

# The Work of Hermeneutic Phenomenology

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## Abstract

This paper is an illustration of the application of a hermeneutic phenomenological study. The theory of meaning and interpretation, drawing on philosophical hermeneutics and the work of Gadamer and Heidegger, and its alignment with phenomenological thought is presented. The paper explains and aims to make visible how key concerns in relation to the fusion of horizons, hermeneutic understanding, hermeneutic circle and hermeneutic phenomenological attitude were implemented. The purpose is to provide practical guidance and illustrate a fully worked up example of hermeneutic phenomenological work as research praxis. This present paper makes a case that hermeneutic phenomenological work is detailed, lengthy, rigorous and systematic in its own philosophical and theoretical frame. It articulates the philosophical and methodological alignment of hermeneutics in a specific hermeneutic phenomenological study and makes visible the work of hermeneutic phenomenology. It concludes by sharing key reflections and insights on the hermeneutic phenomenological process.

## Keywords

hermeneutics, hermeneutic phenomenology, phenomenology, interpretive phenomenology, existential phenomenology, qualitative research methods

## Introduction

### Phenomenology

Husserl, the founder of phenomenology, believed that the primacy of the natural sciences had become detached from the fabric and reality of human experience, and that every theoretical and scientific practice

grows out of and remains supported by the forgotten ground of our directly felt and lived experience. (Abram, 1997, p. 43)

Husserl's phenomenological philosophy was thereby instrumental in re-establishing the fundamental contribution of human experience. In Husserl's view, a more secure founding of scientific knowledge would start with describing the objects of study as phenomena to consciousness. According to Husserl (2012), meanings which can be intuited (through consciousness), can be described precisely as intuited with the help of a method, which he termed the phenomenological attitude and reduction. This systematic study of phenomenological appearance and the modes of appearing reflected a radical readjustment of viewpoint (Husserl, 1970, Moran, 2000).

However, as pointed out by Giorgi (2009 p. 87) "for Husserl, phenomenology was never less than a philosophy, and the

method he articulated was intended to be a philosophical one". While Husserl's phenomenology was a philosophical, epistemological project that offered a rigorous (descriptive) science to study lived experience (Moran, 2000), Heidegger, as a philosopher in his own right considered phenomenology a method of ontology (Spiegelberg, 1994). In *Being in Time* (2003), Heidegger rendered explicit his ideas about phenomenology as a method of interpretation through which to disclose ontological being (Dasein). For Heidegger (2003), uncovering the basic structure of human understanding and existence, was always interpretive in character.

Despite these distinctions, there is some coherence in philosophical and theoretical notions around the lifeworld, intentionality, intersubjectivity and phenomenological reflection in both Husserl's and Heidegger's writings. This paper aims to

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navigate a path between these two philosophers while also drawing on Gadamer's philosophical hermeneutics to support a hermeneutic phenomenological methodology.

Despite phenomenology's relatively recent inception, translating it from the philosophical to the empirical, human science context (Giorgi, 2000) has expanded and progressed at pace. Several types of phenomenological inquiry have emerged, which share a common interest in empirically understanding the nature of human experience but draw on foundational philosophies in different ways. For example, Husserlian, Heideggerian, the Dutch or Utrecht School (van Manen) and French existential phase concerned with phenomenology, perception and embodiment (Merleau-Ponty, Sartre).

Debates within the research field abound, some of which include: how the phenomenological attitude, reduction and epoché<sup>1</sup> are understood, applied, and whether they are fundamental to phenomenological research? (H. Dahlberg & Dahlberg, 2020; Morley, 2010, 2019; Zahavi, 2019a, 2019b) What is/isn't phenomenology? (Finlay, 2009; van Manen, 2017) What makes phenomenology, phenomenology? (Giorgi, 1997; van Manen, 2017) What level of philosophical understanding should be expected from qualitative phenomenological researchers? (Applebaum, 2011a; Giorgi, 2017) Whether phenomenology is hermeneutic (interpretive) and/or a Husserlian (descriptive) endeavor? Whether these positions are divergent, exist on a continuum or offer a third way by focusing on their shared philosophical and epistemological grounding? (Applebaum, 2012; H. Dahlberg & Dahlberg, 2019a; K. Dahlberg & Dahlberg, 2004; Finlay, 2009). As a relatively recent movement, responding to these debates and concerns is important to contribute to the field of phenomenological research as it continues to develop in a diverse range of disciplines (Giorgi, 2017).

One such debate revolves around the hermeneutic arguments about meaning and interpretation, and objections to descriptive science. The adoption of an "all is interpretation" argument as a means to reject Husserl's descriptive science, alongside insufficiently theorized or practically described philosophical, methodological and methodical concerns, have done little to enhance the scientific standing of interpretive, hermeneutically-aligned phenomenological research (Applebaum, 2012). Applebaum (2011b) goes further, proposing that interpretive phenomenology permits the researcher to do what they will with the data, be (un)methodical and eradicates the need for scientific rigor completely (Applebaum, 2012). It is not our remit to address all the above arguments in detail. However, reflective of Giorgi's (2000) proposition for "foundational labor" and Applebaum's (2012) call for rigorous science, the present paper aims to contribute to the debates by making a case for hermeneutic phenomenological work. The paper therefore aims to provide an example of how hermeneutic phenomenology *can* be philosophically and theoretically grounded *and* rigorously and systematically applied.

The paper proceeds by articulating the philosophical and theoretical orientations of a study that explored how being on an acute stroke unit was experientially lived through. It then

takes an empirical step, explaining how these foundations were applied methodically while considering consistency, coherence and flexibility (Holloway & Todres, 2003). Using examples, the paper will illuminate the somewhat intangible, invisible process and clarify the ambiguity and overlooked work that hermeneutic phenomenological practice involves. Although it describes one possible path, it does not exclude or diminish others.

### Hermeneutic Phenomenology

A phenomenologically and hermeneutically grounded research endeavour needs to navigate the debates, theories, philosophical and epistemological positions, as well as the momentous issue of meaning (H. Dahlberg & Dahlberg, 2019b). This study was aligned with the hermeneutic, existential, and ontological emphases found in Gadamer's and Heidegger's philosophy, and concerned with grasping the lived experiential meanings and understanding the lifeworld and being, from an ontological perspective. It adopted a standpoint indicative of the mutual entanglement between being, Dasein and "*being-in-the-world*" as a primordial ontology (Malpas, 2008). Human lives, experiences and the world as lived (human lifeworld and its phenomena) are understood within their particular temporal, situated frame through an interpretivist epistemology, that draws upon intentionality, intersubjectivity and hermeneutics as a theory of interpretation.

