



Phenomenological Approaches in Psychology and Health Sciences

ANNETTE SOFIE DAVIDSEN

University of Copenhagen, Research Unit for General Practice and Section of
General Practice, Copenhagen, Denmark

A whole family of qualitative methods is informed by phenomenological philosophy. When applying these methods, the material is analyzed using concepts from this philosophy to interrogate the findings and to enable greater theoretical analysis. However, the phenomenological approach represents different approaches, from pure description to those more informed by interpretation. Phenomenological philosophy developed from a discipline focusing on thorough descriptions, and only descriptions, toward a greater emphasis on interpretation being inherent in experience. An analogous development toward a broader acknowledgment of the need for interpretation, the influence of the relationship and the researcher, and the co-construction of the narrative is mirrored in qualitative analytic theory and the description of newer analytic methods as, for example, Interpretative Phenomenological Analysis and Critical Narrative Analysis, methods which are theoretically founded in phenomenology. This methodological development and the inevitable contribution of interpretation are illustrated by a case from my own research about psychological interventions and the process of understanding in general practice.

Keywords: description; empathy; general practice; hermeneutics; interpretation; mentalization; narrative; phenomenology; qualitative analysis; suspicion; time

Introduction

Qualitative methods have gained an increasing foothold in health sciences during the last few decades, although they are not yet established as an approach considered equal to the quantitative methods used in established research circles (Malterud 2005). Qualitative and quantitative methods rely on different forms of logic (Patton 2002). In quantitative research the logic is at a population level and depends on statistics; in qualitative research the logic is at a conceptual level. Qualitative methods take their point of departure in philosophical theories, many of them in humanistic theories (Polkinghorne 2000). The methods have developed considerably and the philosophical background is now made more explicit (Langdridge 2007; Smith, Flowers & Larkin 2009). Claims for assessment and internal consistency of research epistemology and methodological cogency have grown (Carter & Little 2009), and much theoretical work has been done to describe and discuss the philosophical and theoretical background of the methods and the implications for practical methodological approaches. Nonetheless, the logic remains the same.

Correspondence: Annette Sofie Davidsen, MD, PhD, Research Unit for General Practice, Copenhagen, Centre of Health and Community, 5 Oester Farimagsgade, P.O. Box 2099, Copenhagen K, 1014 Denmark. E-mail: adavid@sund.ku.dk

Qualitative methods take a critical stance toward knowledge. They recognize the influence of history and culture and appreciate how such knowledge is constructed intersubjectively. One set of qualitative methods is inspired by phenomenological philosophy. For the phenomenological methods, focus is on rich description of some aspects of experience, described through language. However, phenomenological philosophy has developed in different directions. Therefore each phenomenologically inspired approach has a different emphasis depending on the specific strand of phenomenological philosophy that informs the methodology (Langdrige 2007).

In phenomenologically inspired methods research findings are analyzed using concepts from phenomenological philosophy to interrogate the findings and to enable greater theoretical analysis. However, the phenomenological approach covers different approaches, from pure description to approaches more informed by interpretation. The different methods do not use all philosophical concepts, or they have reworked them. There seems to have been a development over time toward a greater recognition that “thick descriptions” (Lincoln & Guba 1985) are unavoidably conditioned by cultural, social, and interpersonal contingencies and that theory and method must necessarily be conflated. This is the view that makes up the new language of qualitative research (Gubrium & Holstein 1997).

In this article, my aim is to illustrate different phenomenological approaches through aspects of my own research into psychological interventions in general practice. I think the development that took place in my analytic approach throughout that project mirrors that in phenomenological philosophy and the consequent development of different analytic methods in the phenomenological family.

First, I give a brief overview of phenomenological philosophy and its development from being purely descriptions to having a greater focus on interpretation. Then I explain how I did my study and briefly mention the themes and the results. The understanding of the main theme, mentalization, was also rooted in phenomenological thinking, just as the theoretical analysis of another theme, time, was founded in phenomenological ideas. Finally, I touch upon the direction in which phenomenological methods are moving, giving an additional example from my own study.

Phenomenological Philosophy

Phenomenology is characterized as a “movement.” It is a dynamic philosophy that comprises several parallel currents that are related but not homogeneous. They do, however, have a common point of departure and agree on the fundamental phenomenological task: the descriptive investigation of the phenomena, both objective and subjective, in their fullest breadth and depth (Spiegelberg 1978). Phenomenology has developed in different directions, eventually incorporating some postmodern ideas (Moran & Mooney 2002), and in fact it can be difficult to decide where to draw the line between phenomenologists and nonphenomenologists (Spiegelberg). Likewise, a clearly delimited definition of the term phenomenology is difficult. Spiegelberg adopts a broad definition, which includes the use of a direct intuition as the source and final test of all knowledge to be incorporated as faithfully as possible in descriptions (Spiegelberg). Others characterize phenomenology as the unprejudiced, descriptive study of what appears to consciousness, precisely in the manner in which it appears (Moran & Mooney).

The phenomenological philosophy emerged at the end of the nineteenth century. It was anticipated by the work *Psychology from an Empirical Standpoint* by Franz Brentano (1995) and was developed by Edmund Husserl, who is normally considered the founder of phenomenology.

Phenomenological philosophy was initially referred to as phenomenological psychology (Brentano 1995). However, the connection between the philosophical theory and psychology has been a matter of great debate. Brentano considered psychology to be the proper lever for the necessary reform of philosophy and for the restoration of scientific metaphysics. However, he realized that none of the previous psychologies could fill his specifications as they lacked the indispensable primary clarification of their fundamental concepts. Brentano hoped to develop a scientific psychology that constituted the philosophical prolegomena to an empirical psychology (Spiegelberg 1978). However, Brentano's view can be regarded as psychologism (see below). Nevertheless, many of the thoughts in his book *Psychology from an Empirical Standpoint* from 1874 (Brentano) are considered to be the founding of phenomenology. In addition, modern psychological theory (Fonagy et al. 2002) uses Brentano's ideas and combines them with "theory of mind," a branch of analytic thought inspired by phenomenology. Freud (like Husserl) was one of Brentano's students and was also inspired by his ideas (Fancher 1977).

Phenomenology has developed to become one of the main currents in modern philosophy, especially in Europe, but also in the United States. Phenomenology represents a rupture with an epistemological dualism and is concerned with the study of consciousness. Phenomenology tries to unite philosophy, science and lifeworld and attaches importance to rich contextualized descriptions, based on experience. It intends to turn to "the thing itself," freeing itself from preexisting prejudices (Spiegelberg 1978). In this way, it becomes an essentially reflexive enterprise (Toombs 1992). In addition, it demands a scientific approach to subjectivity (Natanson 1974), as also stressed by Schutz (1967).

The aim of phenomenological qualitative research is to deal with experiences and meanings and "to capture as closely as possible the way in which the phenomenon is experienced within the context in which the experience takes place" (Giorgi & Giorgi 2003, p. 27). The different methods study this through rich descriptions or narratives that can illuminate the lived world. The aim is to see things in their appearance.

Husserl

Husserl's project was primarily epistemological (Husserl 1982). He did not believe that it was possible to separate the experiencing subject from what is experienced in the world. The world can only appear for a subject and the condition for its appearance lies outside the world itself, namely in the subject (Zahavi 2003).

Husserl's intention was to study consciousness and how phenomena in the world are constituted by the human consciousness. He wanted to describe how phenomena appear to the subject and how experience is established. Husserl thought that it was not possible to isolate the objects from the subject experiencing them. His aim was to describe and develop a universal phenomenology conceived as the ultimate foundation and critique of all knowledge, claiming that phenomenology could put philosophy and science on the right course (Spiegelberg 1978).

Psychologists have adopted Husserl's method in their approach to understanding specific aspects of our human experience of the world. However, even though the phenomenological movement was started as "phenomenological psychology," Husserl raised objections to this "psychologism." Giorgi describes how Husserl both identified phenomenological psychology with and differentiated it from phenomenology. Giorgi states that it is a complicated, "murky and zigzag history that requires careful contextualization if precise meanings are to be communicated" (Giorgi 1997, p. 250). According to Giorgi, Husserl discusses not what would comprise a phenomenologically based psychology

but rather what is required for a phenomenological clarification of the conceptual foundations of psychology, and Husserl's work can therefore be considered a distinctively phenomenological contribution to philosophy of mind.

