

*Article*

## **Hermeneutics as Research Approach: A Reappraisal**

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### **Abstract**

Hermeneutics as a research practice, if it is to remain true to its philosophical origins, involves reappraisal and reinterpretation in relation to its cultural contexts. Among the threads of connection affecting hermeneutic practice are the exigencies of academic institutions and evolving cross-cultural perspectives. This article addresses these issues from the perspective of exploring hermeneutics for a research study of nurses' relational practice on acute care mental health units from Buddhist perspectives. The exploration is, as hermeneutics must be, both a review and a refashioning, a looking back in order to look forward.

**Keywords:** hermeneutics, research, culture, Buddhism, nursing

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## Introduction

Hermeneutic philosophy recognizes the historicity of culture and, thus, of its own insights within cultural contexts. Hermeneutics is always in dialogue with its own history. In the past 25 years, one branch of this history has been the development of hermeneutics as a valuable approach to research in disciplines that entail practices of human relating, such as nursing and education. I write from within this particular branch of the hermeneutic tradition, in an exchange with the tradition as I apply it to a research question about understandings of the nurse-patient relationship in acute care mental health settings. I believe that hermeneutics offers a unique capacity to cut into the complexity of this phenomenon in its historical, political, ethical, and relational complexities. To complicate matters further, I am bringing to the investigation perspectives gained from the study and practice of Zen Buddhism, which I believe hold fresh insights into the topic and can contribute new ways of seeing for nursing practice. At the same time, because I have worked primarily in and around Gadamerian hermeneutics, I have become aware of the sands of history shifting under my feet—the insight of impermanence, in Buddhist terms. The discussion that follows is part review and part questioning of the particular historical and cultural landscape that I am discovering as I cultivate my skills as a hermeneutic researcher in nursing. In this article, I re-explore the historical, philosophical, and methodological underpinnings of the hermeneutic tradition as applied to research in nursing. I consider some of the complexities engendered by working with interpretive research in settings that start from positivist assumptions, and I begin to open up the relevance of hermeneutics to cross-cultural questions.

Every attempt to undertake a research study in the name of philosophical hermeneutics is beset with difficulty from the start. Gadamer (1960/2004) wrote in his introduction to *Truth and Method* that “the hermeneutics developed here is not . . . a methodology of the human sciences” (p. xxii). The would-be hermeneutic researcher, however, operates in a world in which academic institutions, ethics boards, and funding bodies all want to know the method and to have a satisfactory account of the method. Elsewhere, Gadamer (2007) outlined more of an idea of how philosophical hermeneutics might be applied as a mode of research inquiry:

the practical science directed towards this practical knowledge is neither theoretical science in the style of mathematics nor expert know-how in the sense of a knowledgeable mastery of operational procedures (*poiesis*), but a unique sort of science. It must arise from practice itself and . . . be related back to practice. (p. 231)

Researchers have to work out the methodological implications of philosophical hermeneutics for nursing research in this arising from practice and returning to practice. This working-out is not a reinstatement of method, a codification, or a resolution of a problem, but a process of careful explication and exploration of a complex question. The question is how to carry out research in nursing using a philosophical hermeneutic approach within the exigencies of academic structures, while maintaining integrity of philosophy and process. The thread of understanding that will guide this exploration is the appeal to practice, which speaks to the clinical practice of nurses as the point of doing research at all and of research as itself a practice.

### The Historical, Philosophical, and Methodological Underpinnings of the Tradition

#### Historical Underpinnings

Sensitivity to history is part of hermeneutic consciousness, in our understanding of ourselves as being within history and shaped by history (Gadamer, 1960/2004). Any discussion of the historical underpinnings of a research endeavour based upon philosophical hermeneutics must

therefore attend to the history of the approach and to the history underlying the singular inquiry. This awareness that ways of thinking originate from somewhere is in itself one marker of the difference between hermeneutics and scientific method; the latter lays claim to a technical objectivity which is, if not strictly ahistorical, then heir to a progressivist view of history in which the less technologically advanced past is never as good as the present, which is in the shadow of an assumed better future. In this linear view, history is not quite bunk, as Henry Ford remarked, but is a matter of indifference rather than significance.

