Interpretive phenomenological analysis applied to healthcare research

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In the last *Research Made Simple* Series article, we briefly outlined the main phenomenological research approaches in relation to investigating healthcare phenomena including Interpretative Phenomenological Analysis (IPA). IPA was originally developed as a method to undertake experiential research in psychology and has gained prominence across health and social sciences as a way to understand and interpret topics which are complex and emotionally laden, such as illness experiences. In this article, we detail in more depth, the philosophical and methodological nuances of IPA.

Overview of IPA

The aim of IPA is to uncover what a lived experience means to the individual through a process of in depth reflective inquiry. IPA draws on phenomenological thinking, with the purpose to return ‘to the things themselves’ (p 168). However, IPA also acknowledges that we are each influenced by the worlds in which we live in and the experiences we encounter. Therefore, IPA is an interpretative process between the researcher and researched, influenced predominantly by Heidegger’s interpretive phenomenology, hermeneutics and idiology, summarised in table 1.

IPA is particularly useful for understanding under researched phenomena or perspectives. Unlike other phenomenological research approaches, IPA offers direction on how to approach a phenomena of interest with guidance for sampling, data collection and analysis. Table 2 details the prescriptive methods of IPA.

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<tr>
<th>Purpose</th>
<th>Phenomenology</th>
<th>Hermeneutics</th>
<th>Idiology</th>
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<tr>
<td><strong>Dominant Scholars</strong></td>
<td><strong>Heidegger:</strong> we as researchers are part of the research. Schleiermacher: understanding involves grammatical and psychological interpretation. Merleau-Ponty: interpretation comes from our own perspective/being in the world. Sartre: we are always in a state of becoming.</td>
<td><strong>To guide the interpretation of the text of individual accounts.</strong></td>
<td><strong>Identify and value the perspectives of individuals in context.</strong></td>
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<td><strong>Purpose</strong></td>
<td><strong>Describe the lived experience without assigning meaning.</strong></td>
<td><strong>Reveal and interpret the meaning of the lived experience.</strong></td>
<td><strong>Interpretation becomes an art; through detailed and meaningful analysis participants accounts can be appreciated providing insights into their lived worlds.</strong></td>
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The role of the researcher in IPA

The phenomenological and hermeneutic tenets of IPA (table 1), position the researcher as an integral part of the research process (table 2). While IPA researchers view the participant as the experiential expert, they acknowledge that experience cannot be simply revealed. Rather, a process of rich engagement and interpretation involving both the researcher and researched is required. This engagement is commonly referred to as the double hermeneutic approach to analysis, whereby the researcher seeks to make sense of the participant(s) making sense of their world(s). To assist this meaning-making process, IPA calls on researchers to engage with what is known as the hermeneutic circle (figure 1). The hermeneutic circle can be thought of as an iterative process involving a moving between the smaller units of meaning and the larger units of meaning, or between the parts and the whole of the investigated phenomena or lived experience.

How the researcher’s prior conceptions interact with new experiential encounters is of significance to IPA. Heidegger emphasised that rather than bracketing our prior conceptions prior to engaging with participants and

Table 1  Philosophical influences underpinning Interpretative Phenomenological Analysis (IPA)

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1. *Ongoing reflecting on the phenomenon itself rather than exploring how experiences can fit with predefined criteria.*
2. *Bracketing, where each previous case is put to one side before the researcher moves on to read and analyse the next transcript.*
1. *The interpretation of an individual’s meaning making is considered in light of the researcher’s perspective, at that time.*
2. *Researchers observe and empathise but view phenomena from their own perspective or being in the world; the researcher cannot fully share the experiences of others.*
3. *The narrative is developed through interpretation.*
1. *Case by case, systematic analysis.*
the double hermeneutic dynamic that exist within the researcher–participant relationship. The double hermeneutic dynamic central to IPA is also of relevance when considering the beliefs, thoughts and attitudes that may interplay between the researcher and researched. For example, commonalities and disparities between the participant/s and researcher may reveal themselves as the experiential account is explored and subsequently influence the analysis of the account/s. Likewise, pre-existing roles may influence perceptions, particularly if participant/s and researcher were familiar with one another prior to engaging in research activity. This can be particularly relevant if the researcher has a dual role of researcher and health professional. Engaging in the art of reflexivity allows researchers to critically reflect on their own beliefs, thoughts and attitudes that may interplay between the researcher and researched. For example, commonalities and disparities between the participant/s and researcher may reveal themselves as the experiential account is explored and subsequently influence the analysis of the account/s. Likewise, pre-existing roles may influence perceptions, particularly if participant/s and researcher were familiar with one another prior to engaging in research activity. This can be particularly relevant if the researcher has a dual role of researcher and health professional. Engaging in the art of reflexivity allows researchers to critically reflect on their own beliefs, thoughts and attitudes that may interplay between the researcher and researched. For example, commonalities and disparities between the participant/s and researcher may reveal themselves as the experiential account is explored and subsequently influence the analysis of the account/s. Likewise, pre-existing roles may influence perceptions, particularly if participant/s and researcher were familiar with one another prior to engaging in research activity. This can be particularly relevant if the researcher has a dual role of researcher and health professional.
Evid Based Nurs January 2019 | volume 22 | number 1 | 9

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ivity facilitates IPA researchers to strengthen the adequacy and ethical quality of their research, not least through acknowledging their own biographies and prior conceptions, and the manner in which they influence the research process.7

**Good practice in IPA**

The hermeneutic underpinnings of IPA offer researchers the opportunity to go beyond surface-level description of findings, to offer insightful interpretative accounts of the lived experiences of participants. Central to credibility in qualitative research is confidence, or trustworthiness, in that the findings reflect the experiences of participants in relation to the phenomena being explored.8 A robust IPA study is able to offer an enlightening interpretative analysis that is supported by a transparent evidence trail that maintains a clear connection between the data and interpretation.3 This is achieved through an active engagement with the hermeneutic circle, ensuring both a substantial voice is given to the experiences of the participants and the researchers’ interpretations of their narratives. In addition, findings should be presented in a manner that both highlights the key shared themes while also presenting the idiographic uniqueness of the individual lived experience.3

In summary, IPA is a meticulously idiographic and hermeneutic phenomenological approach that seeks to illuminate the way individuals make sense of their lived experiences. Engaging in this method of qualitative enquiry can facilitate researchers to construct insightful interpretative accounts of experiences that can enrich understanding and bring to light prominent matters within healthcare.

Competing interests None declared.

Patient consent Not required.

Provenance and peer review Not commissioned; internally peer reviewed.

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