Some of the concepts Husserl developed are used in phenomenological qualitative methods. He took over the concept of *intentionality* from Brentano (McIntyre & Smith 1989) but differed somewhat in his understanding of the concept (Spiegelberg 1978; Zahavi 2003). In contrast to Brentano, Husserl does not distinguish between the intentional and the real object. Human consciousness is intentional in the sense that it is not empty; it is always directed against something (Zahavi). One cannot think or feel without thinking or feeling something. Whenever a person is conscious or aware, he or she is conscious or aware of something in the world outside the subject. Therefore the focus is on the way consciousness is turned out on the world and on the relationship between a person's consciousness and the world, including the relationships between people. Intentionality is that component of any act that is responsible not only for pointing at an object but also for interpreting pre-given materials in such a way that a full object is presented to our consciousness (Spiegelberg).

Husserl insisted that it is philosophically unacceptable to take the validity of the natural attitude for granted. We should not let preconceived theories form our experience but rather let our experience determine our theories. Husserl describes how we should let our intuition be the source of all knowledge. In *Ideen* (Husserl 1983), he introduced the concept of "phenomenological reduction" and the term "epoché." The primary function of all reduction is to prepare us for a critical attitude to what is indubitably given, before our interpreting beliefs rush in (Spiegelberg 1978). We must suspend our acceptance of the natural attitude and bracket its validity. This procedure is known as epoché. Epoché and reduction are closely linked and parts of one functional unity. Zahavi states that epoché is the term for our abrupt suspension of a naïve metaphysical attitude and that reduction is the term for our thematization of the correlation between subjectivity and world (Zahavi 2003).

In phenomenological reduction efforts should be made to treat all details with equal value. This is achieved through horizontalization, trying to understand all phenomena at the same level by not prioritizing phenomena (Langdrige 2007). Insight can also be gained through *eidetic variation*, which means attempting to imagine the object being different from how it currently is (Zahavi 2003). This can be done by imaginatively varying features of the phenomenon, for example, when analyzing data about medical issues imagining doctors are nurses and vice versa.

Husserl thought that through different stages of reduction it was possible to reach a more fundamental understanding of the phenomena (Spiegelberg 1978). He also developed the thought that it was possible to reach a state with a "transcendental I" from where the consciousness itself could be grasped. Husserl thought that this transcendental reduction was possible, while some of his successors thought this could be only partially achieved. Heidegger, Sartre, and Merleau-Ponty, for example, thought that we could never truly bracket off all our presuppositions and achieve a "God's eye view" because of the grounded and embodied nature of our being in the world (Merleau-Ponty 1964). The aim is the same in qualitative research: we attempt to bracket off our preconceptions and be open to participants' experience, but usually we realize that this is never fully possible.

Some phenomenologists maintain that it is possible through thorough detailed description to reach an understanding of the essences of things or phenomena (Giorgi 1992) without the need for interpretation. This has been rejected by others. In relation to qualitative methods, this discrepancy is mirrored in the disagreement about whether interpretation has a place in the analysis or whether the analysis must depend solely on description.

Because of these assumptions, that the process of bracketing was fully possible, that thorough and repeated descriptions could lead to knowledge about the essence of things, interactionists, in particular, have accused phenomenologists of being too essentialist (Järvinen & Mik-Meyer 2005). However, most of Husserl's followers developed phenomenology in less essentialist directions and stated that interpretation could not be avoided and that descriptions also involved interpretation (Gadamer 1989; Heidegger 1962; Langdrige 2007; Ricoeur 1970).

Heidegger

Heidegger introduced the existential turn in phenomenology. His aim was to understand existence. According to Heidegger, being always presupposes the being of something. The investigation of Being must choose a thematized being for analysis. This includes analyzing one's own Being in a circular process where the formulation of the investigative method also articulates the kind of Being to be investigated (Stolorow 2006). Heidegger uses the word 'Dasein' about this kind of Being:

This entity [dieses Seiende] which each of us is himself and which includes inquiring as one of the possibilities of its Being, we shall denote as "Dasein."
(Heidegger 1962, p. 27)

Literally translated, Dasein means "being there" or "there being." However, Dasein does not simply mean "human existence." It is an ontological term which describes the way in which humans are and understand themselves rather than what they are (Large 2008). "Understanding of Being is itself a definite characteristic of Dasein's Being" (Heidegger 1962, p. 32). Dasein is not another nomenclature for the human being (man) or subject but rather an expression for a definite structure which makes our understanding of Being possible (Figal 2009) and includes a dimension of disclosure (Large 2008). The term entity does not fully signify the active and involved dimension of the meaning of the substantivized verb "das Seiende" in German. Entity is more dehumanized (Stolorow 2006).

Dasein's own Being is an *issue* for it. Dasein understands itself in its Being (Heidegger 1962). Heidegger considers his method of investigating our own understanding to be a phenomenological one aimed at illuminating the fundamental structures of our own understanding of our Being. "Only as phenomenology is ontology possible" (Heidegger, p. 60). However, our Being is often disguised in our understanding of it and we must find ways of "passage through whatever is prevalently covering it up" (Heidegger, p. 61). It must be unconcealed by means of interpretation of that understanding:

Phenomenological interpretation must make it possible for Dasein itself to disclose things primordially; it must, as it were, let Dasein interpret itself.
(Heidegger 1962, p. 179)

Phenomenology relies on description. However, Heidegger thinks that all description inevitably involves interpretation and he develops phenomenology in a hermeneutic direction.

. . . [T]he meaning of phenomenological description as a method lies in interpretation . . . The phenomenology of Dasein is a hermeneutics in the primordial

signification of the word, where it designates this business of interpreting.
(Heidegger 1962, pp. 61–2)

For Heidegger, interpretation is a further development of understanding: “In interpretation, understanding does not become something different. It becomes itself” (1962, p. 188). It is concerned with “the working-out of possibilities projected in understanding” (Heidegger, p. 189). Interpreting what is understood means explicitly articulating, making intelligible, laying out, unveiling, or thematizing its “as-structure” (Stolorow 2006).

Through his concern with the ontological foundation of experiencing and understanding Heidegger displaces the concept of understanding. Understanding is a way of being situated in time and space. We are always already thrown into a pre-existing world of people and objects, language, and culture and this constitutes our existence. The conditions for all human Being are an understanding which is not rationalistic but is rooted in our very existence. This existing is always factual (Heidegger 1962). Our understanding is always rooted in a world of doings and practice (Dreyfus 1991).

Time and temporality was a major issue of concern for Heidegger (Heidegger 1962). Our experience and our existence are always understood in a temporal context between past, present, and future. *Dasein* is a process in a threefold temporal context and directness: toward the future (ahead of itself), its factual being (thrownness), and its being lost in daily preoccupations. For our preoccupation with this three-fold structure Heidegger uses the word “care” (*Sorge*) (Spiegelberg 1978). According to Heidegger this term signifies the “formally existential totality of *Dasein*’s ontological structural whole” (p. 237). Each element of care has its basis in temporality and the meaning of care is temporality. Temporality reveals itself as the meaning of authentic care. *Dasein*’s existentiality is always more than it is at a given time-point. It is fundamentally temporal and “being-toward-death” (Heidegger).

Our understanding is based upon our situated position in the world, our “thrownness” (Heidegger 1962), interwoven in a historical world shared with others where we can never free ourselves from preconceptions which we are not aware of. We understand things from certain framework conditions, which we cannot objectify or explain completely. We see things in their *appearing*, which means that a phenomenon is not clearly showing itself but that it makes itself known, announcing itself without showing itself. Finding a meaning therefore always involves an element of interpretation (Smith et al. 2009).

The word phenomenology is derived from the Greek *phenomenon* and *logos*. Phenomenon means appearance, which can have different forms where some are disguised or latent. Logos, or discourse, is the analytical thinking, which helps facilitate or grasp this appearing. As in qualitative analysis, coming to a possible understanding of an underlying meaning of another person’s description of phenomena depends on this analytical thinking, reflection, and interpretation. For Heidegger, phenomenology meant to make sense of the appearing and he argued against a presuppositionless descriptive phenomenology (Heidegger 1962). Our understanding is always founded upon the fore-conception. Interpretation becomes a cyclical activity from the things to the forestructure. The fore-structure is always there but Heidegger thought that the understanding of one’s own fore-structures went through the experience of the things themselves. We are not aware of the forestructures beforehand, and we cannot uncover the forestructures in other ways than through analysis of the things or phenomena. For example, when encountering a text we do not know which of our forestructures are relevant. This is revealed through engagement with the text and reflection upon what could possibly have influenced the interpretation.