Gadamer (1960/2004) began his historical investigation of hermeneutics with Luther (though, of course, locating it within the western philosophical tradition all the way back to Plato and Aristotle) and followed its development as an explicit issue in philosophy through the works of Schleiermacher and Dilthey. For the present discussion, however, if we keep our eyes on research practices, the key figure is Husserl, who Grondin (2003) described as a “liberator” who tried to “free thought from pre-established methodological concepts” (p. 73). Husserl did this through a critique of the scientific claim to make objective observations of the world. He posited the idea of “intentionality” (Grondin, p. 73), meaning that we are already implicated in the world through our consciousness. Husserl coined the term *Lebenswelt*, or life-world, to convey the experience of being in the world “that represents the pregiven basis of all experience” and “the whole in which we live as historical creatures” (Gadamer, 1960/2004, p. 239). As a nurse researcher, I can trace back to Husserl the legitimacy of choosing a topic of lived nursing practice as the subject of nursing research. Husserl, however, supposed that it was possible, at least to some extent, to step out of the life-world in the name of an observing, analytic ego and to discover the essential components of a phenomenon (Caputo, 1987). These suppositions continue to operate in phenomenological research through the methodological steps of description, bracketing, and the delineation of essences (Dahlberg, 2006; Gearing, 2004; van Manen, 1997). Heidegger, who was a student of Husserl’s, argued that the idea of intentionality implied a fully ontological immersion in the world such that one could not, as it were, pull oneself up by one’s own hair to take a look around. “Essentially, the person exists only in the performance of intentional acts, and is therefore essentially *not* an object” (Heidegger, 1927/1962, p. 73). For Heidegger, the consequence of this immersion in the world is already to be committed to understanding. Caputo (1987) put it that “we understand as we do because we exist as we do” (p. 61). This does not, however, mean that understanding and being are stuck in a tautology since “as understanding, Dasein projects its Being upon possibilities” (Heidegger, 1927/1962, p. 188). For Heidegger, it was “the working-out of possibilities projected in understanding” (p. 189) that constituted interpretation. Gadamer, who was a student and colleague of Heidegger’s, developed this mode of interpretation in his philosophical hermeneutics.

Having come to the threshold of the philosophical underpinnings of the research approach, I will postpone a discussion of Gadamer’s hermeneutics for the next section. First, I want to emphasize the implication of the concept of *Lebenswelt* for scientific method. An ontological basis of understanding troubles the separation of subject and object upon which scientific method traditionally depends. The significance of this point for the context in which I am writing this article is that the language of method is part of the vocabulary of academic research, at least in nursing. The template for candidacy questions from the Faculty of Nursing at the University of Calgary, which constitutes the original context for this paper, requires a question that addresses “the research method and data analysis/management strategy chosen for the thesis” (Faculty of Nursing, 2008). We may recognize this usage of the word “method” as a language-game (Wittgenstein, 1953/2009) belonging to the university. We may, therefore, pass over it as shorthand for whatever form of words we may prefer, such as research approach, but we may also heed Wittgenstein’s observation that “we don’t notice the enormous variety of all the everyday language-games, because the clothing of our language makes them all alike” (p. 236). Indeed,

etymologically the word method goes back to the Greek *méthodos*, meaning “pursuit, following after” (Barnhart, 2006, p. 657) and is derived from the concrete image of a road, a way. The *Canadian Oxford Dictionary* (Barber, 1998) defines method as “a mode of procedure; a defined or systematic way of doing a thing” (p. 912). These readings of method are surely broad enough to include philosophical hermeneutics as a defined way of doing research, but to do so would not only tend to conceal the historical difference outlined above, but also blur a necessary perception of the hegemonic place of scientific method in our society and its institutions of higher education. History is intimately bound up with identity, as the eminent Canadian historian Margaret MacMillan (2008) has pointed out. We recognize where we stand in part through our understandings of where we have come from; this recognition also enables us to begin to shape possibilities towards the future. According to Caputo (1987), universities define “what is or is not ‘rational discourse’” (p. 230) through their apparatuses of discourse but are themselves subject to “a social system which has increasingly technical and pragmatic expectations of the university” (p. 230). From a critical hermeneutic perspective in nursing, Allen (1995, 2006) drew attention to the privileges of professionalism within the educational and healthcare systems. This is not to say that we should excise the term method from our vocabulary or that we can work within existing institutions according to some pure alternative non-method. Our work as researchers has to be undertaken with the acknowledgement of the complexity of history, while framing possibilities for purposeful, useful, and just investigation.

### **Philosophical Underpinnings**

Three significant elements in Gadamer’s philosophical hermeneutics that nurse researchers use in their practice are reflexivity, dialogue, and, of course, interpretation. Reflexivity in this tradition picks up from Heidegger’s (1927/1962) discussion of the circle of understanding, which is “the expression of the existential *fore-structure* of Dasein itself” (p. 195). Gadamer (1960/2004) expanded upon the interpretive effect of this hermeneutic circle to draw attention to the dynamic between the thing under consideration (where he refers to literary texts, we would think of a topic) and the fore-structures of understanding that are already part of our being-in-the-world. Gadamer wrote that “working out this fore-projection, which is constantly revised in terms of what emerges as he penetrates into the meaning, is understanding what is there” (p. 269) and that “this constant process of new projection constitutes the movement of understanding and interpretation” (p. 269). A possible refiguring of the image of the circle sees it as a spiral to convey the movement of understanding that can never quite return to its previous position.

