanding of the manner in which parents, particularly fathers, of children with ASD make sense of their situation and to gain further insight into the specific coping methods employed by these individuals. In addition, given the dearth of ASD-related research in South Africa, research that is specific to the South African context is required. Consequently, this study aimed to explore the phenomenological experience of South African fathers parenting children with ASD, with specific reference to the challenges they face and the ways in which these men attempt to cope with their parenting challenges.

Method

Design

The research aimed to explore the phenomenological experience of fathering a child with ASD. The study focussed particularly on the challenges that fathers face and how they attempt to cope with these challenges. Through sharing experiences people reveal truths and, in that process, the telling of stories gives meaning and interpretation to experience and the world around us. The lived experiences of others encourage personal reflection and provide the basis for the generation of theoretical implications (Sinner, 2004). Such phenomenological enquiry amounts to a focus on the way in which the experience is given directly through the participants' expressions, prior to the interpretation of those expressions (Knight & Bradfield, 2003).

Stones (1986) in his article titled "Phenomenological praxis: A constructive alternative in psychology" advocated that psychology should aim more at being a descriptive science rather than an explanatory one. This stance is considered to be compatible with both phenomenological and behaviourist approaches to research in psychology. There is much debate in phenomenological circles as to the method of research one should use in a phenomenological enquiry. Phenomenological researchers agree that there is no single method that will suffice for each and every enquiry and suggest that the approach to a phenomenological method design should be flexible and adapted to suit the phenomenon that is studied (Holroyd, 2001). For this study, a multiple, single-case study design was employed. Smith and Eatough (2007), as well as Smith (2004) and Yin (1989) contended that case study designs are well suited to qualitative research in a number of psychology-related fields. This is because case study designs offer the opportunity for in-depth analysis and thus provide individual or unique perspectives on participants' experiences and intrapersonal processes. The combination of a case study method with a phenomenological stance can thus be described as a phenomenologically informed case study (Bradfield & Knight, 2008). According to Giorgi and Giorgi (2008), Interpretative Phenomenological Analysis (IPA) offers an adaptable praxis for qualitative research purposes in the same way as therapists practice individualised procedures. IPA is a method for undertaking a phenomenological interpretive strategy. In this phenomenologically informed case-based study the conceptual framework for case-based research proposed by Edwards (1998) was used for guiding the broad process or phases of the case study research. In addition, guidelines offered by Smith, Jarman and Osborn (1999) regarding the implementation of IPA were also used.

Participants

Five fathers of children with ASD were recruited via purposive sampling from two private paediatric practices in Bloemfontein, South Africa. Smith, Flowers and Larkin (2009) suggested that samples of three to six participants are best suited for Interpretative Phenomenological Analysis (IPA) studies. In order to ensure a degree of homogeneity, participants were required to be married to the mother of their child with ASD. Only fathers of children aged between four and seven years of age were included in the sample. This decision was based on literature suggesting that ASD diagnoses are being made at earlier points in childhood (e.g., Charman & Baird, 2002; Yirmiya & Charman, 2010). In addition, relatively little research has been conducted concerning children with ASD who are in the foundation phase of their education and their family members. Fathers of children who had been diagnosed with mental retardation or a physical disability in addition to ASD were excluded from the

sample. Furthermore, in order to obtain a more normative impression of fathering a child with ASD rather than exploring the experience of adjusting to the initial diagnosis, fathers of children who had received a diagnosis of ASD less than one year prior to the data collection were excluded from the sample.

The average age of men in the sample was 40.6 years, while the average age of the children diagnosed with ASD was 4.6 years. Three of the participants were Caucasian, while two were Black. All five participants were employed. The majority (80%) of the sample reported that their children were in preschool at the time of their respective interviews. The gender of the children with ASD was fairly evenly distributed (2 girls; 3 boys). The time that had elapsed since the participants received their child's ASD diagnosis ranged from 12 months to 36 months with a mean of 24 months.

Procedures and ethical considerations

Ethical clearance to conduct the study was obtained from the Research Committee of the Department of Psychology at the University of the Free State (UFS), Bloemfontein, South Africa. Two paediatricians specialising in neurodevelopment identified potential participants from their patient records. The paediatricians provided the researcher with the contact details of fathers of children with ASD who met the inclusion criteria mentioned previously. These individuals had been informed as to the purpose of the study by their paediatrician and had consented to be contacted by the researcher as potential participants in the study. The researcher contacted eight individuals telephonically and five agreed to participate in the study. All five participants were interviewed at the University of the Free State's Department of Psychology. Written informed consent was obtained from each participant prior to being interviewed. Participants were assured that their anonymity would be guaranteed and were informed that the research was being conducted in partial fulfilment of the requirements for an academic qualification. Participants were also informed that the findings of the current study may be submitted for publication in a peer reviewed journal. All interviews were conducted by the researcher. Interviews lasted between 45 and 90 minutes. The interviews were semi-structured and were conducted according to an interview schedule developed by the researcher. The interview schedule was compiled with the overarching aim of exploring the participants' experiences of parenting a child with ASD. The interview schedule also aimed to explore (*a*) the experience of fathering a child diagnosed with ASD, (*b*) the challenges that fathering a child with ASD presents, and (*c*) how these men go about coping with these challenges. In keeping with the guidelines set

out by Smith and Eatough (2007), open-ended questions were used to explore the experiences of the participants. Prompts and follow-up questions were then used to further explore the participants' experiences or to gain clarity on certain issues. Interviews were conducted in English. All interviews were recorded electronically and transcribed verbatim prior to analysis.

Analysis

Smith et al. (2009) stated that Interpretative Phenomenological Analysis (IPA) is "concerned with understanding personal lived experiences and thus with exploring persons' relatedness to, or involvement in, a particular event or process" (p. 40). It has been argued that IPA can best understood as "a perspective from which to approach the task of qualitative data analysis" (Larkin, Watts, & Clifton, 2006, p. 104) rather than a prescriptive method of analysis (Smith & Eatough, 2007; Smith & Osborn, 2008). This perspective emphasises the importance of developing an understanding of the individual's experience and sense-making regarding a particular situation or event (phenomenology), as well as making reflective interpretations of these experiences and meanings (interpretation) (Shinebourne & Smith, 2009; Smith, 2004; Smith & Eatough, 2007; Smith et al., 2009). The IPA approach has its origins in those fields of enquiry, such as phenomenology and symbolic interactionism, which hold that "human beings are not passive perceivers of an objective reality, but rather that they come to interpret and understand their world by formulating their own biographical stories into a form that makes sense to them" (Brocki & Wearden, 2006, p. 88). Brocki and Wearden have cautioned that structuring analyses in IPA according to existing theoretical frameworks may emphasise the perspective of the researcher rather than that of the participant. However, Smith et al. (2009) emphasised that IPA is a non-prescriptive and dynamic method of analysis. Moreover, according to Larkin et al. (2006) the interpretative aspect of IPA is "informed by direct engagement with existing theoretical constructs" (p. 104). It would thus appear that IPA is a suitable method of analysis for the current study, as it allows for the phenomenological understanding of the participants' experiences of fathering a child with ASD, as well as for a theoretically informed analysis of their coping efforts. The data analysis in the current study followed the guidelines provided by Smith and colleagues (2009). First, each transcript was closely read a number of times, noting points of interest and salient statements. Second, themes capturing the participants' lived experiences emerging from the transcripts were documented. Third, these themes were consolidated and given descriptive labels. Fourth, theme labels were compared across the five transcripts and

consolidated into a table of comparative themes. Finally, a master table of superordinate themes was compiled across all five transcripts.

Results

Three superordinate themes emerged during the analysis. The first theme reflects the personal experiences of the fathers participating in the study. More specifically, this theme reflects the cognitions and emotions reported by these individuals in relation to having a child with ASD. The second theme deals with the specific challenges that the participants experience as fathers of children with ASD. Two subordinate themes emerged within this superordinate theme, namely challenges that are directly associated with the child and challenges related to the participants' own wellbeing and functioning. The final theme that emerged during the analysis was related to the methods of coping employed by the participants.

The experience of fathering a child with ASD

The participants generally appear to be overwhelmed at having to come to terms with their children's ASD, as well as the realities of parenting these children. The excerpts below clearly show that most of the participants reported feeling anxious, overawed, confused and disappointed.

> "The first thing, when he *[the paediatrician]* mentioned all this terminology, you become scared. The worries are, I never got a clear picture, is that *[ASD]* something with your mind, do you think straight? Is it a substance in your brain? I do not know." – EF

> "I was also worried." – AD

> "I am confused, I do not know what to expect." – BT

> "...it was a disappointment that my child might not grow up, or be able to function properly or normally. That is the biggest emotion that I felt." – CD

One father, CD, expressed concern that he may have been genetically responsible for his daughter's condition, and thus for her difficulties.

> "...because there is a genetic predisposition, one worries that where – where does she get it, who is to blame for it. You wonder how responsible are you for the child?" – CD

The intensity of the emotions experienced in having to come to terms with having a child with ASD is reflected in the difficulty that LF, the father of a boy diagnosed with ASD 18 months prior to the study, appears to experience in relation to accepting the diagnosis. LF appears to fluctuate between wanting to get the best possible help for his child and being unable to fully accept that his child suffers from ASD.

> "I do not believe it; I do not believe that he has it. I believe he is terribly overactive and he can never sit still. I believe what they *[healthcare practitioners]* are telling me and I respond to them, but I still don't believe he has autism, or ADHD." - LF

Anxiety, confusion and a sense of being overawed were, however, not the only emotional states experienced by the fathers participating in the study. Some fathers expressed relief at being able to attribute their child's difficulties to a specific diagnosis, while others seemed generally positive regarding their child's outcomes.

> "Initially relieved, compared to not knowing what *[was wrong]*." – CD

> "I was also worried, but I was having hope that things would get better. I still have hope that he will be fine" – AD

The fathers participating in the study thus seem to experience a number of emotions, both negative and positive, regarding their children, the role they are to fulfil as parents and what the future may hold for them and their children. In addition, most participants articulated experiencing their children's ASD as stressful and challenging.

> "There are challenges, and we face *[them]* on a daily basis. My patience is tested each day, but it makes me a better person." – BT

> "It *[ASD]* brought a stress on our family, we did not cope." – CD

> "With my first child, my daughter, things were smooth. But with this boy, it has become tough..." – AD

Challenges of fathering a child with ASD

Most of the participants experienced fathering a child with ASD as challenging. A number of these challenges and concerns appeared to be related specifically to their children's behaviour, social skills and scholastic functioning. This subtheme was labelled child-specific challenges. A second subtheme emerged in relation to the participants' experiences of

the ways in which parenting a child with ASD impacted upon their social interactions, marital relationships, and wellbeing. This subtheme was labelled direct paternal impact.

Child-specific challenges
The fathers participating in the study reported that their children's behaviour was one of the most significant challenges they faced. A number of the participants experienced their children as having poor emotional regulation, most often evident in temper tantrums and inappropriate or excessive aggression. The excerpts below reflect the participants' understanding that their children's aggressive behaviour is generally an expression of frustration.

> "It is difficult sometimes, *[e]*specially when he loses his temper, he can't understand some things, he is very challenging..." – LF

> "She sometimes gets aggressive. I take it as it comes. That is a challenge." – BT

The children's high levels of physical activity and apparent noncompliance with parental instructions were additional child-specific challenges reported by the participants.

> "...he wants to run all the time. He does not see danger, he just like*[s]* to go on. He sees everything as fun, and he does not listen to me when I say: do not do that!" – EF

> "He would like to do things his way. But when you give him activities, like saying "this is serious, we do this now" he won't *[engage in the activity]*." – AD

Severely limited interests and stereotypical or perseverative behaviours are characteristic features of ASD. The fathers in the current sample reported that these behaviours presented difficulties, not only in relating to their children, but also as sources of paternal frustration and possible triggers for the temper tantrums and aggressive behaviour discussed above. In addition, one father, AD, found his son's lack of emotional expression particularly frustrating, as this made it impossible for him to judge his son's mood and level of contentment.

> "As I said, sometimes he get*[s]* stuck on stuff, when I want to watch the weather, he wants to watch Barney, and that is where the screaming begin*[s]*. So it is very difficult." – LF

> "He constantly repeats everything, he got stuck on a subject ... he will ask you a hundred times what the cat's name is ..." – LF

> "And then, I think the other challenge is to keep him satisfied. That is a big challenge. We never know when he is happy or not happy. We never know when he is happy." – AD

The participants also identified limited or underdeveloped social skills as significant child-specific challenges. The fathers in the study specifically expressed a desire for their children to become more socially competent, as well as expressing concern at their lack of age-appropriate friendships and their inability to establish age-appropriate personal boundaries or exhibit context-appropriate social behaviour.

> "...she has to learn to interact socially." – BT

> "...he likes to play with *[by]* himself a lot, he does not have a lot of friends, he likes to play with *[by]* himself." – LF

> "...*[child's name]* does not have personal boundaries, not scared of anything, will go to any person in the street. We can't go to church with her. If we sit with her in the mother's room, she will be playing with all the kids, *[and]* all the mothers..." – CD

Due to the composition of the sample, most of the participants had not yet come into contact with formal mainstream educational systems. However, the one participant (AD) whose son was engaged in mainstream education at the time of the study, expressed concern at his son's poor scholastic progress.

> "One big challenge is the slow progress, slow academic progress. This is the big challenge..." – AD

Direct paternal impact
In addition to concerns relating to their children's poor emotional regulation, stereotypical behaviour and poorly developed social skills, participants noted that their personal functioning and wellbeing had been impacted by their roles as fathers to children with ASD. Three of the five fathers participating in the study related that their social interaction with others had been negatively affected by their children's behaviour or by uncertainty regarding how their children might behave in certain situations.

> "Yes, I have no social life. There is nothing of the sort, because you do not know when

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my daughter will do something that will offend other people, or the other way round. We avoid it completely." – BT

"So yes, the biggest social in the community we have cut, for her sake and because other people do not understand her..." – CD

"...the relationship with our neighbour*[s]*, we do not want this boy to play with our [the neighbour's] kids. That is when [the] relationship with our neighbours becomes tough, very tough sometimes." – AD

Some participants noted that parenting a child with ASD had impacted upon their relationship with their spouse, as well as affecting their perception of their role as parents or the manner in which others in the family perceive them.

"...he is so stubborn with the mother, and if I am not around sometimes it annoys me when they make me a monster – "I am going to tell your daddy!" – EF

"...because of the situation *[his son's limited interests and behavioural perseveration]* I lose my temper sometimes and I end up screaming, because of the situation and then everyone blames everyone in the family. And me and my wife start fighting." – LF

Coping with fathering a child with ASD

The preceding analysis suggests that the participants experience a number of their children's behaviours and limitations as challenging or stressful. Furthermore, parenting children with ASD seems to have challenged these men's perceptions of themselves as fathers. Further analysis of the semi-structured interviews revealed that the participants employ a number of coping strategies in an effort to deal with the challenges they face. In keeping with the theoretical framework proposed by Moos and Holahan (2003), the coping strategies reported by the participants were broadly grouped as either problem-focussed or avoidant.

Problem-focussed coping
The participants reported making use of a number of problem-focussed coping strategies when addressing the challenges presented by parenting a child with ASD. Two of the participants found that practical interventions aimed at either reinforcing positive behaviour or facilitating the child's disengagement from disruptive stereotypical behaviours were the

most effective means of consistently coping with their children's problematic behaviours.

"Saying to him do this, and then I am going to reward this. I think that has worked to my advantage..." – AD

"I have to get *[him]* to change his mindset, to get him interested in something else, more interesting than the current situation. He has a fascination with keys ... I use the keys as a deterrent when he loses his temper." – LF

One participant found that specific problem-focussed coping strategies implemented at a more general or systemic level were also useful. These strategies included making changes to existing discipline strategies within the home so as to accommodate the specific needs and characteristics of the child with ASD. In addition, this participant was prepared to relocate the family in order to gain better access to the services his child requires. However, implementation of these strategies was not without difficulties, as the wellbeing and ambitions of the rest of the family needed to be taken into consideration.

"She *[the child with ASD]* has a different disciplinary way with her compared to the other children. They *[other family members]* bought into the picture. My little girl is 10 years and she is four – six years difference - she was not jealous. We could not hit *[child's name]*, it did not have any impact." – CD

"We are prepared to move to a different area or school, where it will be the best for her, and taking the other children into consideration as well." – CD

Gathering information and learning more about ASD, as well as possible treatment opportunities surfaced as a theme in the coping responses of the participants. This is reflected in the excerpt from the interview with BT below. In addition, another participant, EF, believed that periodically consulting his son's paediatrician in order to gain information regarding his son's development and progress would help him cope more effectively with the challenges he experienced.

"I think one should obtain as much information as possible, there will be certain things you will never understand. Just be there for your child and learn about it, try to obtain information." – BT

"Personally, I would like him to see, maybe we could go back to *[paediatrician's name]*, where he could do an assessment, is *[child's name]* okay, I would like to hear how he is now." – EF

Having access to information and specialist care also seemed to provide some participants with reassurance regarding their child's current welfare and future prognosis. Seeking expert medical input and following the recommended treatment regimens appears to be another information-related form of problem-focussed coping. These strategies appeared to be employed primarily by the two black participants.

"It was okay, I took my chance with the doctor. He gave good medication ... he is now okay."
– EF

"I think there is still time to improve, because of the professional assistance we are busy getting for the boy. I think there is still time for this boy to improve. I am not much worried, because of the professional assistance." – AD

The participants also used positive reframing in order to cope with the challenges of parenting a child with ASD. CD appears to have dealt with his wife's role as primary facilitator in their daughter's management/ treatment and his somewhat more removed role as primary breadwinner, by reframing his role with regard to his child's ASD as one of supporting his wife and empowering her to focus on their child. Another participant (BT) seems to have conceptualised the challenges his child with ASD confronts him with as opportunities for positive self-development. He seems to view facing the challenges of raising a child with ASD as providing the opportunity to develop character which, in turn, enables him to deal more effectively with these challenges.

"If she stays on the *[autism]* spectrum, we will be fine with it. It will be challenging, each day of the week is a new challenge. I believe at the moment, because my wife has much more impact and working with her, I see my role more than *[as]* supporting my wife and make sure she copes..." – CD

"My patience is tested each day, but it makes me a better person. It also builds my character, it makes me better. It is not really that much of a challenge. I still live."
– BT

Avoidant coping

In addition to the problem-focussed coping strategies reported above, the fathers participating in the study also appear to employ a number of avoidant coping strategies. One participant appears to minimise the seriousness of the challenges facing him as the parent of a child with ASD by not taking the situation too seriously and viewing the child's condition as transient. CD thus appears to intentionally avoid thinking realistically about the situation with which he is confronted. However, he does seem to be aware of the avoidant nature of this particular strategy. BT also appears to employ cognitive avoidance as a coping strategy by attempting to concentrate on the present and not thinking too much about the future.

"And because we are not taking the diagnosis too seriously, there is a part of you that thinks that it [is] just a phase. We have a[n] ostrich technique – bury your head in the sand." – CD

"Tomorrow will sort itself out. I do not think about it. Tomorrow's worries is tomorrow's worries. This is how I see it. I handle everything on a daily basis." - BT

One participant reported making extensive use of religious coping in order to deal with the challenges of raising a child with ASD. Religious coping involves trusting in supernatural influences or a deity to help one deal with the challenges one faces.

"...at the end of the day, I am a believer, and I believe that it is God's will to cure my child. So, it does not matter which disorder it is, I have prayed about it and God will handle the situation." – BT

A father participating in the study related two situations in which he felt he had raised the awareness of his co-workers with regard to ASD. He seems to find meaning in being able to alert his co-workers to possible signs of developmental delay that their own children may display. These discussions may also serve to provide this participant with some degree of social support. Irrespective of the specific function of the interactions recounted below, they seem to provide him with the opportunity to use the situation he is confronted with to have a positive impact on the lives of others. These interactions could thus be classified as examples of seeking alternative rewards.

"It is very interesting at work, when I started to give details about the growing of this boy, people became interested. They started to think about the activities of their own children. There was one lady who said "You know, my boy used to do those

things, I have to consult a specialist, whether my child is having that particular disease".” – AD

“I am telling the guys, when we are working together, I become ... Because somewhere I am going to assist, somebody who will not be able to recognise the illness *[ASD]* that maybe is in his or her boy, I think that part of the education I am driving. I think that is the positive part that helps.” – AD

Discussion

Analysis of the data revealed that fathering a child with ASD results in the experience of a number of emotions. In this particular study participants reported emotions ranging from guilt and anxiety to hope and relief. However, the fathers participating in the study tended to report more negative than positive emotions with regard to their parental roles. Although no attempt was made to quantify the emotional distress of the participants or to determine whether the emotions they experienced were indicative of specific clinical syndromes, it would appear that the findings lend further support to a trend in the literature that suggests that parents of children with ASD tend to report elevated levels of emotional distress when compared to parents of non-ASD children (e.g., Benson, 2010; Davis & Carter, 2008; Dunn et al., 2001; Estes et al., 2009; Phelps et al., 2009; Seltzer et al., 2003). However, the participants did not experience having a child with ASD as entirely negative. What the respondents actually articulated was that within the negative experience of having a child with ASD there was some relief and sense of usefulness. Some reported feeling relieved at being able to attach a label to their child's problem. They also expressed hope that with the problem having been identified and the appropriate help received, their children's chances of enjoying better outcomes had improved. Nevertheless, all the participants related experiencing their paternal role as stressful or challenging. This finding is in keeping with literature highlighting elevated levels of stress in the parents of children with ASD (e.g., Estes et al., 2009; Higgins et al., 2005; Kuhn & Carter, 2006; Meirsschaut et al., 2010; Osborne & Reed, 2010; Weiss, 2002).

Participants in the study identified specific aspects of their children's behaviour and certain impacts that fathering a child with ASD had on their personal functioning as significant sources of stress. Behavioural difficulties and poor emotional regulation were the most frequently reported child-specific challenges. Participants also expressed frustration at their children's stereotypical and perseverative behaviours. Only one participant expressed concern regarding his child's poor scholastic progress. However, this participant's child was the only child of school-going age included in the sample. The apparently low valence of school-related and cognitive developmental concerns or stressors reported by the participants is thus probably due to the composition of the sample rather than indicating that these ASD-related problems are not viewed as challenges by the fathers of these children.

It is interesting, however, to note that only one father identified his child's lack of emotional responsiveness as a challenge and that none of the participants noted communication difficulties as a source of paternal stress. ASD tends to be characterised by deficient verbal communication, poor eye contact and limited emotional responsiveness (Landa & Garrett-Mayer, 2006; Nicholas et al., 2008; Szatmari et al., 2009; Yirmiya & Charman, 2010). These symptoms are reported to be particularly evident in preschool children (Baird et al., 2006; Charman & Baird, 2002) and it was thus expected that these symptoms would be identified as a challenge by the fathers in the current sample. However, it is possible that the children of the fathers in the current sample represent cases of ASD at the higher or more verbal end of the spectrum. Alternatively, given that all the fathers in the sample hold fulltime jobs, it is possible that the children's mothers or teachers are more directly impacted by their poor communication skills as they are required to deal with the children more intensively on educational and communication-dependent tasks (e.g., Benson, 2010; Bromley et al., 2004; Gray, 2003; Kuhn & Carter, 2006; Osborne et al., 2008). Finally, fathers in the sample may be more inclined to fulfil a disciplinary role, while the children's mothers are more inclined to facilitate learning and communication skills development. Consequently, the higher valence of behaviour-related stressors amongst fathers may be more reflective of their parental role than of the children's abilities and deficits.

Participants perceived parenting a child with ASD as having an impact on their social lives, affecting their relationships with their spouses and influencing the way they view themselves as fathers. The fathers participating in the study viewed their children's behaviour and the potential reactions of others to this behaviour as limiting the extent to which they were able to socialise with others or go out in public with their children. Some participants also viewed negative reactions or a lack of understanding on the part of their neighbours as potentially socially isolating. These findings are in line with the parental social isolation or poor perceived social support reported in a number of other studies in the ASD literature (e.g., Benson & Karlof, 2009; Dale, Jahoda, & Knott., 2006; Stuart & McGrew, 2009). The participants also felt that their relationships with their spouses had

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changed as a result of having a child with ASD in the family. Disruptions or changes in family dynamics have been highlighted in other studies on parenting children with ASD (e.g., Pakenham et al., 2005; Smith et al., 2008; Stuart & McGrew, 2009). The participants in this study perceived themselves to be in conflict with their wives more regularly, particularly on issues involving their child with ASD. Some fathers also perceived themselves as somewhat isolated from the families. They viewed themselves as outsiders who did not experience the same quality of contact with their ASD children as that experienced by their wives. The fathers in the current study thus appear not only to perceive a lack of social support with regard to their communities, but also with regard to their spouses and families.

A specific aim of the study was to gain greater insight into the manner in which the fathers of children with ASD attempt to cope with the challenges they face. These coping strategies or behaviours are reflections of the dispositional personal system proposed in the integrative framework of stress and coping (Moos & Holahan, 2003). The participants reported making use of both problem-focussed and avoidant means of coping. Practical interventions aimed at reducing problem behaviours or increasing child compliance were one form of problem-focussed coping used by the participants. Systemic changes to the way the family functioned or dealt with issues such as discipline also proved helpful to some fathers. These strategies represent direct attempts to reduce the effect that a particular stressor has on the individual, and are often referred to as problem solving coping responses (Moos, 1993). Given that the participants mostly highlighted behavioural difficulties related to their children's ASD as stressors, it would seem logical for them to employ a number of strategies aimed directly at addressing these behaviours. The sample was also composed of the fathers of preschool children with ASD. This is considered to be a developmental period during which behavioural difficulties are particularly prevalent in children with ASD (Baird et al., 2006; Charman & Baird, 2002; Landa & Garrett-Mayer, 2006; Szatmari et al., 2009; Yirmiya & Charman, 2010). Consequently, practical coping strategies aimed at addressing problem behaviours could be expected to be more commonly employed by parents at this stage than during other developmental periods.

Participants reported attempting to cope with the challenges presented by their children with ASD by gathering additional information regarding their children's condition, as well as information regarding alternative treatment or management options. Knowing that they had consulted the appropriate medical and affiliated professionals and that they were following the recommendations of these professionals seemed to reassure some of the participants. The above-mentioned attempts at seeking guidance and support are considered to be forms of problem-focussed coping (Moos, 1993; Moos & Holahan, 2003). It should be noted, however, that many of the participants did not appear to be very knowledgeable with regard to the nature of ASD, the available treatment options or the most probable outcomes associated with the condition. This strong focus on information gathering and professional reassurance may thus have occurred in response to a lack of adequate information regarding the condition rather than as a preferred coping strategy.

Much of the research conducted on parenting children with ASD appears to suggest that problem-focussed coping is preferable to avoidant coping (e.g., Dunn et al., 2001; Hastings et al., 2005; Pakenham et al., 2005; Smith et al., 2008). However, some authors suggest that problem-focussed coping may not necessarily always be superior to avoidant coping (e.g., Hastings et al., 2005; Stuart & McGrew, 2009). Furthermore, Smith and colleagues (2008) have suggested that avoidant coping may prove effective in situations where individuals have little direct control over stressors, as is the case with a chronic condition such as ASD. In addition, the problem-focussed/ avoidant coping dichotomy has been criticised as being too rigid and simplistic to reflect the complex nature of the coping process (Amirkhan & Auyeung, 2007; Moos & Holahan, 2003). Participants in the current study reported engaging in cognitive avoidance in order to more effectively deal with challenges they encountered.

It would thus appear that the fathers of children with ASD participating in this study experienced the characteristic symptoms of their children's condition, such as behavioural difficulties, stereotypical behaviours and poor social skills as particularly stressful. Restricted social lives, marital conflict and changes to their paternal roles also appear to provide these individuals with specific challenges. The aforementioned stressors generally seem to be related to unpleasant emotional states such as anxiety, guilt and feelings of being overwhelmed. The participants employ both problem-focussed and avoidant coping strategies in an attempt to deal with challenges that face them. The respondents did report making use of reframing although this did not appear to be one of their primary means of coping. This finding appears to be contrary to much of the literature on parental coping in ASD (e.g., Dunn et al., 2001; Hastings et al., 2005; Smith et al., 2008). However, this finding could possibly be a result of the age of the participants' children, in that younger children may provide mainly behaviourally-related challenges, thus eliciting primarily behaviour-focussed means of coping in their fathers. Alternatively, reframing may

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be considered to be a less active, more defeatist form of coping and thus considered to be less masculine. The possibility should also be considered that reframing may be more readily employed by the parents of older children with ASD, as parents come to accept the chronic nature of the condition over time and view reframing as a more effective means of coping. The participants did not seem to experience their social isolation as a stressor with a particularly high valence. Furthermore, with the possible exception of one individual, none of the participants appear to have sought social support as a means of coping. A possible explanation may be that studies highlighting social support as an important means of coping with raising a child with ASD focus on specific contextual support as is found in dedicated ASD parent support groups, thus underplaying the effectiveness of non-contextual social support (e.g., Benson & Karlof, 2009; Dale et al., 2006; Pakenham et al., 2005; Weiss, 2002). However, this finding may also reflect gender differences regarding the need and preference for social support, particularly as most studies conducted in this field have tended to make use of either exclusively or predominantly female samples.

Limitations and Recommendations

A number of limitations to the study must be highlighted. First, the sample was drawn from a small, principally homogeneous group from a specific geographic location. This limits the extent to which the findings of this study may be generalised beyond this specific context. Second, no attempt was made to control for the severity of the ASD symptoms experienced by the participants' children. This constitutes a limitation as other studies have revealed that symptom severity is associated with both parental stress and coping preference (e.g., Benson, 2010; Davis & Carter, 2008; Dunn et al., 2001; Estes et al., 2009). Third, no attempt was made to specifically establish or quantify the emotional distress that the participants experienced as a result of fathering a child with ASD. Consequently, while the current study may provide insight into the coping strategies employed by the fathers of children with ASD, no conclusions can be reached regarding the effect of these coping strategies on paternal emotional wellbeing. Finally, the current study provides a somewhat developmentally specific view of the experience of fathering a child with ASD. These findings can thus not be generalised to fathers of children with ASD in other developmental phases, nor can these findings be viewed as representative of the experiences of fathers who have been subjected to the stressors of raising a child with ASD over a more extended period of time.