Further, Heidegger opened up phenomenology to interpretation through language. Through language he anticipated the narrative approach, which was later formulated by Ricoeur, who saw narrative and time as mutually related. In his considerations about time, Ricoeur takes a point of departure in Heidegger's thinking (Ricoeur 1980).

Heidegger's dynamic understanding of foreunderstanding and the greater focus on interpretation led to a reevaluation of the role of bracketing (Smith et al. 2009). This form of bracketing calls for a process of thorough reflexivity where the researchers discuss the preconceptions and forestructures that the analysis has made them aware of and that they make these preconceptions transparent to the audience or the readers. A repeated circle of bracketing processes is inevitable. We suspend attention to selected phenomena, for the time being, to concentrate on other phenomena. We may alternate between bracketing the whats and the hows (Gubrium & Holstein 1997), and this bracketing operates constantly during the analysis as an analytic bracketing.

Gadamer

Gadamer accepted Heidegger's claim that phenomenology must proceed in hermeneutic fashion. In addition, he took up Heidegger's anti-subjectivist characterization of the human being-in-the-world and his emphasis on the "linguisticity" of human experience (Moran & Mooney 2002). Gadamer addresses the fundamental problems of phenomenology. He does so, however, not in Husserlian terminology but in elaborating on the ontology of language and the accessibility of the truth and presence of things (Figal 2007).

Heidegger stressed the need for interpretation. Gadamer realized it fully, both epistemologically and methodologically. In Gadamer's view understanding is always interpretation (Gadamer 1989). Like Heidegger, Gadamer emphasized that our very existence is hermeneutic. In his principal work *Truth and Method* (Gadamer 1989), he points to the essential prejudice character of all understanding. Because we are influenced by prejudices our openness to the world is biased and we can never, even through reflection, entirely keep a critical distance and objectify. This implies the "hermeneutic situation." Prejudices are generated from history and culture. For Gadamer, the past has a truly pervasive power in the phenomenon of understanding (Linge 1977). Like prejudice and tradition, the past also defines the ground the interpreter himself occupies when he understands. We always have a horizon of meanings because the world has always already been given a meaning for us. The interpretations we make of ourselves and our surroundings are determined by conditions which we can never explain comprehensively. Understanding involves the person who tries to understand and who interprets. With Gadamer's philosophical hermeneutics the horizon of the interpreter enters into the picture. This is also the case for historical events. Understanding is from the present perspective. The past is contained in the present and is interpreted from that perspective. All interpretation implies a form of perspectivism and is necessarily selective. Our historical context gives direction and sets limits for what can be experienced. We are born into a community based on traditions. In this way history does not belong to us, we belong to history (Gadamer 1989). According to Gadamer we must, in contrast to traditional hermeneutics, abstain from the subjectivity of the subject. Like Heidegger, he underlines the inevitable influence of the interpreter's horizon and the existential dimension of this understanding: we are our understanding. Understanding is the original form of the realization of Dasein (Gadamer 1989). This understanding is both conditioned and limited by an always already linguistically and historically promoted understanding which we take for granted.

Gadamer drew attention to the importance of language (Gadamer 1989). Interpretation had to find an appropriate language to present the understanding. All understanding is linguistic in the sense that language constitutes the conceptual basis for understanding. He stressed the dialogical character of language and stated that dialogue can lead to understanding through a “fusion of horizons” (Gadamer 1989, pp. 306–7).

Gadamer thinks that we can never free ourselves from our prejudices and our ways of understanding based on the time we are living in, not even as researchers. It is not possible to reach a complete and correct interpretation. Understanding is based on the *application* of the phenomenon to our own context (Gadamer 1989). Gadamer attaches little importance to precise methodological questions but rather is occupied with the understanding which precedes every systematic and specific investigation. His hermeneutics represents a criticism of all forms of method fixation in human sciences and sciences of art and should be related to practical life (Gadamer 1983).

It is concerned with the “scientific” integrity of acknowledging the commitment involved in all understanding. (Gadamer 1989, p. xxviii)

This gives the philosophical hermeneutics a form of universality. All sciences have common features and are basically historical and interpretive.

Ricoeur

As a philosopher, Ricoeur also took his point of departure in phenomenology. His primary philosophical inspiration came from Husserl and Jaspers. He translated Husserl’s *Ideen* and wrote about Karl Jaspers’ existential approach to phenomenology. Later, however, he combined phenomenological description with hermeneutic interpretation (Ricoeur 1970). He maintained that hermeneutics is an unsurpassable presupposition of phenomenology (Moran & Mooney 2002) and that hermeneutics is required to incorporate the critique of ideology into understanding. Ricoeur was particularly concerned with interpretation, primarily with interpreting text. He stated that human action should be understood as text and that such an approach would enable better understanding and interpretation.

Ricoeur was critical of Husserlian phenomenology. To Ricoeur, phenomenology did not carry the significance of universal method that it did for Husserl. Instead he developed a dialectic of methods and a reflective philosophy. He thought it impossible that man could know himself directly or introspectively. He focused on what Gadamer called the “being-in-the-world” of the text and in this way questioned the primacy of interpreting the subjectivity of the author. This led to an indirect reflective procedure and a route via symbol and interpretation, which constituted the opening of a hermeneutic phenomenology (Ihde 1971). Ricoeur formulated two forms of hermeneutics or interpretation: interpretation as recollection of meanings and interpretation according to a school of suspicion (Ricoeur 1970). The latter form tries to reveal the “illusions and lies of consciousness” according to certain theories (Ricoeur 1970, p. 32) as, for example, psychoanalysis.

Ricoeur states that an area where all philosophical investigations cut across one another is the area of language (1970). This led him from a perceptualist to a linguistic phenomenology (Ihde 1971). He distinguished between discourse and language. Discourse is the spoken language, sentences which give meaning, exist temporarily and are addressed to another. Language is a system of signs and exists outside time. Discourse can be spoken or written; transcripts of research interviews are something in between. In written discourse the

possibility of capturing the intention of the author fades, such that any *appropriation* of meaning must always remain an approximation.

Appropriation is the way in which we attempt to interpret meaning (Ricoeur 1981). Ricoeur's thinking was that the text is both taken at face-value and described from a phenomenological standpoint and interpreted with a hermeneutic interpretation. This demands a search for hidden meanings through the interpretation of symbols and myths (Ricoeur 1980). A key element for Ricoeur of engaging with the text was the notion of *play* (Ricoeur 1981, p. 165), a term which he borrowed from Gadamer. Play is used as indirect approaches to works of art or dreams and is not always conscious. Furthermore, one always speaks from somewhere, which means that the subject, including oneself, must be subjected to a hermeneutic critique. We always occupy an ideological position even if we are unaware of it.

In his later writings, Ricoeur concentrated on thoughts about narrative (Ricoeur 1980, 1984). Polkinghorne, drawing on Ricoeur's philosophy, defines narrative as "the fundamental scheme for linking individual human actions and events into interrelated aspects of an understandable composite" (Polkinghorne 1988, p. 13). Ricoeur's thinking is that the creation of meaning intrinsic to humanity can be understood only through the analysis of metaphor and narrative. In this way it is possible to gain access to the creative process in action. Stories are constructed to make sense of our lived experience through the organization of disparate elements into meaningful wholes. Narratives call the subject into being and serve to situate its experience in time. According to Ricoeur, every narrative is concerned with experience in time and the narrative competence makes time a human time when it is experienced or told as a narrative (Kemp 1996; Ricoeur 1980). Ricoeur's narrative theory is a continuation of Heidegger's unfinished project of understanding human existence as essentially temporal (Ricoeur 1980; Vanhoozer 1991). Narrative identities are constructed through the stories we construct. Ricoeur's narrative theory has inspired narrative analytic approaches in qualitative research (Hoshmand 2005; Mattingly 1998) and the development of a phenomenologically inspired narrative analytic method (Langdrige 2007).