### Articulating the Theory of Meaning and Interpretation

The theory of meaning and interpretation included key concerns relating to the hermeneutic circle, fusion of horizons and hermeneutic phenomenological attitude. This theory acknowledges that hermeneutic work can uncover and unfold meaning. However, this uncovering is not assumed, and all remains intentionally and hermeneutically connected:

Nothing that is said has its truth simply in itself, but refers instead backward and forward to what is unsaid. (Gadamer, 2008, p. 67)

Heidegger's position was that the manifest, that which shows itself *phenomenologically*, may not show itself at all or perhaps as "appearance":

Manifestly, it is something that proximally and for the most part does not show itself at all: it is something that lies hidden, in contrast to that which proximally and for the most part does show itself; but at the same time it is something that belongs to what thus shows itself, and it belongs to it so essentially as to constitute its meaning and its ground. (Heidegger, 2003, p. 59)

A shared concern toward that which is visible, in-visible, that which appears, and the intentional, reflective nature of both Heidegger's and Husserl's phenomenological projects, and hermeneutic thinking of Gadamer (2008) and

Schleiermacher (1998) were key philosophical orientations. Although Being (Dasein) permeates the everyday through and through, it is also concealed and resistant to being made present (Nenon, 1997). Engagement with part and whole in the hermeneutic circle (Gadamer, 1988), focusing in-between what shows itself as meaningful, how it speaks through experience and language as we attend to the phenomenon in its appearing (Finlay, 2009), are specific intentional reflective acts that both perceptually make meaning present (Husserl, 2012) and disclose Dasein's hiddenness (Nenon, 1997).

This theory of interpretation considers language and dialogue as ontological<sup>2</sup>, as well as the medium through which access to the lifeworld is possible, perspectively and hermeneutically<sup>3</sup>:

when one enters into a dialogue with another person and then is carried on further by the dialogue, it is no longer the will of the individual person holding itself back or exposing itself, that is determinative. Rather, the law of the subject matter is at issue in the dialogue and elicits statement and counterstatement and in the end plays them into each other. (Gadamer, 2008, p. 66)

The underpinning philosophical principles articulated above support the ontological project, concerned with getting to the “things themselves” and being through phenomenology, and hermeneutics and the phenomenological attitude and reflection as the mediums through which our understanding of lived experience and being-in-the-world can be unfolded, constituted and brought forth.

### The Hermeneutic Circle

The hermeneutic circle reflects the ongoing, attentive, circular movement between part and whole (Gadamer, 1988; Schleiermacher, 1998) as understanding becomes more complete:

The task is to expand in concentric circles the unity of the understood meaning. Harmonizing all the particulars with the whole is at each stage the criterion of correct understanding. (Gadamer, 1988, p. 68).

Gadamer (2004) advanced that when encountering each part, the reader is at once and then continuously projecting toward the whole. This projection is toward the horizon of another, but from the reader's own position (horizon) of fore-understanding and prejudices (Gadamer, 2004):

This formulation certainly does not mean that we are enclosed within a wall of prejudices and only let through narrow portals those things that can produce a pass saying “Nothing new will be said here.” Instead we welcome just that guest who promises something new to our curiosity. (Gadamer, 2008, p. 9)

The hermeneutic “circle of understanding” for Heidegger involved the anticipatory movement of fore-understanding/fore-structure as the expression of meaningful existential Dasein (Being) (Heidegger, 2003). The theory of meaning and

interpretation thereby considered the movement and interplay between interpreter, their fore-understanding and enabling function of prejudices as “brought into play” (Vilhauer, 2009). Play that carries forwards the hermeneutic work. This includes the prejudice of completeness:

that a text should completely express its meaning—but also that what it says should be the complete truth. (Gadamer, 2004, p. 294)

Oft forgotten but fundamental, it is the text/s failure to deliver that provides the incentive to enter the hermeneutic circle and get to work on uncovering meaning.

### Fusion of Horizons

The hermeneutic circle, dialogue, and process of interpretation leads to a *fusion of horizons* as understanding takes place (Gadamer, 2004). Workings within the play of understanding are considered transformative, temporal and necessitate a commitment to the “play activity.” This has a “life, meaning, essence or spirit of its own that emerges from the players' engagement in their back-and-forth movement” (Vilhauer, 2009, p. 359). The play and act of interpretation provide the means through which the opening, closing, broadening and fusion of horizons can occur (Gadamer, 2008). In this vein, *fusion of horizons* offers a gateway to “extend meaning from what is directly given” (p. 536), to discover something more; a new perspective and shared understanding of the subject matter (Vessey, 2009). Phenomenologically, these “matters” are the lived meaning that dwells in experience and the lifeworld, made manifest through the mode of given-ness (Husserl, 1970).

## Applying Phenomenological and Hermeneutic Principles in a Specific Study

### The Study

The research was approved by University of Brighton Faculty of Health and Social Science Research Ethics and Governance Committee, the National Research Ethics Committee (09/H1107/111) and complied with the World Medical Association Declaration of Helsinki and later amendments. All participants provided written informed consent, confidentiality and anonymity were upheld and data managed securely.

The study in question looked to bring forth how the acute stroke unit was meaningfully lived through from two horizontal perspectives. This paper uses one of these perspectives to illustrate the hermeneutic phenomenological method.

After extensive work with four stroke survivors' experiential accounts, the acute stroke unit emerged as a lived space in two meaningful and interconnected forms: holding space and transitional space. The stroke survivors experience of being on an acute stroke unit meant being held intimately and safely as well as held apart from other meaningful spaces, like the space of home and the hospital/ healthcare space. In doing so, holding space was understood to nurture, sustain and offer protection

and distance so that the stroke survivors could think and consider how they would respond to the stroke without suffering additional hurt, vulnerability and disruption. Holding was fulfilled by nurses and others, including their fellow stroke survivors and meant that stroke survivors could transition. These transitions could be protective or potentially driven, and ranged from passive to temporary, active, recovery-orientated transitions and/or a reassertion of their self and agency while on the acute stroke unit (Suddick et al., 2020a).

### *An Apprenticeship and Training for the Work*

A hermeneutically trained consciousness must be, from the start, sensitive to the text's alterity. But this kind of sensitivity involves neither "neutrality" with respect to content nor the extinction of one's self, but the foregrounding and appropriation of one's own fore-meanings and prejudices. The important thing is to be aware of one's own bias, so that the text can present itself in all its otherness and thus assert its own truth against one's own fore-meanings. (Gadamer, 2004, pp. 271–272)

These summarized findings provide a deceptively tidy picture. In fact, the researcher's (K.S.) initial attempts at analysis were lengthy but unsuccessful. She was complacent, naïve, did not dwell within the accounts, work hermeneutically or garner phenomenological insights. At this point, she went back to work on the philosophical and methodological foundations of the study and re-engaged with two individuals' accounts in depth. This reflected a necessary training in readiness for the work, so that she could attend to the text's alterity, come to meaningfully understand herself, another, and apprehend the phenomenon in-between.

