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Researching the Experience of Caring for a Military Veteran Partner with Post-Traumatic Stress Disorder Using Interpretive Phenomenology

Elaine Waddell
Flinders University, South Australia. Email: wadd0005@uni.flinders.edu.au

Mariastella Pulvirenti
Flinders University, South Australia

Sharon Lawn
Flinders University, South Australia

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Contributor Biographies

Elaine Waddell, DrPH, MPH, B.Soc.Adm completed her Doctor of Public Health at Flinders University in 2015. She is currently working with the South Australian health system and undertaking research work with Adelaide University.
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Abstract

Under the supervision of the coauthors, the lead author undertook doctoral research examining the ‘lived experience’ of caring for an Australian military veteran with posttraumatic stress disorder (PTSD) from the perspective of the intimate partner. PTSD is a common mental health condition for military veterans, yet there has been very limited investigation into the partners’ experience of these caring relationships. In this research, an interpretive phenomenological approach was used to collect data through individual face-to-face interviews with 20 female partners of male veterans diagnosed with PTSD. In this case study, we discuss the challenges that confronted the lead author as a novice researcher in accessing a sample population, in remaining alert to the sensitivities in interviews with potentially traumatized participants, and in managing her own emotional reactions to the interview data. This case highlights the need for researcher preparation in pre-empting issues that may arise, and the importance of access to skilled supervision for students undertaking research with a sensitive and vulnerable population.

Learning Outcomes

By the end of this case students should be able to:

- Understand how the impact of the research on the researcher forms an important part of the analysis in interpretive phenomenology;
- Understand why ‘bracketing’ is not used in interpretive phenomenology;
- Have a better understanding of the types of research questions for which interpretive phenomenology is appropriate;
• Have a better understanding of the challenges in recruiting from a vulnerable population;

• Have a better understanding of the need to discuss and plan self-care strategies with supervisors when undertaking emotionally sensitive research;

• Have a better understanding of the importance of reflexivity in qualitative research and practical strategies for doing this.

Case Study

Project Overview and Context

The lead author’s (Elaine’s) interest in this topic stemmed from a career in working with the veteran community, both as a social worker and as a public servant. She had listened to the frustration expressed by partners of veterans that their voices were not being heard and their unique experiences not understood by the Australian Government Department of Veterans' Affairs (DVA), for which she worked at the time. The trauma of military deployment and combat had impacted on their lives and their relationships, yet a disparity appeared to exist between both policy and service delivery and the needs of partners as mental health carers.

Adding to this tension for Elaine was the significant focus in her workplace on commemorative activities in preparation for the Centenary of the Australian and New Zealand Army Corp (ANZAC) at Gallipoli in 2015. As Australians, on 25 April each year, we remember our soldiers who went to the World War I battlefield of Gallipoli, Turkey, in 1915, and the many who did not come home. This campaign, though disastrous because of the sheer loss of life for the soldiers on both sides of the conflict, is perceived by many Australians as one that defined us as a nation. We commemorate it each year on this day as a way to also remember all those who have fought and died during all wars involving Australian soldiers. Elaine felt strongly that there was a disconnect between focusing on commemoration of the dead and recognition of what veterans and their families were experiencing in living. A returned serviceman, James Brown (2014), had commented that there is an ignorance of the military in Australia, and that the ANZAC commemorative activities highlighted the existence of a chasm between Australian soldiers and the society they serve. We agree with this viewpoint, and feel strongly that the Australian government has a moral obligation to address the impacts of trauma on families. For her research, Elaine
wanted to give voice to those who were caring for psychologically injured soldiers, to understand the nature of their particular caring experiences so that they, and future carers, could be appropriately supported.

There is a significant international body of research on the psychological impacts of caring for a veteran partner with PTSD (Ahmadi, Azampoor-Afshar, Karami, & Mokhtari, 2011; Dekel & Monson, 2010; Al-Turkait & Ohaeri, 2008; Ben Arzi, Solomon, & Dekel, 2000; Dirkzwager, Bramsen, Adèr, & van der Ploeg, 2005; Franciskovic, et al., 2007; Sherman, et al., 2005, Westerink & Giarratano, 1999). Because the military is predominantly male, regardless of country, most of this research has involved the female partners of male veterans. However, while studies have consistently found considerable and long-term psychological health impacts for partners, they have been predominantly quantitative in approach. Quantitative research approaches with partners of veterans with PTSD seek cause–effect explanations by focusing on the relationships between PTSD as a variable and reported indicators of distress in partners (Westerlink & Giarratano, 1999; Solomon et al., 1992; Ben Arzi, Solomon, & Dekel, 2000; Calhoun, Beckham & Bosworth, 2002). Elaine considered that such research approaches have been clinically focused on the care of the veteran and position the partner as the primary source of support, rather than having needs that matter in their own right. The mental health of the partner is then viewed in terms of how it impacts on the veteran’s ability to cope with their PTSD symptoms (Campbell & Renshaw, 2012). This is not surprising given that much of the research emanates from the Veterans Health Administration in the United States and the Israeli Defense Force Medical Corps, government organizations with a primary focus on the care of the veteran.