Psychological Interventions in General Practice: An Empirical Study

The aim of the study was to explore how general practitioners (GPs) understand patients with emotional problems or mental disorders, to study their process of understanding. I used interviews with GPs to gain insight into different experiences of understanding patients and managing "talking therapies" as a form of psychological intervention offered to patients in general practice. I used observation of consultations with some of the GPs in their standard surgeries to see how the different approaches were reflected in the normal workday and how external circumstances influenced involvement with emotional problems. The empirical focus was the GPs' different perceptions and experiences when delivering talking therapy and other psychological interventions and the interpersonal interaction in the consultations. My interest was to consider how psychological interventions could be described, conceptualized, and integrated into a theoretical framework of general practice, psychological, and psychotherapeutic thinking. The intention was to study processes of understanding and relationship formation and to identify ingredients and patterns of conduct (Davidsen 2008b).

The analysis was originally planned as a phenomenological analysis as described by Giorgi (1985) and modified by Malterud (2003). There was a tradition for this meaning-condensing method at our research unit. However, during the analytic process it transpired that the data consisted of inconsistent narratives and complex processes of formation

of understandings existing in parallel. I felt that it was not possible to reach a deeper understanding of these phenomena with a method that focused exclusively on descriptions. A deeper understanding demanded more complexity-sensitive ways of thinking and a method that allowed interpretation, exploration of dynamics and processes, and involvement of the context. I applied the Interpretative Phenomenological Analysis, which is a well-described method combining hermeneutic and phenomenological thought with interactionist ideas (Smith 1996). This method was used in the subsequent analytic stage of the interviews. In a final analytic step I undertook a narrative analysis of the material. The steps in the analysis are described in detail below. I did, however, realize that the description-interpretation debate is more complicated than this (Langdridge 2008) and will discuss this later.

Analysis

The analytic process started as early as during the first interview. The interviews were formed as a dialogue between the participants and me. The meaning of what was said was interpreted, verified, and communicated during the interview. This meaning was pursued and clarified, and sometimes the GPs interpreted their own told stories. The interview material was constructed in an interpersonal relational interaction and the development of the dialogue demanded in itself an analysis of what was said to allow the dialogue to proceed. The transcription process was also a form of analysis. During the transcription I took notes of what came into my mind as interesting, surprising, puzzling or common.

The structural analysis of the transcribed interviews began after the first four interviews as the stepwise recruiting was supported by this analysis. As mentioned, the material of this study was analyzed in different rounds using different forms of structural analysis, later being subjected to a narrative analysis. Each of these rounds supplemented the preceding one and developed the analytic work.

The first structural analysis was intended to take the participants' lifeworld as its starting point. It was done according to the phenomenological approach as described by Giorgi (1985) and later developed in more detail (Giorgi & Giorgi 2003). This meaning-condensing method covers four steps: gaining an overall impression and identifying themes; dividing the text into meanings units; condensing meaning across cases; and generalizing descriptions for each theme, forming the foundation for new descriptions and concepts.

During this analysis the material was coded according to the developing themes. Three main themes emerged: processes of understanding patients; applied therapeutic methods/management of talking therapy; and time, structure and organization. These themes were divided into subthemes describing different dimensions of the process of understanding, different approaches to handling psychological interventions and different dimensions of time as necessary preconditions for these interventions to be successful. The subthemes formed descriptive codes. All themes were connected by the superior theme "narrative."

The first structural analysis revealed that the participants differed greatly in their process of understanding patients. They showed different propensities to engage in patients' mental and emotional problems. Some had an understanding approach, which pervaded all consultations, also those about somatic matters. These participants offered more talking therapies and had a more reflective stance than other participants and there was greater disclosure of emotional problems in normal consultations with this participant than with the others. An intermediate group showed a more limited understanding and asked mainly

about workplace and family problems if patients revealed emotional problems. They did not try to disclose less obvious factors or past events in the patient's life. Other participants could be dismissive and unreflective regarding the patient's perspective. They might feel patients were irritating and the lack of mutual understanding likewise pervaded all consultations, making them seemingly unhelpful at times. Some participants had an exclusively biomedical approach and deliberately chose not to involve themselves in psychological work. They defined emotional matters as not belonging to their working area.

None of the participants described any specific method, structure or therapeutic technique used in talking therapy. They used no theoretical language or professional terms for what they did and they had difficulties in explaining in general terms how they carried out talking therapy. From their detailed descriptions of therapeutic sessions, the ingredients could be identified. They all mentioned the importance of giving time, being open to what the patient had on his or her mind and showing this openness to make the patient feel safe and trusting (Davidsen 2008a).

After this first structural analysis, I realized that the phenomenological approach I had chosen until that point did not fully grasp the complexity of the participants' accounts. According to Giorgi, the phenomenological approach allows only descriptions and not interpretations:

The true significance of the descriptive task within phenomenology comes through when one considers the alternatives to description, viz., explanation, construction and interpretation. . . . interpretation is not description, because in order to account for a phenomenon it brings a perspective to the given, either from theory or for pragmatic reasons, that is not necessarily demanded by the intuitive evidence But for "pure" phenomenology, the task is to describe the intentional objects of consciousness within the perspective of the phenomenological reduction. (Giorgi 1997, p. 240)

Langdridge has argued that interpretation is necessarily present in qualitative research (2007). However, he acknowledges the need for a thorough description to reach greater understanding, still realizing the importance of the interpretive approaches and maintaining that interpretation is not in opposition to the phenomenological idea. According to Langdridge we must, however, distinguish between the different understandings of description and interpretation. Interpretation must be distinguished from explanation and causes and instead focus on a description of reasons. Furthermore, there is no hard-and-fast boundary between description and interpretation. Instead they represent different dimensions (Langdridge 2008).

Heidegger uses different terms for understanding (*Verstehen*) and interpretation (*Auslegung*). By interpretation he means a "projecting of the understanding [in which] entities are disclosed in their possibilities" (Heidegger 1962, p. 151). For Heidegger as well as for Gadamer the problem seems to be how true interpretive understandings can be distinguished from misunderstandings (Carr 1987). In the hermeneutic position the very thing that renders the object accessible to us is interpretation. However, it is also kept from being totally accessible. In opposition to the Husserlian notion of self-evidence another interpretation is always possible (Carr). Ricoeur takes up a third position with the turn to meaning and a request for reflexivity. This means that interpretation can be thought of as opening new possibilities (Langdridge 2008). These are, however, always seen from the position of the researcher and influenced by prejudices and ideologies (Gadamer 1989; Heidegger 1962; Ricoeur 1970).

I thought that I could not have avoided using interpretation right from the beginning of the data collection and during the analytic process. Guiding the interview and choosing the relevant themes from the transcriptions could not be done without some element of interpretation. Furthermore, I realized that the context, the interactions between patient and GP had to be incorporated. This required a method that could grasp these interacting processes.

Some analytic questions arose: “how”-questions and questions about process, for example which processes promoted or inhibited understanding; how was the therapeutic situation constituted; how was the therapeutic approach expressed; and what was the influence of time and time dimensions. Concomitantly I realized a need for a more idiographic approach with greater emphasis on each individual case (Smith et al. 2009).

The next step was a *second structural analysis* where I used the Interpretative Phenomenological Analysis (IPA), which was first described by Smith (1996) at a developmental stage where the theoretical roots are dealt with. The method was later described in further detail in a more schematized way (Smith et al. 2009; Smith, Jarman & Osborn 1999; Smith & Osborn 2003). However, as with the other qualitative methods IPA offers no recipe, the researcher must adapt the method to his or her own particular way and topic. IPA has its roots in phenomenology and the method aims to explore in detail the meanings of the participants’ lifeworld and their personal experiences and perceptions. It involves a dynamic process with an active role of the researcher. It acknowledges the influence of the researcher’s own conceptions and the interpretative activity involved. Accordingly, it is described as a “double hermeneutic” process (Smith & Osborn 2003). It also borrows from symbolic interactionism and its perception that the meanings individuals ascribe to events are of central concern, that those meanings are obtained through interpretation and that they are a result of social interactions (Smith 1996). Thereby, IPA forms a link to constructivism and the poststructuralist methods (Søndergaard 2002).

For IPA, analysis always involves interpretation. Heidegger’s notion of *appearing* captures IPA’s apprehension of interpretation as a form of detective work in which the phenomena are called forth and the researcher tries to make sense of what appears during the analysis. This is a reflective practice with a dynamic process of reflecting upon one’s own preconceptions. The researcher is not necessarily aware of these preconceptions and they may only be realized in a cyclical process with the text or other data material. The researcher enters into a hermeneutic circle with a dynamic and cyclical approach to bracketing (Smith et al. 2009).