The paper proceeds by explaining the hermeneutic phenomenological attitude, how empirical descriptions/ texts/s were gathered and aims to illustrate how the hermeneutic circle, fusion of horizons, and hermeneutic phenomenological attitude and reflection, allowed the meaningful experience of being on the acute stroke unit to be made manifest. Acknowledging that the text and words remain the same we will show how the dialogue and "movement of play" (Vilhauer, 2009) provided access to unfolding the text/s meaning and truth. A truth that is always intentionally connected to (and accessible through) the manner of appearing and the researchers' horizon/s of understanding, fore-meanings and prejudice. Using key illustrations, the aim is to make visible the rigorous intertwined hermeneutic and phenomenological work involved, as this presencing unfolds.

### *Applying a Hermeneutic Phenomenological Attitude*

Phenomenological researchers have written about the phenomenological attitude and reduction in different ways. Giorgi (2009) in his application of the descriptive method, explains the levels of phenomenological attitude and reduction, i.e. basic level, eidetic and scientific reduction and transcendental reduction, and that some level of adoption of the phenomenological attitude is necessary for research to claim

phenomenological status. In their reflective lifeworld research, Dahlberg and Dahlberg (2019a) engage the phenomenological attitude through bridling. This involves bracketing the natural attitude and adopting an openness and questioning attentiveness to what comes to awareness, how something is, how the phenomenon shows itself and its meaning (K. Dahlberg, 2006). Our claim is that the researcher (K.S.) adopted both phenomenological and hermeneutic attitudes.

The basic level phenomenological attitude applied in this study involved the researcher transitioning from the natural every-day pre-reflective attitude, and directing her systematic and rigorous attention, reflection and questioning toward the way in which meaningful lived experience was manifested through her bodily being-in-the-world—being-with-others' sensing, feeling, awakening *attitude*, so as to explore its possibilities. Hermeneutically and phenomenologically, K.S. reflected on the relational process of understanding phenomena and their meanings within the shared inter-subjective space of the research encounter and beyond (K. Dahlberg, 2006; Finlay, 2002, 2006). This was intertwined with the co-constituting play-process of hermeneutic interpretation, dialogue and fusion of horizons between the researcher, participants and the phenomenon (Finlay, 2014). Examples of reflection, dialogue, play, and the unfolding of meaning through the text's alterity and the researcher's horizon of understanding (in the hermeneutic phenomenological attitude) are interspersed throughout the following sections.

### *Gathering Text/s and Description Through Phenomenological Interviews and Dialogue*

This study used phenomenological interviews to gather thick descriptions of living in and through the world experientially in the everyday "pre-reflective, pre-conscious mode of being in the world" (Wrathall, 2006, p. 41). These interviews were a way to produce a text, begin to enter into *dialogue* and collect concrete descriptions that were as complete as possible (Giorgi, 1997). Participants were free to talk and expand without interrupting. Depending upon the conversation, K.S. would summarize, rephrase, probe, ask follow-up questions and whether there was anything further (H. Dahlberg & Dahlberg, 2020).

After finishing the interview with Sally (pseudonym) I was overcome with anxiety. Although it was long, little focused on her time on the stroke unit. I had tried to return to the topic numerous times, but also found myself asking Sally what appeared to be completely unrelated questions about her life. I realized I had felt overwhelmed by her account of loss and was looking to offer respite (both to her and myself). Was I wanting to distance from this loss, or find connection because of it? My response felt incompatible with "researcher" but more indicative of human need. I sense I was subconsciously prioritizing and looking to "be" with her, her story and life, at the expense of the phenomenological description. It offers preliminary insight into the tension and movement between "being" and "doing" in my phenomenological research practice.

## Going to Work on Understanding each Persons' Meaningful Experience

The hermeneutic phenomenological attitude meant using reflection to make visible fore-meaning, horizons of understanding, the texts alterity, and intentional character of experience as the researcher came to understand what being on an acute stroke unit was like:

continually reflecting upon interpretations of both our own experience and the phenomenon being studied, in order to move beyond the partiality of previous understandings and investments in particular outcomes. (Finlay, 2014, p. 130)

This commenced by listening to recordings, turning the researchers' attention to the text/s, each person and herself, as she began to work with part and whole. K.S. would listen to the recording when she struggled to engage with the text. When she found herself staring blankly, she used diagrams, drawing and writing.

I drew a picture (of a nurse surrounded by many patients on one side, a chiasm in between, and home, a bed and a burglar on the other side). It feels forced, and I return to the transcript. The nursing part of the picture seems a small element of what Sarah is expressing but this is quick to speak to me because of my pre-understandings and assumptions regarding the stress and demands they face. I think about what I sense and feel when I read and listen to Sarah's account. Through this work, her mother's love and disappointment emerges. I look at the picture again and feel the empathy and understanding Sarah expresses for the nurses on the stroke unit, but also because she is the mother of a nurse.

From the same picture I gain a sense of separation between home and hospital, movement forwards and back, something about the stroke, being at home, and the stroke entering the marital bed at night (like a burglar), perhaps the security of home? I question and think further, working within the hermeneutic circle. What emerges is the hospital—but as a separate place where she adopts a different persona. I go back to the transcript to see what unfolds. The burglar feels like an echo from another account which has crept into my thoughts—unconsciously looking for connections but relevant to be discarded. There are remnants that remain: about danger, security and safety and I take these “shadow unformed thoughts” with me for my next foray into the hermeneutic circle. I allow and permit time away. It isn't as if I leave thinking or the dialogue behind, it comes with me and I embrace the companionship and what plays out inside my head.

K.S. would return to the text and ask questions of it and herself:

What is she/he saying here? Is that what she's/he's really saying? Or is that my thinking? What is not being said in this description?

When I shut my eyes what am I seeing? When I read and hear this, what am I feeling?

What is going on here? What was this like? What does this mean? How is this meaning being made manifest?

To further illustrate how this worked, Tables 1 and 2 include the same extract from an interview with Andrew (Column 1). The second column in Table 1 contains the raw, unfiltered workings in an early stage of analysis. Congruent with the methodology, the tables articulate how attention was paid to what was expressed, given through non-appearance (Giorgi, 2009), definite, indefinite (H. Dahlberg & Dahlberg, 2003) sensed or felt. Tables 1 and 2 make visible the hermeneutic dialogue and work with part and whole on a number of levels, i.e. the word within the sentence, the extract in the complete text, the text within the complete oeuvre and the single episode within the complete life of the person (Smith, 2007). The final column chronicles the play of understanding, shifting appearances as meaning unfolded and the fusion of horizon occurred. Separately, each table is indicative of a stage in the analysis. Together they document the in-process transition, as the researcher's understanding changed and moved from one position/ perspective to another.