The researchers recognise this was a qualitative study and that the research cannot, and does not, seek to generalise. Lincoln and Guba (1988) proposed transferability as an alternative to external validity in recognition of the fact that not all qualitative studies can be generalised. Transferability is a qualitative criterion of trustworthiness which is used to judge the extent to which findings may be applied to other contexts (De Vos, 2005). In order to achieve a level of transferability, thick descriptions should be provided (Rudestam & Newton, 2001) to aid in the interpretation of the complex issues addressed. This allows those readers who want to conduct further research to make a transferability judgement (De Vos, 2005) about the appropriateness of applying the findings in other settings.

Future research should attempt to investigate the efficacy of the specific coping strategies employed by fathers of preschool children with ASD by determining the perceived impact of different coping strategies on paternal psychological wellbeing and functioning. Single case studies should be employed to obtain a richer and more idiographic impression of paternal experiences in ASD. Comparative studies may be employed to identify possible gender differences regarding the experiences of parenting a child with ASD.

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Interpretative phenomenological analysis

Interpretative phenomenological analysis (**IPA**) is an approach to psychological qualitative research with an idiographic focus, which means that it aims to offer insights into how a given person, in a given context, makes sense of a given phenomenon. Usually these phenomena relate to experiences of some personal significance, such as a major life event, or the development of an important relationship. It has its theoretical origins in phenomenology and hermeneutics, and key ideas from Edmund Husserl, Martin Heidegger, and Maurice Merleau-Ponty are often cited.[1] IPA is one of several approaches to qualitative, phenomenological psychology. It is distinct from other approaches, in part, because of its *combination* of psychological, interpretative, and idiographic components.[2]

Contents

Taking part

Sometimes IPA studies involve a close examination of the experiences and meaning-making activities of only one participant. Most frequently they draw on the accounts of a small number of people (6 has been suggested as a good number, although anywhere between 3 and 15 participants for a group study can be acceptable[3]). In either case, participants are invited to take part precisely because they can offer the researcher some meaningful insight into the topic of the study; this is called purposive sampling [i.e. it is not randomised]. Usually, participants in an IPA study are expected to have certain experiences in common with one another: the small-scale nature of a basic IPA study shows how something is understood in a given context, and from a shared perspective, a method sometimes called homogeneous sampling. More advanced IPA study designs may draw together samples which offer multiple perspectives on a shared experience (husbands and wives, for example, or psychiatrists and patients); or they may collect accounts over a period of time, to develop a longitudinal analysis.

Data collection

In IPA, researchers gather qualitative data from research participants using techniques such as interview, diaries, or focus group. Typically, these are approached from a position of flexible and open-ended inquiry, and the interviewer adopts a stance which is curious and facilitative (rather than, say, challenging and

interrogative). IPA usually requires personally-salient accounts of some richness and depth, and it requires that these accounts be captured in a way which permits the researcher to work with a detailed verbatim transcript.

Data analysis

Data collection does not set out to test hypotheses, and this stance is maintained in data analysis. The analyst reflects upon their own preconceptions about the data, and attempts to suspend these in order to focus on grasping the experiential world of the research participant. Transcripts are coded in considerable detail, with the focus shifting back and forth from the key claims of the participant, to the researcher's interpretation of the meaning of those claims. IPA's hermeneutic stance is one of inquiry and meaning-making,[4] and so the analyst attempts to make sense of the participant's attempts to make sense of their own experiences, thus creating a double hermeneutic. One might use IPA if one had a research question which aimed to understand what a given experience was like (phenomenology) and how someone made sense of it (interpretation).

Analysis in IPA is said to be 'bottom-up.' This means that the researcher generates codes *from* the data, rather than using a pre-existing theory to identify codes that might be applied *to* the data. IPA studies do not test theories, then, but they are often relevant to the development of existing theories. One might use the findings of a study on the meaning of sexual intimacy to gay men in close relationships, for example, to re-examine the adequacy of theories which attempt to predict and explain safe sex practices.[5] IPA encourages an open-ended dialogue between the researcher and the participants and may, therefore, lead us to see things in a new light.

After transcribing the data, the researcher works closely and intensively with the text, annotating it closely ('coding') for insights into the participants' experience and perspective on their world. As the analysis develops, the researcher catalogues the emerging codes, and subsequently begins to look for patterns in the codes. These patterns are called 'themes'. Themes are recurring patterns of meaning (ideas, thoughts, feelings) throughout the text. Themes are likely to identify both something that *matters* to the participants (i.e. an object of concern, topic of some import) and also convey something of the *meaning* of that thing, for the participants. E.g. in a study of the experiences of young people learning to drive, we might find themes like 'Driving as a rite of passage' (where one key psychosocial understanding of the meaning of learning to drive, is that it marks a cultural threshold between adolescence and adulthood).

Some themes will eventually be grouped under much broader themes called 'superordinate themes'. For example, 'Feeling anxious and overwhelmed during the first driving lessons' might be a superordinate category which captures a variety of patterns in participants' embodied, emotional and cognitive experiences of the early phases of learning to drive, where we might expect to find sub-themes relating to, say, 'Feeling nervous,' 'Worrying about losing control,' and 'Struggling to manage the complexities of the task.' The final set of themes are typically summarised and placed into a table or similar structure where evidence from the text is given to back up the themes produced by a quote from the text.

The analysis

In IPA, a good analysis is one which balances phenomenological description with insightful interpretation, and which anchors these interpretations in the participants' accounts. It is also likely to maintain an idiographic focus (so that particular variations are not lost), and to keep a close focus on meaning (rather than say, causal relations). A degree of transparency (contextual detail about the sample, a clear account of process, adequate commentary on the data, key points illustrated by verbatim quotes) is also crucial to estimating the plausibility and transferability of an IPA study. Engagement with credibility issues (such as cross-validation, cooperative inquiry, independent audit, or triangulation) is also likely to increase the reader's confidence.

Applications of IPA

Due to an increased interest in the constructed nature of certain aspects of illness (how we perceive bodily and mental symptoms), IPA has been particularly recommended for its uses in the field of health psychology.[6] However, while this subject-centered approach to experiencing illness is congruent with an increase in patient-centered research, it has also been suggested that IPA may have been historically most employed in health psychology due to the fact that many of its initial supporters operated careers in this field.[7]

With a general increase in the number of IPA studies published over the last decade [8] has come the employment of this method in a variety of fields including business (organisational psychology), sexuality, and key life transitions such as transitioning into motherhood [9]

See also

- Action research
- Emic and etic
- Ethnography
- Hermeneutic phenomenology
- Jonathan Smith (psychologist)
- Participatory action research
- Phenomenology
- Triangulation (social science)

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External links

- IPA website at Birkbeck, University of London (http://www.ipa.bbk.ac.uk)

I SURVIVED CANCER: PHENOMENOLOGICAL ANALYSIS OF THE SURVIVORS' LANGUAGE

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ABSTRACT: The study attempted to understand the feelings of people who have survived cancer, through qualitative research with Heidegger's phenomenological approach. The study subjects were five cancer survivors, followed up during 2004 and 2005 through a university extension project in the northwestern region of the state of Paraná. Phenomenological interviews were held to capture the survivors' feelings, at their homes, during January and February 2013. "How is it for you to have survived cancer?" was the orienting question. Four ontological issues emerged from the analysis of their discourses: (re-) remembering the vigor of having been; (re-) encountering spirituality; fear of the disease's recurrence; forgetting the temporality of living with cancer. We conclude that, in their being-healed, patients live with anxiety, that throws them into a distressing state for fear of recurrence, as well as enabling them to find a new meaning to life.

DESCRIPTORS: Neoplasms. Survivorship. Nursing care.

SOBREVIVI AO CÂNCER: ANÁLISE FENOMENOLÓGICA DA LINGUAGEM DOS SOBREVIVENTES

RESUMO: Buscou-se compreender os sentimentos de pessoas que sobreviveram ao câncer, por meio da pesquisa qualitativa, com a abordagem fenomenológica heideggeriana. Foram sujeitos cinco sobreviventes de câncer, acompanhados entre os anos de 2004 e 2005 por um projeto de extensão universitária no Noroeste do Paraná. Para captar os sentimentos dos sobreviventes, foi utilizada a entrevista fenomenológica. As pessoas foram entrevistadas, no próprio domicílio, entre os meses de janeiro a fevereiro de 2013, com a seguinte questão norteadora: "Como está sendo para você ter sobrevivido ao câncer?" Da análise dos discursos, emergiram quatro temáticas ontológicas: (Re) Lembrando o vigor de ter sido; (Re) Encontrando-se com a espiritualidade; Temendo a recidiva da doença; Esquecendo-se da temporalidade de existir com câncer. Concluímos que, em seu sendo-curada, as pacientes convivem com a angústia, que as lança a um estado aflitivo pelo temor da recidiva, como também as possibilita encontrar um novo sentido à vida.

DESCRITORES: Neoplasias. Sobrevida. Cuidados de enfermagem.

SOBREVIVI AL CÁNCER: ANÁLISIS FENOMENOLÓGICA DEL LINGUAJE DE LOS SOBREVIVINTES

RESUMEN: Buscamos comprender los sentimientos de personas que sobrevivieron al cáncer, por medio de la investigación cualitativa e abordaje fenomenológica heideggeriana. Fueron sujetos cinco sobrevivientes de cáncer, acompañados entre los años de 2004 y 2005 por un proyecto de extensión en el Noroeste de Paraná. Para captar los sentimientos de los sobrevivientes fue usada la entrevista fenomenológica. Las personas fueron entrevistadas, en el propio domicilio, entre los meses de enero a febrero de 2013, con la siguiente cuestión: "¿Cómo es para usted haber sobrevivido al cáncer?" Emergieron cuatro temáticas ontológicas: (Re) Acordándose el vigor de haber sido; (Re) Encontrándose con la espiritualidad; Temiendo la recidiva de la enfermedad; Olvidándose de la temporalidad de existir con cáncer. Llegamos a la conclusión que, en su ser-sanado, los pacientes viven con la angustia, que lanza en un estado penoso, por temor a la recurrencia, así como permite encontrar un nuevo sentido a la vida.

DESCRIPTORES: Neoplasias. Sobrevida. Atención de enfermería.

INTRODUCTION

Cancer has been shown to be one of the main causes of mortality in the world, deserving special attention on the part of health professionals so as to mitigate the suffering, as the mortality rate is high, although for many cases, cures occur. When somebody receives a diagnosis of cancer, therefore, which brings the stigma of an incurable illness, there appears in their life the inevitable possibility of death.[1]

As a result, being with cancer goes beyond physical pain and emotional discomfort, which cause the person to be immersed in an existential nothingness, due to interfering in the objectives of life of the patient, her family, her work and income. Her mobility, body image and life-style can be drastically changed, temporarily or permanently, producing repercussions which affect all those involved.[2] Within this temporality, the person moves between the constant shadow of death and the hope of surviving the illness.

Regarding survival following cancer, the literature indicates that, in the United States of America, patient survival has tripled in the last 30 years, indicating nearly 10,000,000 people, due to the advance of discoveries in early diagnosis and of new technologies for treatment. In that country, the patient with a diagnosis of cancer has a 64% chance of survival over five years, compared with a rate of 50% three decades ago.[3] In Brazil, according to the National Cancer Institute (Inca),[4] relative survival expected for all the types of cancer is approximately 50% at five years. However, there is still a need for studies evaluating the survival of patients with cancer, in a more routine and continuous way, over long periods of time, as already takes place in some countries.[4]

The temporality of living with cancer and its treatment pass negative feelings on to the patient, often making her saddened and thinking that things are becoming increasingly difficult. Such thinking supports the feelings of inability and impotence when faced with the situations.[5]

The project "Palliative care for cancer patients and their families" began in 2004, so as to provide a meeting place with patients who experience cancer in their daily life. This has, as a fundamental objective, the accompanying of cancer patients and their families in their homes, the offering of holistic support to these patients and their needs, through the use of the principles of palliative care.[6]

In the above-mentioned project, we noticed that, in experiencing the confirmation of the diagnosis of cancer, the person feels the desire to be cared for, loved, understood, and, principally, to share her concerns and fears.[7] In this trajectory, we shared the patient's fear before the uncomfortable possibility of death, which persists in silencing life, which still lived in her body, annihilating not only the private things of the ill person, but also her dreams of living a pleasurable future.

Equally, in having her daily life invaded by a neoplastic illness, the individual has the possibility of finding a new meaning to life and transcending its vicissitudes,[8] such that the same anxiety which accompanied the patient and her family along difficult paths in search of the cure causes the same to leave the state of collapse in which they find themselves and glimpse the resplendence of a new horizon. Thus, from the rare moments resulting from the temporality experienced by those whose cancer was stabilized, arises the disquiet: what is the meaning of life for the people who survive cancer?

This existential condition causes a different understanding to emerge for care in oncology, transposing a "doing" which goes beyond care for signs and symptoms of the disease, and requires of the health professional a concern with emotional, social and psychological aspects so as to maintain the person's quality of life. In the light of the above, this study's purpose was to understand the feelings of people who survived cancer.

METHOD

For this study, we selected qualitative research, with the Heideggerian phenomenological existential approach. Phenomenology places, as the starting point for its reflection, the person who one can know immediately, that is, Man himself, placing him within an ontological dimension. It allows the understanding of the being, as it is that which is hidden in that which is manifested through the language.[9]

Phenomenological verification does not start from a problem but from a questioning. When the researcher questions, she has a trajectory and walks towards the phenomenon, in that which manifests itself, through the language of the person who experiences the situation. Thus, to know something which leads us to the understanding the concepts of the people who survived cancer, we must question them in their mundanity of the world, that is, in their own human world where

they experience the phenomenon to be revealed,[9] which constitutes our region of inquiry.

The research subjects in question were from the extension project titled "Palliative care for cancer patients and their families", elaborated and implanted in 2004 in the *Universidade Federal de Maringá*, which has monitored patients with cancer receiving palliative care since 2004 to the present day. Between the years 2004 and 2005, the project accompanied 15 people receiving cancer treatment, who continued to be monitored until the situation stabilized, that is, until they no longer presented symptoms of the disease, or until they died. The interest in investigating these peoples' survival arose in 2012, through the request of a survivor who wished to present her experiences.

In seeking this study's subjects, in previously-arranged visits, we met eight ex-participants of the project who had survived cancer. Emphasis is placed on the significant number of survivors, considering that the project in question monitored patients with few perspectives of a cure. We reiterate that, in this project, we considered that the palliative care was to be introduced to the cancer patient since their diagnosis, and not only for those with no perspective of a cure.[10] As inclusion criteria for the interviewees, besides participation in the above-mentioned project, the patient could not have presented recurrence of the cancer in the last seven years; must live in the city of Maringá in the state of Paraná-PR; and be aged over 18 years old. Those who had other comorbidities prohibiting their participation were excluded, as were those who died before the data collection.

Among the eight patients found, three were excluded, as the disease had recurred in one and she died before the data collection period; a second person moved city, causing us to lose contact; and the third lacked psychological conditions to answer the questions due to the onset of Alzheimer's disease. As a result, interviews were held in the period of January to February 2013 with the five people who had survived cancer.

As this is a study involving human beings, the ethical aspects regulated by Resolution N. 466/2012 of the National Health Council were observed. The proposal of intention to undertake the study was considered and approved by the *Universidade Federal de Maringá*'s Standing Committee For Ethics in Research With Human Beings (Opinion N. 233.634). We also make clear that the participants were assured free consent and the liberty to withdraw from the study at any moment if they so wished; confidentiality, regarding the information provided; and anonymity whenever the results were published.

Thus, following the first contact with the former participants in the project, we returned to their homes to explain the research and request their participation. Following the survivor's authorization, we began the interviews in each person's home, with the aim of capturing their feelings and also their body language. A digital recorder was used and the recordings produced, based on the subjects' discourses, will be kept for a period of five years and then discarded.

In our opinion, the description of experiences must involve thoughts, feelings and actions relating to the reality experienced. In this regard we asked the informants the following guiding question: "How is it for you to have survived cancer?" To maintain their anonymity, they were referred to as S1, S2, S3, S4 and S5.

To capture the fullness expressed by the subjects in their languages, we selected the individual analysis of each discourse. Thus, *a priori*, we undertook close readings of each account, separating the excerpts or units of meaning which, for us, were shown to be fundamental structures of the existence of the participants interviewed.[11] *A posteriori*, we moved on to analyze each account's units of meaning, undertaking phenomenological selection of the language of each subject,[11] which produced ontological themes, analyzed in the light of some Heideggerian ideas, and in the light of the ideas of specialists on the issue and researchers who discuss palliative care.

RESULTS AND DISCUSSION

Based on the analysis of the participants' language, four ontological themes emerged: (Re-) Remembering the vigor of having been; (Re-) Encountering spirituality; Fear of the disease's recurrence; and, Forgetting the temporality of existing with cancer.

(Re-) Remembering the vigor of having been

In his work Being and Time, Heidegger presents the interpretation of the authentically existing man, that is, the being-there in her totality. For the thinker, in anticipation of death, being-there exists authentically. The natural ontological foundations of the existentiality of the being-there are the temporality and the historicity.[9]

In the forward-looking decision, that is, in the originality and authentic form of caring, the man reveals all his potentiality-for-being, it being the case that this potentiality-for-being is manifested in a temporal constitution. It is a primitive temporality which is temporalized in accordance with three *ek-stases*. What is to come (future), the vigor of having been (past) and the actuality (present).

In this temporality, learning to be an entity for death, the being-there perceives herself to be thrown into the world and experiencing the facticity of her existence. The temporal movement through which she makes the return to her thrownness constitutes the past. In Heideggerian thinking, it is through projecting himself towards the past that the man can sight and take responsibility for his being-in-the-world.[9]

In this temporal projection, the being-there also becomes historical, but the historicity of this being does not reside in the simple fact of the Being-in-the-world being the object or subject of the history, but of having a destiny. In this case, history does not mean only what has passed, but also its origin and meaning for the person.[9] "The human being can return to the past, because life can be summarized, and crystalizes in significant forms, of meaning and value."[12:137]

Based on the above, we visualized, in the subjects' languages, that being cured from cancer in this *ik-stante* does not erase the memories of their vigor of having been. "The past always has meaning only in the extent to which it is seen from the present."[12:136] And, in this actuality, the patients demonstrate anxiety and suffering experienced in the times when they were subjected to the treatment. The time of chemotherapy stands out from the others as having had the most impact, through its effects and characteristics which invade the patients' lives.

[...] *So I began to do it, I did six months, but that was all week, Monday, Tuesday, Wednesday, Thursday and Friday, I did it every day, and that chemotherapy was very strong. I lost my hair, my skin all peeled, it was like being on fire inside, you know, and nothing stayed in my stomach, nothing, nothing, nothing, dysentery which left nothing of food inside me. So, I ate and I stayed lying quietly on the bed, if I moved, pronto, I had to go to the bathroom, so then I would go to the kitchen to eat again, because the hunger was like not being able to breathe. I was ill for six months, six months... I am 77 years old, now, today I am well, except now we cry* (S1). [...] *I said that I would confront it, but I didn't know that I would suffer so much with the treatment. I did the treatment, but I suffered, because it makes you very sick, gives you a headache, it was breast cancer, how I suffered... my God! After so much praying, I was praying, and I got better, but I was very low indeed, I thought I was going to die, I had no confidence in anything. Six months of chemotherapy, they were really hard* (S2). *The surgery went well. The difficult part came later, which was doing the chemotherapy and radiotherapy. The chemotherapy was the most difficult, as you had to be well fed, the platelets had to be normalized, if not, you couldn't do the sessions, and I would have to strengthen myself and return another day. I had a lot of sickness and I didn't want to eat* (S3).

In the narratives, we surmise that the chemotherapy treatment was revealed to these beings permeated with suffering, not only in the physical sphere, but covering the entire human dimension of the same. This feeling caused us to understand that, in discovering-oneself-in-the-world with cancer, at many times, the patient becomes incapable of understanding herself, living submersed in her own solitude, in which her dreams remain entangled in existence, in a natural relationship in which the I-patient is entire in her world and the world is entire in her illness.

In consonance with these findings, the literature reveals that, even after learning that her disease is stabilized, the patient who has experienced cancer remains with strong feelings in relation to the illness, which include the fear of dependence on the other and the fear of finitude.[13] This is because the profound marks left by living with cancer remain coupled with the individual's life, and last while her memories are equally intense and connected to her feelings.

(Re-) Encountering spirituality

When the possibility of imminent death comes to the being-in-the-world, principally through a disease such as cancer, initially the same is cast down, her life loses its meaning, and she feels abandoned by God. However, this Being being a temporal being, this temporality of existing-in-the-world with cancer causes her to understand herself always in this or that manner, considering that the ex-sisting also brings the positive possibility of becoming a whole in something.

In the ambit of the Heideggerian analysis, it is in projecting oneself towards the most appropriate possibility that the man can sight and take responsibility for his being-in-the-world,

realizing himself and improving in the real time of his life, basing himself in his temporality.[9] This temporality brings to the Being-there the capacity to precede herself and re-encounter with God, and her spirituality, during the treatment and afterwards, feeling her life to be restored and, mainly, her own power, that is, as a being of care.

For these individuals, spirituality is considered a vital element in the search for purposes and meanings to life, reaching the most intimate part of existence.[14] It is a search for answers which transcends the moment being lived, in assisting adaptation of the organization for the sake of higher purposes, re-thinking life's concepts and priorities, that is, the search for meaning.[15]

In evaluating the relationship between spirituality and cancer, studies mentioned that cancer patients pass through delicate points in the course of the discovery, treatment and cure; as, initially, they pass through a state of shock; after, they note that what is happening is real, and that they do not know what to think; and, later, they begin to plan the future with hope,[16] clinging to their faith.

In this understanding, we understand, based on the subjects' language, that the patients, in accepting that they are a cancer survivor, seek new horizons for rebuilding their lives; and, principally, reciprocating the grace received, caring for those next to them and being beside other patients who experience the same existential situation. In these cases, the disease may be understood as liberating, as it allows the person to find the true meaning of life, a discovery of oneself.[3]

I thank God all the time, all the time. We become emotional [...] I am grateful to my doctor all the time, and I thank God for having given me back my health. I feel well now, it is because of this that I have to care for the sick. God gave me the health that I had, better than before, and I help all the patients who come here. Those who need me, I go to the hospital with them, and at home, I care, helping to bath them, because it seems that it is an obligation that I have to help those in need, as God gave me back my health (S1). *It has been 11 years, I survived, but I fought a lot for this survival, I believed in God and in the doctors who treated me every time I did the tests, they comforted me, saying 'congratulations, you're managing, and you're going to pull through'. Today, I just do annual checkups, I am well and I don't think about this anymore, I just thank God for this survival* (S3).

In the narratives we also learn that to have survived cancer allowed the interviewees a new way of seeing the world and the people around

them, a fact corroborated by studies which evidenced the reorganization of life strategies and a new signification for the routine facts by patients who experienced cancer in their lives.[17-18] In this perspective, spirituality is an important dimension of man, which, added to the biological, intellectual, emotional and social dimensions, constitutes that which differentiates man in his uniqueness and personality.[19]

Spirituality is an expression of identity and the purpose of life of each one, in the light of their own history, experiences and aspirations. The relief of suffering occurs to the extent that religious faith allows changes in the perspective through which the patient and the community perceive the serious illness.[16]

Fearing the disease's recurrence

In the Heideggerian analysis, the disposition or affective tonality is raised regarding the past, when the man eventually retracts to the world of forgetting, to his having-been-thrown. The philosopher states that the disposition is characterized in mood or affectivity, representing the ways that the man expresses himself in the world in his being-thrown. In this temporal analysis of the mood, the author patents the fear and the anxiety.[9]

The fear is characterized as an inappropriate disposition, as the fear finds its opportunity in the entities which support it, detecting a "malum futurum". The existential and temporal meaning of the fear constitute a forgetting of oneself. The fear affords the withdrawal of the Being-there from his more appropriate potentiality-for-being and, in this forgetting, he no longer recognizes himself in his surrounding world and does not visualize the various possibilities around him, as, in the fear, the man becomes agitated in relation to the world, becoming afflicted and troubled.[9]

During the reading of the accounts, we visualize the possibility of the recurrence of the cancer as the intramundane entity which was already present and which can come again to the human beings in this study, provoking in them the feeling of fear in the light of the probability of having once again to experience the presence of cancer in their bodies. This possibility brings into their lives a mixture of fear and uncertainty, which surround the fear of the recurrence and re-approximation with death at every moment in which it is remembered.[20]

[...] I say this, that I am well, but all of a sudden the others begin talking, someone has died from this or that, and I begin to feel lower. A friend of my daughter died recently, my colleague, her mother wants to say, she died… She had cancer too, five years ago, and she despaired, I started crying. And recently, many memories have come back and I say 'I don't want to think about this', but soon afterwards, the news comes that someone died of this, and we get all of that in our head again. I do anything I can to get it out, but it's hard, for example, in June I have to do the tests again, every time I go I start praying, I pray that nothing will come up in those tests. When the time of the tests comes close, I become distressed, that distress with fear (S2); *The first few times, I got into such a state, any little thing that was different, I would straightaway think, is this something to do with it? Could it be something? Once I had rectal bleeding, sweat was worried, could it be…? I looked up a GI specialist, and I went to do tests* (S4).

In the Heideggerian meditation, the language is an existential ontological part of the being-there, that is, a positive phenomenon, which constitutes the way that the human being understands and interprets the facts in his mundanity of the world. However, as a project, the *Dasein* never achieved the ontological reference of the speech, settling for repeating and passing on what is said in the talking. In this case, the chatter is an inauthentic mode of the Being-there being-in-the-world-with the other.[9]

One study which focused on women who had survived cancer corroborates these findings, alluding to the presence of cancer in these peoples' lives as a "ghost", hence, even after the end of the treatment, any sign of its presence makes them relive all the suffering of the past.[18]

In the light of the above, we encompass the language of survivor 2, who states that feeling himself to be cured of cancer is also to live with the chatter of the entities around who do not really seek to understand their situation, as the chatter not only dismisses the task of an authentic understanding but also develops an indifferent comprehensibility from which nothing is excluded.[9] Similar feelings were found in an experience report published in 2010, in which the author, after surviving cancer of the colon, mentions that "[...] there are people who question you in a normal way, while there are others who don't ask you anything and go around saying things without knowing anything. They came and asked me if I had breast cancer, people who mix information, people who don't call me for fear of how I might react".[21:6]

The existential phenomenology of perception analyzes the body not as a physical organism, but sees it as a totality, a structure with relation to the things which are there, that is, the meaning is something which occurs in the body itself.[22] Hence, we also observe, in the account of Survivor 4, that the same reports living in an existential paradox, that is, on the one hand, she once more feels life in her body, but at the same time, lives with the expectation of the reappearance of the disease. This thinking leads us to believe that the experience of being a survivor can only be experienced and felt in all its completeness by the person who survives[3] and who brings hope, as the same is founded upon an important phenomenon in human life, taking on a special relevance in crisis situations.[23]

Forgetting the temporality of existing with cancer

The human being in his being-thrown-to-the-world can be manifested inauthentically or authentically. The inauthenticity is a way of Being-there being-in-the-world, but is characterized by abandonment of oneself, that is, the being itself abdicates from itself in favor of the world. In this condition, it forgets its possibility of being a being of care.

In the Heideggerian analysis, the human being is a being-in-the-world with possibilities for transcendence,[24] this because "our existence is characterized by a having to be which must, each time, that is, in each new situation, be taken on".[25:62] In the light of this, we surmise, in the discourses, that after transcending his existential anxiety before the probability of the recurrence of the disease in his life and, experiencing the temporality of being cured, the Being-there abandons himself to lack of care about himself, overlooking his facticity of being a being thrown away in the world, living at the mercy of the facts and occurrences.

In the accounts, we revealed that the temporality of being a cancer survivor immerses them in a state of existential decadence, losing themselves in the banalities of daily life. And, in this state, they cease to value certain important cares for the continuation of their health.

In particular, I feel like this: I [...] I forget what I had, actually. Last year, I even did something I shouldn't have, I should have done my check-ups in the beginning of the year, and in the rush I kept leaving it, leaving it and I only went to the doctor in July. There are times when I am like that, so tranquil that I stopped

valuing things. Every year I have to do a whole battery of tests, and last year I fell behind with them, so I do them from July onward, I go to the doctor who does the chemotherapy and to the mastologist. In the beginning I was worried about seeing what was changed, becoming apprehensive, but nowadays I do it normally, as if it were a test to check blood sugar, to check cholesterol. This might even be bad, I'm not worried anymore, I think it is bad, because maybe I have stopped valuing something which needs to be monitored better, but I'm really calm, I don't see any more problems (S4). [...] *I left hospital, thank God, and I didn't return, I am so casual that I don't even do the tests. My daughter says:' Mom, you need to go to the doctor'; I don't like doctors, but I have to be always at the doctor's. We have to go at least once a year to the doctors, to do a checkup, and everything, but do you think I go? No, I don't. Thank God, no, actually no, my daughter, thank God for not suffering and, sometimes, being traumatized, with depression, no no, I even forget, my daughter, forget, to tell you the truth, I forget that I have already done this, I don't even remember* (S5).