Ricoeur formulated two different forms of interpretation: hermeneutics of meaning recollection and hermeneutics of suspicion. The first paves the way for a more descriptive approach and an understanding of the experience on its own terms, whereas the latter uses an external theoretical perspective and tries to shed light on the material from a more distant perspective, such as psychoanalytic or Marxist theory (Ricoeur 1970). Interpretation in IPA is not primarily through applying a separate theoretical approach as in hermeneutics of suspicion. The interpretation in IPA is grounded in the text, but IPA uses a questioning approach to understand the participant’s experiences and interactions, not primarily in the light of theories from without but also as seen from outside the participant. In this way IPA involves a double hermeneutic process: it tries to understand the stories as they are experienced by the participant, and in addition interpret and understand the interaction and context that the participant is part of (Smith & Osborn 2003). The interpretation in IPA can be at different levels and the levels go deeper as the research progresses. A skilled researcher will risk more interpretive work and involve more interpretation than will a less skilled researcher; accordingly, more interpretation will be involved as the

research process progresses (Langdrige 2007). In this way IPA holds a middle position between hermeneutics of meaning recollection and hermeneutics of suspicion. However, IPA researchers can also use hermeneutics of suspicion but will then normally present the work in a separate paper (see below).

The process of the IPA analysis began with a repeated reading of the transcript of the first interview, using the left-hand margin to note anything that struck me as interesting or important about what the participant said. These comments were attempts at summarizing, making associations, connections and preliminary interpretations. The other margin was used to document emerging theme titles using keywords that attempted to characterize each section of the text. The theme titles were abstract or conceptual and were to capture the essential quality of what was represented in the text. The identified themes from the right-hand margin were listed (in this method they are named “subthemes”), connections were formed between them, some were clustered together, some were regarded as “superordinate” themes. In addition, directories of participants’ phrases were compiled, supporting related themes, and it was indicated where to find instances of subthemes in the transcripts. For each transcript a table of themes was produced and ordered coherently, meaningful quotations were transferred to a special document. I completed this process for each interview. The final step was to produce a master list of themes for the group of participants as a whole. A further condensation and a continual revision of the list of themes and clusters of themes and their mutual relationships were made, forming the basis for the final writeup.

The IPA analysis revealed great differences between participants. They showed different processes of understanding patients and different levels of psychotherapeutic approach. This was conceptualized as different levels and dimensions of mentalization (Allen & Fonagy 2006). Mentalization means understanding other people’s mental states, such as thoughts, feelings, wishes, and so on, while still being aware of one’s own reaction. In the descriptive phenomenological analysis, this phenomenon was described as differences in the capacity to understand the patient’s thoughts and feelings. The concept grew out of the inductive analysis. However, it formed an interpretive approach, a questioning interpretation, still grounded in the text.

The mentalizing process, which GPs engaged in to very different degrees, was a reflective stance where they used their own feelings and imagination in an interpersonal relationship between GP and patient, influenced by the minds of both. Mentalizing GPs showed a propensity to express empathic involvement in the patient’s situation, and to express their thoughts, imaginations and fantasies about the patient’s mental state. They also reflected more on their own emotional reaction to the patient and how the relationship with the GP could be used therapeutically. They included the patient’s whole life situation in an attempt to understand the patient. Their way of understanding broadened their room for manoeuvre and gave them the opportunity to relate to the whole context and use their biomedical knowledge as a working tool in this context. These participants often perceived the patients’ mental state as an intelligible and comprehensible reaction to their life circumstances. Their accounts showed that they understood the patients’ pattern of thinking and the individual narrative style as an expression of the patient’s mental state. These GPs said that they encouraged patients to tell their stories by showing open-mindedness to the version that made sense for the patients. Sometimes the narratives were fragmented and delivered in small bits, and they saw this as an expression of the patients’ emotional problems; less mentalizing GPs often listened to patients’ stories but interrupted the patient when they could no longer decode any biomedical diagnostic material from the story. Furthermore, there were different dimensions of mentalization, including mentalizing

the link between body and mind, the great complexity of patients' problems presented in different narrative styles, and the doctor-patient relationship.

Time was an important factor in the first structural analysis. However, it seemed that the question about time contained greater complexity, which was revealed in the second structural analysis. Three aspects of time emerged: the chronological time of the schedule; the internal time with another rhythm and flow of thought; and the longitudinal time where meeting repeatedly for short consultations promoted a trusting relationship where problems were disclosed gradually and a narrative was created. With therapeutic participants the same aspects of time could be identified in routine consultations. Theories of time and narrative from psychotherapeutic thinking could be applied and an interpretation could be made which formed links to the unconscious and to the narrative time (Davidsen & Reventlow 2010; Ricoeur 1980). The three dimensions of time were important for establishing a psychotherapeutic relationship with patients, one of them being the internal time consciousness, which has been conceptualized in phenomenological thinking (Husserl 1964). In addition, philosophy about understanding these different experiential aspects of time are also founded in phenomenology (Heidegger 1962; Husserl 1964; Ricoeur 1984).

All the superordinate themes: mentalization, nonspecific factors, and time—were interconnected by, and theoretically linked to, the overarching theme narrative. I wanted to explore this narrative perspective, and in addition use a narrative analysis of the patient stories, which the participants recounted during the interviews. I viewed this as a further development of the interpretative perspective and in accordance with Langdridge's view on the present and future development of phenomenologically informed qualitative methods.

Narrative Analysis

Phenomenological methods have always been interested in narratives, and much qualitative analysis based on phenomenological thought has been concerned with understanding people's experiences through the stories they tell. The theoretical interest in storytelling and narrative has grown since the 1980s (Bruner 1991; Polkinghorne 1988; Ricoeur 1984; Sarbin 1986; Schafer 1992; Spence 1982). It has led to the development of a narrative method in qualitative research and in psychology and psychotherapy. In phenomenologically informed narrative analysis, the subject is allowed to speak and the telling of stories is encouraged. There is no predetermined framework of meaning. The aim of the narrative analysis was to explore the narratives that GPs told about patients with common mental disorders or emotional problems. Through narratives the GPs recounted their specific handling of different cases. They became narrators of patient stories. This analysis shed light on the GPs as narrators and how this rendered visible their role or position. It investigated their understanding of their own role in the meeting with patients with emotional problems, which problems they considered relevant to focus on, and which actors were found in the stories.

I identified all the different stories the participants had told in the interviews and transferred them to a special document. These stories, or narratives, formed the basis of the specific narrative analysis.

According to Murray (2000), there are two broad phases in narrative analysis: first a descriptive and second an interpretive phase. A thorough reading of the transcribed narrative precedes both phases. In reading the narrative accounts, one familiarizes oneself with both their structure and their content. After this a short summary is prepared and the key features of the narrative are identified. The analysis can highlight key features and identify

narrative linkages that connect different parts. In reading across the summaries it is possible to get an idea of the main issues and narrative styles across different participants.

After the descriptive phase, the second step is to connect the narrative with the broader theoretical literature to interpret the stories. This phase of the analysis can lead to labeling certain accounts as being of a certain type that illustrates their theoretical content.

The participants generated different types of narratives about patients who came to them with mental disorders or emotional problems. Some participants told stories where the plot was in the patient's life-world, and the patient's life and life story were included as an important factor in the stories they told. These stories contained many actors; the context was the patient's life-world and the doctor merely facilitated delivering the story. Others told stories where the plot was formed by the relationship with the GP. In these stories the patient and the GP both became important actors and their relationship mirrored the patient's psychological problem. In these two types of stories, the patient received much agency and the stories held much power. In a third type of story, the focus was on the GP's perspective and experience. The GP demanded a specific behavior from the patient. In these stories the patient lost energy and both doctor and patient became powerless. A fourth type of story had a biomedical plot with the doctor as the main actor. The difference between participants was not related to any selection criteria and seemed to cover a description of different professional identities and different possible professional roles (Davidsen 2008b; Davidsen & Reventlow 2011).