This was not the end of the work. The emergent understanding remained tentative and further trying out, questioning, returning and working within the hermeneutic circle and text/s, and the intentional threads that connected them were required. Time, attention, focus and engagement, not moving too quickly, slovenly (H. Dahlberg & Dahlberg, 2003) or assuming or looking for the familiar were essential. After numerous iterations (each saved separately), an analysis document for each person was composed. The below excerpt from Andrew's document, illustrates the continued hermeneutic phenomenological work and fusion of horizon that occurred:

Other parts of Andrew's narrative after stroke were understood to assist in the unfolding of meaning. He described how he had a reoccurring health condition which meant he was returned, “sent back” to the acute stroke unit because “they [in the community rehabilitation unit] couldn't handle it.” He explained that when he was discharged from the stroke unit, he was told he was going home and given just a day's notice. Before arriving on the acute stroke unit, and during the night he spent in the Accident and Emergency department after having the stroke, “they” gave him an injection that was “meant to save you” but he had a massive nosebleed and it was stopped. He explained “so that was it—I mean—I went up on the ward.” These appearances felt like endings, and the last one, an abrupt and significant end to the saving. I paid attention to how these experiences and endings seemed to contribute to his temporal vulnerability and how the last may have held particular relevance as it coincided with the start of his time on the stroke unit. Although not articulated explicitly, I felt as if I was transported to the emotional and psychological “place” he may have found himself after being unsuccessfully saved. One which may have meaningfully signified his vulnerability and appreciation of the nurses on the unit. Although he was matter of fact in the research interview, I reflected on how this, his use of contrast, and a more distant “you,” may have functioned to distance himself and perhaps me from these felt implications.

Andrew's account of having the stroke appeared to contrast the nebulous quality of his experience of being on the stroke unit. He explained that due to the repetitive actions of nurses, and because he slept, time went quickly. His previously heightened awareness

**Table 1.** Articulating the Early Analysis using a Sample Extract.

Transcript extract (p10–12)	Working with what is given in the text and through dialogue with the text/ description	Articulating the play of understanding and unfolding of meaning within the researcher's horizon of understanding
A = Andrew (pseudonym) W = Andrew's wife	Including: meaningful phrases/statements, expressions (i.e. linguistically, grammatically), ambiguities and questions, observations of what is given/ present/ not given	
OK. And when you said they had lots of time for you on the ward, why does that feel important do you think?"	Because of the way you are. They have lots of time for you—because of what the stroke has done to you?	<i>The analysis begins to explore the possible effects of stroke—"the way you are."</i>
A "Well because of the way you are. I mean there's some of them who were bad in there, sort of looking up . . . couldn't feed, didn't know where they were, no."	Second person you? Some of them (is he talking about other stroke survivors?) were bad in there, so he wasn't bad?	<i>I begin to explore the idea of the second person you, in hospital, and perhaps a second person "you" after stroke.</i>
"And what were you able to do when you were there? Were you eating and drinking and . . . yep? And talking and . . . ?"	Suggesting he could feed himself and did know where he was—or is this functioning as a distraction, heading me off in a different direction with—"I mean"—(perhaps like elsewhere when talking about the "injection meant to save you")?	<i>My initial thinking about how and what Andrew does and doesn't articulate through his talk is apparent, and resonates with other parts of his transcript, but this does not move beyond me noting the questions it raises.</i>
A "I had a wheelchair didn't I? I used to get out in the wheelchair, yeah." "And were there any other bits that were good about it? When you said it sort of felt different from other wards, was there anything else that felt different about being on that ward particularly?"	"In there". He had a wheelchair—"I" is evident here—this seems to be how he indicates the stroke has affected him individually, he has a wheelchair now?	
A "Well it didn't . . . you didn't er . . . associate it within a hospital. That's what it is."	Re-introduction of I. "You" returns—more general "you"—didn't associate it with a hospital.	<i>Further support seems to be present regarding a "you" more than "I" in hospital.</i>
"And how did they manage that do you think? I know I'm asking you . . . I'm making you think about all these things, but it's really, really useful."	I don't know really-? hasn't thought about this? Why doesn't he know? They—they are trained. Other wards and the "they" there, are different.	<i>I am beginning to get a sense of Andrew's experience of being on the acute stroke unit—but through contrast—one that it is definitively different from other wards and the hospital. I start to consider the importance of the "they" in making his experience different. At this point my analysis is focusing on the characteristics of this 'they'— what they provide—time, a surrounding presence, rather than the abandonment he would experience elsewhere.</i>
A "Um . . . I don't know really. I suppose when they're trained, you know, you go in another ward, you get on with it, yeah . . . But not there."	You go in another ward, you get on with it, not there (quite definitive here).	
Right and so what was different about that ward? So in another ward you'd be getting on with it, what would . . . ?"	They don't leave you to get on with it yourself? By yourself? Is that what he is saying here?	
A "Yeah, they'd just say oh get on with it, but they're there ALL the time, round you, you know . . ."	They on other wards, just say get on with it. They on the acute stroke unit—are there all the time, round you.	
W "You used to go in the day room didn't you A?"	Importance of "them" being present all the time.	
A "Yeah, watch a bit of telly, yeah."	Importance of them being "round you." Sense of being surrounded by them?	
"And so what were the staff like on the ward? You said they were . . . they sort of felt like they were all around you?"	Supported by them? They were terrific. Characteristics of the acute stroke unit "they." Clear and definitive.	<i>My horizon of understanding is forming through the contrasting examples Andrew gives, that takes the initial idea of him as a second person "you" in hospital and the stroke unit, to a more extreme position, that of a lump of meat (in other wards). My tentative interpretation emerges around the implications of what he seems to be articulating (albeit less overtly)—a sense of being abandoned, disregarded and diminished. How this relates to the "they" of the acute stroke unit who protect from this, is beginning to form in my horizon of understanding.</i>
A "Oh they were terrific. You know . . ."	It's hard to explain—what was meaningful was hard to explain—why? You go in another ward and you're just . . . like a lump of meat, that's it—disregarded, diminished, finished?	
"And how were they terrific? You're not getting away with anything! Laughter . . ."		
A "Well it's hard to explain."		
"I know, I'm sorry."		
A "You know, you sort of go in another ward and you're just . . . that's it . . . like a lump of meat. But there you're not. They look after everybody, and treat . . . everybody's the same."	"You" still—become a you in hospital? The acute stroke unit is not another ward—it's different. Other wards—you are diminished—just . . . and dehumanized . . . lump of meat—not even living— But there you're not. They look after everybody and treat everybody the same.	