In his being-in-the-world, the being-there has the liberty of choosing his own path, living life according to his way of being and feeling the world, "which means taking on responsibilities with the present and with the future".[24:27] In the light of this, we can understand from the accounts of S4 and S5 that these demonstrate a way of living fixed to the present. And, imprisoned in this temporality, they let themselves be guided by the situation, overlooking themselves and their care. This attitude may demonstrate that to feel cured is to carry with oneself the ghost of the cancer, as if the same were present in their bodies, but in silence, being able to wake up at any moment. We learn, too, that revealing the phenomenon experienced by the survivors allowed us "the understanding of being in its multiple facets, in its experiences and relationships with the routine world".[26:985]

From the analysis of the survivors' accounts, in this ontological theme, we also surmise that the confirmation of the cancer and its treatment bring with it routine changes which transform an individual, leaving marks which last for the rest of his life.[27] Thus, the specter of the cancer and its consternation remain in the memories of those with whom it coexisted, and how it is faced is translated in a form unique to each individual.

REFLECTIONS ON THIS STUDY

In entering the world of the being-there who survived cancer, we sought not only to glimpse the human being, but to understand this being in her temporal existentiality. And, in this experience, this time is the most immediate phenomenal aspect of the temporality. In this situation, he manifests his way of having survived cancer, as, as an ontic-ontological being, the man reveals to his entities around him the happinesses, the sadnesses, and, mainly, the needs which encompass his ontic-ontological priorities.

The existential phenomenological analysis allowed us to understand the interviewees' feelings, it being the case that, for these, surviving cancer is to find oneself in a temporality which hears, sees and knows; which imagines and expects, and becomes happy and distressed in the context of one's existential facticity.

Hence, through this study, we understand that, in their being-cured, the people come to live with the fog of the disease in their daily life and, at these times, the anxiety is present and the fear of the cancer's recurrence throws them into a distressing state, and, in this *ik-stante* of their lives, that people try in every way to forget their vigor of having been, and this attitude causes them not to accept their responsibilities for the present and future.

However, at some points, the anxiety provides new perspective on life, which is reflected in a new way of facing problems and suffering, with only the feeling of gratitude to a superior entity remaining, for everything which remained in the past. In this way, these individuals now live authentically, demonstrating solicitude for their fellow man, and now inauthentically, turning away from their possibilities of remaining cured.

Based in the feelings constructed over time by the survivors, the need is demonstrated to broaden the nursing professionals' focus, given that this profession has a relevant role in maintaining the health and quality of life of the people who survived cancer, through planning actions directed towards educational processes and psychosocial support for these beings, raising their awareness regarding the importance of self-care through undertaking tests and being monitored by a doctor as a means of detecting any abnormality at an early stage and, thus, being able to live their lives in a full and healthy way.

We are driven like this, to the reflection on the care practised, so as to provide care which covers the needs of these Beings-in-the-world. In this context, it is essential to look to not only their physical dimension, but to the totality of their being. In our opinion, the need for the professional

to use time as a listening tool for improving the quality of the care is evident, as the temporality of being a cancer survivor revives feelings of anxiety, originating from not having a person with whom they can share the anxieties which cause them physical or mental discomfort or a means of doing so, thus restricting their quality of life.

In spite of the scale of the feelings which emerged among the survivors, the study has limitations, which do not allow us to generalize its findings to all the cancer survivors; however, the opportunity is repeated to offer health professionals some aspects which encompass the experience of these beings and which deserve due attention in relation to their care.

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RESEARCH ARTICLE   **Open Access**

"They make money off of us": a phenomenological analysis of consumer perceptions of corruption in Kenya's HIV response system

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Abstract

Background: Problems with misallocation and redirection of critical resources and benefits intended for PLHIV are not uncommon in Kenya. This study explores corruption in Kenya's HIV response system and the implications for health outcomes from the perspective of people living with HIV (PLHIV). Although they might not be directly responsible for health care fund management, PLHIV and their advocacy efforts have been central to the development of HIV system response and they have a vested interest in ensuring proper governance.

Methods: This phenomenological study was conducted in 2012 in Kiambu County in Kenya. The study was designed to capture the experiences of a select group of individuals living with HIV and AIDS and subsequent effects on intergenerational wealth transmission. Four focus groups were conducted with self-convened HIV/AIDS peer support groups. Findings related to corruption emerged unexpectedly, albeit consistently, across all four focus groups. To validate core themes within the data, including corruption, two coders independently reviewed and coded the data.

Results: Participants described incidences of resource misallocation, theft, and denial of services across three thematic levels namely at the interpersonal, provider, and institutional levels. Participants described the negative influence of corruption on their health and financial well-being, and propose: (1) strengthening legal protections for assets belonging to PLHIV, (2) direct representation of PLHIV within service agencies, (3) and addressing information asymmetries to inject transparency into the response system.

Conclusion: Our findings add to the growing literature that identifies advocacy among individuals and families impacted by HIV and AIDS to be a useful tool in drawing attention to harmful practices in the HIV response infrastructure; consistent with this movement, communities in Kenya demand greater control over programmatic interventions both at the national and local levels.

Keywords: HIV/AIDS, Corruption, Kenya, Phenomenological study

Abbreviations: AIDS, Acquired immune deficiency disorder; ART, Anti-retroviral therapy; CACC, Constituency AIDS Control Committee; CBO, Community based organization; CCC, Comprehensive Care Centers; CHW, Community health workers; HIV, Human immunodeficiency virus; HTC, HIV testing and counseling; KES, Kenyan shilling; OVC, Orphaned and vulnerable children; PLHIV, People living positive (with HIV); PMTCT, Prevention of mother-to-child transmission; STI, Sexually transmitted infection; USAID, United States Agency for International Development

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Background

Kenya continues to have one of the highest HIV prevalence rates in the world [1]. High prevalence and HIV/AIDS related deaths prompted the Kenyan government to declare HIV a national disaster in 1999. Although the rate of new HIV/AIDS infections in Kenya has declined steadily since the late 1990s, when the highest rates were recorded [2, 3], 1.6 million Kenyans are reportedly living with HIV [3]. Kenya's HIV response system is multi-sectorial in nature, characterized by a network of services provided through an array of Ministries and State Departments, County Governments, and various arms of the private and corporate sectors [3]. This broad and overarching response system uses a social justice perspective to integrate prevention and health services, research and development, and organizational development [3]. At the national level, financing and administration of testing and treatment services is the responsibility of the Ministry of Health through The National AIDS and STI Control Program (NASCOP). Other government ministries—such as the Ministry of Labour, Social Security, & Services; Ministry of Education, Science, & Technology—are responsible for administering and delivering auxiliary services such as economic empowerment supports for vulnerable families, education bursaries for children orphaned or made vulnerable by AIDS, and enforcement of anti-discrimination policies.

Although the Kenyan government has developed public agency infrastructure for delivering HIV services, only 18 % of these expenditures are financed through public coffers. Rather, the extensive healthcare needs have meant that the lion's share of the HIV response costs are borne by international development partners, the corporate sector, and private households [4]. It was estimated that Kenyans spent over US$ 98 million on out of pocket costs in HIV related care in 2011/12 accounting for 13 % of the response system. PLHIV spend approximately seven times more than what the average Kenyan spends on health care [4] which includes medical costs associated with HIV and HIV related illnesses. In 2012, the private and corporate sectors contributed approximately US$ 15.93 million to the HIV response system. They do this providing work place programs such as interventions dealing with stigma and gender relations, pharmaceutical treatment, and inpatient and outpatient care [4]. Finally, international development partners play an integral part in the HIV response system by bearing a significant share of the cost burden—approximately 70 % between 2009/12. This over – reliance on international donor supports raises concerns about the Kenya government's ability to sustain the response effort.

Corruption in Kenya

Problems with misallocation and redirection of critical resources and benefits intended for PLHIV are not uncommon in Kenya, where corruption is widespread. In a worldwide corruption perceptions index, Kenya was ranked 139 out of 168 nations, with 43 % of those surveyed perceiving corruption as a problem in the health care sector alone [5]. Corruption is defined as public servants' abuse of their position for personal gain [6]. Kenyans have extensive personal experience with corruption; 77 % of those surveyed about corruption in Kenya reported that someone in their households paid a bribe to the police, 54 % to public registry departments, and 35 % to medical healthcare providers [5]. Within health care and other public systems that support PLHIV, corruption can also manifest as a variety of behaviors among decision makers within public agencies, provider facilities, and community groups. Other examples include kickbacks for procurement decisions, embezzlement, fraudulent claims of services rendered, theft of funding or supplies, charging individuals for services or products that should be free, providing poor quality care, diverting individuals away from public benefits, and excessive absenteeism among providers [7–9]. Bribes and corrupt behaviors may be used both by consumers as a conduit to access legitimate services or by decision makers to gain access to unmerited goods and services.

Regardless of the level at which it occurs, corruption obstructs the delivery of resources, services, medications, and benefits to those who are most in need, unduly impacting low-income Kenyans, and can lead directly to poor health outcomes [10, 11]. Unchecked corruption threatens the stability of international aid, health programming [12], and national economic growth [13]. In addition, corruption can lead to distrust in public institutions and healthcare providers. Especially in healthcare, where patients rely on professionals to consider their best interests, distrust limits individuals' motivation and likelihood of accessing needed services, and compromises personal health [14, 15].

Conditions that drive corruption

Although corruption among public officials is often driven by individual factors, their behavior is also heavily influenced by organizational, institutional, and cultural contexts [6, 16]. In many cases, corruption is motivated by the potential for personal financial gains, friendship, or family, but made possible by ample opportunity to engage in these behaviors without being held accountable [6]. As large sums of international aid are dispersed throughout complex public systems, weak governance infrastructure, limited integrity policies, poor supervision, and wide ranging personal discretion in decision making allow public officials to misdirect resources without being detected [7, 16]. Another factor may be that decision

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makers feel justified in accepting a bribe because they feel their work is inadequately rewarded [17].

Furthermore, personal, organizational, or cultural values that enable public officials to rationalize their behavior can drive corruption. For instance, weak ethical values, strong social norms, or cultural taboos such as the social stigma associated with HIV/AIDS could legitimate corrupt behaviors [6]. Kenya's political structure and ethnic heterogeneity has been viewed as a driver of corruption. Kenya has had a long history of political patronage driven by ethnic and regional motivations. The result has been economic inequalities along ethnic, and by extension, geo-political boundaries [18, 19]. These inequalities have bred an environment of ethnic cronyism where individuals engage in corrupt activities not purely for private gain but also for the benefit of fellow tribesmen. Indeed, Orjuela [20] cautions that in societies where group identity is paramount, corrupt behaviors and actions in pursuit of "personal again" could extend to include the "collective gain" of a particular group.

Fighting corruption often requires multiple complementary measures that target internal governance, improve transparency, and engage the public in promoting accountability. Internal accountability mechanisms that tighten personnel management, procurement, and oversight processes can reduce the opportunity to misallocate resources. For instance, instituting staff performance appraisals, codes of ethical conduct, mechanisms for reporting and subsequent sanctions for misconduct, and financial incentives for performance could minimize opportunities, pressures, and acceptance of corruption [9]. To complement internal governance initiatives, external mechanisms are needed that engage the public in promoting accountability among systems, providers, and other decision makers. Provider report cards, consumer advocacy or advisory groups, complaint boxes, and health facility charters that advertise the cost of services can promote transparency and information dissemination to the community, empowering patients to challenge corruption [21–23].

Consumer advocacy and the global HIV response
In 1978, the World Health Organization introduced the idea of local involvement and control in the design and implementation of health systems as a necessary mechanism to effectively address public health issues, particularly in the global South [24]. UNAIDS guidelines requiring community engagement were established in 2000. Initially, engagement was focused on research participation and protections through Community Advisory Boards (CAB) but engagement has since expanded to more broad participation in research, advocacy, program and policy design, and service delivery. Effective community engagement processes are based on: 1) authentic

participation of a representative group of stakeholders, 2) mutual trust between community and partners, and 3) shared power [25]. Engaged community may lead to greater transparency in the research and implementation processes [26], re-direction of resources to areas of highest need, [27, 28] and locally appropriate services [29]. Consumer advocacy is also associated with increased patient trust in providers. As consumers develop stronger trust in healthcare professionals, they may be more likely to comply with treatment [26, 30]. From a service provision perspective the use of unpaid volunteers in service provision is geared towards increasing the chances of program sustainability. It should be noted that community volunteers account for approximately 40 % of community based organizations' (CBO) budgets. This is especially salient given that in Kenya funding most likely comes from external donors and is limited (average annual budgets equal approximately US$ 15,000) [31]. However, reliance on under- or uncompensated labor, particularly in communities where needs are great, could be construed as exploitative and is indeed unsustainable in the long run [32]. Thus, even in systems with strong consumer advocacy and involvement, there still remains a strong risk of the misalignment of resources to local needs.

Methods
This study explores consumers' experiences in Kenya's HIV response system and describes corruption and implications for personal health and well-being. Consumers [1] describe instances of corrupt behavior at multiple levels of the system, [2] explain the effect of corruptive behaviors on personal health and well-being, and [3] identify potential strategies for improving governance and accountability within the healthcare system.

This phenomenological study was conducted in 2012 in Kiambu, Kenya. Phenomenology allows for the exploration of lived experiences. Unlike grounded theory which focuses on the objective generation or discovery of theory, the phenomenological approach seeks to unearth the deeper meaning of experiences solely from the perspective of an individual's life experiences [33, 34]. Furthermore, this technique aims to reduce the degree to which conceptualizations of the phenomena are superimposed on research participants' re-telling and understanding of their experiences. Given the dearth of information on the phenomenon of intergenerational wealth transmission in households at the confluence of poverty and chronic illness, this study was originally designed to capture these experiences among a select group of heads of households. Four focus groups were conducted with self-convened HIV/AIDS peer support groups in the region. In light of the original study's focus on personal and family asset holdings, the findings

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related to corruption presented in this manuscript emerged unexpectedly, although consistently, across all four focus groups.

Study design, setting, and population

Kiambu County is home to a mixed economy, with industries and large scale farms on the one hand and small subsistence land holdings and informal housing settlements (slums) on the other. The County Integrated Poverty Plan 2013-17 places the county's poverty rate at 21.75 %. Kiambu county's HIV prevalence rate stands at 3.8 % and ranks 38th among Kenya's 47 counties [35]. Admittedly, Kiambu County has inadequate health care services with a doctor/patient ratio of 1:17000 and the nurse/patient ratio at 1:1300. In addition the county has one level-five hospital, namely, Thika District Hospital [36]. Although located in a region predominated by the Kikuyu tribe, the county's proximity to the capital city Nairobi and its peri-urban economy means that it is home to Kenyans from all ethnicities. Kenya has at least 40 different ethnic tribes each with unique intergenerational wealth transmission norms and rules. We documented understanding of this issue from different cultural perspectives by deliberately seeking peer support groups that were as culturally diverse as possible, although homogeneity was not an exclusion criteria.

A community gatekeeper assisted with recruitment by publicizing the study among local support groups. The gatekeeper had access to these groups through her participation with the local Constituency AIDS Control Committee (CACC). CACC's are local bodies charged with the coordination of HIV and AIDS activities. HIV Peer support groups are required to register with their local CACC [37]. Participating groups were those that were able to convene with at least ten group members present and had to be able to commit at least two hours to the interview.

These recruitment procedures yielded a diverse sample, with regard to age, gender, and tribe. Of the 45 respondents 67 % were female. The respondents ranged in age from 28 to 63 years (M = 42.9, SD = 8.52). Household size ranged from 2 to 9 individuals (M = 4.9, SD =2.02) and with the exception of four respondents, all others were living in a household with at least one child under the age of 18 years. All respondents self-identified as major decision makers in their households. Only eight (18.6%) of this sample had completed secondary school, while nine (20.9 %) had not completed primary school education. Participants self-identified as Kamba, Kikuyu, Kisii, Luhya, and Luo thereby providing a diverse cultural perspective.

Data collection and analysis

Data were collected through four in-depth focus group interviews and a brief six question close-ended survey with each respondent participating in only one focus group discussion. Focus group interviews are especially advantageous as a research method as a heterogeneous group is more likely to elicit lively conversations that lend to comparing and contrasting experiences, thereby providing a nuanced description of the phenomenon.

Interviews were conducted in Kiswahili (national language), English, Kikuyu, and Sheng (slang). The first author is fluent in all of these languages. Focus group interviews were digitally recorded with each groups' permission, and flip charts used to highlight the key words and major points that emerged throughout each interview session. A research assistant (with certification in human subjects' research) was also present to assist with facilitation. Transcriptionists were hired to transcribe and translate the data into English. The first author checked all transcriptions and translations to ensure accuracy and consistency.

Data were analyzed using AtlasTi software [38]. A phenomenological data analysis approach was used [33, 34]. To enhance the process, two coders—the first author (coder #1) and the second author (coder #2) independently reviewed the transcripts. It should be noted that coder #1 is Kenyan, has previously analyzed these data for other themes, and has been immersed in this literature for close to a decade while coder #2 is North American and has substantial experience working with qualitative data. To check for and avoid the introduction of assumptions, interpretations, and meanings exogenous to the transcripts as provided by the participants, both coders independently engaged in a neutral appraisal of the transcripts to establish a global understanding of the interviews. This process ensured completeness because each coder would ideally identify meaning units on account of their different theoretical backgrounds, world view and biases. In the second round of analysis, both coders met to discuss the emergent meaning units and to integrate these units into meaningful structures. After several iterations, this part of the data analysis process identified two levels at which corruption of resources takes place, namely provider and institutional levels. The final round of data analysis deconstructed the data further by attempting to understand what these different levels of misappropriation tell us about this population's experiences. Connecting these two themes to the numerous examples in the data, the coders were able to explain this phenomenon by exemplifying how misappropriation takes place, the consequences on well-being, and suggested solutions to address the identified gaps.

Results

The issue of corruption as it relates to the well-being of the groups was mentioned and discussed throughout all four

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focus groups. Participants described incidences of resource misallocation, theft, and denial of services across two thematic levels namely at the provider and institutional levels. Under each thematic level, quotations derived from respondents' perceptions of how corruption manifests in their lives, their interpretation of its impact on overall well-being, and proposed solutions are presented. Table 1 Participants identified a system of service provision, which was fraught with corruption. The discussion further evolved into examples of how the lack of accountability emboldens individuals to either deny services or game the system for personal or collective gain. Focus group participants identify ways in which at the institutional level government agents, international donors, and the research community engage in practices that could be construed as disadvantageous to PLHIV. Finally, participants identify ways in which institutions could provide greater PLHIV protections and ownership of the response system.

Service providers

This section presents narratives discussing experiences with service providers, including health care workers, community workers, and bankers. Given the differences in the roles and functions of facility-based health workers and community-based health workers, data on these two groups are presented separately. In addition, given the Kenyan Government's integration of economic empowerment interventions as a component of the HIV response system [3] and the critical role income and assets play in the health and well-being of impacted households, participant discussions that revolve around banking representatives are included in this section.

In discussions revolving around facility-based healthcare providers, participants described situations where workers denied them services. Specifically, female respondents from Group D discussed how the intersection of HIV, stigma, and tribalism in Kiambu County resulted in a delay of health services. In addition to stigmatization by doctors and other hospital workers, these women described an instance where hospital staff were heard to attribute this delay of service to their tribal affiliation. Here, the women speak of arriving at the hospital early only to have other patients seen before them...

> *Respondent 1: That one was attended to, then the third one was called, and they kept calling others in for treatment, until they got to the tenth person, and I was just sitting there. I started to ask why I am not being called in yet I was there first. I found my file on the table but it had been kept aside. When I asked, they told me that I was bringing a disturbance, step outside come in only after I have called you in.*

> *Respondent 2: I was there that day and she is not the only one who was affected, I too was affected.*

> *Respondent 1: So I went outside and I overheard the social worker and the doctor, I don't know who else was in the room but it's just the people who work there, I overheard them say, "That one is a Luo (tribe), she will have to wait". I was very hurt. I went in and asked them, "doesn't a Luo deserve treatment?"*

It should be noted that upon further probing, respondents from this group did confirm that this denial of service was due to discrimination based on both their HIV status and tribal affiliations: *"here in Thika District, sometimes people are discriminated against because of their tribe".* Group D. In instances such as these, hospital staff prioritized care for patients with a similar tribal affiliation by delaying treatment to patients from different ethnic groups. However, this group also acknowledged that the system is improving and the situation is not as dire as it once was.

Further, participants noted service delivery differences across different service delivery settings. In particular, Group D provided examples to illustrate county variations in public HIV care. It should be noted that theoretically county level services should follow comparable administrative, payment, and care procedures. Participants noted how stark differences in costs and services are unfair, and arouse their suspicions about the proper use and disbursement of national resources that

Table 1 Emergent thematic levels

Thematic Levels		
	Service providers	Institutional
What is experienced	– Theft of resources designated for PLHIV – Misdirection of resources from PLHIV to the public – Denying services due to ethnicity and HIV	– Bribing officials to amend/issue legal documents – Misdirection of resources from PLHIV to the public – Difficult to access service system
How it manifests and affects PLHIV	– Heightens the cost burden of the diagnosis – Longer hospital wait times – Hard to access bank loans	– Lack of support services – Consumers are denied ownership of the response system
Proposed solutions	– Representation within the response system – Equity	– Legal protections of PLHIV Representation within the response system – Transparency

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hospitals receive to serve them. These regional differences are especially pertinent given well documented instances of *'tribalism'* and regional disparities in national resource allocations [19, 20] previously noted:

> Respondent: I am part of a support group in Maragwa. When you go to the clinic in Maragwa, the first thing you are given tea because you arrived early, it is assumed that you have had nothing to eat. If lunch time finds you there you are given lunch. When it's time to go home you are given two hundred shillings for transport… If you go to the hospital there suffering from the flu, you won't have to buy medicine. You do not even need to buy a card. However, here where we live, we do not see things like those. They do not reach us. We wonder where they go to.

In addition to regional service delivery differences, variations in the way providers treat PLHIV were noted between public and private care facilities *"So I went to the private health center called Mulumba (St. Mulumba) and I am normally treated very well. I was very discouraged at the government run ones"* Group D. Although the circumstances surrounding the quality of treatment provided at the public center are unclear, when consumers feel unwelcome, they may not seek needed treatment thereby compromising adherence and retention into care. Participants continued to describe their skepticism about the proper use of resources when they are charged for services that should otherwise be covered by government benefits and therefore offered free of charge to them:

> Respondent: Here even to get a card (medical card) you need money.

> Respondent: Even if you go there (Thika Hospital) critically ill, you must buy a card before you are attended to.

> Respondent: And that's in a government hospital.

In addition to these auxiliary charges participants were also curious as to why PLHIV are often l turned away by providers when they are ill, *"another thing in this hospital is, when you go on a Saturday or a Sunday and they see your card has CCC[1] written on it, they tell you to come back on Monday.* Group D. Thus, participants illustrated how the quality, accessibility, and costs of care vary widely despite government efforts to fund and standardize services and also noted variations in the way providers treated PLHIV. Their conversations therefore centered around reasons why PLHIV did not receive comparable treatment across all public centers, and

where the resources clearly intended for them were directed.

Community health workers (CHW) are a critical part of the HIV support system in Kenya. Respondents discuss how community workers benefit from concrete supports that are meant for PLHIV, which leads to greater out-of-pockets costs. One participant describes a situation where a CHW stole blankets intended for her children:

> Respondent: I want to ask something, these CHW, for example there was a time they asked us to fill forms where I live. The lady asked for a hundred shillings for each child. I gave 300 shillings for my children and returned the form to her. Only one child was issued a blanket, the other two got none, and remember we paid a hundred shillings for each form. As the CHW she said she had people she was caring for and took 3 blankets to take to them. Later she was asked whether she had taken those blankets to the people and it turned out she hadn't. The blankets were taken from her house by the Headman. She said they would have to wait for her to bring them because she was already using them in her house. You see, they hide these things from the people they are expected to benefit.

> Respondent: And that person gets paid to work, they are salaried.

> Respondent: They ask us for all this money and they forget we have to work very hard to get it, even go without some things so that they can forward those forms for you. Group B

Participants expressed outrage and disappointment that a paid professional would exploit a patient, especially one who is also experiencing financial struggles. Conversation continued and participants speculated that CHWs might engage in these behaviors because many are not HIV infected and do not relate to the patients they serve. Recruiting and training CHWs from the PLHIV community was proposed as a counter to this exploitation. Participants argued that CHWs who share a diagnosis with their clients might be more inclined to empathize with and therefore provide better services to the community as described by one participant in Group B: *"If CHW has HIV it's okay … they will relate because the person they are helping has HIV too."* Group B.

Economic empowerment is a strategy that has been used in the public and private sectors to address the HIV epidemic. Given the economic burden of a seropositive diagnosis and the high poverty rates in the region, income-generating activities were discussed by all groups as interventions that strengthen this population

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both economically and socially. For instance, participants from Group A discussed the merits of their rabbit rearing business which served a threefold purpose: a much needed and affordable protein for group members, a source of income when excess products are sold to local communities, and finally as an activity that keeps the group socially engaged and connected.

Given the preeminence of income in the fight against HIV, financial institutions play a key role in the response system. Participants from groups B, C, and D discussed how proposals written by PLHIV meant to bolster their economic functioning are often un-funded or when funded the resources are directed towards non-affected groups. Participants argue that a sero-positive status, their low-income status, and tribal affiliation is used to discriminate against funding for group *projects, "as members we write proposals. But when you write this proposal, you hear that another group benefited but the one that has HIV people questions are asked about how they will repay a loan"* Group B. Respondents are indeed committed to securing their economic well-being and do make the necessary efforts to attend the relevant trainings in the hope of receiving financial supports which are not always forthcoming, *"we were trained for 6 months and we did not get any support"* Group C.

Participants proposed several solutions to the issues they had identified. To reduce discrimination, group members discussed the importance of having a representative voice and equity in the service provision system. Representation is viewed as a way in which agencies can be held accountable during service provision. Specifically, respondents highlight the benefits of including their peers as representatives on these government councils.

> *Respondent: I would also like us to talk about the government, yes the government is saying that its giving us support but those who have been given the mandate to help us are benefiting themselves.*

> *Respondent: For example the government gives food to those who are HIV positive and those who are supposed to supply the food are selling the food, those who are in charge are not affected like us and the people who are chosen are not HIV positive... In case there is any support that is given we should have representatives... we should know the representatives very well.* Group C

The solution of representation was further elaborated when the group members continued their discussion:

> **Interviewer: There should be a representative?**

> *Respondent: Yes, the money should not be distributed by the government.*

> *Respondent: One of us should be involved in the distribution of that money.*

> *Respondent: We should be the ones who are supposed to be given the money.*

> *Respondent: ...we also get people who usually come and tell us to fill forms, give our passport photos, ID and those documents are going to be dumped so we don't believe anyone.*

> *Respondent: They make money off of us.* Group C

Earlier, respondents expressed their belief that providers divert resources away from PLHIV because they do not understand or relate to PLHIV. Thus, respondents assume that by having PLHIV involved in decision making and service provision, providers will be less likely to take or misallocate resources, thereby increasing accountability within the system.

Institutional level

At the institutional level participants perceived a system that is permissive of corrupt government officials, misdirection of national resources intended for PLHIV, and a difficult to access response system. One of the ways this manifests is the collusion of government officials with relatives and non-relatives alike to deny PLHIV of critical economic resources. Again, given the strong association between HIV and economic disenfranchisement, the theft and misappropriation of their meager resources is especially detrimental to their well-being. Participants shared a variety of situations where family members and village elders deliberately colluded with government officials to misdirect resources intended for them. Both genders identified women as being especially vulnerable. For example, one participant from Group B describes how relatives bribe legal officials to deny widows access to land upon the death of a husband by altering official documentation: *"It comes in because as I have told you, the brother has money, right? You the widow are left without any money. Because of corruption, the said brother will go and give whatever amount of money and after a few minutes, the documents will be given to him with his name written on them"*. A participant from the same group added, *"Let me contribute a little, for instance, everywhere in this country there is an assistant chief. The assistant chief knows everyone in their area. They know whose wife you are, they know who has died. If the assistant chief is bribed, your case is closed. It starts with the administration, because the administration in the village is the chief and assistant chief. Whether you go to the chief or to the police station, they all work in the same way, together"*. Group B

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A male participant from group A described an experience he had where he helped a female acquaintance secure legal documents: "*There is a lady I went to assist to get a death certificate at the City Mortuary. She had tried to get one for a whole year and every time she would go they would tell her that they already issued one. When I went there...I found out that they had written two death certificates. I asked why they had issued two death certificates, had this person died twice? How can you note two death certificates for one person?*" In this instance the document in question was a death certificate, a document which is critical to the succession process and is used to secure household assets after the death of a family member.

Institutional players were further identified as misdirecting national resources intended for PLHIV. For instance, participants from Group D noted in their discussions instances where food and money donations intended for PLHIV were misdirected away from these intended target groups: "*There was a time I heard that there are donors who send food to Kenya for people who are living the virus. Who does this food benefit because we don't get it*". Again, although participants are not a part of the HIV response system, these group members are aware of how resources ought to be allocated and lack of access or receipt of these resources may raise questions about proper allocation and distribution.

How is this corruption at the institutional level experienced by these participants? Participants discussed situations where accountability mechanisms (in place to prevent skimming and false claims) are circumvented and as a result they do not receive potential services and resources. Group C participants describe an instance where they were asked to cooperate with information gathering efforts by a government group seeking external donations. Presumably, the group needed a count of PLHIV to justify their request for funding:

Interviewer: When you sign somewhere do you usually ask why you are signing?

Respondent: Even if we ask we are going to be cheated.

Respondent: We are usually told that there is funds that are about to be released and the donors want to know how (many) members we have, write your name and sign, since you want to get support then you will just sign, since the donor is not there to know the only proof that he can get is by me writing my name and signing and that's why we have said, it's good that you have a recorder so that the donors can listen to us and not you, the donors should not give the funding to those who are not affected because they do not give us the funds. Group C

Although participants seemed aware that their cooperation might not yield any direct benefit to them (and in fact, might only serve others' personal gains), they complied with the request anyway. Given their tremendous financial needs, many felt as though they could not risk not cooperating. Thus, although PLHIV are aware of the potential use of their exploitation for others' personal gain, they might also often be unwillingly complicit in corruptive behaviors because of their own dire economic statuses. This engenders a feeling of hopelessness, when PLHIV know that the promised assistance may never materialize.