Narrative analysis is not a uniform activity and different forms of narrative analysis have been described (Riessman 2008). Some forms of narrative analysis stress the interactionist perspective and the construction of narratives as a meaning-making process. This places narrative analysis in a more complexity-sensitive postmodern context of analysis methods than earlier anthropological methods, not only asking "what" is meant but also "how" meaning is assembled (Gubrium & Holstein 1997). Some narrative methods focus more on the micro-level conversational qualities of stories, others focus more on the macro-level and the way in which narratives allow and limit possible ways of living. Many variations in between exist.

Langdridge describes a critical narrative analysis (CNA) which involves the micro and macro levels and the possibility of interpreting the findings in relation to social theories, in this way applying a hermeneutics of suspicion (Langdridge 2007). In Ricoeur's work, this hermeneutics of suspicion is best exemplified by those investigations informed by psychoanalysis (Ricoeur 1970). Langdridge raises some objections to this form of hermeneutics of suspicion which he thinks involves "an archaeological trawl for prior causes" (Langdridge 2008, p. 1136) and a danger of projection of the analyst's subjectivity on to the text (Flowers & Langdridge 2007). Instead he advocates the use of an appropriate hermeneutics of suspicion that opens up new narrative identities by including an empathic understanding which is attuned with lived experience. In my interpretation, I used psychodynamic (psychoanalytically inspired) theories. However, newer psychodynamic theories include a relational aspect and an empathic understanding of the patients in the situational context. These theories are more teleological and less archaeological than original psychoanalytic theory. I applied this relational psychodynamic thought (Mitchell 2003) and psychotherapeutic theories about power and agency (Adler, Skalina & McAdams 2008; Williams & Levitt 2007). In addition, I used theories from other professional traditions, for example, anthropological, and interpreted the findings in relation to Kleinman's and Mattingly's theories (Kleinman 1988; Mattingly 1994). In this way parts of the narrative analysis can be considered a hermeneutics of suspicion, which was, however, operating dialectically with a basic empathic understanding.

In addition, I later applied a hermeneutic of suspicion to the material and reported these results in a separate paper (Davidsen 2010). In that article, I linked mentalization to Balint's original ideas about psychotherapy in general practice and found that psychological interventions that worked in general practice were founded on a psychodynamic thinking which was integrated in the overall work of the GP. I stated that to survive in its present form general practice would need to reintroduce the psychodynamic dimension and that a theoretical approach to psychological interventions was necessary. A theory could more appropriately be based on mentalization than on Balint's more imprecise theoretical formulations (Balint 1964; Davidsen 2010; Gask & Mcgrath 1989). That article can be seen as a hermeneutic of suspicion.

Conclusion

I have described how the phenomenological philosophy has developed and how concepts from this philosophy are used in phenomenological psychology and qualitative research. Phenomenological philosophy has undergone a development with existentialist, hermeneutic and later narrative ramifications. This is mirrored in the phenomenological analytic methods, which now form a family of methods increasingly informed by theories of understanding and interpretation. Moreover, in qualitative research a method can never be a recipe. There is always a demand for creativity and reflexivity (Malterud 2002; Stige, Malterud & Midgarden 2009) and for adapting the method to the specific research being done.

I used my own research as an example and have described how the phenomenological analytic approach developed in subsequent analytic steps throughout the project. These steps mirror the development in phenomenological philosophy, from Brentano to Husserl, Heidegger, Gadamer and Ricoeur, and the development in phenomenological qualitative analytic approaches, from the phenomenological analysis focusing exclusively on descriptions to methods acknowledging the need for interpretation and the subsequent development toward narrative analysis.

The original descriptive phenomenological method does acknowledge the grounded and embodied nature of the researcher and his or her situated position, which demands bracketing and reduction to abstain from the researcher's natural attitude and presuppositions. However, subsequent phenomenological methods, for example the IPA, have moved away from Husserl's thinking that through a process of repeated reductions it was possible to preclude one's preconceptions completely and free oneself from the natural attitude and the biases of everyday life. These methodological developments involve interpretation right from the beginning and build on Heidegger's notion of appearing and the detective work required to facilitate the interpretation of meaning (Smith et al. 2009). Furthermore, they build on Heidegger's and Gadamer's view of the process of understanding as constantly influenced by our own preconceptions and never being fully complete.

Interpretation can, however, be at different levels. According to Ricoeur, there are two fundamental forms of interpretation: interpretation of meaning re-collection and interpretation of suspicion (1970). The first form of interpretation is the empathic form, where an attempt is made to understand things as the participant understood them, to engage in his or her perspective. The latter form of interpretation is a more distanced form, where a theoretical perspective is applied and the interpretation of what one sees is through that lens. However, an intermediate form of interpretation between the hermeneutics of empathy and the hermeneutics of suspicion can be used, where one asks questions of the material without using a theory from without.

IPA often uses what could be called hermeneutics of questioning, or understanding. After the first descriptive analysis I used IPA in my study. This led to identifying different processes of understanding as different levels and dimensions of mentalization and uncovering the influence of different time dimensions. During this process I interpreted the results using some well-defined theoretical concepts. However, I still remained founded in the text. The concept of mentalization was introduced to describe and interpret different processes of understanding. Time has also been a subject of phenomenological thought and I subjected this concept to a hermeneutic of questioning and found that the results could be interpreted using concepts from phenomenological and psychotherapeutic thinking. In addition, time was linked to narrative, both through psychotherapeutic concepts (Arvanitakis & Kafka 2005; Eickhoff 2006) and Ricoeur's thinking (Ricoeur 1980, 1984).

All the concepts were connected in theoretical ways through the concept of narrative, which showed to be an overarching concept linking all the other concepts together. Mentalization always takes its point of departure in a narrative. Lack of time hampers mentalization and mentalization can be in different time frames (Allen et al. 2008). Time becomes human when it is told as a narrative (Ricoeur 1980, 1984). The capacity to mentalize is linked to understanding the meaning, also of the fragmented narrative (Fonagy et al. 2002). This understanding and mentalizing capacity depend on reflective functioning (Allen, Fonagy & Bateman 2008). Understanding the meaning of fragmented narratives has been called narrative reflective functioning by Mattingly (1998). Mentalization is operationalized as reflective functioning for research purposes (Fonagy et al. 2002). In this way mentalization and narrative can be seen as two different perspectives on the same phenomenon. Bruner said that narration is an activity rooted in a human need to read others' minds (Bruner 1991). Fonagy describes mentalization as the capacity to read others' minds (Fonagy & Target 1998). This means that Bruner describes narrative in the same way as Fonagy describes mentalization as the capacity "to read others' minds." Mentalization is considered a common factor in psychotherapy (Jorgensen 2004); it is story-creating and story-disintegrating (Holmes 2001), analogous with narrative therapy (McLeod 1997). Furthermore, time and narrative are combined in Ricoeur's concept of narrative time (Ricoeur 1984), inspired by Heidegger (Ricoeur 1980), and it demands mentalizing to understand the generated narrative.

The concept of mentalization is also rooted in phenomenological psychology (Fonagy et al. 2007), as it builds on the tradition in philosophy of mind established by Brentano (1995; Fonagy et al. 2002) and defined according to Dennett (1987) and others (e.g., Wollheim 1993) with roots in phenomenological philosophy and in opposition to the Cartesian doctrine (Fonagy et al. 2007). Furthermore, mentalization is linked to narrative through attachment theory (Fonagy et al. 2002; Fonagy & Target 1997; Holmes 2001).

I used the concepts of mentalization, time, and narrative to understand the preconditions for psychological interventions in general practice and for developing a useful theory about psychological interventions in general practice (Davidsen 2008b, 2010). In this theoretical approach, I viewed the findings and the participants' mentalizing approach from a psychodynamic perspective. This could be considered a hermeneutics of suspicion.

I was inspired by CNA in the narrative analysis. I showed that GPs' narrative style reflected the professional identity and therapeutic potential of the GP. This therapeutic potential could be described by applying a psychodynamic theory and the concept of mentalization. These theories could be used to formulate a theoretical approach to psychological problems in general practice and to decide which future educational developments should be promoted. CNA is informed by phenomenological hermeneutics, especially Ricoeur's philosophy. In CNA different components with different philosophical

backgrounds are combined practically into one analytic approach, still remaining grounded in the phenomenological tradition. The method introduces a critical element using aspects of social, or other theories to interpret the findings and as a hermeneutics of suspicion, not to uncover a hidden truth but to open up new possibilities (Langdrige 2008).