(continued)

Table 1. (continued)

Transcript extract (p10–12)	Working with what is given in the text and through dialogue with the text/ description	Articulating the <i>play of understanding</i> and unfolding of meaning within the researcher's horizon of understanding
<p>"Hmm. And do you think that's really important after you've had a stroke?"</p> <p>A "Yeah, yeah."</p> <p>"Why did that feel important? If you'd have ended up on another ward . . ."</p> <p>A "Well you'd just give up wouldn't you? Yeah."</p>	<p>This is important for keeping going and not giving up after stroke.</p> <p>The they on the stroke unit are important for keeping going/ not giving up.</p> <p>A sense you would give up?</p>	<p><i>This part of this extract provides an insight into what I am thinking about Andrew's experience of being looked after and its importance for not giving up. At this point, this feels fairly superficial and tentative (albeit potentially no less meaningful).</i></p>
<p>"Right. Yeah. And so the ward being like it was helped, you know, keep you . . ."</p> <p>A "Yeah and they're specially trained staff, not like er . . . the ordinary nurses."</p> <p>"Yep, and did that impact on how you felt or how they were? What do you think?"</p> <p>A "Yeah, it is. I suppose like um . . . Macmillan Nurses, you know they're trained to do that, yeah."</p>	<p>"They" on the acute stroke unit are specially trained staff—not like ordinary nurses.</p> <p>Does "they" therefore refer to the nurses? Are nurses the they of the acute stroke unit?</p> <p>The acute stroke unit nurses are not ordinary nurses.</p> <p>Compares them to Macmillan nurses—"they are trained to do that." Specialist but? exceptionally caring? Or linked to the severity or the far from ordinariness of the condition-? stroke? Like cancer needs nurses that are far from ordinary</p>	<p><i>The "they" of the acute stroke unit is clarified as the nurses. My interpretation surrounding the nurses and their relevance and importance for Andrew for feeling looked after, is continuing to unfold. His contrast (not ordinary nurses) and comparison (to Macmillan nurses) seems to suggest he couldn't praise these nurses any higher.</i></p>
<p>"And did you . . . did you feel, you know . . . I suppose did it make you feel secure and . . .?"</p> <p>A "Yeah, you felt, you know, as though you were looked after, oh yeah."</p> <p>"And, I'm sorry because I'm trying to get as much information out of you as possible . . . laughter . . . when you say you feel like you were looked after, what does that mean to you really?"</p> <p>A "Oh a lot, after you've had a stroke, yeah."</p>	<p>Is there a sense that he feels comfortable and safe because of this? Or is this my perspective?</p> <p>Feeling looked after.</p> <p>"Oh yeah"—reinforces the importance of this.</p> <p>It means a lot, after you've had a stroke.</p> <p>Stroke necessities feeling looked after.</p> <p>You again (second person).</p>	<p><i>I am playing within my horizon of understanding, exploring cancer as a condition, alongside his final phrase—"a lot after you've had a stroke." Andrew doesn't go on to explain why it means a lot, and in this stage of the analysis I am yet to unfold the meaning embedded within this part of his account.</i></p>

was understood to be replaced by a reduced sense of presence, agency and knowing. I began to apprehend how this nebulous space (place and time related) was where he experienced vulnerability. This was in part, hermeneutically accessed and meaningfully signified by the importance of the nurses within his account. "They" appeared to be present and clear in what was an indistinct period after his stroke. "They" made the acute stroke unit what it was and different from the hospital, other wards and other "theys" that sent him, processed, injected, told him and did not save him. "They" were understood as essential for protecting from vulnerability (being dehumanized, alone) and helping him practically and psychologically keep going when faced with the threat and vulnerability because of the stroke.

### Going to Work Across the Collective Whole

Once the individual accounts were analyzed, the researcher began working toward a unified, comprehensive understanding of what was meaningful for the stroke survivors as a whole (Figure 1). To begin K.S. found a room, and in each corner placed all related text/s for each stroke survivor. She moved between them, reading, thinking and remembering, searching

for ways toward the center. Sometimes she lay down and closed her eyes; sometimes she sat, stood, talked to herself, to them. She left the room and returned. Nothing magically "came" but she was eliciting the space, time and commitment needed. As with the individual accounts, playful, attentive questioning, sensing, dwelling and intentional reflection between part and whole through the hermeneutic phenomenological attitude, were necessary (Figure 1). This involved writing, drawing and returning to texts (individual accounts, recordings, transcripts, findings), as well as working within and across multiple hermeneutic circles and the dialogue in-between (Figure 1).

Within this process an additional activity; the creation of visual maps was undertaken (described in detail elsewhere, Suddick et al., 2020b). This offered further opportunity to enter the hermeneutic circle, work with part and whole and embrace a more dynamic, textured, holistic understanding of lived experience. The entire process was not as straightforward as Figure 1 indicates. Playing, writing, creating the maps and working with the analysis across the collective whole and individual analyses, were all intertwined. The researcher would leave the maps and revisit the writing, leave one hermeneutic circle and

**Table 2.** Continuing the Hermeneutic Phenomenological Work, Using the Same Extract as Illustration.

Transcript extract (p10–12)	Working with what is given and appears in and through the ongoing dialogue with the text/description	Articulating the ongoing play of understanding and unfolding of meaning within the researcher's horizon of understanding
<p>A = Andrew (pseudonym) W = Andrew's wife OK. And when you said they had lots of time for you on the ward, why does that feel important do you think?"</p> <p>A "Well because of the way you are. I mean there's some of them who were bad in there, sort of looking up . . . couldn't feed, didn't know where they were, no."</p> <p>"And what were you able to do when you were there? Were you eating and drinking and . . . yep? And talking and . . . ?</p> <p>A "I had a wheelchair didn't I? I used to get out in the wheelchair, yeah."</p> <p>"And were there any other bits that were good about it? When you said it sort of felt different from other wards, was there anything else that felt different about being on that ward particularly?"</p>	<p>The nurses' generosity of time. Being a second person you—a reduced sense of self? A need for the nurses' time, because of what stroke has done to you. He is different from them—others badly affected. Thankfulness for what he could do in comparison?</p>	<p><i>My understanding of this part of the excerpt relates to what is meaningfully signified as Andrew's less visible, articulated self in hospital, in the acute stroke unit, and also perhaps after the stroke.</i></p>
<p>A "Well it didn't . . . you didn't er . . . associate it within a hospital. That's what it is." "And how did they manage that do you think? I know I'm asking you . . . I'm making you think about all these things, but it's really, really useful."</p> <p>A "Um . . . I don't know really. I suppose when they're trained, you know, you go in another ward, you get on with it, yeah . . . But not there."</p> <p>Right and so what was different about that ward? So in another ward you'd be getting on with it, what would . . . ?"</p> <p>A "Yeah, they'd just say oh get on with it, but they're there ALL the time, round you, you know . . ."</p> <p>W "You used to go in the day room didn't you A?"</p> <p>A "Yeah, watch a bit of telly, yeah."</p>	<p>Acute stroke unit that stands apart from the hospital -through difference, and? through the work of the nurses. Difficult to articulate the difference of the acute stroke unit. The acute stroke unit nurses are trained. You fend for yourself on other wards. Not there—constancy of belief in They of acute stroke unit. ? acute stroke unit "they" assist and support you in managing/ dealing with the situation. Importance of the stroke unit and their presence all the time, means you are not alone. A surrounding, constant? enveloping presence.</p>	<p><i>Resonating with other parts of his transcript, I start to consider how Andrew's experience of the acute stroke unit seems to reflect a place that is part of the hospital, but through the dedicated and special work of the nurses, distinctly stands apart. As is apparent below, I am beginning to understand how this standing apart is thought to meaningfully work by way of protection.</i></p>
<p>"And so what were the staff like on the ward? You said they were . . . they sort of felt like they were all around you?"</p> <p>A "Oh they were terrific. You know . . ."</p> <p>"And how were they terrific? You're not getting away with anything! Laughter . . ."</p> <p>A "Well it's hard to explain." "I know, I'm sorry."</p> <p>A "You know, you sort of go in another ward and you're just . . . that's it . . . like a lump of meat. But there you're not. They look after everybody, and treat . . . everybody's the same."</p>	<p>The predominance and primacy of the nurse in his experience /The significance of the nurse. Characteristics of the acute stroke unit "they." Meaningfulness of the acute stroke unit "they" was hard to explain—could explain through contrast/difference to other wards. The acute stroke unit is not "another" ward—it is different. Become a "you" in hospital—a less visible self? In other (non acute stroke unit wards) you are diminished? finished? and? dehumanized. Being in a better place, one constructed by nurses. Inclusivity -treating and responding to everyone the same (fairness and humanity?).</p>	<p><i>Here, my sense of Andrew's vulnerability begins to form within the emergent understanding (fusion of horizon). This is meaningfully signified to me by what appears to sit beneath the surface of his account and relates to the emotional and psychological importance of the nurses.</i></p>