Feelings of mistrust as a result of exploitation were not only reserved for government officials. Participants also detailed their growing mistrust with the research community. They perceive an imbalance in this relationship with the scales tipped towards the researchers' favor. To protect their own interests, PLHIV have begun demanding monetary compensation prior to consenting to research activities, "*...there are a lot of people who call on us...they then tell us it is possible to be helped. Then you live with that hope...then you live waiting and that is the reason why these days when you ask to interview a person living with HIV they ask you for money. Because people have realized that they are being used*" Group D. Another group member offered a poignant statement on the disconnect between the data collected by researchers and the resulting interventions that do not seem to have a direct impact on her life, "*now, when you interview groups and go back abroad, we the ones you have interviewed are not the ones who benefit from the research. Doesn't that hurt?*"

To address some of these situations participants first identify individual wealth protection mechanisms that they can undertake to protect their economic resources and to circumvent the collusion of family members with corrupt government officials. Participants from all four groups discussed at great lengths some of the strategies they should apply to protect themselves from economic exploitation. These include using the legal system, the use of both oral or written wills, and divulging the location and quantity of household wealth holding to children early on to stave off disinheritance after their deaths.

Participants also proposed several solutions to address the institutional loop holes identified in the system including consumer accountability and having a representative voice at the table. Such an approach would not only deal with the misdirection of services but also promote the availability of services that are targeted and tailored to this population's specific needs. In the quote below a participant in Group B posed a question to the group pointing towards the need for accountability in

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funding streams. *"May I ask a question? Is it possible for example when people are writing proposals, there are those who sit down and decide that HIV people need this and this, is it possible two have at least two HIV Positive people in those meetings?"* This sentiment is echoed by participants in part of a conversation that was initiated by the interviewer. This discussion points to a level of accountability that PLHIV would inject into the system *"if this money was in the custody of people living with AIDS in Kenya, it would get to those who are affected because they know all the difficulties of this disease"* Group A.

Participants reported feeling infantilized by the system and want ownership of the research process to ensure that the results address critical problems that they encounter. To do so, respondents noted the importance of community participatory research approaches:

> *Respondent: when you are doing your research please tell them not to start at the top. When you start at the top it doesn't reach them (PLHIV), it doesn't pay*

> *Respondent: It doesn't reach us. Come to the grass root. Like now you have come to the grass root. If you started at the top you couldn't know anything*

> *Respondent: Even those projects they (donors) think they can start, they should start from the ground, send their people here, they start from the ground.* Group A

Thus by starting "at the top" participants feel as though research studies or other externally initiated projects might not be addressing the critical problems that they encounter and, thus, the results are not likely to benefit them.

Discussion and implications

These findings emerged from a larger study designed to understand intergenerational wealth transmission in families impacted by HIV in Kenya. Perceived corruption emerged as a salient theme during participants' discussion of their experiences. Given the research team's responsibility to report findings as entrusted to them by study participants, this particular sub-study further explored consumers' experiences and perceptions of corruption. Using transparent and rigorous data analysis procedures, perceived instances of corruption were identified among direct care providers in health care and other service systems and at the institutional level among both local and high-ranking public officials. Corruption is widespread and, thus, a high priority concern among people living in sub-Saharan Africa [39]. In this study, participants described the corruption throughout Kenya's HIV response system in their own words. Corruption manifests as a variety of behaviors among public

decision makers, but differs depending on the setting. Within healthcare organizations, other entities that serve PLHIV, and within the larger governmental and international institutions, participants described how they believed that providers diverted medications, food, and other resources intended for PLHIV, charged for services that were perceived to be free, delayed treatment, or outright denied benefits to PLHIV. Many of these actions could have been motivated by public officials' or health care workers' personal economic interests; however, in some of the cases described, these officials or workers did not directly benefit. Rather, other patients or citizens from similar tribal groups, or those who are not directly affected by HIV benefitted from their actions by accessing resources or services that may not have been merited. Although corruption is typically motivated by direct personal gains, our study illustrates how corruptive behaviors might also be motivated by the potential to extend such gains to one's own social group. Based on participant perceptions, in many cases, decision makers might be justifying their actions based on stereotypes about PLHIV or tribal divisions.

Mitigating corruption – implications for intervention

Study findings highlight the potential for several policy or programmatic interventions for mitigating corruption within Kenya's HIV response system. Chiefly, participants advocated for greater ownership of the HIV response system in the form of PLHIV representation. Members of all four peer support groups involved in this study believe that including PLHIV in decision-making could hold institutions accountable thereby creating a more effective service delivery system. Citizen participation (and specifically participation of other PLHIV) also encourages greater transparency in the way that resources are allocated and services created. Addressing information asymmetries would not only address the current system inaccessibility but would also empower the community. In other countries, transparency measures and opportunities for citizens to have a voice in administrative and policy decisions have empowered citizens to challenge corruption and ultimately improved satisfaction with the health care system [21, 22]. These present findings therefore add to the growing literature that identifies advocacy among individuals and families impacted by HIV and AIDS to be a useful tool in drawing attention to harmful practices in the HIV response infrastructure; consistent with this movement, communities in Kenya demand greater control over programmatic interventions both at the national and local levels.

In addition to greater accountability and transparency within Kenya's public and private institutions, participants also identified the need for additional support for controlling their assets and economic security. PLHIV

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are especially vulnerable to asset loss when they are set to inherit wealth from a family member. Additional legal protections that safeguard PLHIV from property grabbing could ensure participants rightfully inherit assets. In addition, further assistance with inheritance planning could help PLHIV ensure their assets are appropriately directed in accordance with their wishes upon their death. Together, legal protections and financial planning assistance could improve individuals' control over their assets.

Our findings also highlight ethical and accountability implications for the international community. Participants' concerns that international aid does not reach them point to the need for international donors to be aware of potential resource diversions and the negative consequences for PLHIV. For instance, USAID developed tools for assessing corruption in country and tailoring anti-corruption strategies [40]. Tools such as these that recognize each society's unique socio-cultural, political, and economic environment hold promise in addressing this issue. In collaboration with government officials, more proactive fiscal and programmatic monitoring and other accountability structures could help ensure international aid reaches the intended targets. In addition, international researchers studying HIV treatment, service needs, and experiences of PLHIV should consider their local contributions. Consumers have a long history of mistrust with researchers – researchers who win external funding to study the HIV pandemic arrive in-country and gather data directly from PLHIV. Yet, participants rarely see the results. Furthermore, programs and policies are designed based on the interpretation of that data by people outside of the community [26]. Producing ethical and responsible research that fills a local need calls for well-designed scientific participatory approaches.

Finally, anti-corruption measures are unlikely to be successful in Kenya without continued efforts to reduce stigmatization and discrimination based on HIV status and ethnic membership. Given that disclosure of HIV sero-status is integral to procuring resources from service providers (41) pervasive stigmas and stereotypes create a social context that allows decision makers to rationalize corruption [6]. So until misinformation surrounding a HIV diagnosis is eradicated and the individual worth of persons affected by the virus is socially elevated, corrupt acts targeting this population may continue. At the institutional level, appealing to public service motivations and promoting strong ethical values among decision makers [17] will hopefully begin to address this situation.

Limitations

Because this study was not designed with the specific intent of exploring corruption, we acknowledge that we may have missed other facets of this phenomenon. Although participants shared their personal experiences with corruption as service consumers, they might not be privy to observing (or confirming) all forms of corruption, especially behaviors that occur among higher-level administrators and officials. Thus, we recognize that these data do not provide objective evidence of corruption but do provide preliminary evidence of the influence of consumers' perceptions about corruption on resource acquisition, health service access, and outcomes. In addition, the study design precludes any local or national generalizability on the extent to which corruption occurs or affects PLHIV. However, these perspectives gathered from PLHIV who are well positioned to describe their experiences with the system are vital and should be considered in our scrutiny of the HIV response system. Although corruption is perceived to be widespread throughout Kenya, follow up research is needed to determine the magnitude of the problem, how frequently it occurs, and the resulting impact on PLHIV. In addition, future research is needed that tests the effectiveness of anti-corruption measures targeting government agencies as well as providers in the HIV response system.

Conclusions

Participants place great importance on the theme of corruption as it relates to their overall well-being. This study expands on prior literature documenting the negative consequences of corruption on national economic development and health by illustrating the impact on the daily lives and well-being of PLHIV. Specifically, our findings highlight how corruption in Kenya's health system and governmental institutions may be driven, in part, by HIV and tribal stigmas. Based on participants' accounts, corruption throughout the system results in fewer resources for PLHIV. Corruption in the form of resource misappropriation or theft is especially deleterious given the high cost burden already borne by the study population.

Endnotes

[1]Comprehensive Care Centers (CCC) are medical centers charged with the delivery of HIV medical services including counseling, nutrition, and other support services.

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Availability of data and materials
The dataset supporting the conclusions of this article is not included within the article due to the study's assurances to participants that the raw focus group and demographic information data would not be shared publicly, and that all attempts would be made to maintain confidentiality.

Authors' contributions
NK designed and conducted the study, led the focus groups, data analysis, and manuscript preparation. AB served as a data coder, assisted with data interpretation, and contributed to manuscript preparation. KW contributed to data interpretation and manuscript preparation. All authors read and approved the final manuscript.

Competing interests
The authors declare that they have no competing interests.

Consent for publication
Not applicable.

Ethics approval and consent to participate
This study was approved by Adelphi University's Institutional Review Board in 2012. All participants provided their informed consent to participate in this study.

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Research Reports

Coming to Terms With Permanent Involuntary Childlessness: A Phenomenological Analysis of Bulletin Board Postings

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Abstract

Little is known about the role that online support communities play in the lives of women faced with permanent involuntary childlessness. To understand the experiences of these women, this study conducted a thematic analysis of messages downloaded from an online community for permanent involuntary childlessness. Four central themes were identified: Feeling like an "outsider", A whole lifetime of loss, Coming to terms with childlessness and Finding a safe haven online. These findings show that the online community appeared to empower women to move on with their lives and discover a new sense of self-worth and identity beyond that of motherhood.

Keywords: infertility, online support, involuntary childlessness, social support, internet, psychosocial well-being

Infertility defined as the inability to conceive after two years of regular unprotected sexual intercourse, is estimated to affect approximately 72.4 million people worldwide (Boivin, Buntin, Collins, & Nygren, 2007). A review of the infertility literature suggests that men and women faced with infertility will often experience a strong need for psychosocial support and guidance; a need which is not always adequately met by existing sources of support (Alesi, 2005; Malik & Coulson, 2008a; Schmidt, 2009). Recent research has explored the potential role of the Internet and in particular online support communities, in helping to address these unmet support needs (Epstein, Rosenberg, Grant, & Hemenway, 2002; Epstein & Rosenberg, 2005; Himmel, Meyer, Kochen, & Michelmann, 2005; Malik & Coulson, 2008a).

An online community can be described as a social network that is created and supported by electronic media (Wellman, 1997). Online support communities are typically facilitated through bulletin boards, which allow users to communicate with one another by posting and replying to messages on a discussion board. Some websites may include additional features such as a chat room or private messaging option. These online communities are unique in that they allow individuals to engage in either synchronous or asynchronous written communication with people from all over the world and access a dynamic source of peer and/or professional support, advice and information at virtually any time of the day (Braithwaite, Waldron, & Finn, 1999; Ferguson, 1996).

Research across a range of different health conditions has shown that online support communities can offer individuals a unique and valuable source of social support (Braithwaite et al., 1999; Bunde, Suls, Martin, & Barnett,

2006). In addition, participation in online communities has been linked to several positive psychosocial outcomes including a sense of empowerment, improved quality of life and reduced depression (Bartlett & Coulson, 2011; Evans, Donelle, & Hume-Loveland, 2012; Mo & Coulson, 2010; van Uden-Kraan et al., 2008; van Uden-Kraan, Drossaert, Taal, Seydel, & van de Laar, 2009). In relation to infertility, several studies have shown that the anonymity of the Internet and online communities offers individuals a novel opportunity to express their feelings and experiences without fear of embarrassment or stigmatization (Malik & Coulson, 2008a; Malik & Coulson, 2008b). Furthermore, research reveals that online infertility support communities can offer many of the therapeutic and self-help processes that occur in face-to-face support networks and can create a strong sense of camaraderie among participants (Malik & Coulson, 2010a). The benefits of accessing online infertility support communities have been shown to be experienced by both individuals who actively post messages to online communities as well as those individuals who simply access the community to read messages posted by others (Malik & Coulson, 2011). Key psychological benefits of participation include reduced feelings of isolation, informational and emotional support, a sense of hope and positivity and tips/advice on how to cope with the effects of infertility on interpersonal relationships (Gold, Boggs, Mugisha, & Palladino, 2012; Hinton, Kurinczuk, & Ziebland, 2010; Malik & Coulson, 2008b; Malik & Coulson, 2010a; Malik & Coulson, 2011). As such it appears that online support communities offer a viable and beneficial alternative source of support for many people affected by infertility.

However, online infertility support communities are not without their disadvantages. Several studies indicate that online communities may not always fulfill the support needs of people facing permanent involuntary childlessness. Research has shown that women who had experienced treatment failure and were facing permanent childlessness, found it difficult to hear about treatment success from other members of the online community. Reading about other people's pregnancies resulted in feelings of immense grief, anger, and jealousy and appeared to heighten infertility-related stress (Malik & Coulson, 2008b; Malik & Coulson, 2010b; Malik & Coulson, 2011). Thus, it appears that while women may initially benefit from accessing a network of similar others, there is a risk that those women who do not fall pregnant will become increasingly depressed and isolated overtime, particularly if fellow members have become pregnant while they are facing the prospect of potential permanent childlessness (Verhaak, Smeenk, van Minnen, Kremer, & Kraaimaat, 2005; Verhaak, Smeenk, Nahuiis, Kremer, & Braat, 2007).

Estimates suggest that around 4.2% of women wishing to conceive between the ages of 40 and 55 years remain childless due to unresolved infertility (Oakley, Doyle, & Maconochie, 2008). These women may be at risk for developing depression and long-term emotional problems (Verhaak et al., 2005, 2007). Moreover, a number of studies utilizing both qualitative and quantitative approaches; have indicated a general dissatisfaction with the level of information and support provided by clinics in relation to the decision to end treatment and alternative options such as adoption (Peddie, van Teijlingen, & Bhattacharya, 2005; Schmidt, 1998; Souter, Penney, Hopton, & Templeton, 1998). For example, a qualitative study by Peddie et al. (2005) found that women felt the information provided at their final consultation was inadequate and expressed a need for ongoing support from the IVF unit. In light of this, it is important to ensure that individuals making the transition from fertility treatment to permanent childlessness are able to access adequate support and guidance both online and offline.

To date, much of the research focusing on online support and infertility issues has been conducted in online communities that are dominated by individuals undergoing investigation or treatment for infertility. Consequently, comparatively little is known about the role that online support communities can play in the lives of women faced with permanent involuntary childlessness. More in depth research in this area may help health care professionals gain an insight into how they can create positive online and offline environments, in which women feel they can

access the support that they need. To help address the gaps in our understanding of online women's support needs at this stage of their infertility journey, we conducted a qualitative analysis of messages posted to an online community dedicated solely to individuals facing permanent childlessness. It was felt that a qualitative approach would allow for a more in-depth and richer insight into the experiences of women using the online community. Consequently, through the qualitative analysis, we sought to understand the "lived" experience of women accessing an online community for unresolved infertility and to explore the role that online support plays in the lives of these individuals. To the best of our knowledge, the current study is one of the first to focus specifically on online communication among women facing permanent involuntary childlessness.

Methods

Sample and Data Collection

The data for this study were messages obtained from the archive of a peer-moderated online community designed solely to support individuals dealing with permanent involuntary childlessness. The online community was identified through conducting a Google search of online support for permanent infertility and selected as it appeared to be one of the largest and most active online communities of this nature. At the point of data collection the online community consisted of one bulletin board, which contained just over 1000 messages in its archive, with new messages being posted on a regular basis (around 5-10 messages per week). To begin with, the 40 most recent discussion threads in the archive were downloaded on 15/12/10. This resulted in 224 messages for data analysis. Following the analysis of these messages, it was felt that the point of data saturation (i.e. no new themes or relevant insights coming to light) had been reached therefore no further messages were collected. The length of the messages ranged from 2-956 words (mean = 122 words). Messages identified the date and time of posting and the senders name and gender followed by the message text. From this information it appeared that all the messages were posted by women and a total of 49 unique sender names were identified. Due to the anonymous nature of an online support community, further personal/demographic data about the sample was not available.

Data Analysis

Messages were analyzed using a thematic analysis, which drew on principles of phenomenological research to understand the "lived" experiences of the senders. Phenomenological research is concerned with gaining a deeper and richer insight into the lived experiences of individuals and understanding the meanings that individuals attach to events and phenomena (Beck, 1994). A phenomenological analysis was thus considered an appropriate and ideal method for describing and interpreting the meanings that women attach to their experiences of involuntary childlessness and accessing an online support community. The practical steps involved in the data analysis process, broadly followed the generic thematic analysis guidelines set out by Braun and Clarke (2006) and involved a collaborative process between the study authors. In the first instance, the lead author read the discussion threads several times to become familiar with the dataset. Following this, salient and interesting features of the data were coded. In the final stage, similar codes were grouped together to form overarching conceptual themes, which captured the women's experiences as expressed through their bulletin board postings. The data and thematic conceptualization was then reviewed by the second author for validity. Following discussions between the two authors, an agreement was reached around the final thematic framework.

Ethical Considerations

Ethical approval was obtained from the University Research Ethics Committee, in accordance with the ethical guidelines for Internet research published by the British Psychological Society (BPS, 2007). For the present study, issues concerning informed consent, privacy and confidentiality were considered particularly relevant. In light of recommendations from previous authors (e.g. BPS, 2007; Eysenbach & Till, 2001), a relatively large and open access online community (i.e. one that does not require any form of registration or subscription to access and read messages) was selected for research purposes. Since the online support community could be considered "public" in nature, informed consent from individual members was not sought.

However, in accordance with the British Psychology Society ethical guidelines, to further protect the privacy and confidentiality of individuals using the online community, the name of the support community and address of the website from which data was collected has not been disclosed in any dissemination of the work. In addition, all quotations used in the reporting of the results were anonymised and entered into a search engine to ensure the quotes could not be traced directly to an individual posting. In instances where quotes were traceable to the original posting, the quote was paraphrased when reporting the results to ensure privacy and anonymity.

Results

The results of the analysis revealed four emergent themes related to the experiences of women accessing an online support community for permanent involuntary childlessness. These themes were labeled as:

- Feeling like an "outsider"
- A whole lifetime of loss
- Coming to terms with childlessness
- Finding a safe haven online

Feeling Like an "Outsider"

A common experience among women posting to the online bulletin board was a sense of isolation from the *"fertile world"* and the feeling that they were somehow *"different"* to other women. Many women talked about how not having children of their own meant that they were forever *"on the outside looking in"* on their peers becoming mothers and raising families. The knowledge that they would never be admitted into this *"mum's club"* evoked a range of strong negative emotions in members of the online community. Emotions commonly expressed in the postings included intense feelings of grief and anguish at the loss of their opportunity to become biological parents, as well as anger that this role had been denied to them.

> *"I constantly feel like an outsider in this world. Wherever I go or whatever I do, I feel like the odd one out. I work in a female dominated environment with either younger girls having babies or the older women becoming grandparents. There are always happy family photos being passed around, so I do feel 'different' to everyone else."*

Several women also described how being unable to conceive a child of their own, appeared to have changed their outlook on life in general, which served to further separate them from other women around them. For example:

> *"One of the things I find hardest to deal with is people with a child talking about the next or one planning their first as if they are going to order one and the universe will deliver, at particular age gap, what sex they want and that be most convenient after their holiday so they can enjoy a drink!! But the reason it*

bothers me so much is that I've had to learn that life isn't like that when it appears others don't have that lesson taught. It can make me feel singled out for some hardship and it's so unfair."

Hearing about other people's pregnancies appeared to be a particularly painful experience for women in the online community and served as a poignant reminder that they were unable to conceive themselves. For many women, receiving news that a friend, colleague or family member was pregnant resulted in a mixture of joy, despair and feelings of jealousy. Such news often prompted members to access the online community, in order to vent their frustration and express these conflicting emotions to people who could empathize with their experiences. In this context, the online community served as a unique environment in which women could alleviate their sense of isolation and connect with other women in similar situations.

"I went over to see a friend yesterday to 'mourn' the breakup of my relationship and she announced that she is pregnant. I wouldn't wish this feeling of isolation and hopelessness on anyone, especially a close friend but it felt like a kick in the gut non-the-less…."

Some women also described feelings of distress when they heard stories in the media about motherhood or attended family gatherings, where there were young children present. These experiences heightened their feeling of being *"the odd one out"* and once again brought home the realization that they would never experience motherhood.

"TV personalities seem to get pregnant at the drop of a hat or they have fertility treatment and it just seems to work first time for them. Reading these stories makes me really upset and angry".

To protect themselves against reminders of their infertility and feeling like an outsider in social situations, several women reported avoiding certain family gatherings or cutting themselves off from friends who were pregnant or had children. Although this coping strategy was effective in avoiding painful feelings in the short-term, in the long-term it appeared to create a vicious cycle with members feeling more isolated and alienated from society as time went by:

"I have had an in built safety mechanism for years in which I distance myself from any friends/work colleagues/family of child bearing age, hence I was left with very few friends of my own age and have gradually felt more and more isolated."

"I always dreaded family gatherings and made excuses not to go because i hated feeling like the odd one out whilst everyone around me had children or were expecting them. I tried to protect myself because i found it all too painful but at the same time i have found the feeling of isolation really painful and difficult too".

One environment in which the women found it more difficult to avoid pregnancies and discussions about children was within the workplace. Several members reported that they had gone to great lengths (e.g., changing jobs) to create a *"safe"* working environment for themselves. However, this safe haven was often short-lived, for example as one woman describes:

"Hi folks, well here I am again after my few months away whilst I am 'coping' (haha) Its that wave again.....after moving job to escape the many pregnancies around me I find 2 of my colleagues are pregnant very unexpectedly. one being in her forties with 2 grown up children and the other on her 4th. my safe space has now crashed!"

This posting elicited a surge of responses from other members of the online community who had also been through similar experiences:

"I do really know what you mean about how that sinking feeling grabs you...and then stays for a length of time. It is seems so unfair that you have changed jobs and thought you were in a safe place...only to have to it thrust upon you again. It happened to me last year too and I remember that blow."

These messages were used to share common experiences and empathy, and also offer reassurance to the poster that the pain and anguish would lessen with time. In this way, members of the online community created a safe and supportive environment in which infertile women could reach out to one another, every time they felt down or experienced a new wave of negative emotions.

A Whole Lifetime of Loss

Members of the online community described multiple losses as a consequence of infertility. First and foremost, there was the loss of an unborn child and the accompanying loss of their hope of becoming parents. Furthermore, for some members permanent childlessness also seemed to challenge their core identity as women; with several posters questioning their role in a society, which they perceived to be obsessed with childbearing. For example:

"I keep thinking I am moving on as my life has changed so much since we stopped the IVF treatments but I just feel like I am slipping backwards when I want to keep looking forwards with as much of a positive way as I can. Living in a society that expect women to have children".

As this quote illustrates, a key challenge that many women accessing the online community were faced with was the struggle to create a new identity for themselves following their lost hopes of becoming a mother. The online community provided an accessible forum in which these challenges could be shared and discussed anonymously.

Several women expressed the view that although they might learn to live with their loss, they would never fully recover from the grief that came with it. As one woman describes, unresolved infertility seemed to instigate a *"whole lifetime of losses"* that she would have to encounter at each stage of her life:

"Does anyone else ever get really angry about not having children? It washes over me every so often and I get really cross and hurt, even after all this time. Not only do we miss out on the babies but it's a whole lifetime of experiences too. Sorry, just feeling a bit sorry for myself. Xx".

A key advantage of accessing the online community for many women was receiving validation for these powerful emotions. For example, this feeling was reciprocated by other members of the online community, with another woman posting:

"I do get where you are coming from about missing out on things:
first birthdays, 18th birthdays / 21st birthdays, first day at school, learning to drive, passing exams (or not), meeting boyfriends / girlfriends for the first time, Christmases of course!, seeing them ride a bike for the first time, perhaps going to college or university, weddings of course (and hopefully), grand children of course (and hopefully), birthday parties etc, etc, etc. It is so difficult and I too try to think of the lovely husband I have and my dog, Harvey, and my home and the fact I have a car and occasionally have a lovely holiday, but sometimes that just doesn't do it does it!"

Another life event that appeared to be particularly distressing for members was the realization that they would never become grandparents either. Several members discussed their emotional reactions to news that their peers

were becoming grandparents. These reactions seemed to parallel the pain and jealousy they had initially felt when they heard of other women falling pregnant. However, as some women described, the loss of their opportunity to become grandparents not only served as a reminder that they didn't have children but was almost like a *"second wave"* of infertility, where they grieved anew for their unborn grandchildren and were again pushed to seek support and consolation online, which for many women was the only forum in which they could access and communicate with other women living with permanent infertility.

"I could not help observing the sign Grandchild on board in the rear window of a car the other day. I have noticed lots of baby/child/princess etc etc on board but never the grandchild one before. It just made me think that it does not matter what age we are or how we feel there is always something or someone to remind us that not only are we not parents but are never to be grandparents either.."

"Found out last night that my partners sisters daughter has just become pregnant and as I am now in the Grandmother age thought I had got past all these feelings but once again I spent all last evening feeling I should be over this by now and then feeling like crying."

Thus it seems that for this group of women, involuntary childlessness was experienced as a major and recurring loss throughout their life course.

Coming to Terms With Childlessness

Most of the people posting to the online community had been through the *"emotional rollercoaster"* of several unsuccessful cycles of infertility treatment; before they went from "*trying to conceive"* to facing the prospect of permanent infertility. Prior to this, these individuals had been wholly consumed with the goal of resolving their infertility crisis, but now suddenly found themselves searching for new life goals that did not involve parenthood.

"It's funny that when things don't go according to plan, you just want to hide away and be as invisible as possible. Then it's incredibly hard to re-emerge and reinvent yourself".

"I have found that I really struggle to come to terms with it all …the fact that you can do nothing to change it, is very disempowering. I have achieved many things in recent years…yet I often feel that this all is nothing because I cant have a child.."

Many women accessing the online community expressed a strong desire to learn to *"accept"* their infertility and move on with their lives. However as the quotes above suggest, members generally agreed that this was a long and difficult process, particularly with the constant external reminders of their loss (e.g. seeing other women become mothers or grandmothers). There was also a distinction made between *"coping"* with infertility and achieving *"closure"*. For example, several women described how they had experienced periods of "calm" where they were able to temporarily move on with their lives, only to find their emotions spiraling downwards again when they were hit with the reality of permanent childlessness.

"I feel I have lots of stuff that I need closure with and I ache for a time when I can get on with my life without this affecting me all the time….It's that old chestnut again and I'm fed up of it. Thanks for listening".

"It comes out of nowhere and knocks you flat. I am currently in a calm period but I know that the wave will hit again".

"Really thought I'd come to terms with not having children but when I see my sisters/brother and friends with grandchildren, it hits home again. It's not easy."

A number of women appeared to experience a sense of guilt that they were still dwelling on their infertility years later and were unable to achieve permanent closure.

> *"I don't know where I am going and everything seems so pointless, my hubby is fantastic and is so supportive so I should be grateful for what I've got.."*

> *"I thought I had got past all these feelings but once again I spent all last evening feeling I should be over this by now and then feeling like crying."*

Counseling was frequently discussed as one means of achieving closure. The online community was used as a forum in which to share both good and bad experiences of counseling. Members also sought advice from one another about the type of counseling they should have and shared some of their anxieties about the process:

> *"It is a big step to say those inner thoughts out loud and to someone who may have children has always put me off, so I have found a counselor with experiences in this area and I can only hope that if she has children she does not tell me. Will let you know honestly how I get on. I am very positive about counseling and know it can work wonders if you get the right person at the right time so fingers crossed."*

As this quote highlights, most women posting to the online community seemed to consider seeing a counselor as a positive and cathartic process and actively encouraged other members to explore counseling. However, women also expressed the view that finding the *"right"* counselor and ensuring that they were ready to openly talk about their infertility issues was crucial.

> *"I found the process challenging sometimes draining and exhausting, but deeply cleansing too. The therapist was very clever and found ways to push my buttons and get me in touch with my feelings because I'm soo good at pasting a big smile on and telling myself I'm doing great when I'm not".*

The use of self-help strategies was also evident within the messages. Women frequently shared inspirational quotes and poetry with one another and described using cognitive strategies to help change negative thought patterns surrounding their infertility. For example:

> *"I don't know about anyone else but I have a collection of inspirational quotes which I read from time to time and find that they really help…I thought it maybe would be good if we could share some of our favorites. So here are three things I find inspirational. I hope you do too."*

> *"It's easy to think that others have it easy especially with their made to order kids and feel like the grass is always greener. It's easier to say than do but I'm working on making my little patch as green as possible so that I can stop and admire it rather than looking longingly at someone else's patch. There are already times I notice theirs looking a bit rough when they are knackered and close to tears with screaming kids fighting around them".*

In addition, some women spoke of the need to "reinvent" themselves through seeking out new activities and social groups as well as finding a new sense of purpose and meaning to their life. This appeared to be a central part of the process of coming to terms with childlessness and accessing the online support community was often viewed as a first step in this process.