While quantitative research has been valuable in building the sound evidence base on the impacts of PTSD on the intimate partner, Elaine’s research intended to address the gap in understanding about how partners both experience and cope with the challenges of caring in these intimate relationships. She adopted an interpretive phenomenological approach, based on the philosophy of Martin Heidegger (1962), because she wanted to examine what the experiences of caring for a veteran with PTSD are like, and gain a deeper understanding of the nature or meaning of these experiences as seen through the eyes of the participants (Schwandt, 1994; Hesse-Biber, & Leavy, 2011; Laverty, 2003).

In interpretive phenomenology, we as human beings make sense of our world from existing within it, rather than being detached from it. When we experience a thing as
something, it has already been interpreted, and this interpretation is shaped by our life-world (Findlay, 2009). Heidegger conceptualised this as a forestructure (pre-suppositions) of understanding. Understanding is before us in the shared background practices within our society, in language, and in the common meanings. We must already have a ‘take’ on something before we can interpret it (Polt, 1999, p. 71). Phenomenology is not explanatory, nor can it prove why phenomena are as they are experienced. As a research methodology, it does not look for cause–effect relationships, to solve problems or to generalize but is about interpreting and understanding the lived experiences of human beings by focusing on what makes the experience unique as a human experience (van Manen, 1990).

Because Elaine was also examining how partners cope, she used the theoretical perspective on stress and coping developed by Richard Lazarus and Susan Folkman (1984). Understanding coping strategies was particularly relevant to enabling practical recommendations to be made from the study. As such, this study was not a ‘pure’ phenomenological study but an interpretive study adopting a phenomenological approach.

Thematic analysis followed the methodological framework suggested by Max van Manen (1990), using the four phenomenological existentials of lived space, lived body, lived time, and lived human relation. A key output of this research was a report for the DVA in July 2015, highlighting simple changes in health promotion and education activities that could accord improved recognition and redress of partner issues.

**Research Practicalities**

The study was approved by the Flinders University Social and Behavioural Research Ethics Committee and sample selection and participant interviews were carried out between July 2013 and February 2014.

A major consideration was how to publicize and recruit for the study. The aim in participant selection in phenomenological research is to select participants who have the lived experience that is the focus of the study, who are willing to talk about their experience and who are diverse enough from one another to enhance possibilities of rich and unique stories of the particular experience (Laverty, 2003, p. 18). As such, Elaine sought to recruit participants currently caring for a veteran partner with PTSD who had been in the Australian
Defense Force (ADF). She excluded current serving members of the ADF to avoid any ethical issues for the Department of Defense.

Because a literature review had not suggested any differences in the health impacts of caring for a veteran with PTSD regardless of country or conflict, sampling aimed to include partners of World War II veterans through to partners of veterans of the recent military operations in Afghanistan. The sampling strategy also aimed to recruit partners of different genders, as studies cited in the literature had focused on female partners in traditional relationships. The sample was limited to partners living in South Australia due to practicalities of travel to conduct face-to-face interviews.

Although Elaine’s workplace supported her studies, this was not departmentally sponsored research. Elaine understood the adversarial nature of the relationship between some members of the veteran community and the DVA in relation to compensation issues and was aware that there can be an ensuing lack of trust in government officials. Of particular importance was the separation of her role as a public servant from her role as a researcher. This was clearly addressed in the Information Sheet provided to participants and approved by the Ethics Committee.

Recruitment was subsequently undertaken through articles in several ex-service and carer support community publications in 2013. These recruitment strategies resulted in 20 partners deciding to participate. These were all female partners of male veterans and 19 were in relationships with Vietnam War veterans. Age of participants ranged from 49 to 68 years with a median age of 63 years.

As the original aim had been to recruit a more diverse, heterogenous sample which included partners of younger veterans, male partners and those in same-sex relationships, we gained further Ethics Committee approval to extend recruitment through using social media. The study was publicized through the Facebook page of a large ex-service organization. Although it received more than 6,000 views, it did not result in any extra participants. By this stage, there were time constraints on completing the research and Elaine addressed both the limitations and strengths of researching a homogenous population within her dissertation.

However, the question remained as to why it had been so difficult to recruit younger partners, in particular, and we needed to do justice to the research and that of future research by seeking to understand why. Elaine spoke with two members of the younger veteran
population who were active at the time in promoting awareness of issues facing veterans of recent deployments to the Middle East.

Both of the individuals approached raised issues of trust and stigma. Lack of trust is a feature in veterans with PTSD (Al-Turkait & Ohaeri, 2008; Waysman, Mikulincer, Solomon, & Weisenberg, 1993), and the stigma of PTSD can be significant for veterans because it carries pervasive connotations for veterans of being weak or cowardly and a questioning of their self-identity (Yarvis, 2011). This issue of veteran trust can extend to their partner discussing the relationship outside of the home. In particular, if the compensation process through the DVA has not been finalized, there may be a fear that this could be jeopardized if the partner discloses issues in the relationship.