(continued)



Table 2. (continued)

Transcript extract (p10–12)	Working with what is given and appears in and through the ongoing dialogue with the text/description	Articulating the ongoing play of understanding and unfolding of meaning within the researcher's horizon of understanding
<p>“Hmm. And do you think that’s really important after you’ve had a stroke?”</p> <p>A “Yeah, yeah.”</p> <p>“Why did that feel important? If you’d have ended up on another ward . . .”</p> <p>A “Well you’d just give up wouldn’t you? Yeah.”</p> <p>“Right. Yeah. And so the ward being like it was helped, you know, keep you um . . .”</p> <p>A “Yeah and they’re specially trained staff, not like er . . . the ordinary nurses.”</p> <p>“Yep, and did that impact on how you felt or how they were? What do you think?”</p> <p>A “Yeah, it is. I suppose like um . . . Macmillan Nurses, you know they’re trained to do that, yeah.”</p> <p>“And did you . . . did you feel, you know . . . I suppose did it make you feel secure and . . . ?”</p> <p>A “Yeah, you felt, you know, as though you were looked after, oh yeah.”</p> <p>“And, I’m sorry because I’m trying to get as much information out of you as possible . . . laughter . . . when you say you feel like you were looked after, what does that mean to you really?”</p> <p>A “Oh a lot, after you’ve had a stroke, yeah.”</p>	<p>Acute stroke unit difference is needed to keep going and not give up after stroke.</p> <p>“They” on the stroke unit are important for keeping going.</p> <p>Keeping going necessary after stroke.</p> <p>Encouraging in the face of threat?</p> <p>Distinction of the acute stroke unit nurses.</p> <p>The stroke unit nurses are not ordinary nurses.</p> <p>Dedication and specialization, familiarity with corporal fragility and damage (akin with that of cancer?).</p> <p>Distinction of the acute stroke unit nurses.</p> <p>Significance of feeling looked after.</p> <p>Stroke necessitates feeling looked after.</p> <p>The need for protection and support after stroke.</p>	<p><i>My analysis and developing understanding offers a sense of how they support and envelope him, but also protect him from the additional hurt he would otherwise feel. The nurses, as I begin to understand, mean that he doesn’t give up in the face of the adversity and threat he seems to experience after the stroke.</i></p>

enter another, returning and working within the new changed alterity. This extensive work within and across multiple hermeneutic circles continued as the meaningful experience of living through the acute stroke unit was made manifest.

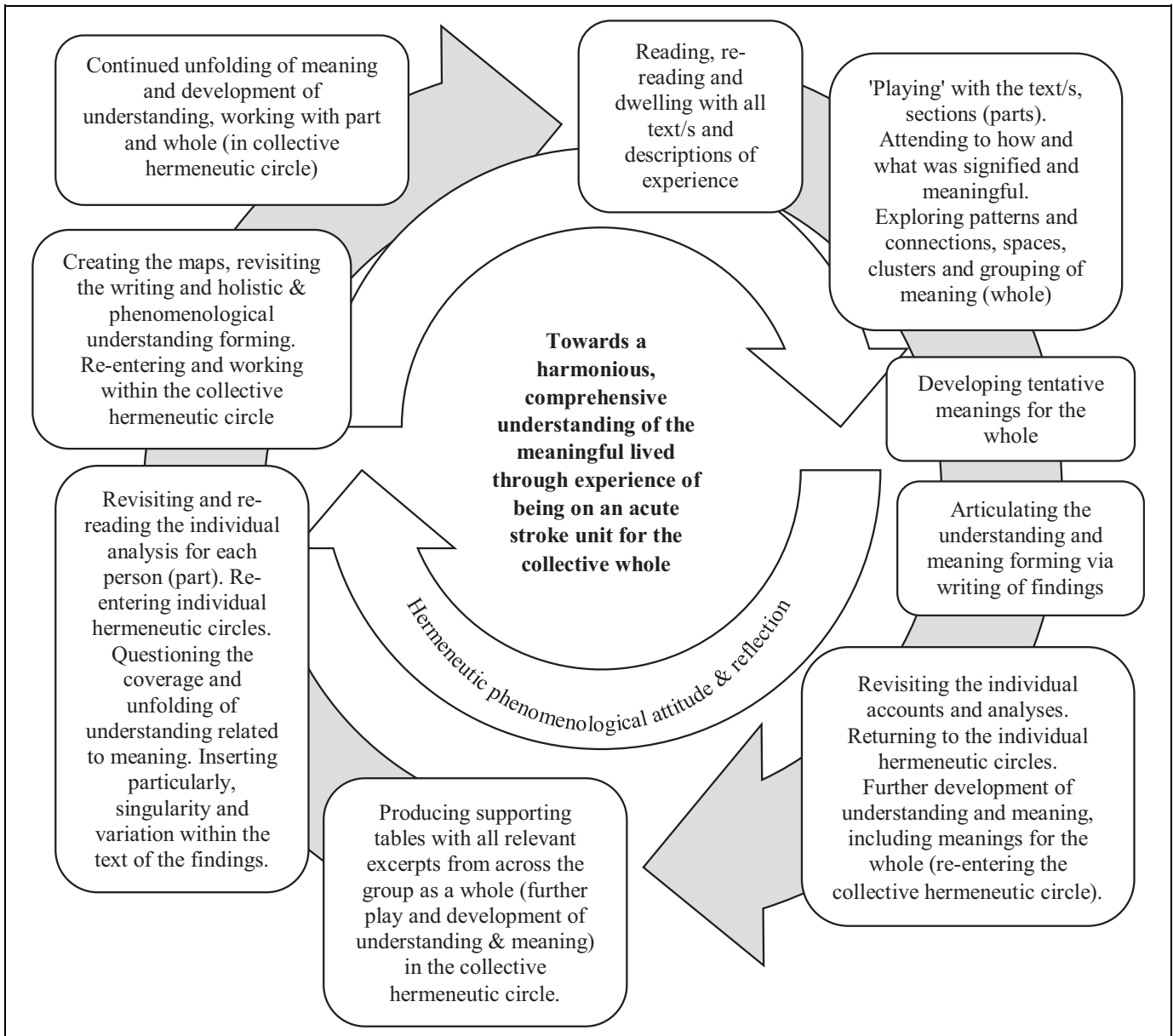
The initial analysis that I undertook demonstrated a bias and prejudice grounded within my own experiential concerns and struggles in practice. This assumed stroke survivors would be dissatisfied, and that they would describe limited or missing needs within their stroke unit experience. It became apparent that I also held an a priori notion that care and rehabilitation would emerge as meaningful phenomena, and that they were discrete entities. At numerous points, I would often revert to my comfortable, but inauthentic “natural attitude” of “doing” and “distancing.” This was when I was quick to assume and manipulate words and phrases, just as I had peoples’ bodies in my clinical practice. I had to re-engage the hermeneutic phenomenological attitude and focus on attending, patiently “being” and intimately dwelling with the accounts/ texts, as well as myself.