> *"I've found it really helpful spending time with friends I'm making who are in a similar position to me and doing things I enjoy that aren't child-oriented so I give myself more of a chance to notice what's positive for me. It's more of a test faced with poster advert scenes of happy families and at those times I just have to accept it makes me feel sad".*

Finding a Safe Haven Online

Accessing the online community appeared to play an integral role in helping this group of women cope with permanent childlessness. Through using the online community, women discovered a *"safe haven"* free from pregnant women and families; which was not so easy to find offline. This, coupled with the shared experiences of group members, created a unique environment in which they felt they could openly discuss their experiences and release any negative or confusing emotions surrounding infertility.

> *"The online community is a life saver for me - having somewhere to 'feel' what I'm feeling – safely…"*

Although members of the online community were often unable to offer tangible support or advice in response to such postings, they readily provided an empathic *"listening ear"*. For example, women would often frame their response to messages with phrases like:

> *"Wish I could say something more useful but take care and we are thinking of you" or "I'm sorry if I cannot help much but I am thinking of you. That's the great thing about this place people really do know how hard it is."*

The opportunity to simply vent in a supportive environment was experienced as a cathartic and empowering event. As one woman wrote:

> *"I feel better already just posting and apologise for having displaced on you guys. Thank you again."*

Receiving empathic responses from other members and reading their experiences of similar issues was also perceived as beneficial. Learning that there were others women who went through the same emotions and experiences served to validate the sometimes confusing and conflicting feelings that member's experienced as a consequence of childlessness. Many women felt unable to talk about their infertility with friends and family, as it was felt that only people who had experienced it firsthand could fully understand their pain and anguish. Consequently, being able to connect with other women who faced permanent childlessness also helped to alleviate some of the isolation and separateness that women felt in their day-to-day lives.

> *"This online community is the only place that I feel can come to where I am amongst people who truly understand and I feel able to share my difficult moments".*

> *"I have been a member of this online community for a long time and am pleased to say that time and the friendship of the members has helped heal my wounds".*

> *"I know what you mean about being on the outside looking in but with this online community I'm beginning to feel a bit more like I belong somewhere…maybe in time we can say that we are on the inside looking out".*

As these quotes suggest, for most individuals the online community created a sense of belonging that was absent in other areas of their life. Indeed, many of the messages posted within the bulletin board conveyed a strong sense of universality and camaraderie between group members. Several members described the online community as a *"family"* and regularly posted messages praising one another's coping efforts and offering words of support and encouragement.

> *"I can promise you, you will get through this and live to be happy again. You're not at all hopeless and you are a very brave lady. What I read in your post as I read in soo many of the posts on here is the human spirit kicking away under all the misery, refusing to a accept the suffering and fighting to come out of the pain. Very best of luck to you and a massive hug to you".*

"Thank you for being brave enough to put your feelings down here. It's true that we do feel on the outside looking in. I feel that everytime I have contact with my brother who has three children".

"…here's to all of us here. We may not be mums and das but we are aunties, uncles, step parents, doting pet parents, teachers, carers and role models to the young people in our lives…"

The online community also appeared to play a huge part in women's efforts to build new lives for themselves post fertility treatment. Some women actively used the online community as a way of a building a new social circle for themselves. Where women were unable to meet face-to-face due to geographical distance, the bulletin board was used to strike up friendships with other regular posters. For instance, several women regularly posted off topic messages and conversed with one another about other aspects of their life.

"I would like to meet with other members but every time there has been an event close enough for me to get to I have been working or not free to go. I live in West Essex".

"I would love to exchange feelings and thoughts if you would like too. I am not living in England at the moment but can easily exchange emails and other messages".

"For me it's been really important to start building a new network of friends who are childfree…this online community is obviously a big part of that which is why as much as possible I've thrown myself into meeting new members and getting to know them better socially, as well knowing that I have people who understand".

Discussion

The current study is one of the first to focus specifically on online communication among women facing permanent involuntary childlessness. Through a phenomenological analysis of bulletin board postings, this study provides a novel insight into the "lived" experience of individuals who access an online support community for permanent infertility. Moreover, the study demonstrates the important role that online communities can play in the lives of these individuals and in their efforts to come to terms with childlessness.

In line with previous qualitative studies with this population (Daniluk, 2001; Johansson & Berg, 2005; McCarthy, 2008; Schwerdtfeger & Shreffler, 2009; Wirtberg, Möller, Hogström, Tronstad, & Lalos, 2007), the analyzed messages show that women experienced involuntary childlessness as a major and recurring loss that pervaded all aspects of their lives; threatening their core identity and sense of self, as well as the central values and meanings that they attached to their life. One theme that was particularly strong across the messages was the sense of immense grief and loss that characterized women's experiences of permanent involuntary childlessness. The knowledge that they would potentially never become biological mothers appeared to instigate a grief reaction akin to that of bereavement.

Kübler-Ross (1969) proposed a five stage model to describe emotional reactions to loss and the process through which individuals come to terms with the accompanying grief: Denial, Anger, Bargaining (seeking in vain for a solution), Depression, and Acceptance (adapting to the loss and planning for the future). This five-stage model has been applied to a variety of significant life events such as job loss, divorce, terminal/ chronic illness and bereavement. However, although the theory captures many of the conflicting emotions that women experience in response to infertility, as Volgsten et al. (2010) argue, the model does not adequately portray the complexities of accepting and adapting to permanent childlessness. Indeed, our findings reveal that permanent infertility was typically suffered as a recurring loss that women felt in varying intensities throughout their life. For example, some

women described times when they felt they had reached a level of acceptance, only to find the anger, grief and depression return when they were faced with an external reminder of their loss. The chronic and cyclical nature of their grief was particularly evident for women entering the "grandparent" stage of life. For these women, not becoming a grandmother like their peers was experienced as both a reminder of their infertility as well a secondary loss (i.e. that of a potential grandchild).

These findings mirror the results of an earlier qualitative study with women 20 years after unsuccessful infertility treatment (Wirtberg et al., 2007). The study found that these women were now at the age when their peers were having grandchildren and were thus having to deal with the concept of "grandchildlessness". Taken together, these findings highlight that although permanent infertility is in many ways similar to other major life crises, there are also several marked differences in the ways in which this grief manifests itself and is experienced by women. Consequently, traditional models of grief and loss may not always be applicable when supporting women facing the prospect of permanent involuntary childlessness. In particular, it is important for counsellors and other health care professionals to be aware of the cyclic nature of women's grief and the potential need for ongoing support throughout their lifespan.

Another dominant theme within the messages was the sense of isolation and difference that women experienced within their social networks and day-to-day lives. Unsurprisingly, the women in this study found it extremely difficult to deal with talk of pregnancy and childbearing from friends, family and colleagues and often felt the need to isolate themselves from such reminders of their own childlessness. In this context, the online community became one of the only venues in which women felt that they could "safely" communicate and connect with other women. Although similar themes have been identified in previous studies of online infertility support communities (e.g. Malik & Coulson, 2008b; Malik & Coulson, 2010a), the vast majority of people who access online infertility support communities are often pursuing some form of treatment for infertility and can thus be described as in a "not yet pregnant" state (Throsby, 2001). While some of these individuals will become pregnant and make the transition to parenthood, others will have to come to terms with permanent childlessness (Daniluk, 1997). The bonds and friendships that women form in online infertility support communities can therefore be short lived and dependent on the outcomes of their fertility treatment. Furthermore, as previous research has suggested, accessing an online infertility support community may simply serve to increase the feelings of distress and anguish that individual's experience as they lose hope of becoming biological parents (Malik & Coulson, 2008b; Malik & Coulson, 2010b).

The findings of this study highlight the importance of also having online communities dedicated specifically to people faced with permanent infertility. As our results reveal, the ability to vent, seek support and share thoughts in a "safe" environment is perceived as a cathartic, unique and an invaluable experience, particularly for those women who are struggling to find a new sense of identity. Previous research has demonstrated that dissatisfaction with social support among individuals dealing with permanent infertility is linked to higher levels of depression, anxiety, and grief (Lechner, Bolman, & van Dalen, 2007). Consequently, being able to access an online support community to bridge gaps in offline social support can be seen as a positive coping strategy and one that should be actively encouraged by professionals involved in infertility care.

Our findings further show that moving from "trying to conceive" to permanent childlessness presents a significant threat to women's sense of self and in particular their gender role identity. For example, through their bulletin board messages many women described instances where they had questioned their identity as a woman and the purpose of their life now that the motherhood status was denied to them. Even though these women expressed

a desire to establish a new personal identity for themselves that was distinct from motherhood, in reality many women struggled to find meaningful alternative life goals. This is perhaps unsurprising given that culturally, caring and nurturing for a child is often considered a social norm for a woman and seen as an integral part of her gender role identity (Daniluk, 1997). Hence, as evidenced in this study, the inability to conceive can carry a hidden stigma and create feelings of inferiority and being "different" (Dyer, Abrahams, Hoffman, & van der Spuy, 2002; Glover, McLellan, & Weaver, 2009; Sandelowski, 1988; Slepickova, 2009).

In a similar vein, a qualitative study by Kirkman (2003) suggested that the cultural dominance of the motherhood narrative was a significant barrier to infertile women revising their life goals. Additionally, the absence of a clear and collective narrative of the "non-mother", further complicated women's ability to make sense of infertility. While, our study also highlights the complex and difficult nature of women's struggles to come to terms with childlessness, the findings suggest that the online community may go some way towards helping this group of women create a new collective narrative for themselves. The current study's results concur with previous studies of online support, which have found that the emotional and informational support exchanged within online communities can have an empowering effect on individuals (Bartlett & Coulson, 2011; Mo & Coulson, 2010; van Uden-Kraan et al., 2008; van Uden-Kraan et al., 2009). However, the messages in this study often went beyond the exchange of simple information and support, with members actively using the forum as a venue in which they could explore new collective identities for themselves and promote one another's self-worth and sense of purpose in life. This pattern of findings suggests that for some individuals online communities can potentially play a positive and important role in the process of coming to terms with involuntary childlessness. Further research is therefore warranted to examine the long-term outcomes of participation in an online community specifically for permanent infertility. Importantly, future research should seek to explore and compare the adjustment and journey of both women who seek support online and those women who do not.

Limitations

The current study has a number of potential limitations that should to be taken into consideration when interpreting the findings. Importantly, although the study provides rich data for understanding the challenges and issues that this particular group of women face, these findings may not be representative of how all women cope with permanent infertility. For example, very little is known about the demographic profile of members and how representative these individuals are of infertile women in the wider population. Also, it may be that those women who eventually resolve their grief discontinue their participation in the community, leaving behind those who continue to have trouble. Thus, the results may only represent the experiences of a particular subset of infertile women who are struggling to cope with infertility. In addition, the analyzed messages were only a snapshot of discussions taken from a single online community, the extent to which these messages are representative of communications in other online support communities for permanent involuntary childlessness or the same community at other times remains unclear. Future research should therefore seek to examine messages posted to multiple online support communities for permanent involuntary childlessness and over a longer period of time, in order to explore the extent to which similar patterns emerge.

It is also noteworthy that the analyzed messages were all posted by women; consequently the study does not tell us anything about the online experiences of men dealing with permanent infertility. This mirrors the results of research examining other online infertility support communities, which were also found to be dominated by women (Malik & Coulson, 2010a). However, research has shown that male partners often feel the need to take on a supportive role in the couple and suppress their own grief, both during and after unsuccessful infertility treatment

(Malik & Coulson, 2008a; Volgsten, Svanberg, & Olsson, 2010). In this context, online communities could provide a welcoming environment in which men can anonymously and safely express their grief surrounding unresolved infertility. Future research should therefore seek to understand the male partner's perceptions towards online infertility support communities, in order to identify whether anything can be done to encourage men to make use of this novel source of support.

Practice Implications

The findings of this study highlight the potential valuable role that online communities can play in helping women come to terms with permanent involuntary childlessness. Individuals struggling to cope with the prospect of permanent infertility can therefore be encouraged to access and seek support online. Equally, given the increasing popularity and accessibility of the Internet, it is important for health care professionals to ensure that there are adequate online support resources available to cater specifically for the needs of women with permanent infertility. Women should also be made aware that not all online infertility communities will necessarily meet the support needs of women facing permanent childlessness.

More broadly, the results of this study point to the need for health care professionals to be aware of the complex and recurring nature of infertility grief. Individuals terminating fertility treatment should therefore be given details of available counseling and support services and encouraged to access these as and when they feel the need to. In particular, it is important to ensure that women are provided with the resources and support to help them deal with difficult situations (e.g., the workplace, family events, etc.) and build their self-esteem.

Conclusions

In summary, this study provides a novel insight into communication within an online support community specifically for permanent infertility. The findings highlight the powerful and sometimes conflicting emotions experienced by women accessing the online support community and the cyclic nature of their grief. For this group of women the struggle to come to terms with their loss, find a new identity and sense of self-worth seemed to be key driving factors pushing them to seek consolation and support online. Importantly, our results suggest that the online community played a pivotal role in empowering these women to move on with their lives and come to terms with infertility, through providing them with a unique source of emotional support and a comfortable, anonymous environment in which they could make sense of their feelings free from reminders of pregnancy.

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by flower-universal'. Hence (1) will become Q (Q (cd) Q (ef)) (2) Where d
and f are flower universal and red universal respectively. It will be read as, 'a
flower- individual is qualified by flower-universal and red colour which is
qualified by red-universal'. Similarly the sentence, *rakta puspavati latā* will give
a *śābdabodha* expressible as, 'a creeper individual is qualified by
creeper-universal and flower-individual which is qualified by flower-universal
and red colour which is qualified by red-universal'. It can be represented by
Q(Q(ab) Q(Q(cd) A(ef))) (3) where a and b are the creeper- individual and
creeper-universal respectively. It will be noted that creeper individual holds a
special place. It is simply a qualificant and never a qualifier. The other elements
are either qualifiers or both qualifier and qualificand. Nyāya calls it the chief
qualificand of the sentence.

Thus we find that the knowledge gained from an utterance has a specific
form. It is one of the reasons that prevented the Naiyāyikas from placing *śabda*
under inference or perception, in spite of criticism from other schools.[19] The
form of the perceptual knowledge arising from seeing a cat on the mat can be
either 'The cat is on the mat' or 'The mat is under the cat'. It has no determinate
structure. Similarly inferential knowledge from seeing smoke on the mountain
can be of the form, 'The hill has fire' or 'There is fire on the hill'. But
śābdabodha has a determinate structure. The sentence 'Cat is on the mat' has a
specific form of knowledge which is expressible as 'The cat is qualified by its
presence on the mat'. Thus knowledge from testimony cannot be assimilated
into perception or inference.

NOTES

1.   K. Kunjunni Raja, *Indian Theories of Meaning* (Madras : Adyar Library, 1963),
        pp. 405-406.

2.   B.K. Matilal, *Logic, Language and Reality* (New Delhi : Motilal Banarsidass,
        1985), p. 401.

3.   Kunjunni Raja, p. 70.

4.   B. K. Matilal, *The Word and the World* (New Delhi : Oxford University Press,
        1990), p. 36.

5.   *Ibid.*, pp. 23-24.

6.   *Ibid.*, p. 81.

7.   Matilal, *The Word and the World,* p. 101.

8.   *Ibid.*, p. 51.

9.   Matilal, *Logic, Language and Reality*, p. 407.

10.   *Ibid.*, pp. 420-422.

11.   *Ibid.*, p. 406.

12.   Matilal, *The Word and the World,* p. 60.

13.   Matilal, *Logic, Language and Reality*, p. 430.

14.   *Ibid.*, p. 427.

15.   Matilal, *The Word and the World,* pp. 53-54.

16.   Kunjunni Raja, p. 208.

17.   Matilal, *Logic, Language and Reality*, p. 413.

18.   The points under this title are taken from *Ibid.*, pp. 408- 416.

19.   *Ibid.*, p. 391.

HUSSERL'S NOTION OF OBJECTIVITY :
A PHENOMENOLOGICAL ANALYSIS *

KOSHY THARAKAN

The various issues around which the fundamental controversies in philosophy of social sciences revolve concern the questions whether the method of social sciences is fundamentally similar to or different from that of natural sciences (Monism or Dualism), whether the terms of social scientific understanding pertain to individual agents or trans-individual phenomena (Intentionalism v/s Consequentialism), whether social sciences must commit to a realist ontology (Realism or Anti-realism) and whether the end of social sciences is description / explanation or critique etc. Underlying some of these seminal issues is the question whether social sciences can be objective, if so, how ? And if not, why not ? My paper deals with some aspects of this basic question from the point of view of the philosophical movement called phenomenology.

Phenomenology, as formulated by Husserl, is an attempt to ground all knowledge in unshakable foundation. The unrelenting search for certitude is the principal theme that underlies his works. Thus, Husserl proceeds from an attack on psychologism to phenomenology so as to describe the necessary structures of the world. Such a project leads him to transcendental subjectivity. Transcendental subjectivity constitutes the necessary structures of the world as correlates of its own intentional acts.

1. The Structure of Intentionality

The doctrine of intentionality of consciousness is the key to understand the notion of objectivity in phenomenological philosophy. According to Husserl,

consciousness as always directed to some object-consciousness is consciousness of something. Intentionality consists in this directedness of consciousness. Thus, if all conscious acts refer to some objects, Husserl maintains that, object is constituted by the conscious act. The phenomenological analysis of consciousness reveals the noesis-noema structure of experience. Noesis is the objectifying act and noema is the intended object. In other words, noesis and noema correspond to the subject and object poles of experience respectively. Every noesis has its corresponding noema. However, the same object can be apprehended differently. That is to say that the many intended objects may refer to the same object grasped in various intending acts. This implies that there is an underlying unity or identity of different 'noemata' of varying acts. Without this unity we cannot support any claim to objectivity. Now, we may ask how does this unity emerge ? An answer to this question points to the phenomenological concept of 'horizon'.

In perception an object is given in a perceptual field or horizon. Any object is perceived from various standpoints. These changes in view point are not accidental with respect to an initial perceptual act. These various perspectives are rather intrinsic to the object. Every actual perception implies an horizon of possible perceptions that are expected to occur. Husserl calls this anticipated set of possible perceptions 'internal horizon' (inner horizon). Apart from this there is 'external horizon' (outer horizon). An object perceived does not appear in isolation. There is no such thing in experience as an isolated object. It always stands in relation to other objects. An object appears amidst other objects simultaneously perceived. This is known as external horizon. To quote Husserl:

> In seeing I always 'mean' it with all the sides which are in no way given to me, not even in the form of intuitive, anticipatory presentifications. Thus every perception has 'for consciousness' a horizon belonging to its object .... For consciousness the individual thing is not alone: the perception of a thing is perception of it within a perceptual field. And just as the individual thing in perception has meaning only through an open horizon of 'possible perceptions', insofar as what is actually perceived 'points' to a systematic multiplicity of all possible perceptual exhibitings to it harmoniously, so the thing has yet another horizon: besides this 'internal horizon' it has an external horizon precisely as a thing within a field of things; and this points finally to the whole world as a perceptual world.[1]

Thus, we have seen that 'noema' has horizon both inner and outer, apart from a nucleus'- the central core of meaning or objective sense that invariantly presents in

different acts. But in transcendental perception as against immanent perception the object is not given completely and absolutely. The object of transendental perception is capable only of a series of perspectives or profiles that is not fully determinable. An element of indeterminacy always hangs on. However, this indeterminacy does not lend to what Quine calls 'indeterminacy of meaning'. For Quine undetermination by experience necessarily leads to indeterminacy of meaning. Contrary to this, Husserl says:

> Indeed, the indeterminateness necessarily signifies a determinableness which has a rigorously prescribed style. It points ahead to possible perceptual multiplicities which, merging continuously into one another, join together to make up the unit of one perception in which the continuously enduring physical thing is always showing some new "sides" ... in a new series of adumbrations. Accordingly, those moments of the physical thing which are also seized upon .... gradually become actually presented, the indeterminacies become more precisely determined and are themselves eventually converted into clearly given determination...[3]

That is, the unity of sense is accomplished by reason prescribing an idea of complete givenness as an *a priori* determination.[4] In the course of perceptual process, if the anticipations implied in previous perception are fulfilled later, unification takes place. That is to say, if the possible perceptions are actualized, then identification of object is made possible thereby increasing the determinateness of the object.

In the noesis-noema structure of intentionality, we have so far analyzed the noema-the intended object, into nucleus and horizon. Similarly, if we analyse the noetic act, we can see that 'intending falls into direct visualizing of the object as well as aiming at its horizon'. Now, this 'aiming at' is always done with reference to a scheme of anticipations known as 'situations'.[5] Situations arise out of the emotive and valuational modes of intending acts. We cannot ignore the situation as merely one of subjective traits, since as an attitude in regard to the object it has an important role in the constitution of the object.

It is clear now, that both the noetic act and noematic aspect of intentionality are vital in grounding experience. If we neglect the situatedness of intentional act and concentrate only on the noema, we fall prey to naturalism. On the other hand, ignoring the noema and attending only to the act loads us to unmitigated relativism. However, phenomenological analysis shows that both noesis and noema are the

two poles of the same pointer called intentionality of consciousness. Nevertheless, the relation between noesis and noema is not one of equality. As Helmut Kuhn points out, noesis has primacy over noema. According to him, "The very objectivity of object is to be defined in terms of objectivating activity".[6] Moreover, Husserl speaks of the object as constituted by the subjective sources. Then the question is: will it not end up in relativism ? The answer lies in the notion of 'Lebenswelt' or 'Life-world'.

2.   *Life World*

Life-world is the world of common experience. It is the world prior to the theoretical attitude. The theoretical attitude which idealizes entities paves the way to objective science. In other words, science is an ideal construct or theoretico-logical superstructure which has its basis in the life-world. Life-world, then is a pre-given world that exists for all in common. It is always taken for granted in all human life, in all human activities. The life-world is a realm of original self-evidences (self-givenness). Every mediate cognition confined to this domain has the sense of possibly perceivable as the thing itself, as self-given. Hence all verifications go back to these modes of self-givenness. The thing itself in this given mode of self-evidence is intersubjectively experienceable and verifiable. It is not a substruction of thought. Thus, we have life-world and objective-scientific world which is obtained by idealization. However, the knowledge of the objective-scientific world is grounded in the life-world. The meaning of science becomes intelligible only when one explores the relatedness of the scientific world to the life-world.

Life-world thus understood, comprises multiplicity and relativity. It is a subjective-relative world. To each one of us the objects in the world at large appear under the varying perspectives, according to one's point of view. Hence the life-world implies a community of individuals who interact with each other. It is a historical community. Thus, a life-world is relative to a certain society at a given moment of its history. However, there may be invariant structure of the life-world. As Husserl says:

> No one ever thinks about the predications and truths which precede science, about the 'logic' which provides norms within the sphere of relativity, or about the possibility, even in the case of these logical structures conforming purely descriptively to the life-world, of inquiring into the system of principles that give them their norms *a priori*.[7]

So as to grasp the essential features of the life-world, Husserl subjects it to a series of epoche. The first epoche concerns the objective sciences, thereby precluding us to find any common objects of the life-world such as spatial shape, motion, sense quality etc. (these are all concerned with objective sciences). But our bracketing reveals that these are the same structures the life-world has despite its relative features. This general structure itself is not relative.

> As life-world the world has, even prior to science, the 'same' structures that the objective sciences presuppose in their substitution of a world which exists 'in itself' and is determined through 'truths in themselves'... These are the same structures that they presuppose as a priori sturctures and systematically unfold in *a priori* sciences, sciences of the logos, the universal methodical norms by which any knowledge of the world existing 'in itself objectively' must be bound.[8]

Nevertheless, the spatio-temporal world that is prior to the theoretical attitude (the scientific attitude) is not one of ideal mathematical points or the straight lines or planes. The bodies in the life-world are actual bodies. Yet not in the sense of the physicist's actual bodies. In other words, these general features of the life-world, though they share the same names, are not concerned with theoretical idealizations and hypothetical substructions.

Now we have to make a separation in principle of the a priori of the life world from the objective a priori. This is achieved by the first epoche of all objective sciences along with all objective a priori sciences. It provides us the insight that the universal a priori of the objective sciences itself is grounded in a universal a priori of life-world. In the search of the general structure of the life-world , we come across the world as the universe of things, distributed within the world-form of space and time. It is the universal field of all actual and possible praxis as horizon. 'To live is always to live in certainty of the world'. It is to be conscious of the world and of oneself as living in the world. The pregivenness of the world effects a givenness of the individual things. Though things (objects) and world are inseparably united, there is a difference between the way we are conscious of both. We are conscious of things as objects within world-horizon. Each object is an object of the world horizon. We are conscious of this world horizon only as a horizon for existing objects. Thus relativity and multiplicity presuppose the world-horizon. Over and against the seeming relativity of the life-world, it exhibits an invariant structural framework or a conceptual scheme that incorporates the relative and changeable.

Nevertheless, such an attempt to evercome relativism looks trivial. What Husserl achieved is only a formal essence. Hence, Mohanty is right when he says that "What was threatened at the level of contents is thereby gained only at the level of form".[9] Husserl himself realizes this. Hence he says: "...the first step which seemed to help at the beginning, that epoche through which we freed ourselves from all objective sciences as grounds of validity by no means suffices".[10] So, Husserl turns to a pre-given world itself. He carries out a universal epoche in which a total transformation of our attitude in the life-world is carried out. Through this universal epoche or transcendental reduction we discover the correlation between the world and world-consciousness. Transcendental reduction liberates one from the internal bond of the pre-givenness of the world to a realm of absolutely self enclosed and absolutely self-sufficient correlation between the world itself and world-consciousness. By world consciousness Husserl means the conscious life of the subjectivity which validates the world. This transcendental subjectivity bestows meaning and ontic validity on the life-world. In other words, transcendental epoche effects absolute correlation between the life-world and transcendental subjectivity. However, Husserl cautions us that transcendental subjectivity is not a point of view or interpretation about the world. Every point or view or interpretation about the world is grounded in the pre-given world. By transcendental epoche the world becomes a phenomenon. Hence, transcendental subjectivity constitutes the world. This universal subjectivity / intersubjectivity is nothing but the mankind. However, the human beings are a component part of the world. This leads to a paradox: humanity as world-constituting subjectivity and yet as incorporated in a world itself. To resolve this paradox we have to look into the constitution of intersubjectivity itself. 'I' as the one who practises the epoche put all other human beings in the epoche including my empirical ego. Then 'I' as transcendental ego, first constitutes a primordial sphere of objects and constitutes in itself the alter-ego. Thus, in me another 'I' achieves ontic validity as copresent with his own ways of being self-evidently verified. The ego by its transcendental functions, exhibits transcendental intersubjectivity in its transcendental communalization and constitutes, in the functioning system of ego poles, 'the world for all'. Each subject, in its transcendental mode, constitutes the world as world for all. Husserl says that:

> .....each human being 'bears within himself a transcendental I ' - not as a real
> part or stream of his soul... but rather in so far as he is the self-objectification
> as exhibited through phenomenological self-reflection, of the corresponding
> transcendental I.[14]

Here, the paradox gets resolved: we human beings in the natural objective sense do belong to the world as real entities. But at the same time, these real entities themselves are phenomena and as such themselves object poles and subject matter for inquiring back into the correlating intentionalities. By the function of this intentionality alone the human beings have their ontic meaning.

Hence, Husserl, by virtue of transcendental epoche, transforms everything objective into transcendental subjectivity. In other words, objectivity in phenomelogical philosophy resolves into transcendental subjectivity.

In his aruguments against relativism in the Prolegomeha to Pure Logic, Husserl accuses the relativist of contradicting himself. The relativist makes claims that are supposedly objective truths which are later used to show that those very claims are not possible. In other words, the relativist assumes the nonrelative validity of his own concepts in order to show how any such theory or concept is relative. Do these arguments make Husserl an anti-relativist? David Carr answers in the negative. Carr draws some elements from Husserl's phenomenology which make a relativistic interpretation of Husserlian phenomenology tenable. As he points out, Husserl's search for 'The Given' - the unmediated objects in intuition- does not supply an irrefutable cognitive link to the external world. Since the perceptual objects in space and time are the most primitive objects, Husserl denies the availability of any sense-data beneath the directly given. Reflection on the sensation does not give any evidence for the existence of the objects but only makes claim about those experiences themselves.

Husserl makes a distinction between the object which is intended and the object as it is intended. This distinction is crucial as there are various ways in which an intention relates to its object. In other words, an object which is intended can be intended differently. From this, it follows that though Husserl holds the unmediated nature of objects, it is only with regard to the mediation by some other object. Husserl allows the mediation by concepts- thus the 'object as it is intended'. This distinction between object which is intended and object as it is intended is further developed into the analysis of 'profiles'. It speaks of the object as always seen from some angle or another. As has been mentioned earlier, the object of transcendental perception is never given fully. From this it follows that our perception of objects or cognitive experience of them is always

perspectival. With regard to the cognitive experience of an object, some other perspective is possible as other possible 'intending-as' is allowed. This leaves the object undetermined by our reference to it as other 'intending-as' make other possible references which has obvious implications of relativism. Moreover, the temporal character of consciousness as conceived by Husserl is prone to a relativistic interpretation. Consiousness is conceived as consisting of distinct phases. Thus the present has past and future with it through 'retention' and 'protension'. The passing experiences are held within the present as a background awareness as the future is anticipated in the present. The same of the present is derived from the past as well as the future anticipation. Now Carr argues that if we assume that each individual has a different experiential part and different concerns from each other, then each one confronts the world of his experience in a way that is unique to him or his community.

However, we cannot brand Husserl a relativist as he holds a teleogical concept of history and consciousness. Husserl may well accept these relativistic implications but he overcomes relativism with his notion of intersubjectivity. Intersubjectivity is the coincidence or consensus of simultaneous but different intendings of the same object or state of affairs. Though perceptual evidence does not guarantee intersubjective agreement it nevertheless appeals to it. Further, experience makes it forth coming. The role of communication of what one has perceived is emphasized by Husserl. Such a possibility of being able to communicate and consequently to understand what is being communicated is never ruled out. The very fact that the life-world is constituted by the transcendental intersubjectivity as its intentional correlate gives credence to the possibility of intersubjective agreement.