Researchers in other traditions have taken up the idea of reflexivity in different ways. Ahern (1999), for example, argued for a reflexive bracketing. She proposed that fore-understandings enable us to frame an issue, but maintained that it is still possible to bracket, or temporarily suspend, “the idiosyncrasies of researchers” (p. 407). Koch (1996) outlined several approaches to reflexivity in different research approaches. These are variations on the idea of a self-positioning in historical, cultural, political, or gender terms. This self-consciousness of identity, which is, as mentioned above, thoroughly historical, is part of the work of hermeneutic research. In Gadamerian (1960/2004) terms, it is part of working out fore-understandings in the light of “historically effected consciousness” (p. 336). However, this kind of reflexivity also carries the risk of reductionism when it is too tied to some particular ideological perspective, whereas the dynamic of the reflexive hermeneutic circle allows for, indeed expects, the iterative questioning and shifting of one’s assumptions.

One of Gadamer’s central themes is dialogue, since the engagement with the address of the other permits the hermeneutic circle to move. In the encounter with another, our presuppositions are thrown into relief, exposed in new ways, and made available for revision (if we allow them).

Davey (2006) wrote that, “the result of dialogic encounter should be that *both* parties retire thinking in different and unexpected ways about criticisms made and received” (p. 19). I would qualify the word “criticisms” here as being only one mode of being able to shift in understanding; the introduction of new or unfamiliar ways of looking at something would be a more general description for what might emerge in dialogue. One of the important points about dialogue when considering the philosophical underpinnings for research is that it so closely pertains to the actual practice of interviewing in research. Here again, the idea of practice is important, both as a description of what to do and, more importantly, as an attitude of continual opening into possibility. Gadamer (1960/2004) addressed this sense of practice in his discussion in *Truth and Method* of dialogue as lived dialectic:

As the art of asking questions, dialectic proves its value because only the person who knows how to ask questions is able to persist in his questioning, which involves being able to preserve his orientation towards openness. The art of questioning is the art of questioning ever further – i.e., the art of thinking. It is called dialectic because it is the art of conducting a real dialogue. (p. 360)

Gadamer, at another point in *Truth and Method*, distinguished “a therapeutic conversation” from a “true conversation” (p. 387) on the grounds that the former is governed by a particular intent and, implicitly, assumes unequal or at least different roles between participants. There is a correlate here with the research interview as a conversation that by its nature has certain assumptions about roles and purposes. As a researcher, or as a clinician, I take this as an important caution rather than an interdiction. Indeed, in an address to psychiatrists in San Francisco in 1989, Gadamer (1996) emphasized the commonality rather than the contrast between hermeneutic philosophical work and clinical work. He noted that, “if philosophy is an attempt to understand the incomprehensible, an attempt to take up the major human questions” then “psychiatrists will immediately recognize how particularly exposed they are to such unexplained phenomena” (p. 167). This speaks to me, too, as a mental health nurse. I would argue that since Gadamer gave that address, the increasing dominance of the biomedical in psychiatry has served to try to reduce that exposure to the unexplained. That it persists nonetheless in the endlessly variegated responses to the world of those suffering with mental illness only makes it all the more urgent that nurses continue to locate their work on precisely this ground of the unexplained and the uncomfortable. Given this, the differentiation of how we practice with hermeneutic conversation under different circumstances only underlines the significance of reflexivity because it invokes the social structures standing behind the clinician or researcher as such. It is the responsibility of the nurse as either clinician or researcher to enter into an interview/conversation with an awareness of her or his place and role in relation to the other in that setting.

The third element of philosophical hermeneutics that is so crucial to research is interpretation. Interpretive perspectives in qualitative research include structuralism, phenomenology, and feminism, as well as hermeneutics (Denzin & Lincoln, 2008). What is distinctive about philosophical hermeneutics, however, is the ontological grounding of interpretation that calls into play, in Gadamer’s (1960/2004) terms, our prejudices and historically-effected consciousness. By the fact of our being-in-the-world, we are already seeing the world *as* something – we have “an angle” (Caputo, 2006, p. 57). Our task as researchers is to align this angle (which is already partly-revealed and partly-hidden in the choice of topic) with the appropriate cultural resources to enable us to “see what is going on” (Caputo, p. 57). In a way it sounds banal to say “I want to see what is going on” when a mental health nurse on an acute unit meets a patient. The challenge of research inspired by philosophical hermeneutics is to articulate a meaningful and useful alignment of elements among the infinite possibilities of individual experiences and cultural and historical interconnections in which the topic lives.