While working with the stroke survivors’ accounts as a whole, within the hermeneutic circle/s and hermeneutic phenomenological attitude, it became apparent that accounts of rehabilitation were indeed limited or missing. However, rather than validating my pre-understanding, I attended to what was left in its wake. What emerged was the acute stroke unit as a meaningful, transitional space that was orientated around the self. These concerns or

understandings were not present in my a priori fore-meaning or horizon of understanding about the acute stroke unit experience.

As I interacted with Sarah’s and Sally’s descriptions and text/s, space in a tentative way began to form within my horizon of understanding. This appeared in various ways. For example, the chasm and abstract sense of space between their pre-stroke lifeworld and since the stroke, and a physical (but non-geographical) space in relation to absence and presence. This encompassed the absence and presence of nurses, and for Sarah, the felt absence of the people on the unit once she returned home. Sarah’s analysis also provided access to my understanding of the acute stroke unit and in particular the hospital bay, as a place and temporary encampment that she and other stroke survivors populated and practiced (Figure 2). This was where they sustained and supported each other, shared knowledge, understanding, abilities, responsibility and care.

Working within the hermeneutic circle and hermeneutic phenomenological attitude I also came to understand how Jane and Andrew were held apart from their lifeworld by the acute stroke unit, and for Andrew, also, the dehumanizing other wards of the hospital. Jane was appreciative of the people who contributed during her time on the unit through their kindness, and how they protected and sustained her. However, she described how she also began to feel confined and held in a negative sense. As I worked at length through the process shown in Figure 1 and across, and between the accounts of these four people (Figure 2), the space of the stroke unit in the phenomenological sense of the word as a



**Figure 1.** The ongoing dialogue and work toward a unified, hermeneutic and phenomenological understanding

lived space, and the spatiality of their experience emerged in different, similar and nuanced ways.

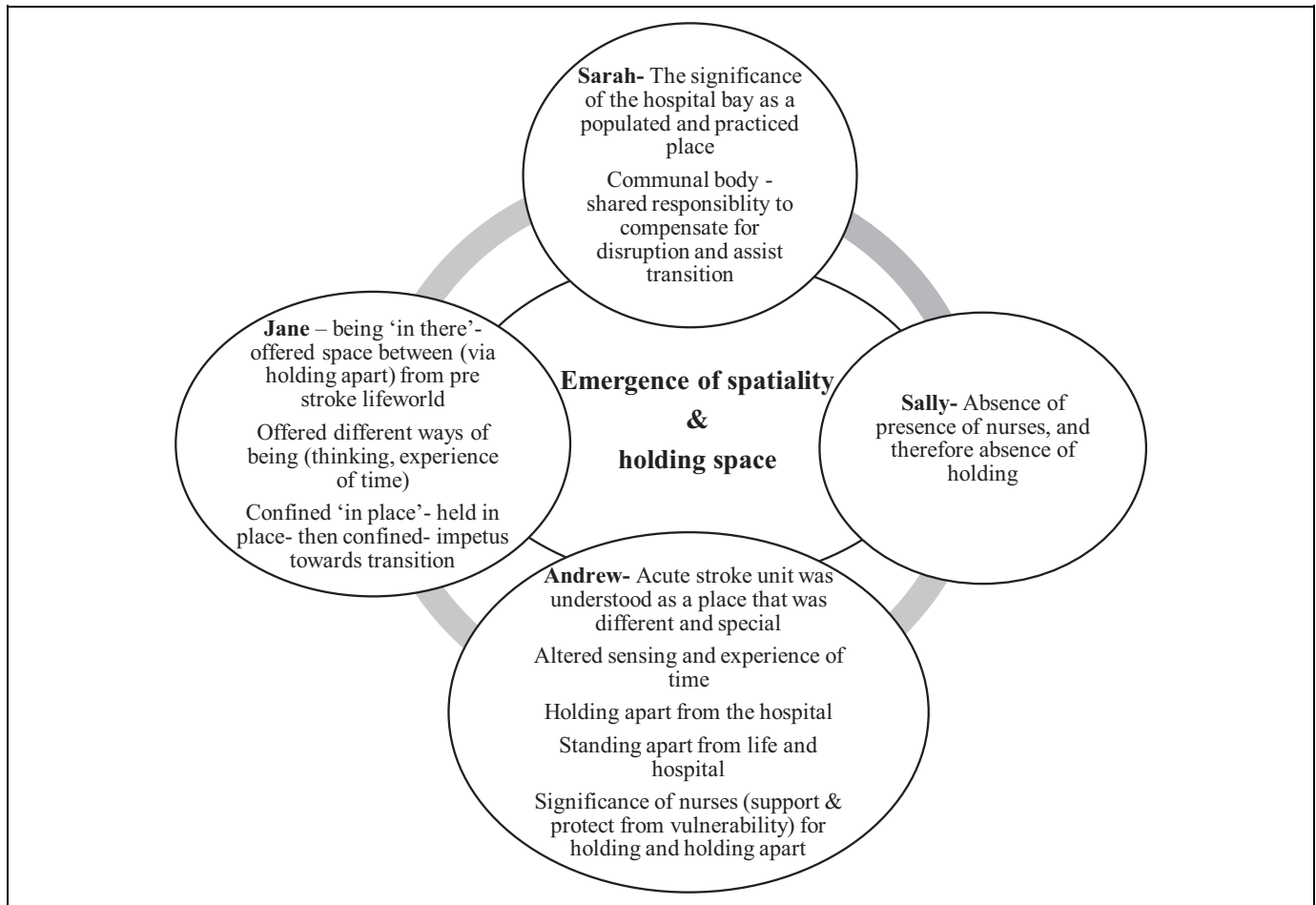
I came to understand that the acute stroke unit as holding space, was thereby signified through intimacy and distance, was complex, nuanced, responsive to human need, and produced and fulfilled by stroke survivors as well as health practitioners. The meaning of the holding space went beyond my pre-understandings of caring and helping and was intertwined, sometimes the impetus for stroke survivors' transition (Figure 2).