3.   *Phenomenological Philosophy of Social Science*

For Husserl, science, like any other cultural fact is a product of human praxix. It takes shape form the interaction of the members of that professional community. It is an open community in so far as the works achived by the predecessors are taken up and continued by the successors. Criticisms, confirmations and corrections find their place in the activities of the community. This praxis aims at a justifiable agreement among its practitioners. Here Husserl anticipates the post-positivist philosophies of science.

Husserl criticizes the Galilean style of mathematizing the nature. It misunderstands the objective nature as something hidden from the life -world - a reality that is to be explored beneath the appearances of the life-world. For Husserl, objective nature is a regulative principle - an idea with respect to which members of the scientific community orient their work. The idea gets approximated in theories which are the products of the scientific praxis. By such a regulative principle, the subjectivity and relativity of common experience can be overcome in so far as these ideals guide and direct the specific human activity. For Husserl, to be objective means nothing but to have results attained by mutual criticism that withstand further criticisms.[13] In other words, objectivity is consensus or conincidence of judgements shared by the members of a community. Now, we have to clarify the nature of this consensus. This consensus or coincidence is explained by the concept of truth. For Husserl, truth is not predicated of judgements but of affairs. It is an assertion of what is the case. This assertion is made possible by the phenomenological concept of 'evidence'. Evidence is a mode of consciousness, a manner in which an object is given to consciousness. The establishment of evidence has nothing to do with mysterious vision, rather it is an achievement of consciousness. It is established in the complex act of synthesis. The synthesis of evidence is a conincidence of empty intention and fulfillment. An intention is empty if we merely intend something as truly existing. In order to have evidence we have to identify it with iintuitive fulfillment. Evidence thus becomes the experience of self-givenness of something. Then, truth is an idea of the correspondence between meaning intention and meaning fulfillment.[14] Nevertheless, Husserl talks about truth as idealized rational acceptability.

In the logical sphere, in the sphere of statement, 'being truly' or 'actually' and 'being' something which can be shown rationally' are necessarily correlated. This holds, moreover, for all modalities of being all doxic positional modalities. Obviously, the possibility of the rational showing referred to here should be understood, not as empirical, but as 'ideal', as an essential possibility.[15]

Both natural sciences and social sciences grow out of the pre-scientific life world as cultural accomplishments. Social sciences, or Humanistic sciences, as Husserl calls them, are the 'sciences of the human subjectivity in its conscious relation to the world as appearing to it and motivating it in the world as appearing it in action and passions and conversely it is the science of the world as the surrounding world

of persons."[16] Social sciences thus deal with the mundane intersubjectivity. There is a difference in attitude between natural sciences and social sciences. Natural sciences have the theoretic attitude towards the objective world while social sciences are directed towards unversal subjectivity, - towards the personal attitude as against the natural scientist's theoretical attitude. Thus, the attitude of the social scientist makes the pre-given life-world as his starting point. (S)he finds himself or herself in a world which surrounds him or her. (S)he is practically determined in different ways by this world and his/her praxis makes the world a new. Hence social sciences cannot be reduced to or entirely modeled on natural sciences.

Nevertheless, as R.J.Bernstein reminds us, we have to distinguish the various dimensions of the activity of the social scientists.[17]

1.   A social scientist, like any other man, is a participant in the everyday life-world. (S)he interprets his/her own actions as well as of others.

2.   As a social scientist, like any other scientist, (s)he interacts with his/her professional community.

3.   As social scientist *per se*, (s)he is concerned with a representation and explanation of the structures of the everyday life-world. (S)he then takes a theoretical stance against the practical stance.

To sum up, we may say that the theories / hopotheses / explanations etc. are objective in the sense that they are subjected to intersubjective norms of the scientific community.

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Four

Interpretative Phenomenological Analysis

Jonathan A. Smith and Mike Osborn

The aim of interpretative phenomenological analysis (IPA) is to explore in detail how participants are making sense of their personal and social world, and the main currency for an IPA study is the meanings particular experiences, events, states hold for participants. The approach is phenomenological (see Chapter 3) in that it involves detailed examination of the participant's life-world; it attempts to explore personal experience and is concerned with an individual's personal perception or account of an object or event, as opposed to an attempt to produce an objective statement of the object or event itself. At the same time, IPA also emphasizes that the research exercise is a dynamic process with an active role for the researcher in that process. One is trying to get close to the participant's personal world, to take, in Conrad's (1987) words, an 'insider's perspective', but one cannot do this directly or completely. Access depends on, and is complicated by, the researcher's own conceptions; indeed, these are required in order to make sense of that other personal world through a process of interpretative activity. Thus, a two-stage interpretation process, or a double hermeneutic, is involved. The participants are trying to make sense of their world; the researcher is trying to make sense of the participants trying to make sense of their world. IPA is therefore intellectually connected to hermeneutics and theories of interpretation (Packer and Addison, 1989; Palmer, 1969; Smith, in press; see also Chapter 2 this volume). Different interpretative stances are possible, and IPA combines an empathic hermeneutics with a questioning hermeneutics. Thus, consistent with its phenomenological origins, IPA is concerned with trying to understand what it is like, from the point of view of the participants, to take their side. At the same time, a detailed IPA analysis can also involve asking critical questions of the texts from participants, such as the following: What is the person trying to achieve here? Is something leaking out here that wasn't intended? Do I have a sense of something going on here that maybe the participants themselves are less aware of?

We would say that both styles of interpretation are part of sustained qualitative inquiry but that the degree of emphasis will depend on the particularities of the IPA study concerned. The ordinary word 'understanding' usefully captures these two aspects of interpretation-understanding in the sense of identifying or empathizing with and understanding as trying to make sense of. Allowing for both aspects in the inquiry is likely to lead to a richer analysis and to do greater justice to the totality of the person, 'warts and all'. IPA also acknowledges a debt to symbolic interactionism (Denzin, 1995) with its concern for how meanings are constructed by individuals within both a social and a personal world.

IPA has a theoretical commitment to the person as a cognitive, linguistic, affective and physical being and assumes a chain of connection between people's talk and their thinking and emotional state. At the same time, IPA researchers realize this chain of connection is complicated – people struggle to express what they are thinking and feeling, there may be reasons why they do not wish to self-disclose, and the researcher has to interpret people's mental and emotional state from what they say.

IPA's emphasis on sense-making by both participant and researcher means that it can be described as having cognition as a central analytic concern, and this suggests an interesting theoretical alliance with the cognitive paradigm that is dominant in contemporary psychology. IPA shares with the cognitive psychology and social cognition approaches in social and clinical psychology (Fiske and Taylor, 1991) a concern with mental processes. However, IPA strongly diverges from mainstream psychology when it comes to deciding the appropriate methodology for such questions. While mainstream psychology is still strongly committed to quantitative and experimental methodology, IPA employs in-depth qualitative analysis. Thus, IPA and mainstream psychology converge in being interested in examining how people think about what is happening to them but diverge in deciding how this thinking can best be studied.

Indeed, we would argue that IPA's commitment to the exploration of meaning and sense-making links it quite closely to the original concerns of cognitive psychology in its rejection of the behavourist paradigm that had thus far dominated the discipline. It is interesting to see how Bruner (1990), one of the founders of the cognitive approach, regrets how it swiftly moved from a central concern with meaning and meaning making into the science of information processing. For more on the theoretical foundations of IPA, see Smith (1996a) and Eatough and Smith (in press).

The aim of this chapter is to provide for the reader new to this way of working a detailed presentation of the stages involved in doing interpretative phenomenological analysis. It gives details of each stage and illustrates them with material taken from a study conducted by the authors. At the same time, it should be recognized that, as is generally the case with qualitative research, there is no single, definitive way to do IPA. We are offering suggestions, ways we have found that have worked for us. We hope these will be useful in

helping the newcomer to IPA to get under way, but remember that, as you proceed, you may find yourself adapting the method to your own particular way of working and the particular topic you are investigating. We would also point the reader to related writing on interpretive phenomenology (Benner, 1994; Van Manen, 1997).

Constructing a Research Question and Deciding a Sample

As will be apparent, IPA is a suitable approach when one is trying to find out how individuals are perceiving the particular situations they are facing, how they are making sense of their personal and social world. IPA is especially useful when one is concerned with complexity, process or novelty. Box 4.1 illustrates the type of research questions that have been addressed by IPA. Research questions in IPA projects are usually framed broadly and openly. There is no attempt to test a predetermined hypothesis of the researcher; rather, the aim is to explore, flexibly and in detail, an area of concern.

Box 4.1   Examples of psychological research questions addressed in IPA studies

- How do gay men think about sex and sexuality? (Flowers et al., 1997)
- How do people with genetic conditions view changing medical technologies? (Chapman, 2002)
- What is the relationship between delusions and personal goals? (Rhodes and Jakes, 2000)
- How do people come to terms with the death of a partner? (Golsworthy and Coyle, 1999)
- How does a woman's sense of identity change during the transition to motherhood? (Smith, 1999)
- What model of the person do priests have? (Vignoles et al., 2004)
- How do people in the early stage of Alzheimer's disease perceive and manage the impact on their sense of self? (Clare, 2003)
- What influences the decision to stop therapy? (Wilson and Sperlinger, 2004)
- What forms of social support are helpful to people in pain? (Warwick et al., 2004)
- How does being HIV impact on personal relationships? (Jarman et al., 2005)

IPA studies are conducted on small sample sizes. The detailed case-by-case analysis of individual transcripts takes a long time, and the aim of the study is to say something in detail about the perceptions and understandings of this particular group rather than prematurely make more general claims. This is

not to say that IPA is opposed to more general claims for larger populations; it is just that it is committed to the painstaking analysis of cases rather than jumping to generalizations. This is described as an idiographic mode of inquiry as opposed to the nomothetic approach which predominates in psychology (Smith et al., 1995). In a nomothetic study, analysis is at the level of groups and populations, and one can make only probabilistic claims about individuals; for example, there is a 70 per cent chance that person x will respond in this way. In an idiographic study, because it has been derived from the examination of individual case studies, it is also possible to make specific statements about those individuals.

IPA researchers usually try to find a fairly homogeneous sample. The basic logic is that if one is interviewing, for example, six participants, it is not very helpful to think in terms of random or representative sampling. IPA therefore goes in the opposite direction and, through purposive sampling, finds a more closely defined group for whom the research question will be significant. How the specificity of a sample is defined will depend on the study; in some cases, the topic under investigation may itself be rare and define the boundaries of the relevant sample. In other cases where a less specific issue is under investigation, the sample may be drawn from a population with similar demographic/socio-economic status profiles. The logic is similar to that employed by the social anthropologist conducting ethnographic research in one particular community. The anthropologist then reports in detail about that particular culture but does not claim to be able to say something about *all* cultures. In time, of course, it will be possible for subsequent studies to be conducted with other groups, and so, gradually, more general claims can be made, but each founded on the detailed examination of a set of case studies. It is also possible to think in terms of theoretical rather than empirical generalizability. In this case, the readers make links between the findings of an IPA study, their own personal and professional experience, and the claims in the extant literature. The power of the IPA study is judged by the light it sheds within this broader context. A final note on sampling: it should be remembered that one always has to be pragmatic when doing research; one's sample will in part be defined by who is prepared to be included in it!

There is no right answer to the question of the sample size. It partly depends on several factors: the degree of commitment to the case study level of analysis and reporting, the richness of the individual cases, and the constraints one is operating under. For example, IPA studies have been published with samples of one, four, nine, fifteen and more. Recently there has been a trend for some IPA studies to be conducted with a very small number of participants. A distinctive feature of IPA is its commitment to a detailed interpretative account of the cases included and many researchers are recognizing that this can only realistically be done on a very small sample – thus in simple terms one is sacrificing breadth for depth. Recently the first author has been arguing the case for the single case study (Smith, 2004) and for recent examples of IPA case studies, see Eatough and Smith (2006a, 2006b). In the recent past, five or six has sometimes been recommended as a reasonable sample size for a student

project using IPA. Our current thinking is that for students doing IPA for the first time, three is an extremely useful number for the sample. This allows sufficient in-depth engagement with each individual case but also allows a detailed examination of similarity and difference, convergence and divergence. The danger for the newcomer is that if the sample size is too large they become overwhelmed by the vast amount of data generated by a qualitative study and are not able to produce a sufficiently penetrating analysis. We express an intellectual debt to George Kelly here (see Bannister and Fransella, 1971; Smith, 1990 and Chapter 2 in this volume). To facilitate accessing an individual's personal constructs, Kelly suggested considering three elements at a time, allowing the individual to focus closely on the relationship between the elements in considering a way in which two were similar to and different from the third. IPA doesn't prescribe a technique in the same way but our thinking is clearly related.

Collecting Data: Semi-structured Interviews as the Exemplary Method for IPA

IPA researchers wish to analyse in detail how participants perceive and make sense of things which are happening to them. It therefore requires a flexible data collection instrument. While it is possible to obtain data suitable for IPA analysis in a number of ways – such as personal accounts, and diaries – probably the best way to collect data for an IPA study and the way most IPA studies have been conducted is through the semi-structured interview. This form of interviewing allows the researcher and participant to engage in a dialogue whereby initial questions are modified in the light of the participants' responses and the investigator is able to probe interesting and important areas which arise. Therefore, we will discuss semi-structured interviewing in detail in this chapter. For discussion of other data collection methods either used in or consonant with IPA, see Smith (1990) and Plummer (2000). It is useful first to contrast the primary features of a semi-structured interview with those of a structured interview.

The Structured Interview

The structured interview shares much of the rationale of the psychological experiment. Generally, the investigator decides in advance exactly what constitutes the required data and constructs the questions in such a way as to elicit answers corresponding to, and easily contained within, predetermined categories, which can then be numerically analysed. In order to enhance reliability, the interviewer should stick very closely to the interview schedule and behave with as little variation as possible between interviews. The interviewer will aim to:

• use short specific questions
• read the question exactly as on the schedule

- ask the questions in the identical order specified by the schedule
- ideally have precoded response categories, enabling the questioner to match what the respondent says against one of those categories.

Sometimes the investigator will provide the respondent with a set of possible answers to choose from. Sometimes the respondent is allowed a free response, which can then be categorized.

Thus, in many ways, the structured interview is like the questionnaire; indeed, the two overlap to the extent that often the interview is simply the investigator going through a questionnaire in the presence of a respondent the interviewer filling in the answers on the questionnaire sheet based on what the respondent says.

The alleged advantages of the structured interview format are control, reliability and speed. That is, the investigator has maximum control over what takes place in the interview. It is also argued that the interview will be reliable in the sense that the same format is being used with each respondent, and that the identity of the interviewer should have minimal impact on the responses obtained.

The structured interview has disadvantages which arise from the constraints put on the respondent and the situation. The structured interview deliberately limits what the respondent can talk about – this having been decided in advance by the investigator. Thus, the interview may well miss out on a novel aspect of the subject, an area considered important by the respondent but not predicted by the investigator. And the topics which are included are approached in a way which makes it unlikely that it will allow the unravelling of complexity or ambiguity in the respondent's position. The structured interview can also become stilted because of the need to ask questions in exactly the same format and sequence to each participant.

This section has offered only a brief introduction to the structured interview, the aim being to provide a context in which to place a discussion of semi-structured interviewing. For more on the different types of interview used by researchers, see Brenner et al. (1985) and Breakwell (2006).

⦀ Semi-structured Interviews

With semi-structured interviews, the investigator will have a set of questions on an interview schedule, but the interview will be guided by the schedule rather than be dictated by it. Here then:

- There is an attempt to establish rapport with the respondent.
- The ordering of questions is less important.
- The interviewer is freer to probe interesting areas that arise.
- The interview can follow the respondent's interests or concerns.

These differences follow from the basic concerns of an approach such as IPA. The investigator has an idea of the area of interest and some questions to

pursue. At the same time, there is a wish to try to enter, as far as possible, the psychological and social world of the respondent. Therefore, the respondent shares more closely in the direction the interview takes, and the respondent can introduce an issue the investigator had not thought of. In this relationship, the respondents can be perceived as the experiential expert on the subject and should therefore be allowed maximum opportunity to tell their own story.

Thus, we could summarize the advantages of the semi-structured interview. It facilitates rapport/empathy, allows a greater flexibility of coverage and allows the interview to go into novel areas, and it tends to produce richer data. On the debit side, this form of interviewing reduces the control the investigator has over the situation, takes longer to carry out, and is harder to analyse.

ılı Constructing the Interview Schedule

Although an investigator conducting a semi-structured interview is likely to see it as a co-determined interaction in its own right, it is still important when working in this way to produce an interview schedule in advance. Why? Producing a schedule beforehand forces us to think explicitly about what we think/hope the interview might cover. More specifically, it enables us to think of difficulties that might be encountered, for example, in terms of question wording or sensitive areas, and to give some thought to how these difficulties might be handled. Having thought in advance about the different ways the interview may proceed allows us, when it comes to the interview itself, to concentrate more thoroughly and more confidently on what the respondent is actually saying. For example, Box 4.2 presents a schedule from a project one of us conducted on kidney disease patients' response to their illness. The participants are undergoing dialysis treatment for their kidney disease – an extremely demanding treatment regimen which involves going to hospital three or four times a week and being attached to a dialysis machine for about three hours.

Box 4.2   Interview schedule: patient's experience of renal dialysis

A. Dialysis

1) Could you give me a brief history of your kidney problem from when it started to your beginning dialysis?
2) Could you describe what happens in dialysis, in your own words?
3) What do you do when you are having dialysis?
4) How do you feel when you are dialysing?
    prompt: physically, emotionally, mentally.

(Continued)

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(Continued)

5) What do you think about?
6) How do you feel about having dialysis?
    prompt: some people/relief from previous illness/a bind.
7) How does dialysis/kidney disease affect your everyday life?
    prompt: work, interests, relationships.
8) If you had to describe what the dialysis machine means to you, what would you say?
    prompt: What words come to mind, what images? Do you have a nickname for it?

B. Identity

9) How would you describe yourself as a person?
    prompt: What sort of person are you? Most important characteristics: happy, moody, nervy.
10) Has having kidney disease and starting dialysis made a difference to how you see yourself?
    prompt: If so, how do you see yourself now as different from before you started dialysis? How would you say you have changed?
11) What about compared to before you had kidney disease?
12) What about the way other people see you?
    prompt: members of your family, friends? changed?

C. Coping

13) What does the term 'illness' mean to you? How do you define it?
14) How much do you think about your own physical health?
15) Do you see yourself as being ill?
    prompt: always, sometimes? Would you say you were an ill person?
16) On a day-to-day basis, how do you deal with having kidney disease (the illness)?
    prompt: do you have particular strategies for helping you? ways of coping, practical, mental.
17) Do you think about the future much?

The following list suggests a sequence for producing an interview schedule. This is intended to be only suggestive, not prescriptive. Note also that doing this sort of work is often iterative rather than linear, and you may find your ideas of what the interview should cover changing or developing as you work on the schedule.

1. Having determined the overall area to be tackled in the interview, think about the broad range of issues you want your interview to cover. The three issues in the kidney dialysis project are description of dialysis, effect on the self and coping strategies.
2. Put the topics in the most appropriate sequence. Two questions may help here. What is the most logical order in which to address these areas? Which is the most sensitive area? In general, it is a good idea to leave sensitive topics until later in the interview to allow the respondent to become relaxed and comfortable speaking to you. Thus, an interview on political affiliations might begin with questions on what the different political parties represent, and then move on to the question of societal attitudes to politics before, in the final section, asking about the person's own voting behaviour – thus leaving the most personal and potentially most sensitive area until last. In the dialysis project, one could say that all the material is sensitive – but then the respondents know the project is about their health condition and have agreed to talk about it. It was decided that talking about the illness itself was the best way into the interview, and to allow discussion of the effect on the respondent's sense of self to come later.
3. Think of appropriate questions related to each area in order to address the issue you are interested in.
4. Think about possible probes and prompts which could follow from answers that might be given to some of your questions (see below).

Constructing Questions

A strategy often employed in this type of interviewing is to encourage the person to speak about the topic with as little prompting from the interviewer as possible. One might say that you are attempting to get as close as possible to what your respondent thinks about the topic, without being led too much by your questions. Good interview technique therefore often involves a gentle nudge from the interviewer rather than being too explicit. This aspect of the methodology runs counter to most of the training received for more orthodox psychology methodologies. Thus, you may well find that in the course of constructing your schedule, your first draft questions are too explicit. With redrafting, these become gentler and less loaded but sufficient to let the respondents know what the area of interest is and recognize that they have something to say about it. It may be useful to try out possible questions with a colleague and get some feedback on the level of difficulty and tone.

Sometimes this initial question will be insufficient to elicit a satisfactory response. This may be for various reasons – the issue is a complex one or the question is too general or vague for this particular participant. To prepare for this, you can construct *prompts* that are framed more explicitly. Indeed, some of your first draft questions may serve as these prompts. You do not have to prepare prompts for every question, only those where you think there may be some difficulty. So, for example, after question 4 in the dialysis schedule (Box 4.2), there is a prompt to remind the interviewer to ask about each of these domains. After question 8, a prompt is provided in case the respondent has difficulty with the main question itself.

Thus, the interviewer starts with the most general possible question and hopes that this will be sufficient to enable the respondent to talk about the subject. If respondents have difficulty, say they do not understand, or give a short or tangential reply, the interviewer can move to the prompt, which is more specific. Hopefully, this will be enough to get the participant talking. The more specific level questions are there to deal with more difficult cases where the respondent is more hesitant. It is likely that a successful interview will include questions and answers at both general and more specific levels and will move between the two fairly seamlessly. If an interview is taken up with material entirely derived from very specific follow-up questions, you may need to ask yourself how engaged the respondent is. Are you really entering the personal/social life world of the participants, or are you forcing them, per-haps reluctantly and unsuccessfully, to enter yours?

Funnelling is a related technique. For certain issues, it may well be that you are interested in eliciting both the respondents' general views and their response to more specific concerns. Constructing this part of the schedule as a funnel allows you to do this. Thus, in Box 4.3, the first question attempts to elicit the respondent's general view on government policy. Having established that, the interviewer probes for more specific issues. The general point is that by asking questions in this sequence, you have allowed the respondents to give their own views before funnelling them into more specific questions of partic-ular concern to you. Conducted in the reverse sequence, the interview is more likely to produce data biased in the direction of the investigator's prior and specific concerns. Of course, it is possible that when answering the first ques-tion, the respondent may also address the targeted issue and so make it redun-dant for you to ask the more specific questions.

Box 4.3   Funnelling

1) What do you think of current government policies?
2) What do you think of the current government policies towards health and welfare issues?
3) Do you think the government record in this area is okay, or should it be doing anything different?
4) If so, what?
5) It has been suggested that government policy is moving towards one of self-reliance, the welfare system being there only as a safety net for people unable to finance their own provision. What do you think of this as a policy?

Below we provide some more tips on good practice for constructing the inter-view schedule:

- *Questions should be neutral rather than value-laden or leading*.
    Bad: Do you think that the prime minister is doing a good job?
    Better: What do you think of the prime minister's record in office so far?
- *Avoid jargon or assumptions of technical proficiency*. Try to think of the perspective and language of the participants in your study and frame your questions in a way they will feel familiar and comfortable with.
    Bad: What do you think of the human genome project?
    Better: What do you know about recent developments in genetics?
    Obviously, the first question would be fine if one were talking to biologists!
- *Use open, not closed, questions*. Closed questions encourage Yes/No answers rather than getting the respondent to open up about their thoughts and feelings.
    Bad: Should the manager resign?
    Better: What do you think the manager should do now?
    It all depends on intent and context, however. It is possible to ask what seems like a closed question in such a way and at such a point in the interview that it is actually unlikely to close down the response.

Having constructed your schedule, you should try and learn it by heart before beginning to interview so that, when it comes to the interview, the schedule can act merely as a mental prompt, if you need it, rather than you having constantly to refer to it.

Interviewing

Semi-structured interviews generally last for a considerable amount of time (usually an hour or more) and can become intense and involved, depending on the particular topic. It is therefore sensible to try to make sure that the interview can proceed without interruption as far as possible, and usually it is better to conduct the interview with the respondent alone. At the same time, one can think of exceptions where this would be neither practical nor sensible. For example, it may not be advisable with young children. The location of the interview can also make a difference. People usually feel most comfortable in a setting they are familiar with, as in their own home, but there may be times when this is not practicable and a different venue will need to be chosen.

It is sensible to concentrate at the beginning of the interview on putting respondents at ease, to enable them to feel comfortable talking to you before any of the substantive areas of the schedule are introduced. Hopefully, then, this positive and responsive 'set' will continue through the interview.

The interviewer's role in a semi-structured interview is to facilitate and guide, rather than dictate exactly what will happen during the encounter. If the interviewer has learnt the schedule in advance, he or she can concentrate during the interview on what the respondent is saying, and occasionally monitor the coverage of the scheduled topics. Thus, the interviewer uses the schedule to indicate the general area of interest and to provide cues when the

participant has difficulties, but the respondent should be allowed a strong role in determining how the interview proceeds.

The interview does not have to follow the sequence on the schedule, nor does every question have to be asked, or asked in exactly the same way, of each respondent. Thus, the interviewer may decide that it would be appropriate to ask a question earlier than it appears on the schedule because it follows from what the respondent has just said. Similarly, how a question is phrased, and how explicit it is, will now partly depend on how the interviewer feels the participant is responding.

The interview may well move away from the questions on the schedule, and the interviewer must decide how much movement is acceptable. It is quite possible that the interview may enter an area that had not been predicted by the investigator but which is extremely pertinent to, and enlightening of, the project's overall question. Indeed, these novel avenues are often the most valuable, precisely because they have come unprompted from respondents and, therefore, are likely to be of especial importance for them. Thus quite a lot of latitude should be allowed. On the other hand, of course, the interviewer needs to make sure that the conversation does not move too far away from the agreed domain.

Here are a few tips on interviewing techniques.

- *Try not to rush in too quickly*. Give the respondent time to finish a question before moving on. Often the most interesting questions need some time to respond to, and richer, fuller answers may be missed if the interviewer jumps in too quickly.
- *Use minimal probes*. If respondents are entering an interesting area, minimal probes are often all that is required to help them to continue, for example: 'Can you tell me more about that?' or 'How did you feel about that?'
- *Ask one question at a time*. Multiple questions can be difficult for the respondent to unpick and even more difficult for you subsequently, when you are trying to work out from a transcript which question the respondent is replying to.
- *Monitor the effect of the interview on the respondent*. It may be that respondents feel uncomfortable with a particular line of questioning, and this may be expressed in their non-verbal behaviour or in how they reply. You need to be ready to respond to this, by, for example, backing off and trying again more gently or deciding it would be inappropriate to pursue this area with this respondent. As an interviewer, you have ethical responsibilities toward the respondent. For more on interviewing, see Taylor and Bogdan (1998), Breakwell (2006) and Burgess (1984).

⫴ Tape Recording and Transcription

It is necessary to decide whether to tape-record the interview or not. Our view is that it is not possible to do the form of interviewing required for IPA without tape recording. If one attempts to write down everything the participant is saying during the interview, one will only capture the gist, missing important nuances. It will also interfere with helping the interview to run smoothly and with establishing rapport.

Of course, the respondent may not like being taped and may even not agree to the interview if it is recorded. It is also important not to reify the tape recording. While the record it produces is fuller, it is not a complete 'objective' record. Non-verbal behaviour is excluded, and the recording still requires a process of interpretation by the transcriber or any other listener.

If you do decide to tape and transcribe the interview, the normal convention is to transcribe the whole interview, including the interviewer's questions (see Box 4.4 for a sample). Leave a margin wide enough on both sides to make your analytic comments. For IPA, the level of transcription is generally at the semantic level: one needs to see all the words spoken including false starts; significant pauses, laughs and other features are also worth recording. However, for IPA, one does not need the more detailed transcription of prosodic features of the talk which are required in conversation analysis (see Chapter 7). Transcription of tapes takes a long time, depending on the clarity of the recording and one's typing proficiency. As a rough guide, one needs to allow between five and eight hours of transcription time per hour of interview.

Box 4.4   Sample of transcription from dialysis project

Q   Right, okay, em, so I would like to start with some questions about dialysis, okay? And a very basic one just to start with, can you tell me what you do, physically do, when you're dialysing?

R   What I actually do with myself while I'm sat there?

Q   Yeah.

R   Well, what I tend to do is, I always have a paper, or I watch TV, you mean actually just sat there?

Q   Yeah.

R   I read the papers, I always take two papers from work or a magazine and read those.

Q   Do you mean work papers or?

R   No, just normal everyday papers cos the problem I've got is because I'm right-handed and the fistula (?) is on the right-hand side, which is the one annoyance but I can't write.

Q   Because you can't write, yeah.

R   Or else I would be able to, so I read the papers or take as many magazines as I can and I always keep myself busy or watch TV. If I'm getting a good enough sound from the television point I watch the news, I always do it the same way, get in, get on, read the news daily papers, any magazines I've got, then if I've got a good enough sound on the TV I watch the news from half 6 to half 7, that's during the week when I'm in there, on the Sunday now I do it on a morning, I just buy a Sunday paper and I always read the paper or read a magazine. Always the same, just so I can keep my mind occupied. I always need to do that.

(Continued)

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(Continued)

Q   So you are able to concentrate enough to be able to do?

R   Yeah. And sometimes if I'm tired I can go to sleep for an hour.

Q   Right.

R   Or if I've run out of papers and sometimes I just shut me eyes for an hour, and I can fall asleep but normally if I can I always make sure I get a magazine or a paper and read that and do something.

Q   And that sounds as though you're, that's quite a determined routine.

R   Yeah.

Q   Do you, what's behind that, what what why do you feel the necessity to be so methodical?