Interpretation in the hermeneutic tradition also draws on a profound sense of the place of language as mediating our being-in-the-world. Gadamer (1960/2004) wrote that, “the light that causes everything to emerge in such a way that it is evident and comprehensible in itself is the light of the word” (p. 478). This view of language as inherently interpretive, aesthetic, and self-expressive presses back against the objectification of words as entities to be counted and means that even forms of thematic analysis have to be approached with care. For philosophical hermeneutics, interpretation is linguistic and language is interpretive.

### **Methodological Underpinnings**

The question of the methodological underpinnings for research that breathes philosophical hermeneutics moves the discussion back towards that disputed territory of method which is inscribed in the map of the modern university. The *Canadian Oxford Dictionary* (Barber, 1998) defines methodology as “a body of methods” and as “the branch of knowledge that deals with method” (p. 912). The qualitative research literature also allows for some latitude. Laverty (2003) argued that methodology, unlike a prescriptive method, is a “creative approach to understanding” (p. 16) that can draw on various approaches. Carter and Little (2007) placed methodology as the foundation of method, as the justification for techniques and procedures of research. For Koch (1996), methodology “describes the process by which insights about the world and the human condition are generated, interpreted and communicated” (p. 174). These loosening around method certainly create space for ways of conducting research that do not fit the scientific paradigm and, even in the case of philosophical hermeneutics, explicitly question its hegemony. The trouble with hegemonies is that we live under them whether we like it or not – not only under but also in them. It is good hermeneutic practice to keep these ambiguities in play. Derrida (2008) wrote of one boundary, the limit between animal and human, that his purpose in discussing and challenging this duality was “certainly not in effacing the limit, but in multiplying its figures, in complicating, thickening, delinearizing, folding, and dividing the line precisely by making it increase and multiply” (p. 29). My intention, then, is not to elide or ignore the limits of method/methodology or methodology/process (and so on) but rather to maintain alertness around such limits, even as I endeavour to follow the ways of philosophical hermeneutics qua research.

From the perspective of nursing research, philosophical hermeneutics is one way of addressing the need to answer certain kinds of questions. Qualitative research is a response to a basic curiosity about human experience that is not satisfied by results of inquiry based upon Cartesian assumptions of objectivity and isolated phenomena. In nursing, Carper’s (1978/2009) description of four ways of knowing, which include the aesthetic, personal, ethical, and empiric/scientific, has remained an important reference point for establishing the pertinence of qualitative research in nursing. Over time, qualitative research has broadened in its range of approaches, which at least partly reflects a developing awareness of being in the shadow of quantitative research (D. Jardine, personal communication, May 2008). Grounded theory, for example, has a schematic approach that involves treating words as data elements that can be grouped into themes so that the number of incidences of words, phrases, and themes acts as a register of the value of a concept (Streubert-Speziale & Rinaldi-Carpenter, 2007). Polkinghorne (2005) traced the expansion of qualitative research to include more interpretive approaches with a concomitant shift from a focus on methods and training in techniques towards practice and cultivation of a way of seeing. This interest in the stance and presence of the researcher in the research process, over and above technique, is one of the methodological linkages between philosophy and process in hermeneutic research. For Jardine (1992) writing from the point of view of research, and Davey (2006) from the point of view of philosophy, philosophical hermeneutics is a practice. The qualities that make it a practice are its dialogic nature and dynamic of discovery, in which the researcher’s understanding moves with a deepening sense of the interconnectivity of the topic. It is this

dynamism, unforeseeable in its specifics, that is so different from a prescriptive method. Practice, however, always has its own obligations and ways of doing something. Philosophical hermeneutic research has its “critical procedures” with a “clear style and a discernible signature” (Davey, 2006, p. 18). These procedures generally include the address of a topic, collection of pertinent data, and then an interpretive analysis of the topic (Moules, 2002). These generalized procedures all involve reflexivity and decision-making on the part of the researcher. There is a dialectic of form and formlessness that is only ever apparently resolved in a finished research report or thesis, provided that the researcher has maintained the integrity of the approach.

The address of the topic suggests a question that is brought to awareness by an experience rather than by a rational process of decision-making or an external suggestion (Jardine, 2003). The researcher’s reflexive involvement in the topic is already present in its first articulation, and, in terms of the above dialectic, the working out of a research question is the role of form. Davey’s (2006) discussion of the German word *Sache* is applicable to “topic” as an equivalent English word. He wrote that *Sache* has both the dimensions of an entity with cultural referents beyond the grasp of any one individual and of “cultural effectiveness” (p. 69) that is only brought about through an active engagement on the part of the reader (or researcher). Thus, the topic presents itself as an area of study and, at the same time, as a locus of reappraisal, reanimation, and reimagining. My own topic can illustrate this element of renewal. There is an extensive literature about nurse-patient relationships in mental health nursing that already contains a wealth of valuable perspectives, but the topic takes on a singular resonance stemming from my own clinical experiences and my perspectives of Buddhist practice. New research may arise from precisely such resonances between the existing tradition of knowledge and the possibility of fresh insights. One aspect in the recognition of possibility becoming a realized research study is the approval of the topic and its articulation as questions by supervisors and colleagues. It is not enough that I feel inspired or energized by a topic—there is a social and ethical obligation that the topic has relevance and at least a reasonable chance of providing something useful in the end to people in need of nursing care.