The attention to narrative is not new. The importance of the narrative has been acknowledged throughout the phenomenological journey. Husserl focused on rich description of narratives. Heidegger added the hermeneutic perspective with the importance of the interpretation of stories. Ricoeur took his point of departure in the phenomenological philosophy and, as Heidegger, developed it in a hermeneutic direction. Especially Ricoeur focused on stories and the function these stories had for generation of meaning and identity and he formulated these thoughts in an elaborate philosophy about narrative.

Different phenomenologically informed methods, for example, IPA, and narrative analysis (Murray 2000) include theoretical and interpretive elements in the analysis and combine the descriptive elements of phenomenology with an interpretive approach. This interpretation can be at different levels at different steps of the research process. By adding the interpretation of suspicion informed by applying a theory from without, one's interpretation is made more explicit. In addition, this development of some strands of narrative analysis, such as for example CNA, by subjecting the interpretation to critical social, or, I would add, other theory disproves some of the points of criticism against phenomenological thought (Langdrige 2007).

Basically, all these different phenomenologically inspired qualitative methods are based on the fundamental philosophical shift that took place at the start of the 20th century and influenced philosophical development in Europe and by the 1960s in the United States. Even though it developed in different directions, phenomenological thinking has formed the basis for modern philosophy. Different philosophical directions do not form completely different ways of thinking but could more appropriately be seen as using different languages and different perspectives (Carr 1987). The described methods are all founded in a conceptual logic, which implies that methodological descriptions can never give a recipe. They describe an approach, a way of thinking, an attitude, which implies profound reflexivity (Stige et al. 2009) and a resistance to fixed methods (Gadamer 1989).

There is no hard-and-fast boundary between these phenomenologically inspired methods. When described in this article, the methods appear as "ideal types." In reality there is much overlap between them. According to Heidegger, description is already interpretation; and according to Gadamer, all understanding is interpretation. One would therefore consider Giorgi's descriptive method to involve an unavoidable element of interpretation. In IPA the hermeneutics of questioning would be impossible without preconceptions determined by the theories one is inspired by and the concepts which develop from the analysis are informed by these theories as well. By applying an external theory, as in CNA, this theoretical approach is made more explicit. However, in practice, the analytic approaches form a continuum from the pure descriptive approach to the explicitly interpretive and most would agree that interpretation is unavoidable. Phenomenologically inspired methods are not in opposition to modern ways of thinking, even if some have accused phenomenologists of being too essentialist. Phenomenology represented a significant turning point in the history of the appearance-reality distinction and a conceptual shift in philosophy and started a discussion of problems which are also central problems of philosophy today. Thoughts in postmodern philosophy were already found in the later Husserl with his focus on intersubjectivity and lifeworld (Carr 1987). The idea of putting oneself philosophically in a position to hear and understand what is said is what Husserl calls the phenomenological standpoint, the attitude of *epoché*. The difference between the Husserlian and the hermeneutic position

may not in reality be so great, and researchers who advocate an interpretive approach also acknowledge the need for thorough description. However, following the development of the postmodern philosophies inspired by phenomenology, new developments in analytic methods, such as CNA, could represent an approach which could open up new possibilities.

References

- Adler, JM, Skalina, LM & McAdams, DP 2008, 'The narrative reconstruction of psychotherapy and psychological health', *Psychotherapy Research*, vol. 18, no. 6, pp. 719–34.
- Allen, JG & Fonagy, P 2006, *Handbook of mentalization-based treatment*, Wiley, Chichester, UK.
- Allen, JG, Fonagy, P & Bateman, A 2008, *Mentalizing in clinical practice*, American Psychiatric Publishing, Washington, DC.
- Arvanitakis, KI & Kafka, JS 2005, 'An update on time', *International Journal of Psychoanalysis*, vol. 86, no. 1, pp. 531–4.
- Balint, M 1964, *The doctor, his patient and the illness*, 2nd edn, Pitman Medical Publishing, London.
- Brentano, F 1995, *Psychology from an empirical standpoint*, Routledge, New York.
- Bruner, J 1991, 'The narrative construction of reality', *Critical Inquiry*, vol. 18, no. 1, pp. 1–21.
- Carr, D 1987, *Interpreting Husserl: critical and comparative studies*, Martinus Nijhoff, Dordrecht.
- Carter, SM & Little, M 2009, 'Justifying knowledge, justifying method, taking action: epistemologies, methodologies, and methods in qualitative research', *Qualitative Health Research*, vol. 17, no. 10, pp. 1316–28.
- Davidsen, A 2008a, 'Experiences of carrying out talking therapy in general practice: a qualitative interview study', *Patient Education and Counseling*, vol. 72, no. 2, pp. 268–75.
- 2008b, *Mentalization, narrative and time – a qualitative study about psychological interventions in general practice*, Månedsskrift for Praktisk Lægegering, Copenhagen.
- Davidsen, A 2010, 'To survive, general practice needs a reintroduction of the psychodynamic dimension', *Psychodynamic Practice*, vol. 16, no. 4, pp. 451–61.
- Davidsen, A & Reventlow, S 2010, 'It takes some time to get into the rhythm – and to slow the flow of thought': a qualitative study about experience of time and narrative in psychological interventions in general practice', *Health*, vol. 14, no. 4, pp. 348–68.
- Davidsen, AS & Reventlow, S 2011, 'Narratives about patients with psychological problems illustrate different professional roles among general practitioners', *Journal of Health Psychology*, vol. 16, no. 6, pp. 959–68.
- Dennett, DC 1987, *The intentional stance*, MIT Press, London.
- Dreyfus, HL 1991, *Being-in-the-world. A commentary on Heidegger's being and time*, The MIT Press, Cambridge, MA.
- Eickhoff, F-W 2006, 'On Nachträglichkeit: the modernity of an old concept', *International Journal of Psychoanalysis*, vol. 87, pp. 1453–69.
- Fancher, RE 1977, 'Brentanos psychology from an empirical standpoint and Freud's early metapsychology', *Journal of the History of the Behavioral Sciences*, vol. 13, no. 3, pp. 207–27.
- Figal, G 2007, 'Gadamer als Phänomenologe', *Phaenomenologische Forschungen/Phenomenological Studies*, pp. 95–107.
- Figal, G 2009, *The Heidegger reader*, Indiana University Press, Bloomington.
- Flowers, P & Langdrige, D 2007, 'Offending the other: deconstructing narratives of deviance and pathology', *British Journal of Social Psychology*, vol. 46, no. 3, pp. 679–90.
- Fonagy, P, Gergely, G, Jurist, EL & Target, M 2002, *Affect regulation, mentalization, and the development of the self*, Other Press, New York.
- Fonagy, P, Gergely, G & Target, M 2007, 'The parent-infant dyad and the construction of the subjective self', *Journal of Child Psychology and Psychiatry*, vol. 48, no. 3–4, pp. 288–328.
- Fonagy, P & Target, M 1997, 'Attachment and reflective function: their role in self-organization', *Development and Psychopathology*, vol. 9, no. 4, pp. 679–700.