R   I think what I try and do is, yeah, so that I treat it as part of normal routine, I think that's what I do it for, I'm sometimes, I always get a paper from work, the same papers, always try and borrow a magazine and read and keep myself, a way not thinking about it while I'm on, that is why I do it and watch TV, so I don't think about the machine or I get bored if I'm just sat there doing nothing, but mainly not so I don't think about it, so I can just think about reading the paper, and I read the paper from top to bottom even if I've, I just read everything, it's the same things in the same papers in the daily paper, but I always read the same things, even if it's just reading the same things again I read the papers from top to bottom all the way through, and any magazines I always read them and read it from the beginning to the end or watch the TV, always keep myself busy thinking about something rather than that, that's what I feel I do it for.

||| Analysis

The assumption in IPA is that the analyst is interested in learning something about the respondent's psychological world. This may be in the form of beliefs and constructs that are made manifest or suggested by the respondent's talk, or it may be that the analyst holds that the respondent's story can itself be said to represent a piece of the respondent's identity (Smith, 2003). Either way, meaning is central, and the aim is to try to understand the content and complexity of those meanings rather than measure their frequency. This involves the investigator engaging in an interpretative relationship with the transcript. While one is attempting to capture and do justice to the meanings of the respondents to learn about their mental and social world, those meanings are not transparently available – they must be obtained through a sustained engagement with the text and a process of interpretation.

The following section describes a step-by-step approach to the analysis in IPA, illustrated with a worked example from a study on the impact of chronic

benign pain on the participant's self-concept. Chronic benign low back pain is a useful subject for IPA, as the context and personal meanings of the pain to the sufferers are critical to their experience. The example is taken from a project using IPA to try to understand the experience of chronic back pain by patients from one clinic in northern England. Participants were interviewed in the style outlined above and the transcripts subjected to IPA. For more on the study, see Osborn and Smith (1998) and Smith and Osborn (in press).

This is not a prescriptive methodology. It is a way of doing IPA that has worked for us and our students, but it is there to be adapted by researchers, who will have their own personal way of working. It is also important to remember that qualitative analysis is inevitably a personal process, and the analysis itself is the interpretative work which the investigator does at each of the stages. The approach is both similar to different from phenomenology and grounded theory (Chapters 3 and 5) as, hopefully, will become apparent.

A project may take the form of a single case design or involve a number of participants. For the latter, it is advisable to begin by looking in detail at the transcript of one interview before moving on to examine the others, case by case. This follows the idiographic approach to analysis, beginning with particular examples and only slowly working up to more general categorization or claims (see Smith et al., 1995).

⫶ Looking for Themes in the First Case

The transcript is read a number of times, the left-hand margin being used to annotate what is interesting or significant about what the respondent said. It is important in the first stage of the analysis to read and reread the transcript closely in order to become as familiar as possible with the account. Each reading has the potential to throw up new insights. This is close to being a free textual analysis. There are no rules about what is commented upon, and there is no requirement, for example, to divide the text into meaning units and assign a comment for each unit. Some parts of the interview will be richer than others and so warrant more commentary. Some of the comments are attempts at summarizing or paraphrasing, some will be associations or connections that come to mind, and others may be preliminary interpretations. You may also find yourself commenting on the use of language by the participants and/or the sense of the persons themselves which is coming across. As you move through the transcript, you are likely to comment on similarities and differences, echoes, amplifications and contradictions in what a person is saying.

The extract which follows shows this first stage of analysis for a small section of the interview with Martha, who was the first participant in our study:

Int. How long has it been like that?
Aggression
Not who I am – identity
Being mean
Can't help it – no control
Me doing it but not me
Conflict, tension
Me vs nice
Shame, if you knew – disgust
Fear of being known

M. Since it started getting bad, I was always snappy with it but not like this, it's not who I am it's just who I am if you know what I mean, it's not really me, I get like that and I know like, you're being mean now but I can't help it. It's the pain, it's me, but it is me, me doing it but not me do you understand what I'm saying, if I was to describe myself like you said, I'm a nice person, but then I'm not am I, and there's other stuff, stuff I haven't told you, if you knew you'd be disgusted I just get so hateful.

Int. When you talk about you and then sometimes not you, what do you mean?

Not always me, part of

himself that is rejected
– hateful, the 'not me'
Not me = pain, defending
against implications that
it is 'me'
Helpless
Mean/sour – worse than the
pain

M. I'm not me these days, I am sometimes, I am all right, but then I get this mean bit, the hateful bit, that's not me.

Int. What's that bit?

M. I dunno, that's the pain bit, I know you're gonna say it's all me, but I can't help it even though I don't like it. It's the mean me, my mean head all sour and horrible, I can't cope with that bit, I cope with the pain better.

Int. How do you cope with it?

Tearful/distressed,
avoidant/resistant
Unbearable, shocked at self

M. Get out the way, [tearful] sit in my room, just get away, look do you mind if we stop now, I didn't think it would be like this, I don't want to talk any more.

This process is continued for the whole of the first transcript. Then one returns to the beginning of the transcript, and the other margin is used to document emerging theme titles. Here the initial notes are transformed into concise phrases which aim to capture the essential quality of what was found in the text. The themes move the response to a slightly higher level of abstraction and may invoke more psychological terminology. At the same time, the thread back to what the participant actually said and one's initial response should be apparent. So the skill at this stage is finding expressions which are high level enough to allow theoretical connections within and across cases but which are still grounded in the particularity of the specific thing said. From Martha's account, related above, the following themes emerged and were noted:

Int. How long has it been like that?
Anger and pain
Struggle to accept self and
identity – unwanted self
Lack of control over self
Responsibility, self vs pain

Shameful self – struggle with
unwanted self
Fear of judgement

M. Since it started getting bad, I was always snappy with it but not like this, it's not who I am it's just who I am if you know what I

mean, it's not really me, I get like that and I know like, you're being mean now but I can't help it. It's the pain, it's me, but it is me, me doing it but not me do you understand what I'm saying, if I was to describe myself like you said, I'm a nice person, but then I'm not am I, and there's other stuff, stuff I haven't told you, if you knew you'd be disgusted I just get so hateful.

Int. When you talk about you and then sometimes not you, what do you mean?

M. I'm not me these days, I am sometimes, I am all right, but then I get this mean bit, the hateful bit, that's not me.

Unwanted self rejected as true
self

Int. What's that bit?

M. I dunno, that's the pain bit, I know you're gonna say it's all me, but I can't help it even though I don't like it. It's the mean me, my mean head all sour and horrible, I can't cope with that bit, I cope with the pain better.

Attribution of unwanted self to
the pain
Defence of original self
Ranking duress, self vs pain
Int. How do you cope with it?
Shame of disclosure
M. Get out the way, [tearful] sit in my room, just get away, look do you mind if we stop now, I didn't think it would be like this, I don't want to talk any more.

This transformation of initial notes into themes is continued through the whole transcript. It may well be that similar themes emerge as you go through the transcript and where that happens the same theme title is therefore repeated.

We have presented the two stages for a small extract above to show the way in which the transformation into themes works. To illustrate this process further, here is another section of the transcript, showing first the initial notes and then the emergent themes:

Resistance to change
Avoidance
Struggle against being
'bad person', depression
Fear of exposure/public
knowledge
Mean, unsociable, undesirable
Schadenfreude
Loss of care, bitter against will
Rejected as true self
Confusion, lack of control
M. No, not really, well, you don't want to think you've changed at all, and I don't think about it, you've asked me and I'm trying to think and yeah, I don't want to, but I think I'm not a bad person, perhaps, yeah, it

brings you down, and then you end up spoiling things.

Int. How do you mean?

M. No one is going to hear this tape, right?

Int. Like we agreed, anonymous and confidential, you get the tape after I'm done.

M. Right, [pause] the pain makes me mean. I don't want to be, but I get like, mean, I don't care about other people, nothing's funny, and I get mad if they try to be nice, like pity. It's not really me, but it is me if know what I mean, I don't like it but I do it, do you understand, and I end up saying sorry, if I've snapped like, it's the pain it's killing, it does that sometimes.

The emergent themes for this extract were noted in the right-hand margin:

Rejection of change
Avoidance of implications
Struggle to accept new self
Undesirable, destructive self
Shame
Undesirable behaviour ascribed
to pain
Lack of compassion
Conflict of selves, me vs not me
Living with a new 'me'

M. No not really, well, you don't want to think you've changed at all, and I don't think about it, you've asked me and I'm trying to think and yeah, I don't want to, but I think. I'm not a bad person, perhaps, yeah, it

brings you down, and then you end up spoiling things.
Int. How do you mean?
M. No one is going to hear this tape, right?
Int. Like we agreed, anonymous and confidential, you get the tape after I'm done.
M. Right, [pause] the pain makes me mean. I don't want to be, but I get like, mean, I don't care about other people, nothing's funny, and I get mad if they try to be nice, like pity. It's not really me, but it is me if you know what I mean, I don't like it but I do it, do you understand, and I up saying sorry, if I've snapped like, it's the pain it's killing, it does that sometimes.

At this stage, the entire transcript is treated as data, and no attempt is made to omit or select particular passages for special attention. At the same time, there is no requirement for every turn to generate themes. The number of emerging themes reflects the richness of the particular passage.

Connecting the Themes

The emergent themes are listed on a sheet of paper, and one looks for connections between them. So, in the initial list, the order provided is chronological – it is based on the sequence with which they came up in the transcript. The next stage involves a more analytical or theoretical ordering, as the researcher tries to make sense of the connections between themes which are emerging. Some of the themes will cluster together, and some may emerge as superordinate concepts. Imagine a magnet with some of the themes pulling others in and helping to make sense of them.

The preliminary list of themes that emerged from Martha's transcript and were noted in the right-hand margin are shown in Box 4.5. These were clustered as shown in Box 4.6. In this particular case, it will be seen that all the themes listed were present in the two extracts selected. This is because, in this particular case, we have specifically chosen these two extracts for their richness. They encapsulate each of the important issues in our analysis.

Box 4.5   Initial list of themes

Anger and pain
Struggle to accept self and identity – unwanted self
Lack of control over self

(Continued)

Responsibility, self vs pain
Shameful self – struggle with unwanted self
Fear of judgement
Unwanted self rejected as true self
Attribution of unwanted self to the pain
Defence of original self
Ranking duress, self vs pain
Shame of disclosure
Rejection of change
Avoidance of implications
Struggle to accept new self
Undesirable, destructive self
Shame
Undesirable behaviour ascribed to pain
Lack of compassion
Conflict of selves, me vs not me
Living with a new 'me'

Box 4.6   Clustering of themes

Undesirable behaviour ascribed to pain
Struggle to accept self and identity – unwanted self
Shameful self – struggle with unwanted self, fear of judgement
Shame of disclosure
Struggle to accept new self
Undesirable, destructive self
Conflict of selves, me vs not me
Living with a new 'me'
Unwanted self rejected as true self
Attribution of unwanted self to the pain
Defence of original self
Lack of control over self
Rejection of change
Avoidance of implications
Responsibility, self vs pain
Shame
Lack of compassion
Anger and pain
Ranking duress, self vs pain
Shame of disclosure

As the clustering of themes emerges, it is checked in the transcript to make sure the connections work for the primary source material – the actual words of the participant. This form of analysis is iterative and involves a close inter-action between reader and text. As a researcher one is drawing on one's inter-pretative resources to make sense of what the person is saying, but at the same time one is constantly checking one's own sense-making against what the person actually said. As an adjunct to the process of clustering, it may help to compile directories of the participant's phrases that support related themes. This can easily be done with the cut and paste functions on a standard word-processing package. The material can be printed to help with the clustering, and as the clustering develops, so the extract material can be moved, con-densed and edited.

The next stage is to produce a table of the themes, ordered coherently. Thus, the above process will have identified some clusters of themes which capture most strongly the respondent's concerns on this particular topic. The clusters are themselves given a name and represent the superordinate themes. The table lists the themes which go with each superordinate theme, and an iden-tifier is added to each instance to aid the organization of the analysis and facil-itate finding the original source subsequently. The identifier indicates where in the transcript instances of each theme can be found by giving key words from the particular extract plus the page number of the transcript. During this process, certain themes may be dropped: those which neither fit well in the emerging structure nor are very rich in evidence within the transcript. The final table of themes for Martha is presented in Box 4.7. Because most of the themes recur in this transcript, the identifier in this case points to a particularly good example of the relevant theme.

Box 4.7   Table of themes from first participant

1. *Living with an unwanted self*
– Undesirable behaviour ascribed to pain   1.16   'it's the pain'
– Struggle to accept self and identity –
   unwanted self   24.11   'who I am'
– Unwanted self rejected as true self   24.24   'hateful bit'
– Struggle to accept new self   1.8   'hard to believe'
– Undesirable, destructive self   5.14   'mean'
– Conflict of selves, me vs not me   7.11   'me not me'
– Living with a new self   9.6   'new me'

2. *A self that cannot be understood or
   controlled*
– Lack of control over self   24.13   'can't help'
– Rejection of change   1.7   'still same'

(Continued)

– Avoidance of implications	10.3	'no different'
– Responsibility, self vs pain	25.25	'understand'
3. *Undesirable feelings*		
– Shame	5.15	'disgusting'
– Anger and pain	24.09	'snappy'
– Lack of compassion	6.29	'don't care'
– Confusion, lack of control	2.17	'no idea'
– Ranking duress, self vs pain	25.01	'cope'
– Shame of disclosure	25.06	'talk'
(1.16 = page 1, line 16)		

⦀ Continuing the Analysis with Other Cases

A single participant's transcript can be written up as a case study in its own right or, more often, the analysis can move on to incorporate interviews with a number of different individuals. One can either use the themes from the first case to help orient the subsequent analysis or put the table of themes for participant 1 aside and work on transcript 2 from scratch. Whichever approach is adopted, one needs to be disciplined to discern repeating patterns but also acknowledge new issues emerging as one works through the transcripts. Thus, one is aiming to respect convergences and divergences in the data – recognizing ways in which accounts from participants are similar but also different.

   In the study illustrated here, the superordinate list from Martha's account was used to inform the analysis of the other transcripts. By remaining aware of what had come before, it was possible to identify what was new and different in the subsequent transcripts and at the same time find responses which further articulated the extant themes. Evidence of the superordinate themes 'living with an unwanted self' and 'undesirable feelings' emerged in other transcripts in ways which helped to illuminate them further. The first stage of the process with Tony's transcript follows:

Withdrawal, relief	T. Yeah, you know that *Desert Island Discs?*
Change in role, putting on	*Int.* The radio show?
an act	T. I'd love that, don't get me wrong I'd miss
No people = bliss	my kids and I don't mean it, but to be away
Miserable but no cost	from people and not have to be something
People = duress	else you're not, that would be bliss.
People = cannot be yourself	*Int.* You'd be happier that way?
Front, façade, demands	T. Yeah, no, well, no I'd still be a miserable
of social role and convention	old git but it wouldn't matter, it's only when
Pain and relationships,	other people come around that it matters, if
kids affected experience	you can just be yourself it doesn't matter

what you do, I'd probably shout and swear all day but it wouldn't matter I wouldn't have to put on that front so it'd be easier.

Int. So a lot of how you feel depends on who's around?

T. I suppose it does, but not the pain, that just happens. Dealing with the pain, I suppose, is different. You could say if I didn't have kids I wouldn't be like this.

These initial comments were transformed into the following themes.

Pain and social context
Conflict in identity
Conforming to role despite pain
Self in public domain
Managing the self in public
Destructive social consequences
of pain
Self independent of pain
Self/identity and relationships
define pain experience

T. Yeah, you know that *Desert Island Discs?*
Int. The radio show?
T. I'd love that, don't get me wrong I'd miss my kids and I don't mean it, but to be away from people and not have to be something else you're not, that would be bliss.

Int. You'd be happier that way?

T. Yeah, no, well, no I'd still be a miserable old git but it wouldn't matter, it's only when other people come around that it matters, if you can just be yourself it doesn't what you do, I'd probably shout and swear all day but it wouldn't matter I wouldn't have to put on that front so it'd be easier.

Int. So a lot of how you feel depends on who's around?

T. I suppose it does, but not the pain, that just happens. Dealing with the pain, I suppose, is different. You could say if I didn't have kids I wouldn't be like this.

One can see here how the analysis of pain and identity is evolving and, as the analytic process in this example continued, the theme of 'living with an unwanted self' and 'undesirable feelings' transmuted to become 'living with an unwanted self in private' and 'living with an unwanted self in public'. As we said earlier, the researcher can choose to either use the table of themes from the first transcript to orient the analysis of the subsequent ones, or start the analysis of each case, as though it was the first. If one is working with a very small number of cases, for example, a sample of three as we are now suggesting for students' first IPA projects, then we would recommend that the latter strategy is adopted. When the number of cases is very small, it is best to start analysis of each from scratch and then look for convergence and divergence once one has done each case separately.

Once each transcript has been analysed by the interpretative process, a final table of superordinate themes is constructed. Deciding upon which themes to focus upon requires the analyst to prioritize the data and begin to reduce them, which is challenging. The themes are not selected purely on the basis of their prevalence within the data. Other factors, including the richness of the particular passages that highlight the themes and how the theme helps

illuminate other aspects of the account, are also taken into account. From the analysis of the cases in this study, four main superordinate themes were articulated. The fourth one, 'a body separate from the self', emerged late in the analysis. Consonant with the iterative process of IPA, as the analysis continued, earlier transcripts were reviewed in the light of this new superordinate theme, and instances from those earlier transcripts were included in the ongoing analysis. Box 4.8 shows the identifiers for the themes for the two participants looked at in the chapter. In practice, each of the seven participants in the study was represented for each superordinate theme. Sometimes students are worried because they cannot find convergences between their individual case tables of themes. In our experience, this can be seen as an intellectual opportunity rather than difficulty. It is often possible to see higher level convergences across seemingly disparate cases, and so this process pushes the analysis to an even higher level. The resulting analysis respects both theoretical convergence but also, within that, individual idiosyncrasy in how that that convergence is manifest.

Box 4.8   Master table of themes for the group

Martha	*Tony*	
1. Living with an unwanted self in private		
Undesirable behaviour ascribed to pain	1.16	3.27
Struggle to accept self and identity – unwanted self	24.11	2.13
Rejected as true self	6.3	7.15
Undesirable, destructive self	5.14	2.17
Conflict of selves	7.11	12.13
Living with a new self	9.6	2.14
2. Living with an unwanted self, in public		
Shame	5.15	10.3
Lack of compassion	6.29	3.7
Destructive social consequences of pain	8.16	10.9
3. A self that cannot be understood		
Lack of control over self	24.13	11.8
Rejection of change	1.7	4.16
Responsibility, self vs pain	25.15	13.22
4. A body separate from the self		
Taken for granted	21.15	15.14
Body excluded from the self	23.5	16.23
Body presence vs absence	18.12	19.1

⫴ **Writing Up**

The final section is concerned with moving from the final themes to a write-up and final statement outlining the meanings inherent in the participants' experience. The division between analysis and writing up is, to a certain extent, a false one, in that the analysis will be expanded during the writing phase.

This stage is concerned with translating the themes into a narrative account. Here the analysis becomes expansive again, as the themes are explained, illustrated and nuanced. The table of themes is the basis for the account of the participants' responses, which takes the form of the narrative argument interspersed with verbatim extracts from the transcripts to support the case. Care is taken to distinguish clearly between what the respondent said and the analyst's interpretation or account of it. And when one sees the extracts again within the unfolding narrative, often one is prompted to extend the analytic commentary on them. This is consonant with the processual, creative feature of qualitative psychology.

Two broad presentation strategies are possible. In the first, the 'results' section contains the emergent thematic analysis, and the separate 'discussion' links that analysis to the extant literature. An alternative strategy is to discuss the links to the literature as one presents each superordinate theme in a single 'results and discussion' section. In the back pain study, the themes are presented together in one analysis section while a separate section is devoted to exploring their implications in relation to the existing literature. A brief extract is shown in Box 4.9.

Box 4.9   Extract from final write-up of the back pain study

Participants were asked to talk as widely as possible about the different ways their pain had affected or influenced their feelings, attitudes or beliefs about themselves. The participants' accounts clustered around four superordinate themes: living with an unwanted self, in private; living with an unwanted self, in public; living with a self that cannot be understood; and living with a body separate from the self.

Living with an unwanted self, in private

All of the participants related how, as a consequence of living with their chronic pain, they had experienced a deterioration in their sense of self, and were engaged in a struggle to manage that process. The phrase 'self-concept' was not used by the interviewer; the participants were asked to describe in their own words how they felt living with their chronic pain had affected the way they saw

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(Continued)

or felt about themselves, 'as a person'. None of the participants reported any problems understanding this concept, referring to it as 'me' and 'who I am'.

Martha's account captured much of the participants' despair in relation to the deterioration in their self-regard, and their struggle to assimilate that aspect of their experience of living with pain into their self-concept. The changes Martha reported were associated with significant distress that, at times, outweighed that caused by the pain sensation, and prompted her to withdraw from social contact for fear of harsh judgement:

> *Int.*   How long has it been like that?
> *Martha* Since it started getting bad, I was always snappy with it but not like this, it's
>   not who I am, it's just who I am if you know what I mean, it's not really me,
>   I get like that and I know like, you're being mean now but I can't help it. It's
>   the pain, it's me, but it is me, me doing it but not me do you understand what
>   I'm saying, if I was to describe myself like you said, I'm a nice person, but
>   then I not am I, and there's other stuff, stuff I haven't told you, if you knew
>   you'd be disgusted I just get so hateful.
> *Int.*   When you talk about you and then sometimes not you, what do you mean?
> *Martha* I'm not me these days, I am sometimes, I am all right, but then I get this
>   mean bit, the hateful bit, that's not me.
> *Int.*   What's that bit?
> *Martha* I dunno, that's the pain bit, I know you're gonna say it's all me, but I can't
>   help it even though I don't like it. It's the mean me, my mean head all sour
>   and horrible, I can't cope with that bit, I cope with the pain better.
> *Int.*   How do you cope with it?
> *Martha* Get out the way, [tearful] sit in my room, just get away, look do you mind if
>   we stop now, I didn't think it would be like this, I don't want to talk any more.

Martha's account emphasized the distress she felt as she struggled to manage or comprehend her situation. Martha referred to behaviours and feelings she had about herself since having pain, of being 'hateful', that she found disturbing and alarming. They gave her feelings of self-disgust, and a fear that if others were aware of them, they, too, would share that disgust:

M: There's other stuff, stuff I haven't told you, if you knew, you'd be disgusted I just get so hateful.

Martha was not explicit about what she does that is so 'hateful', but showed that it was sufficiently threatening to warrant its concealment. Her use of the term 'hateful' was not explicit, but implied that she felt that, in being 'mean', she was both full of feelings of hate toward others, and also worthy of hate by others.

She showed a need to see herself in a positive light, as a 'nice person', but struggled to do so. This was reflected in her confusion about her sense of self, and her attempts to separate the undesirable behaviour from her self-concept, and attribute it to the pain:

(Continued)

(Continued)

M: It's not who I am it's just who I am if you know what I mean, it's not really me … It's the pain, it's me, but it is me, me doing it but not me.

   Martha appeared to be engaged in an ongoing process of defending her self-concept to retain a sense of self-worth, but she could not reject completely the implication that her 'disgusting' behaviour was not just a function of her pain but also related to herself, 'I know you're gonna say it's all me'. The battle to retain a sense of self-worth in the face of her confusing experience of her deteriorating physical and emotional state, and disability, was more difficult to bear than the sensation of pain itself:

M: It's the mean me, my mean head all sour and horrible, I can't cope with that bit, I cope with the pain better.

⑴⑴ Conclusion

This chapter has aimed to present the reader with an accessible introduction to IPA. We have outlined a series of steps for conducting a research study using the approach. Doing qualitative research may seem daunting at first, but, ultimately, it is extremely rewarding. We hope you may be encouraged by what we have written to attempt a project using IPA yourself.

   Box 4.10 presents three examples of IPA in action.

Box 4.10   Three good examples of IPA

Migration and Threat to Identity

This paper by Timotijevic and Breakwell (2000) explores the impact of migration on identity. Immigrants to the UK from the Former Yugoslavia were interviewed about their perceptions of the countries they had left and the one they had joined and the decision to move. Their accounts point to a rich patterning of identifications. Different people used different category membership strategies in relation to their former home. Some stressed their own ethnic identity at the expense of the greater national Yugoslavian while others identified as Yugoslavian and emphasized their own ethnic group as being an important element in that Yugoslavian identity, Thus the category Yugoslavian was not fixed and could therefore be invoked in different ways as part of the process of asserting ones identity. Their relationship to the UK was similarly complex. The paper neatly captures this multifaceted and dynamic process of identification and relates it to various theories of identity, including identity process theory and social identity theory.

(Continued)

Hepatitis C Infection and Well-being

Dunne and Quayle (2001) conducted focus groups with patients who had iatro-genically acquired Hepatitis C infection – that is they became infected from con-taminated blood infusion. The authors make a persuasive case for the use of focus groups here in that they argue the style of group facilitation and the fact that members were connected as members of a patients advocate group meant that the data obtained were still able to tap into personal lived experiences. The paper illustrates how difficult patients find it to make sense of their symptoms before they are given a diagnosis. And when diagnosis comes, their reactions are mixed, partly because with it comes awareness of the seriousness of their condition. The paper also explores the negative impact on their primary social relationships. The authors discuss their results in terms of identity and life career and make links to the extant work of Charmaz and Goffman.

Anger and Aggression in Women

Eatough and Smith (2006b) present a detailed case study of one woman's account of anger and aggression. It is therefore a useful illustration of IPA's commitment to the idiographic. The paper aims to show how the individual attempts to find meaning for events and experiences within the context of their life and how this meaning mak-ing can be hard and conflictual. The analysis begins by demonstrating how domi-nant cultural discourses are used to explain anger and aggression. These include hormones, alcohol, and the influence of past relationships on present action. It then goes onto examine how the participant's meaning making is often ambiguous and confused, and how she variously accepts and challenges meanings available to her. Finally, the analysis shows how meaning making can break down and the conse-quences of this for the individual's sense of self.

Further Reading

Smith, J.A. (1996) 'Beyond the divide between cognition and discourse: using interpretative phenomenological analysis in health psychology', *Psychology and Health*, 11: 261–71.
This paper provides a summary of the theoretical basis for IPA.
Smith, J.A., Flowers, P. and Osborn, M. (1997) 'Interpretative phenomenological analysis and health psychology', in L. Yardley (ed.), *Material Discourses and Health*. London: Routledge, pp. 68–91.
This chapter illustrates IPA applied to three different areas in the psychology of health.

Smith, J.A. and Eatough, V. (2006) 'Interpretative phenomenological analysis', in G. Breakwell, C. Fife-Schaw, S. Hammond and J.A. Smith (eds) *Research Methods in Psychology*, (3rd edn). London: Sage.

This chapter gives an alternative discussion of the IPA method illustrated with material from a project on anger and aggression.

Eatough, V. and Smith J.A. (in press) 'Interpretative phenomenological analysis', in C. Willig and W. Stainton Rogers (eds) *Handbook of Qualitative Psychology*. London: Sage.

This chapter discusses the theoretical foundations of IPA and considers a range of current issues.

A practical guide to using Interpretative Phenomenological Analysis in qualitative research psychology[1]

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Abstract: Interpretative Phenomenological Analysis (IPA) has become a popular methodological framework in qualitative psychology. Studies based in IPA focus on examining how individuals make meaning of their life experiences. A detailed analysis of personal accounts followed by presenting and discussing the generic experiential themes is typically paired with researcher's own interpretation, which is an expression of double hermeneutics in practice. IPA relies draws upon phenomenology, hermeneutics, and idiography. This paper presents fundamental principles behind IPA and offers guidelines for doing a study based on this framework.

Qualitative methodology frameworks in psychology

For many decades, the mainstream experimental psychology relied on quantitative methodology based on a model, which involved testing theories by deriving hypotheses from them, which could then be checked in practice via an experiment or observation. The researcher was looking for disconfirmation (falsification) of theory, and by eliminating claims which were not true he or she was believed to move closer to the truth. In contrast to this approach, we have observed a growing development of qualitative research methodologies[2], based on a different epistemological view. Qualitative researchers are mainly concerned with meaning (e.g., how individuals make sense of the world, how they experience events, what meaning they attribute to phenomena). In other words, they are more preoccupied with the quality of experience, rather than causal relationships. While quantitative studies are generally more concerned with counting occurrences, volumes, or the size of associations between entities (which requires the reduction of phenomena to numerical values in order to carry out statistical analyses), a great deal of qualitative research aims to provide rich descriptive accounts of the phenomenon under investigation. In qualitative research, data is usually collected in naturalistic settings (at home, school, hospital). Both participants' and researchers' interpretation of phenomena is taken into account in the process of analysis. An important part of qualitative methodology is *epistemological reflexivity*, which refers to questions such as: How does the research question define and limit what can be found? How does study design and method of analysis affect

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[1] This paper was written in English by the two authors and then translated into Polish by the first author.

[2] Silverman (1993:1) explains the difference between "methodology" and "method": whereas the former refers to 'a general approach to studying research topics', the later denotes 'a specific research technique' (e.g., an in-depth interview, focus group, participatory observation, etc.).

data and its analysis? If the research problem were defined differently, how would affect the understanding of phenomenon under investigation? (Willig, 2008).

Handbooks in qualitative methodology in psychology usually describe a number of major methodological approaches, such as the Grounded Theory, Phenomenology, Discourse analysis, Narrative Psychology, Participatory Action Research (Smith 2008; Willig 2008; Camic, Rhodes & Yardley 2003). Each type constitutes a comprehensive framework which includes theoretical underpinnings behind it and guidelines for research design (sampling, methods of data collection and analysis). When producing the final report (or a research paper), it is especially convenient to use an established methodological framework. This is valuable, as most journals impose limitations on paper lengths. The researcher can make reference to standardized methods and methodologies, instead of giving detailed descriptions of analytical procedures. This allows more space to present abundant qualitative material. In this paper, we shall describe one of such methodological frameworks, which has become increasingly popular in European and American psychology, namely Interpretative Phenomenological Analysis (IPA). After a short outline of its theoretical orientation, we shall describe the specifics of research problems suitable for IPA, methods of sampling and data collection, and present guidelines for analysis using examples, and final comments on how to produce a final paper. For the reader who is interested, a much fuller treatment of these issues can be found in the book on IPA (Smith, Flowers, Larkin 2009).