The animation and illumination of the topic guides the process of data collection. In nursing research, this usually entails interviews with individuals who are in the life-world of the topic (Koch, 1996). The interview in this tradition reflects the dialogic, linguistic heart of hermeneutics even though, as noted earlier, it has inflections of the exigencies of roles and context. The researcher thus has a responsibility to respect the integrity of the interviewee while conducting a conversation based on heeding the other’s position and remaining open to the possibilities that emerge in dialogue (Binding & Tapp, 2008). Another aspect of data collection is getting to know the literature about the topic. In philosophical hermeneutics, this goes beyond a literature review, both in content and style. Davey (2006) dwelt at length on the Gadamerian notion of *Bildung*, which can be narrowly translated as “cultivation,” but which has connotations of culture, learning, and, perhaps most importantly, openness to new learning. *Bildung* entails, in one aspect, “exposing oneself to the *experiences* that the practical acquisition of the facts and skills pertinent to a given discipline expose one to” and, thereby, it is “possible to become a good or, rather, a *more understanding* practitioner” (p. 39). The sense of development as a practitioner affirms the philosophical-methodological power of hermeneutics as a research approach for a practice discipline like nursing. Another aspect of *Bildung*, according to Davey, is that it does not dictate a particular kind of education or canon of work, as some critics of Gadamer have suspected, but that it is linked to the topic at hand. *Bildung* requires a cultivation of what can expand understanding of the topic, which can include not only the obvious sources (as in the conventional literature review) but also whatever cultural resources can help to shed light on the topic. In this way, each researcher reinvents the topic in light of his or her own constellation of relationships, readings, and fore-understandings.

Data analysis is another term that ought to carry a hermeneutic health warning, although it is no bad thing once more to draw attention to the tension between the generally given structures of research and the far more fluid interconnections of a hermeneutic study. The dialectic of form and formlessness is still in play. While there is something to be written, the term data implies separated objects of knowledge with analysis as a distanced examination of them. The hermeneutic understanding of language as interpretive instead demands an attention to aesthetics and expressive fluidity. Koch (1996) described the process of writing in a way that respects form, while retaining a more ecologic sense of making connections: “Patients’ stories and exemplars merge with contextual data, and literature is progressively incorporated to mediate understanding delivered in a construction” (p. 179). In hermeneutic writing, “analysis becomes synonymous with interpretation” (Moules, 2002, p. 15). Through this interpretive writing reflexivity once more emerges as one of the signatures of philosophical hermeneutics. Reflexivity is not the same as subjectivity—the researcher does not redraw the topic on a whim but rather commits to the play of the topic. There is undoubtedly a question of style involved in philosophical hermeneutic writing, a valuing of creative expression that goes against the grain of contemporary belief that technical, jargon-ridden language somehow betokens substance. This is one of the challenges of hermeneutic research, both because it is not easy to do and because style cannot be allowed to run away with sense and purpose.

The risks of hermeneutic research, including the risk of doing it badly, mean that rigour is as much a methodological consideration as for any other form of research. The debate about rigour in qualitative research has continued as the forms of research have increased. There have been various re-interpretations of validity to make more sense in a qualitative paradigm. Morse, Barrett, Mayan, Olson, and Spiers (2002) argued to retain the concepts of reliability and validity and called for structural “techniques of verification” (p. 14) to ensure validity. Their approach does highlight the importance of careful, intentional decision making throughout the research process, although it seems over-schematic for hermeneutic research. Rashotte and Jensen (2007), by contrast, outlined a way of understanding validity in hermeneutic phenomenological inquiry that links it to relational ethics. Values of acute sensitivity to context, communication styles, and the integrity of research participants in their account are all highly consistent with philosophical hermeneutics. What both approaches have in common is a concern for accountability, so that the decisions made by researchers are recorded and explained. A further support for rigour in the hermeneutic process is the dialogic work with participants and supervisors entailed in arriving at decisions, though the researcher remains responsible for those decisions. One determinant of rigour is a constant attention to the pertinence of interpretation to the particular world of practice under consideration. The arc of the research process must at all points remain true to practice such that “interpretations provide faithful, recognizable, and ‘true’ descriptions of experience . . . that ring true” (Moules, 2002, p. 17) to those reading the finished report.