- Fonagy, P & Target, M 1998, 'Mentalization and the changing aims of child psychoanalysis', *Psychoanalytic Dialogues*, vol. 8, no. 1, pp. 87–114.
- Gadamer, H 1983, *Lob der Theorie*, Suhrkamp Verlag, Frankfurt am Main.
- Gadamer, H 1989, *Truth and method*, 2nd edn, Stagbooks, London.
- Gask, L & Mcgrath, G 1989, 'Psychotherapy and general practice', *British Journal of Psychiatry*, vol. 154, pp. 445–53.
- Giorgi, A 1985, 'Sketch of a psychological phenomenological method', in A Giorgi (ed.), *Phenomenology and psychological research*, Duquesne University Press, Pittsburgh, PA, pp. 8–22.
- Giorgi, A 1992, 'Description versus interpretation – competing alternative strategies for qualitative research', *Journal of Phenomenological Psychology*, vol. 23, no. 2, pp. 119–35.
- Giorgi, A 1997, 'The theory, practice and evaluation of the phenomenological method as a qualitative research procedure', *Journal of Phenomenological Psychology*, vol. 28, no. 2, pp. 235–61.
- Giorgi, A & Giorgi, B 2003, 'Phenomenology', in JA Smith (ed.), *Qualitative psychology*, Sage, London, pp. 25–50.
- Gubrium, JF & Holstein, JA 1997, *The new language of qualitative method*, Oxford University Press, Oxford.
- Heidegger, M 1962, *Being and time*, Blackwell, Oxford.
- Holmes, J 2001, *The search for the secure base. Attachment theory and psychotherapy*, Brunner-Routledge, Hove and New York.
- Hoshmand, LT 2005, 'Narratology, cultural psychology, and counseling research', *Journal of Counseling Psychology*, vol. 52, no. 2, pp. 178–86.
- Husserl, E 1964, *The phenomenology of internal time consciousness*, Indiana University Press, Bloomington.
- Husserl, E 1982, *Logical investigations* (translated from the second German edn), Routledge & Kegan Paul, London.
- Husserl, E 1983, *Ideas pertaining to pure phenomenology and to a phenomenological philosophy*, Kluwer, Dordrecht.
- Ihde, D 1971, *Hermeneutic phenomenology. The philosophy of Paul Ricoeur*, Northwestern University Press, Evanston, IL.
- Järvinen, M & Mik-Meyer, N 2005, *Kvalitative metoder i et interaktionistisk perspektiv*, Hans Reitzel, Copenhagen.
- Jorgensen, CR 2004, 'Active ingredients in individual psychotherapy – searching for common factors', *Psychoanalytic Psychology*, vol. 21, no. 4, pp. 516–40.
- Kemp, P 1996, *Tid og fortælling. Introduktion til Paul Ricoeur*, Aarhus Universitetsforlag, Aarhus.
- Kleinman, A 1988, *The illness narrative. Suffering, healing, and the human condition*, Basic Books, New York.
- Langdridge, D 2007, *Phenomenological psychology. Theory, research and method*, Pearson Education Limited, Harlow.
- Langdridge, D 2008, 'Phenomenology and critical social psychology: directions and debates in theory and research', *Social and Personality Psychology Compass*, vol. 2, no. 3, pp. 1126–42.
- Large, W 2008, *Heidegger's being and time*, Indiana University Press, Bloomington.
- Lincoln, YS & Guba, EG 1985, *Naturalistic inquiry*, Sage, Beverly Hills, CA.
- Linge, DE 1977, 'Editor's introduction', in DE Linge (ed.), *Philosophical hermeneutics. Hans-Georg Gadamer*, University of California Press, Berkeley, pp. xi–lviii.
- Malterud, K 2002, 'Reflexivity and metapositions: strategies for appraisal of clinical evidence', *Journal of Evaluation in Clinical Practice*, vol. 8, no. 2, pp. 121–6.
- Malterud, K 2003, *Kvalitative metoder i medisinsk forskning - en innføring*, 2nd edn, Universitetsforlaget, Oslo.
- Malterud, K 2005, 'The art and science of clinical knowledge: evidence beyond measures and numbers', *The Lancet*, vol. 358, no. 9279, pp. 483–8.
- Mattingly, C 1994, 'The concept of therapeutic emplotment', *Social Science & Medicine*, vol. 38, no. 6, pp. 811–22.
- Mattingly, C 1998, *Healing dramas and clinical plots*, Cambridge University Press, Cambridge, UK.

- McIntyre, R & Smith, DW 1989, 'Theory of intentionality', in JN Mohanty & WR McKenna (eds.), *Husserl's phenomenology: a textbook*, Center for Advanced Research in Phenomenology and University Press of America, Washington, DC, pp. 147–79.
- McLeod, J 1997, *Narrative and psychotherapy*, Sage, London.
- Merleau-Ponty, M 1964, *Signs*, Northwestern University Press, Evanston, IL.
- Mitchell, SA 2003, *Relationality: from attachment to intersubjectivity*, Analytic Press, Hillsdale.
- Moran, D & Mooney, T 2002, *The phenomenology reader*, Routledge, Oxon.
- Murray, M 2000, 'Levels of narrative analysis in health psychology', *Journal of Health Psychology*, vol. 53, no. 3, pp. 337–47.
- Natanson, M 1974, *Phenomenology, role and reason*, Charles C. Thomas, Springfield, IL.
- Patton, MQ 2002, *Qualitative research & evaluation methods*, 3rd edn, Sage, London.
- Polkinghorne, DE 1988, *Narrative knowing and the human sciences*, State University of New York Press, Albany.
- Polkinghorne, DE 2000, 'Psychological inquiry and the pragmatic and hermeneutic traditions', *Theory & Psychology*, vol. 10, no. 4, pp. 453–79.
- Ricoeur, P 1970, *Freud and philosophy. An essay on interpretation*, Yale University Press, New Haven, CT.
- Ricoeur, P 1980, 'Narrative time', *Critical Inquiry*, vol. 7, no. 1, pp. 169–90.
- Ricoeur, P 1981, *Hermeneutics and the human sciences*, Cambridge University Press, Cambridge, UK.
- Ricoeur, P 1984, *Time and narrative*, University of Chicago Press, Chicago.
- Riessman, CK 2008, *Narrative methods for the human sciences*, Sage, Los Angeles.
- Sarbin, TR 1986, *Narrative psychology, the storied nature of human conduct*, Praeger, New York.
- Schafer, R 1992, *Retelling a life: narration and dialogue in psychoanalysis*, Basic Books, New York.
- Schutz, A 1967, *The phenomenology of the social world*, Heinemann Educational Books, London.
- Smith, JA 1996, 'Beyond the divide between cognition and discourse: using interpretative phenomenological analysis in health psychology', *Psychology and Health*, vol. 11, no. 2, pp. 261–71.
- Smith, JA, Flowers, P & Larkin, M 2009, *Interpretative phenomenological analysis. Theory, method and research*, Sage, London.
- Smith, JA, Jarman, M & Osborn, M 1999, 'Doing interpretative phenomenological analysis', in M Murray & K Chamberlain (eds.), *Qualitative health psychology*, Sage, London, pp. 218–40.
- Smith, JA & Osborn, M 2003, 'Interpretative phenomenological analysis', in JA Smith (ed.), *Qualitative psychology*, Sage, London, pp. 51–80.
- Søndergaard, DM 2002, 'Poststructuralist approaches to empirical analysis', *International Journal of Qualitative Studies in Education*, vol. 15, no. 2, pp. 187–204.
- Spence, DP 1982, *Narrative truth and historical truth. Meaning and interpretation in psychoanalysis*, Norton, New York.
- Spiegelberg, H 1978, *The phenomenological movement. A historical introduction*, 2nd edn, Martinus Nijhoff, The Hague.
- Stige, B, Malterud, K & Midtgarden, T 2009, 'Toward an agenda for evaluation of qualitative research', *Qualitative Health Research*, vol. 19, no. 10, pp. 1504–16.
- Stolorow, RD 2006, 'Heidegger's investigative method - in being and time', *Psychoanalytic Psychology*, vol. 23, no. 3, pp. 594–602.
- Toombs, KS 1992, *The meaning of illness. A phenomenological account of the different perspectives of physician and patient*, Kluwer, Dordrecht.
- Vanhoozer, KJ 1991, 'Philosophical antecedents to Ricoeur's time and narrative', in D Wood (ed.), *On Paul Ricoeur. Narrative and interpretation*, Routledge, London, pp. 34–54.
- Williams, DC & Levitt, HM 2007, 'Principles for facilitating agency in psychotherapy', *Psychotherapy Research*, vol. 17, no. 1, pp. 66–82.
- Wollheim, R 1993, *The mind and its depths*, Harvard University Press, Cambridge, MA.
- Zahavi, D 2003, *Husserl's phenomenology*, Stanford University Press, Stanford, CT.

About the Author

Annette Sofie Davidsen is associate professor at the Research Unit for General Practice and Section of General Practice, University of Copenhagen. She is a former general practitioner (GP), trained as a psychotherapist and supervisor. The main focus of her research has been on GPs' process of understanding patients with emotional and psychological problems, not only in arranged talking therapy sessions but also in normal everyday consultations. She has worked with developing an appropriate theoretical framework for this part of the GP's work. Furthermore, she has been dealing with method development in qualitative research and the theoretical foundation for qualitative methods. Presently she is carrying out a project, in collaboration with language psychologists, to study how GPs and psychiatrists respectively engage in the process of understanding patients with depression and how these two types of doctors understand and conceptualize depression.