IPA theoretical orientation

The primary goal of IPA researchers is to investigate, how individuals make sense of their experiences. It is assumed that people are as 'self-interpreting beings' (Taylor, 1985), which means that they are actively engaged in interpreting the events, objects, and people in their lives. To examine this process, IPA draws upon the fundamental principles of phenomenology, hermeneutics, and idiography.

Phenomenology, developed by Edmund Husserl, as an eidetic method, is concerned with attending to the way things appear to individuals in experience. In other words, it aims at identifying the essential components of phenomena or experiences which make them unique or distinguishable from others. By the use of eidetic reduction, phenomenologists try to recognize what essential components make a given phenomenon special (or unique). Phenomenological studies will thus focus on how people perceive and talk about objects and events, rather than describing phenomena according to a predetermined categorical system, conceptual and scientific criteria. This involves 'bracketing' one's preconceptions and allowing phenomena to speak for themselves.

Husserl's thought was further developed by his follower - Martin Heidegger (1962) into existential philosophy and hermeneutics. Heidegger was concerned with the ontological question of existence itself. According to hermeneutics (from the Greek word '*to interpret*' or '*to make clear*') one needs to comprehend the mind-set of a person and language which mediates one's experiences of the world, in order to translate his or her message (Freeman, 2008). Thus, IPA researchers attempt to understand what it is like to stand in the shoes of subject (although recognising this is never completely possible) and through interpretative activity make meaning comprehendible by translating it (just like the mythological Hermes translated the gods' messages to humans). This means, that the IPA study is a dynamic process with an active role of the researcher which will influence the extent to which they get access to the participant's experience and how, through interpretative activity, they will make sense of the subject's personal world. The analytical process in IPA is often described in terms of a *double hermeneutic* or dual interpretation process, because firstly, the participants make meaning of their world and secondly, the researcher tries to decode that meaning - make sense of the participants' meaning making (Smith & Osborn, 2008). In other words, IPA researchers try to understand what an experience (object or an event) is like from the participant's perspective. Yet, at

the same time, they try to formulate critical questions referring to the material, such as: What is the person trying to achieve here? Is there anything meaningful being said here, which was not intended? Do I have a sense of something going on here that the person himself of herself is perhaps less aware of? IPA studies may thus contain elements of both types of interpretation, making the analysis richer and more comprehensive.

To sum up, IPA synthesizes ideas from phenomenology and hermeneutics resulting in a method which is descriptive because it is concerned with how things appear and letting things speak for themselves, and interpretative because it recognizes there is no such thing as an uninterpreted phenomenon.

The third theoretical orientation which PA relies upon is idiography. It refers to an in-depth analysis of single cases and examining individual perspectives of study participants, in their unique contexts. The fundamental principle behind the idiographic approach is to explore every single case, before producing any general statements. This contrasts with the nomothetic principles which underlie most empirical work in psychology, in which groups and populations are studied to establish the probability that certain phenomena will occur under specific conditions. IPA relies on idiography, meaning that researchers focus on the particular rather the universal (Smith, Harré, & Van Langenhove, 1995). The researcher can make specific statements about study participants because the analysis is based upon a detailed case exploration. IPA researcher will thus start with examining an individual and producing a case study or will move to an equally attentive exploration of the second case, and so on. This idiographic commitment is unusual even among qualitative methodologies. Be it the case, that the researcher wants to study a group of individuals, he or she will move between important themes generated in the analysis and exemplify them with individual narratives (how particular individuals told their stories), comparing and contrasting them (i.e., showing similarities and differences.

Formulating research questions

Most qualitative methodology rejects formulating hypotheses prior to research conduct. Instead, it promotes an open inductive approach to data collection and analysis. IPA emphasises studying people idiographically. It aims at generating rich and detailed descriptions of how individuals are experiencing phenomena under investigation. Its concern with the in-depth exploration of their lived experiences and which how they are making sense of those experiences helps define the type of question which is suitable for an IPA study. Example research problems might be:

- What does jealousy feel like?
- How do young people experience the transition from school to college or university ?
- How do people make the decision whether or not undergo chemotherapy?

There are interesting examples of using IPA in psychological research to explore a variety of problems, such as: the relationship between body image, gender and sexual orientation (Morgan & Arcelus, 2009), how people with multiple sclerosis think about the experience of exercise (Borkoles et al., 2008), how being HIV positive impacts personal relationships (Jarman, Walsh & de Lacey, 2005), what influences the decision to stop psychotherapy (Wilson & Sperlinger, 2004), how individual's sense of identity is affected by being diagnosed with Alzheimer's disease (Clare, 2003), by homelessness (Riggs & Coyle, 2002) or how it changes during the transition to motherhood (Smith, 1999), how people come to terms with the death of a partner (Golsworthy & Coyle, 1999), or how gay men think about sex and sexuality (Flowers, Smith, Sheeran & Beail, 1997).

IPA was initially applied to problems in health psychology but became more and more popular in other fields. It can be a suitable approach in clinical psychology and psychotherapy to examine

cases. Its strengths can also be utilized in cultural or indigenous psychology, which focus on the *emic* perspective of participants. It can also support psychologists of religion to analyse spiritual experiences or religious rituals and meaning attributed to them. Community psychologists, as well as psychologists of migration and acculturation can find it handy to examine how various groups construct their ethnic (or group) identity, what meaning they attribute to social roles, and how they perceive phenomena. These are just a few examples of how this methodological framework can be used to design qualitative psychological research.

Sampling in IPA

The main concern in IPA is give full appreciation to each participant's account (case). For this reason, samples in IPA studies are usually small, which enables a detailed and very time consuming case-by-case analysis. At an early stage, the researcher must decide whether he or she wants to give a comprehensive and in-depth analysis about a particular participant's experiences or present a more general account on a group or specific population. Doing both is rarely possible, so the final goal will determine the subsequent methodology and research design. It is inappropriate to use a large sample size just because that is more common in psychological studies. With IPA, we aim at producing an in-depth examination of certain phenomena, and not generating a theory to be generalised over the whole population. (However, comparing multiple IPA studies on a particular problem may provide insights into universal patterns or mechanisms.)

There is no rule regarding how many participants should be included. It generally depends on: 1. the depth of analysis of a single case study, 2. the richness of the individual cases, 3. how the researcher wants to compare or contrast single cases, and 4. the pragmatic restrictions one is working under. The last category includes time constrains or access to participants. For example, one of us participated in a study to investigate the experiences of parents who had a child with a Juvenile Huntington's disease - a seemingly rare condition (Smith et al., 2006). The total number of people for whom this is a relevant experience is small and therefore this immediately determines the boundaries for a possible sample. More commonly the potential participant pool is wider and a process of sample selection will need to be undertaken.

IPA studies have been published with, for example one, four, nine, fifteen participants. Larger sample sizes are possible but less common. According to Turpin *et al.* (1997) the clinical psychology doctoral programmes in Britain recommend that having six to eight participants is appropriate for an IPA study. Having a sample as such gives an opportunity to examine similarities and differences between individuals. At the same time, the amount of qualitative data gathered is not overwhelming. In general, IPA researchers should concentrate more on the depth, rather than breadth of the study. A detailed analysis of a single case may be well justified if rich and meaningful data has been collected, which allows the researcher to present original problems, mechanism, or experiences. This will offer an opportunity to learn a lot about the individual, his or her response to a specific situation, and consider connections between different aspects of the person's account (Smith, 2004). In most studies, however, IPA researchers rely on a small sample rather than a single individual.

Typically, IPA researchers aim for a fairly homogeneous sample (contrary to grounded theorists, for example, who engage in constant comparisons and seek exceptions or odd cases which helps them produce a multidimensional dynamic theory of how different factors affect human behaviours). In IPA, psychological similarities and differences are usually analysed within a group that has been defined as similar according to important variables. Obviously, it is inappropriate to think in terms of random or representative sampling when one is interviewing so few participants. In line with the theoretical underpinnings of IPA, participants are selected purposively. This allows one to find a defined group for whom the research problem has relevance and personal significance. How

homogeneous the group will be depends on two factors: 1. interpretative concerns (degree of similarity or variation that can be contained in the analysis of the phenomenon), and 2. pragmatic considerations (ease or difficulty of contacting potential participants, relative rarity of the phenomenon). The subject matter can itself define the boundaries of the relevant sample (e.g., if the topic is rare and few representatives are available, such as the Juvenile Huntington Disease mentioned earlier). In other cases, when the topic is more commonplace, the sample may include individuals with similar demographic or socio-economic status profiles (e.g., elderly, female members of a specific religious community or young, male patients diagnosed with a particular illness, etc.). In this respect, IPA can be compared to ethnographic studies in which small communities are closely investigated to produce detailed descriptions and commentaries about their culture, where claims are bound to that culture or only cautiously suggested at a broader level. Nevertheless, through a steady accumulation of similar studies on other groups, generalizations may become possible over time (Smith, Harré, & Van Langenhove, 1995).

Collecting data

The primary concern of IPA researchers is to elicit rich, detailed, and first-person accounts of experiences and phenomena under investigation. Semi-structured, in-depth, one-on-one interviews are the most popular method to achieve that, although other alternatives of data collection can also be used (e.g., diaries, focus groups, letters or chat dialogues). Semi-structured interviews allow the researcher and the participant to engage in a dialogue in real time. They also give enough space and flexibility for original and unexpected issues to arise, which the researcher may investigate in more detail with further questions.

It is crucial, that researchers have developed their interviewing skills. Apart from mastering active listening[3] and the ability to ask open-ended questions free from hidden presumptions, the interviewer should know to build rapport and gain trust of the participant. A kind of 'warm-up discussion may be necessary to reduce the interviewee's tension and get him or her ready to discuss more sensitive or personal issues. With semi-structured interviews, it is helpful to prepare an interview plan in advance. It is merely a guide to facilitate a natural flow of conversation. It can include key questions or areas the researcher wants to discuss (see an example in Frame 1). Formulating specific questions (e.g., relating to sensitive issues) may be helpful for less experienced interviewers. Apart from open and expansive questions which encourage participants to talk at length, it may be also be convenient to think about prompts. These may be helpful if participants find some questions too general or abstract. Questions suitable for an IPA study may concentrate on exploring sensory perceptions, mental phenomena (thoughts, memories, associations, fantasies), and specifically individual interpretations. During an interview, the researcher should also feel comfortable with moments of silence, to allow both oneself and the participant reflect issues being discussed. Furthermore, an experienced interviewer is also sensitive to and tries to be aware of all verbal, non-verbal, and non-behavioural communication.

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[3] It involves listening attentively, trying to understand what is being said, negotiating meaning when things seem unclear, ambiguous or abstract, and constructing appropriate questions which helps explore what is being said.

Frame 1: Example interview questions for a study on illness behaviours in an ethnic minority group. The researcher's goal was to examine how the indigenous culture and acculturation in northern India affected Tibetan patients' explanatory models and reactions to becoming ill.

1. Can you tell me about your illness experiences when living in exile?
Prompts: *What kind of health problems did you have? How did that feel in your body? How did you interpret symptoms? Why do you think symptoms appeared at that time of your life? What was going on in your mind then? (thoughts/ associations/ fantasies)*
2. What did you think could help you feel better at that time?
Prompts: *What kind of treatment did you think was most appropriate? Why? What did you think should be done to help you overcome your problem(s)? How did you think your condition would change if had done nothing about it?*
3. What was you first / subsequent reaction(s)?
Prompts: *How did you decide to go about your health problems? Where did you seek help? / What stopped you from seeking help? If sought medical / non-medical treatment: What did you think about recommendations you received? What was similar or different in what you thought about your problem and how the person you referred to assessed it?*

For ethical reasons, and because IPA studies are frequently concerned with significant existential issues, it is crucial that the interviewer monitors how the interview is affecting the participant. Experienced interviewers can easily determine when the participants avoid talking about certain issues, start feeling awkward, ashamed or become very emotional. Using counseling skills may then be useful and if the interviewer has not developed such competence, he or she should follow specific ethical procedures (e.g., stop the interview and refer the person to a professional in mental care). Even though such situations are rare, the researchers should consider all possible risks.

The duration of most IPA interviews is one hour or longer. The semi-structured form of interviews allows the interviewer to ask questions in a convenient order, which may differ from one interview to another. Novel perspectives or topics, which have not been anticipated, may also arise and the researcher is free to develop them. In IPA it is necessary to audio record the interviews and produce a verbatim transcription of it.

Analysis of the qualitative material

Analysing qualitative material using the IPA framework can be an inspiring activity, although complex and time-consuming. It is recommended that the researchers totally immerse themselves in the data or in other words, try step into the participants' shoes as far as possible. IPA aims at giving evidence of the participants' making sense of phenomena under investigation, and at the same time document the researcher's sense making. The researcher is thus moving between the *emic* and *etic* perspectives. The latter is achieved by looking at the data through psychological lens and interpreting it with the application of psychological concepts and theories which the researcher finds helpful to illuminate the understanding of research problems. Showing the emic perspective protects researchers from psychological or psychiatric reductionism On the other hand, by looking at data from the outsider's perspective, we have a chance to develop higher level theories and insights (which the respondent himself or herself may have no access to). The researcher should be careful, however, when applying theories developed in one setting (e.g. western culture) to explain phenomena from a different one. Indigenous psychologists stipulate, that such theories might be irrelevant.

In general, IPA provides a set of flexible guidelines which can be adapted by individual researchers, according to their research objectives. However, these guidelines are merely an illustration of one possible way of analysing the qualitative material. They should not be treated as a recipe and the researcher is advised to be flexible and creative in his or her thinking. To demonstrate how the analysis unfolds, we shall describe the analytic stages of an example study on how Tibetans acculturating in northern India make meaning of their medical conditions.

Multiple reading and making notes

The initial stage involves close reading of the transcript a number of times. If an audio recording is available, it is also recommended to listen to it a few times. This helps researchers immerse themselves in the data, recall the atmosphere of the interview, and the setting in which it was conducted. Each reading and listening to the recording may provide some new insights. At this stage, the researcher can make notes about his or her observations and reflections about the interview experience or any other thoughts and comments of potential significance. They may focus on content (what is actually being discussed), language use (features such as metaphors, symbols, repetitions, pauses), context, and initial interpretative comments. Some comments associated with personal reflexivity may also be generated (e.g., how might personal characteristics of the interviewer, such as gender, age, social status, etc. affect the rapport with the participant). It is useful to highlight distinctive phrases and emotional responses. An example of making notes has been demonstrated in Frame 2.

Original transcript	Exploratory comments
Interviewer: *Can you tell me about the situation you were ill last time?* Oh, it was long ago. By the grace of His Holiness the Dalai Lama I haven't had any problems recently. When I arrived here ten years ago… well… even I had a small, like… spirit harm. My [points out to his genitals], you know, my organ got swollen and it was itching. I did not pay attention to it at first, but after a few days it got worse. I had… sort of pain when I was trying to pee, and I was really worried.	*Attributes good fortune to the Dalai Lama. A cliché or reflects his beliefs?* *Attributes illness to spirits; does not know the word "penis" or ashamed to use it?* *Grew worried about his symptoms as they got worse* *Finds different explanations for his problem* *Sees symptoms as punishment by nagas*
Interviewer: *Why do you think that symptom appeared?* Well, you know, many reasons possible. What I thought at that time and what I think now – two different reasons. I mean, you know, we used to piss everywhere, you see. In a spring, on a tree… we used to pee near that and sometimes my organ [penis] swells. And when I go to lama, he say: "This is harm of *nagas* because you did something wrong." So, they would tell me to do this prayer and I do.	*Holds folk beliefs about the serpent deities (nagas), ways of offending them (peeing, cutting a tree), and being cursed. Associating skin problems with nagas' activity*
Interviewer: *Can you tell me how you interpreted your health problem?* Well, at that time, I thought that it was the curse of *nagas*. These serpent deities, are very powerful beings, you know, so you have to… you know, be careful not to offend them. Sometimes, they… you can see them in a form of a frog or snake. They live in forests, in streams or in a tree. So, you know… when you pee into the stream or on that tree… or cut this tree, you can make them angry and they curse you. Then, you know… skin problems.	*Smiled and seemed embarrassed to talk about sleeping with a woman. What is embarrassing for him – talking about sexual activity, prostitutes?*
Interviewer: *What else might have caused your problem? You mentioned another reason.* Well… it is like…. you know, I may have slept with another woman, who may have some problems. Like a prostitute for instance. I think, if that is the cause, then I should go to a doctor. It depends. Maybe *nagas* or maybe… you know… bacteria. Sometimes we have these talks, you know… a nurse or a doctor comes… and they talk about bacteria. "Wash your hands" – you know, after using toilet or "Use condoms."	*Referring to the germs theory to explain his symptoms. How does he go about conflicting explanations?*

Frame 2: An extract from an interview with Lobsang (a Tibetan from Dharamsala) about making meaning of his symptoms, with researcher's notes.

Transforming notes into Emergent Themes

At this stage, the researcher should work more with his or her notes, rather than with the transcript. When detailed and comprehensive have been produced in the earlier stage, they should reflect the source material. The aim is to transform notes into emerging themes. The researcher tries to formulate a concise phrase at a slightly higher level of abstraction which may refer to a more psychological conceptualization. Nevertheless, this is still grounded in the particular detail of the participant's account. At this stage, we are inevitably influenced by having already annotated the transcript as a whole, which is a good example of the hermeneutic circle discussed earlier (the part is interpreted in relation to the whole and the whole is interpreted in relation to the part). Frame 3 shows examples of the emergent themes for the same interview extract with Lobsang.

Original transcript	Emerging themes
Interviewer: *Can you tell me about the situation you were ill last time?* Oh, it was long ago. By the grace of His Holiness the Dalai Lama I haven't had any problems recently. When I arrived here ten years ago… well… even I had a small, like… spirit harm. My [points out to his genitals], you know, my organ got swollen and it was itching. I did not pay attention to it at first, but after a few days it got worse. I had… sort of pain when I was trying to pee, and I was really worried.	*Attributing good fortune to lama's blessing* *Attributing illness to supernatural forces*
Interviewer: *Why do you think that symptom appeared?* Well, you know, many reasons possible. What I thought at that time and what I think now – two different reasons. I mean, you know, we used to piss everywhere, you see. In a spring, on a tree… we used to pee near that and sometimes my organ [penis] swells. And when I go to lama, he say: "This is harm of *nagas* because you did something wrong." So, they would tell me to do this prayer and I do.	*Holding different explanatory models* *Referring to folk beliefs associated with nagas to rationalize illness*
Interviewer: *Can you tell me how you interpreted your health problem?* Well, at that time, I thought that it was the curse of *nagas*. These serpent deities, are very powerful beings, you know, so you have to… you know, be careful not to offend them. Sometimes, they… you can see them in a form of a frog or snake. They live in forests, in streams or in a tree. So, you know… when you pee into the stream or on that tree… or cut this tree, you can make them angry and they curse you. Then, you know… skin problems.	*Folk beliefs about nagas, ways of offending them, and being cursed.* *Referring to folk beliefs to rationalize skin problems*
Interviewer: What else might have caused your problem? You mentioned another reason. Well… it is like…. you know, I may have slept with another woman, who may have some problems. Like a prostitute for instance. I think, if that is the cause, then I should go to a doctor. It depends. Maybe *nagas* or maybe… you know… bacteria. Sometimes we have these talks, you know… a nurse or a doctor comes… and they talk about bacteria. "Wash your hands" – you know, after using toilet or "Use condoms."	*Using western conceptualizations to explain illness*

Frame 3: Examples of developing Emergent Themes.

Seeking relationships and clustering themes

The next stage involves looking for connections between emerging themes, grouping them together according to conceptual similarities and providing each cluster with a descriptive label. In practise, it means compiling themes for the whole transcript before looking for connections and clusters. Some of the themes may be dropped at this stage, if they do not fit well with the emerging structure or because they have a weak evidential base.. A final list may comprise of numerous superordinate themes and subthemes (see: Frame 4). Researchers who use the traditional method of pen and paper, and write comments and themes in the margin, will probably like to end up with a list of major themes and subthemes, and relevant short extracts from the transcript, followed by the line number, so that it is easy to return to the transcript and check the extract in context. On the other hand, researchers who are using modern software for qualitative data administration, will feel convenient with a mere list of themes and subthemes, as they can produce short descriptions of each theme and use links to appropriate passages in the transcript. Using QDA software with IPA is another subject, however, which needs further elaboration in a separate paper.

Conditions associated with good health and luck
Accumulation of positive karma in the past
Involvement in actions to accumulate merits
Attributing good fortune to lama's blessing
Meaning attributed to spiritual involvement

Rationalizing symptoms of illness
The concept of negative karma
Referring to indigenous beliefs to conceptualize illness
- Imbalance of humours
- Attributing illness to supernatural forces
Using western conceptualizations to explain illness
- Attributing symptoms to viruses or bacteria
- Illness attributed to stress
Illness attributed to poor diet
Illness attributed to exhaustion

Holding conflicting explanatory models

Frame 4: An example of clustered themes

Writing up an IPA study

The painstaking analysis described above leads to writing a narrative account of the study. This usually involves taking the themes identified in the final table and writing them up one by one. Each of them needs to be described and exemplified with extracts from interview(s) , followed by analytic comments from the authors (see an example in Frame 5). The table of themes opens up into a persuasive account that explains to the reader the important experiential things that have been found during the process of analysis. Using interviewees' own words to illustrate themes has two functions: 1. It enables the reader to assess the pertinence of the interpretations, and 2. It retains the voice of the participants' personal experience and gives a chance to present the emic perspective. The final paper will thus include both the participant's account of his or her experience in his or her own words, and interpretative commentary of the researcher. The narrative account may engage several levels of interpretation, from low-level interpretation of data to a highly detailed, interpretative and theoretical level, which may generate new insights.

In a typical IPA project, the narrative account is followed by a discussion section which relates the identified themes to existing literature. Reflection on the research can be included here, as well as comments on implications of the study, its limitations, and ideas for future development.

Trying to rationalize the onset of his illness, Lobsang initially referred to the traditional indigenous beliefs of the culture he represented:

> I thought that it was the curse of *nagas*. These serpent deities, are very powerful beings, you know, so you have to… you know, be careful not to offend them. Sometimes, they… you can see them in a form of a frog or snake. They live in forests, in streams or in a tree. So, you know… when you pee into the stream or on that tree… or cut this tree, you can make them angry and they curse you.

Stories about serpent deities have been part of everyday life and social discourse in the Tibetan diaspora. They were imbedded in their cosmological system and reflected the belief in the invisible sphere of existence, inhabited by gods, demi-gods, spirits or hungry ghosts. This defined Lobsang's spirituality and his sense of identity. This also represents shared values Lobsang identified with, such as respect towards nature and all living creation. Yet, in a another part of his discourse, Lobsang refers to fundamental principles of tantric Buddhism according to which all phenomena are perceived as "mere reflections of the mind." As such, serpent deities, powerful, dangerous, and potentially oppressive for those who cross the taboo, can represent inner objects which are projected and used to control the behaviour of body, speech, and mind. Peeing into the stream or cutting a tree which belongs to the *nagas* carries significant symbolic force…

Frame 5: A brief illustration of writing up an IPA study

Conclusion

Doing an IPA study is a demanding enterprise, despite a possible illusion that using a small sample makes it easy. Obviously, the researcher needs to combine a wide repertoire of skills. To gather valuable data, some degree of interviewing experience is indispensable. Careful, systematic, and rigorous analysis, on the other hand, requires patience and openness to see the world through someone else's eyes and the ability to control a temptation to *a priori* impose conceptual categories. The inductive character of most qualitative methodologies requires that theories are derived from data, and not the other way round.

Training in qualitative research in psychology is still relatively new and underdeveloped. Students are thus likely to approach qualitative research with a mindset developed from much fuller training in quantitative methodology. Many feel challenged by the lack of appropriate skills required here. As qualitative psychology matures, we expect the general level of student work to become stronger, deeper, and richer (Smith, 2011).

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Interpretative phenomenological analysis

Interpretative phenomenological analysis (**IPA**) is an approach to psychological qualitative research with an idiographic focus, which means that it aims to offer insights into how a given person, in a given context, makes sense of a given phenomenon. Usually these phenomena relate to experiences of some personal significance, such as a major life event, or the development of an important relationship. It has its theoretical origins in phenomenology and hermeneutics, and key ideas from Edmund Husserl, Martin Heidegger, and Maurice Merleau-Ponty are often cited.[1] IPA is one of several approaches to qualitative, phenomenological psychology. It is distinct from other approaches, in part, because of its *combination* of psychological, interpretative, and idiographic components.[2]

Contents

Taking part

Sometimes IPA studies involve a close examination of the experiences and meaning-making activities of only one participant. Most frequently they draw on the accounts of a small number of people (6 has been suggested as a good number, although anywhere between 3 and 15 participants for a group study can be acceptable[3]). In either case, participants are invited to take part precisely because they can offer the researcher some meaningful insight into the topic of the study; this is called purposive sampling [i.e. it is not randomised]. Usually, participants in an IPA study are expected to have certain experiences in common with one another: the small-scale nature of a basic IPA study shows how something is understood in a given context, and from a shared perspective, a method sometimes called homogeneous sampling. More advanced IPA study designs may draw together samples which offer multiple perspectives on a shared experience (husbands and wives, for example, or psychiatrists and patients); or they may collect accounts over a period of time, to develop a longitudinal analysis.

Data collection

In IPA, researchers gather qualitative data from research participants using techniques such as interview, diaries, or focus group. Typically, these are approached from a position of flexible and open-ended inquiry, and the interviewer adopts a stance which is curious and facilitative (rather than, say, challenging and

interrogative). IPA usually requires personally-salient accounts of some richness and depth, and it requires that these accounts be captured in a way which permits the researcher to work with a detailed verbatim transcript.

Data analysis

Data collection does not set out to test hypotheses, and this stance is maintained in data analysis. The analyst reflects upon their own preconceptions about the data, and attempts to suspend these in order to focus on grasping the experiential world of the research participant. Transcripts are coded in considerable detail, with the focus shifting back and forth from the key claims of the participant, to the researcher's interpretation of the meaning of those claims. IPA's hermeneutic stance is one of inquiry and meaning-making,[4] and so the analyst attempts to make sense of the participant's attempts to make sense of their own experiences, thus creating a double hermeneutic. One might use IPA if one had a research question which aimed to understand what a given experience was like (phenomenology) and how someone made sense of it (interpretation).

Analysis in IPA is said to be 'bottom-up.' This means that the researcher generates codes *from* the data, rather than using a pre-existing theory to identify codes that might be applied *to* the data. IPA studies do not test theories, then, but they are often relevant to the development of existing theories. One might use the findings of a study on the meaning of sexual intimacy to gay men in close relationships, for example, to re-examine the adequacy of theories which attempt to predict and explain safe sex practices.[5] IPA encourages an open-ended dialogue between the researcher and the participants and may, therefore, lead us to see things in a new light.

After transcribing the data, the researcher works closely and intensively with the text, annotating it closely ('coding') for insights into the participants' experience and perspective on their world. As the analysis develops, the researcher catalogues the emerging codes, and subsequently begins to look for patterns in the codes. These patterns are called 'themes'. Themes are recurring patterns of meaning (ideas, thoughts, feelings) throughout the text. Themes are likely to identify both something that *matters* to the participants (i.e. an object of concern, topic of some import) and also convey something of the *meaning* of that thing, for the participants. E.g. in a study of the experiences of young people learning to drive, we might find themes like 'Driving as a rite of passage' (where one key psychosocial understanding of the meaning of learning to drive, is that it marks a cultural threshold between adolescence and adulthood).

Some themes will eventually be grouped under much broader themes called 'superordinate themes'. For example, 'Feeling anxious and overwhelmed during the first driving lessons' might be a superordinate category which captures a variety of patterns in participants' embodied, emotional and cognitive experiences of the early phases of learning to drive, where we might expect to find sub-themes relating to, say, 'Feeling nervous,' 'Worrying about losing control,' and 'Struggling to manage the complexities of the task.' The final set of themes are typically summarised and placed into a table or similar structure where evidence from the text is given to back up the themes produced by a quote from the text.

The analysis

In IPA, a good analysis is one which balances phenomenological description with insightful interpretation, and which anchors these interpretations in the participants' accounts. It is also likely to maintain an idiographic focus (so that particular variations are not lost), and to keep a close focus on meaning (rather than say, causal relations). A degree of transparency (contextual detail about the sample, a clear account of process, adequate commentary on the data, key points illustrated by verbatim quotes) is also crucial to estimating the plausibility and transferability of an IPA study. Engagement with credibility issues (such as cross-validation, cooperative inquiry, independent audit, or triangulation) is also likely to increase the reader's confidence.

Applications of IPA

Due to an increased interest in the constructed nature of certain aspects of illness (how we perceive bodily and mental symptoms), IPA has been particularly recommended for its uses in the field of health psychology.[6] However, while this subject-centered approach to experiencing illness is congruent with an increase in patient-centered research, it has also been suggested that IPA may have been historically most employed in health psychology due to the fact that many of its initial supporters operated careers in this field.[7]

With a general increase in the number of IPA studies published over the last decade [8] has come the employment of this method in a variety of fields including business (organisational psychology), sexuality, and key life transitions such as transitioning into motherhood [9]

See also

- Action research
- Emic and etic
- Ethnography
- Hermeneutic phenomenology
- Jonathan Smith (psychologist)
- Participatory action research
- Phenomenology
- Triangulation (social science)

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External links

- IPA website at Birkbeck, University of London (http://www.ipa.bbk.ac.uk)