### **The Fit of the Topic**

I have mentioned in general terms the kind of research topics that arise from nursing practice and lend themselves to an interpretive approach. I can flesh this out with regard to my own topic, which concerns understandings of the nurse-patient relationship in acute care mental health units, particularly from Buddhist perspectives. The word topic itself leads into interpretive ways of thinking through its connection with topology, sense of place, and ecology of place (Jardine, 2000). The etymology goes back even beyond the Greek *tópos*, meaning place, to the Indo-European *top*, meaning “arrive at, meet with” (Barnhart, 2006, p. 1151). A topic is a place of encounter, a place where things are going on, a place with its own life of exchanges and interconnections. In this way, the particular topic already begins to reveal itself as a certain kind of place, a mental health unit, in a particular point in history and culture, and as a place where a



nurse meets a patient. An ecology begins to unfold. I, as researcher, am already part of this unfolding ecology by attending to it, by responding to its address. As a Zen practitioner, with a little bit of learning and many questions arising from this tradition and this practice, my perspective also enters into the ecology of the place, of the topic. This is the ground for the fit of the topic and the hermeneutic approach to research.

Bearing in mind this understanding of the topic, I will highlight some aspects of it that strike me as worthwhile pathways of understanding, which deserve critical attention, perhaps reinvention, in order at the end to return to practice with fresh ideas and new possibilities. I will start with mental health and psychiatry, that curious dual term (now there is a rival duality, mental health and addictions, which for now I only note as a question for another occasion). Mental health and psychiatry are like a couple in a somewhat opaque relationship, sometimes seen together and sometimes apart, who have their differences but are familiar enough to finish each other's sentences. Psychiatry is, for sure, a medical specialty that treats something called mental disorders, at least according to the *Diagnostic Statistical Manual's (DSM-IV-TR)* (American Psychological Association, 2000) terminology. Mental health, by contrast, sounds, well, healthy except that its usage more often has to do with mental illness (think of those people served by a mental health unit, mental health clinic, or mental health nurse). However, the term mental health allows for a less discrete compartmentalization of health and illness, order and disorder, and allows the newer discourses of mental health promotion and recovery to expand the social opportunities of care (Mental Health Commission of Canada, 2009). I have chosen to use the term mental health, because of its greater latitude, in framing my research question. Nevertheless, the official designation for nurses in Alberta trained solely in this specialty is Registered Psychiatric Nurse, and the practice of nurses on acute care mental health units is greatly influenced by psychiatry. Psychiatry does in itself have an interpretive permeability related to the unavoidable reality of the ways in which mental disorders are lived through in each singular instance, however much biomedicine forces its claims about organic causation. Gadamer (1996), in the address to psychiatrists, identified that:

The science and praxis of psychiatry are always to be found on the narrow borderline between the knowledge domain of the natural sciences with their attempt to understand nature by rational means, and recognition of the enigmatic character of mental and psychological problems. (p. 164)

According to Gadamer, this remains true in spite of the encroachments of biomedical psychiatry: “. . . the fact that doctors have recourse to various possibilities for mastering an illness, such as the resources of modern pharmaceuticals, does not make the uncanny obscurity surrounding mental illness any less comprehensible” (pp. 170-171). The discipline of mental health nursing is not the same as psychiatry, but it does likewise work in this space of negotiation between reason and enigma. Indeed, the similarities and differences between the disciplines only add to the interpretive richness of the topic.

The borderline between mental health nursing and psychiatry is just one dimension of the cultural ecology of mental health nursing. Historically, the discipline has roots both in nursing and the role of asylum attendant (O'Brien, 2001). These histories are enacted in the various ways nurses express their roles on acute inpatient units, monitoring spatial, temporal, and legal boundaries whilst working in relationship with patients. How this variegated role is understood and negotiated varies between units, between individuals, and within individuals. Philosophical hermeneutics advocates for precisely this kind of difficulty, keeping “a watchful eye for the ruptures and the breaks and the irregularities in existence” (Caputo, 1987, p. 1). Interpretive research offers opportunities to face such complications, without trying to conceal or suppress

them with high-minded theory or mere exhortation to do one thing or another. At the same time, recalling the arc from practice and back to practice, hermeneutics maintains within it the constant provocation that there are situations to be faced, patients to be helped. It is not enough to dwell on fascinating paradoxes or awkward truths without seeking some kind of way forward in striving to lessen the burden of human suffering. Hermeneutic research is, ultimately, practical in pursuit of better practice, while incorporating the tragic knowledge that human endeavor is inevitably flawed and incomplete. This complex of recognition, complexity, and ethical intent is captured in Ricoeur's (1992) formulation of finding ways of "living well in just institutions" (p. 194).