## Reflections

This paper has aimed to address the hermeneutic phenomenological scientific method and ontological, epistemological and

methodological concerns in the context of empirical research. In doing so, we hope to have gone some way to respond to Applebaum's (2012) contention that the hermeneutic attitude can be naïve, assumptive and methodologically incoherent. This paper has illustrated how hermeneutics and the hermeneutic phenomenological attitude worked as research praxis. It has illustrated the rigorous back and forth intentional, reflective movement between what appeared, the manner of appearing and part and whole, as a path to unfold meaning. Meaning that is encountered and grasped through a practical, relational, concerned orientation and embodied, being-in-the-world attitude.

It is widely known that developing hermeneutic understanding means working with part and whole on various levels. However, this paper has shown that developing hermeneutic



**Figure 2.** A summary of how spatiality and holding space emerged as meaningful through the hermeneutic phenomenological work with four stroke survivors’ experiential descriptions.

and phenomenological understanding involved adoption of a specific attitude as well as movement and interpretive work within multiple hermeneutic circles/ spirals, all of which remained intentionally intertwined and dynamically in-play. Bringing to light such a lengthy, nonlinear, messy and complex process was not straightforward, and further work in developing ways to effectively convey the hermeneutic phenomenological method and more obscure hermeneutic principles like the fusion of horizons and texts alterity, require explicit consideration.

Although this paper has not discussed the quality dimensions of the study in question (this is addressed elsewhere, Suddick, 2017; Suddick et al., 2019), it has illustrated a thorough, rigorous, extensive process which upheld the philosophical and methodological foundations. Notwithstanding, we have demonstrated the congruence and points of contact when interweaving hermeneutics with phenomenology, and how phenomenological principles were upheld through the hermeneutic phenomenological attitude and reflection and ontological emphasis of lived experience.

Hermeneutic phenomenology can draw on a number of orientating perspectives. The researcher discovered that

using and listening to her body was necessary for sensitive dwelling and sensing. Finlay (2006, 2011) has advocated embodied practices and reflexivity, Todres (2007), embodied enquiry and embodied relational understanding. Despite this, embodiment is too easily diminished within the research process. Daza and Huckaby (2014) with their embodied data analysis highlighted the body’s limited presence in methodological literature, and more telling perhaps their own theses. In this study, the researchers’ hermeneutic phenomenological *embodied* practice reflected “being with that”; where *being* and *knowing* meet (Todres, 2008 p. 1569); and re-established touch, flesh, and the deep, irrefutable relationship between the body, perception, sensations and interpretation. Kearney (2015) suggests we can recover the body as text and the text as body, restoring hermeneutics to phenomenology and vice versa. Attending to embodied knowing within hermeneutic phenomenological practice may be even more important in our ever-increasingly “fleshless society,” where advances in technology have removed touch and physical (and perhaps thereby other forms of) closeness (Kearney, 2014), knowing, and where self-other have become objectified (Todres, 2007).

## Conclusion

Hermeneutics means going to work on the text/s so its own truth can emerge (Gadamer, 2004). Hermeneutic phenomenology means working with part and whole in a cyclical, open and interrogative way to understand the person/ people who produced the text, the person doing the hermeneutic phenomenological work, and ultimately, the phenomenon that is brought to awareness and made manifest as a result of the work.

This paper has attempted to convey the somewhat abstract and less articulated process that occurs in hermeneutic phenomenological research. It illustrates the texts alterity and integral interplay between part and whole, as meaning unfolds and is apprehended. It has articulated the movement from pre-understanding, prejudgments, and prior horizons of understanding (a position of not knowing) to embodied understanding and “truth.” Truth that is determined through an extensive, complex, interrogative intentional dialogue. A dialogue that does not look for straightforward verification but embraces *play* in all its potentiality. It has explained what is meant by hermeneutics and the fusion of horizons between researcher, the individuals involved and phenomenon of interest, perceived and understood from the researchers’ horizon of understanding.

We have attempted to articulate how the phenomenon was apprehended through the work of hermeneutics, hermeneutic phenomenological attitude and reflection. We have proposed the relevance of apprenticeship and a hermeneutically and phenomenologically grounded understanding, alongside dialogue within and across “multiple hermeneutic circles.” In doing so, we have aimed to show how hermeneutics and phenomenology can work in a specific empirical research study.

This paper aimed to demonstrate how philosophy can contribute to methodological and methodical development, and how phenomenological and hermeneutic principles can be rigorously and coherently applied. This does not exclude other ways of going to work in hermeneutic phenomenology. In fact, all is in play, and to address the obscurity of hermeneutics and phenomenological inquiry and the range of ways hermeneutic phenomenology can work, we ask others to contribute and extend this dialogue:

Hence there is an infinite dialogue in questioning as well as answering, in whose space word and answer stand. (Gadamer, 2008, p. 67)

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## Notes

1. Fundamental change from natural to the phenomenological questioning attitude (H. Dahlberg & Dahlberg, 2020). A change of attitude toward reality (not exclusion of reality) through attending to the phenomenological given—the wordly objects as they appear (Zahavi, 2003).
2. Gadamer’s philosophical hermeneutics proposes the ontological structure between language, understanding and being, and that these constituents are intertwined with our historicity and tradition. The historicity and linguistic character of understanding are ontological structures of our experience of the world (Bilen, 2004, p. 8).
3. From a philosophical perspective, individual subjects are thrown together and encounter the world, themselves and each other within the collective, dynamic field of the lifeworld (Heidegger, 2003). The lifeworld that we share, encounter and live through in the everyday natural attitude is pregnant with meaning waiting to be grasped through the phenomenological attitude. Temporally and relationally positioned (horizontally) in this communal lifeworld and through our intersubjectivity and universality, human beings have the potential to come to understand (hermeneutically) the perspective/horizon of another (Gadamer, 2004).

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