The next beckoning pathway for interpretive investigation in this topic is relationship, and, more specifically, the relationships between nurses and patients on acute care mental health units. This is not the place for a survey of the literature and history of this theme, but to note the connections between it and hermeneutic research. One of the vital insights of hermeneutics, in its critique of a Cartesian world-view, is that things live in worlds of relationships. This assumption not only renders a particular kind of relationship, such as that between nurse and patient, meaningful to begin with, but also gives notice that it is not to be isolated and objectified. To give an example from practice of this latter tendency, nurses often refer to a planned conversation with a patient as a "one-to-one," which is a suggestively ambivalent piece of terminology. On the one hand, it refers to individualized contact with a patient, which is necessarily relational, and yet, on the other hand, there is a trace of separation in the "one" and "one" held apart (accentuated when abbreviated in the chart as 1:1). Does the word "to" in the phrase suggest a unidirectional encounter or an exchangeability? Which one is which, nurse or patient? In short, this fragment from practice that tells us there is a relationship only brings us to the threshold of interpretive possibility. It is like an archeologist finding a pottery shard, which then takes on meaning as it is interpreted in light of its connections to its historical, social, cultural, aesthetic, and political worlds.

Philosophical hermeneutics has its distinctive ways of entering into relationship; I am thinking here of the researcher entering into relationship with the topic of relationship and with participants talking about relationships. Gadamer (1960/2004) took up the image of play as a component of his philosophy of describing the conditions for understanding. For understanding to take place, in the sense of a new appreciation of a topic rather than merely the acquisition of information, there has to be openness, a freedom and a surrender of the self: "The structure of play absorbs the player into itself" (p. 105). There has to be more than one player, and there is a to-and-fro movement between players, with a spontaneity and creativity in the motion of the play. For the researcher, this image of the game invites entry into the topic in such a way that fore-understandings are neither left behind nor enforced as self-evident, but brought into play. This principle carries over into the style of interviewing. The researcher sets out a field of interest and some directions for inquiry, but then enters into the to-and-fro of conversation with the participant around the topic.

The interpretation of topic as a place of encounter makes it relatively easy to see how the relationships between nurses and patients in a particular setting can be construed as a topic of interpretive inquiry. The other element of the topic as I have chosen to define it, however, is not a place but a perspective or, rather, a plurality of perspectives from the Buddhist tradition. What is Buddhism doing in the *tópos* of the contemporary western mental health unit? There is a question of justification: Why at the outset is this a worthwhile pathway for nursing research? Then there is a question of methodology: Why use an interpretive approach to address this aspect of my topic?

If, for a moment, the phrase point of view is substituted for perspective, it is easier to recall that the viewer of a place has to stand somewhere. Perspective is not separate from the spatial metaphor of the topic. Perhaps this is a good moment to invite one of those Buddhist perspectives into the discussion. The *Abhidhamma*, which is a detailed analytic compendium of early Buddhist teachings, contains a description of visual experience as a compound of eye, light, object, and mind (Bodhi, 2000). Thus, there is no perceiving consciousness removed from the object of attention and, as one modern translator noted, “for this reason the philosophical enterprise of the *Abhidhamma* shades off into a phenomenological psychology” (Bodhi, p. 4). The answer to the first question is that if I walk on to the unit with Buddhist perspectives, then they are part of the topography. This can also be understood in terms of Gadamer’s (1960/2004) use of prejudice to describe the fore-understandings that we bring to the topic. The innovation in this use of the idea of prejudice, however, is that prejudices are enabling in the sense that we cannot see without them; they are part of the condition of understanding. What matters for hermeneutic inquiry is, again, the careful reflexive stance by which we do not take our prejudices for conclusions.

The next question, however, is that of justification or, in Gadamerian terms, how can we tell if this is a good prejudice? I identify several useful affinities between nursing and Buddhism. Briefly, these are (1) an appeal to direct, practical experience as a mode of knowing the world, (2) a concern with the question of suffering, (3) the importance of compassion as a response to suffering, (4) practice as a cultivation of how we attend to the world, and (5) the emphasis on relationship and interrelationship (McCaffrey, Raffin-Bouchal, & Moules, 2012). Whether or not this insight does turn out to be substantive and productive in light of nurses’ and patients’ experiences of relationships and my own interpretive analysis remains to be seen. That is the work of the research study itself and if there were no risk involved, no possibility of meaninglessness, there would be no need, no point, and no challenge in offering my work at all.

The third question is that of fit. If I am going to stick with my intuition, backed by the results of a certain amount of theoretical digging, that it is worth looking into this topic, then why an interpretive approach? The answer lies in the ethical orientation of hermeneutics towards openness to the other. This theme has already become evident in the attitude towards dialogue and human relationships even within conditioned environments, such as the clinical or academic. Openness to the other also has a cultural dimension. In a late work, Gadamer (2007) wrote, “we do not know anything about what the great conversations of the future between members of different religions may hold in store” (p. 118). Elsewhere he noted the fluidity of categories of expression in East Asian thought between religion, philosophy, and poetry, and that this tradition of thought can present “an almost immediate encounter with the self” (Gadamer, 1989/2003, p. 25, my translation). The significance of these words, which remain suggestive, is the potential in principle for dialogue among different traditions of thought. Philosophical hermeneutics has the impetus and means, through its dialogic vivacity, to explore the affinities, contrasts, and aporias between different cultural traditions. Furthermore, it can include particular directions of perspective, such as, in this case, that of a western practitioner of an Asian way of thought, while retaining the awareness that this is one among many possible angles of encounter. Hence, the fit between hermeneutic research and topic is such that it can do justice to a multilayered, interconnected phenomenon while keeping it grounded in the imperative of saying something about nursing practice.

### **Informing Nursing Practice**

In the foregoing discussion of appropriateness, I have already invoked the importance of connecting research to practice and suggested how an interpretive approach and this particular topic are attuned to practice. Hermeneutics makes available the difficulty inherent in human

phenomena without prescriptive, a priori ideological frameworks either for understanding or for articulating solutions. This plasticity of possible understanding keeps the topic open in its historical, cultural, ethical, political, or institutional aspects. Openness of this kind offers a valuable opportunity for research into a topic that is as implicated by its histories and cultures as that of the nurse-patient relationship in acute care mental health units. It is up to the researcher to make good decisions about which aspects to address and from what angles to do justice to the topic. The return to practice is a continuous part of this responsibility on the part of the researcher.

Openness means that a hermeneutic research question does not stand to be either supported or not; there is no null hypothesis that numbers, precisely processed can affirm or discount. One effect of openness is that it can be difficult to project how any given study might inform nursing practice. At the same time, interpretation is not creation *ex nihilo* but a creative and reasoned formulation of ways of seeing a phenomenon with alertness and a leaning into possibility. There are already skills, styles, preferences, and beliefs being lived out in the practice of nurses' work with patients that have their own weight and their own way of being in tradition. The outcome of a study such as this, in terms of recommendations for practice, will be a matter of well argued, ethically motivated decisions about what best helps patients to live well in just institutions (Ricoeur, 1992). There are, for example, two existing practices that support openness and therapeutic intentionality in clinical relationships. One example is clinical supervision, the practice of guided, dialogic reflection on practice, which originated in the discipline of psychotherapy and which has been taken up in mental health nursing in limited ways (Brunero & Stein-Parbury, 2008). The second is mindfulness, understood as a way of cultivating the capacity to listen to another by quietening the reflex of reactivity, which is so often bound up with professional identity (Walsh, 2008). To introduce these examples does not predict any specific way in which an interpretive approach might inform nursing practice, but rather illustrates the already-present in the ecology of the topic that exists as potential for development.

An important factor in considering such possible examples is the question of the linkages between recommendations for practice and the institutional environment. The theoretical issue of the interactions between social structure and individual agency is helpful here (Nairn, 2009; Porter, 1993). Nairn, as a nurse researcher, identified that in many interpretive studies there was an over-emphasis on individual agency at the expense of identifying the influence of institutional and social structures. Porter wrote as a sociologist trying to make sense of the literature reporting on psychiatric nurses not interacting in therapeutic ways with patients. He outlined theoretical models that sought to overcome a dichotomy that accounted for this phenomenon either in terms of autonomous individual actions or institutional determinism. A dialectical approach allowed him to "examine how the actions of nurses are constrained and enabled by the institutions within which they work, while at the same time identifying how their actions either maintain or transform the nature of those institutions" (p. 1561). This body of theory can support and clarify the ecological perspective in understanding interconnected phenomena.

### **Conclusion**

Philosophical hermeneutics is in its own terms a tradition of thought that "does not persist because of the inertia of what once existed. It needs to be affirmed, embraced, cultivated" (Gadamer, 1960/2004, p. 282). Hermeneutics developed from a philosophical practice into a research practice and has proved to be of value in the deep questioning of a practice discipline such as nursing. The attendant complexities surrounding its status as a method and its functioning as a methodology, far from being arguments against its application in research, are testament to its vitality. Hermeneutics is "a return to the essential generativity of human life, a sense of life in

which there is always something left to say, with all the difficulty, risk, and ambiguity that such generativity entails” (Jardine, 2000, p. 120). Hermeneutics as a research approach grants a hearing to those living in important, complicated relationships and offers possibilities of reinvention. Likewise, it is open to the voices of other strands of thought, other cultures and ways of viewing the world, and seeks to do them justice in understanding and, ending where it begins, in practice.

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