Both individuals discussed generational issues in the intimate relationships of people aged in their 20s and 30s. They both encountered relationships breaking down more frequently than in previous generations and suggested that there may be a conflict between the stigma for the veteran in help-seeking and the focus in contemporary society on individual responsibility in managing one's own mental health by seeking treatment. They suggested that partners may expect the veteran to get help and deal with the problem, and that they are also less likely to undertake any caring role.

For Elaine, the learning in this process related to future research and the need for a more diverse range of recruitment strategies with the post-Vietnam War population groups. By the time she had completed her analysis, she had also gained an insight into the caring 'journey' and the length of time it can take to reach a level of acceptance of 'caring' for a partner with PTSD. This highlighted that the use of language can differ when recruiting different generations. Terms such as 'carer', and 'caring' may not resonate as well with younger partners who do not view their relationships within this framework.

**Research Design**

The premise underlying the appropriateness of interpretive phenomenology as a methodological approach for this study was that, through a process of participants sharing their lived experiences, an understanding of their lives and how they cope would be developed. As such, in-depth semi-structured face-to-face interviews were selected as the primary method of data collection. The interview method enables the gathering of narrative
material to develop an understanding, and a conversational style with the participant helps with eliciting the meaning of the experience (van Manen, 1990; Patton, 2002). Face-to-face interviews were appropriate in exploring the individual experiences of partners because time was required for establishing rapport and empathy, and gaining trust, given the sensitive nature of the topic (Patton, 2002).

Elaine developed an interview guide to both provide some structure to the interviews and to assist in establishing rapport (see Arksey & Knight, 1999; Fontana & Frey, 2003; Patton, 2002). As a novice interviewer, it was important for her to have a guide to ensure that all questions were covered. However, she adopted the semi-structured approach so questions were not asked in a fixed order and she could probe deeper where appropriate. Questions were based on the literature reviewed and aimed to be broad enough to encourage participants to tell their stories of their experiences. Elaine found the work of van Manen to be useful in developing the broad questions, particularly those to encourage a description of the experience. For example, each participant was asked to describe a ‘good’ day and a ‘bad’ day in relation to caring for their veteran spouse.

All interviews were audio-taped which, apart from ensuring an accurate record for transcription, enabled Elaine to both to be attentive to the participant and to concentrate on non-verbals, noting tone of voice, body language, facial expressions and the use of silences. It is important to capture not only what is ‘said’ but what is said ‘between the lines’ as this can indicate particular feelings in relation to questions, which is essential in interpretation of data (Laverty, 2003).

Prior to starting the audio recording, Elaine asked each participant some biographical questions to establish socio-demographic details such as their age and that of their veteran, length of the relationship and the military cohort of the veteran. The aim was to start the interview with less sensitive questions to help with easing into the conversation and develop rapport before more sensitive ground was explored (Creswell, 2003). It also assisted Elaine in preparing for the participant’s potential story and in providing some background for further exploration where necessary.

Immediately following each interview, Elaine made reflective notes in a field journal about her impressions of the interview, the rapport and any assumptions or judgments she felt she had made about the participant. Consistent with interpretive phenomenology, as part of
the shared life-world, rather than an objective observer, she did not eliminate or suspend (bracket) her presuppositions (Dowling, 2007). She needed to acknowledge the influence of her prior knowledge, personal experiences or prejudices on her understanding on the phenomenon. She also noted physical expressions or gestures that may not be audible in the audio-recording of the interview. She used these notes for reflection and for discussion with supervisors, and were incorporated into the data analysis.

As qualitative inquiry is an iterative process, data analysis began with the interviews and post interview journal notes (Patton, 2002; Creswell, 2003; Hesse-Biber, & Leavy; 2011). Elaine transcribed the interviews verbatim, noting pauses, emphases, hesitations and gestures such as sighs and laughter in the transcription.

Analysis followed the methodological framework suggested by van Manen and involved a process of reading the relevant field notes and then the transcript several times before going from parts of the text to the whole using detailed, or line by line, and wholistic approaches. The line-by-line approach required reading each sentence or sentence cluster separately and asking what it reveals about the phenomenon or experience being described (van Manen, 1990). This approach enabled Elaine, as the researcher performing the analysis, to look in detail at description, use of language and concepts as well as any emotion, silences and gestures. She used the wholistic approach to reflect on the interview as a whole, incorporating the themes extracted from the interview and words that had stood out in transcribing. She initially analyzed each transcript in order of interview. However, with the emergence of new themes, she reviewed the previous transcripts to clarify whether these ideas had been subsumed within that particular data. This highlights the iterative rather than linear nature of the analytic process. The 20th interview contained no new themes and because recruitment could not be extended, we deemed that theoretical saturation was satisfied for the sample recruited.

Because Elaine’s own interpretations and assumptions formed part of the analytic process, she discussed these with one of her supervisors (a carer of a spouse with a mental illness) while undertaking and transcribing the first interviews. In addition, the supervisor separately coded the first five transcripts, as a form of intercoder agreement, a method used to increase the probability of credible research findings, which involves researchers comparing their independently coded transcripts for agreement on the coding used (Creswell, 2003; Miles & Hubermann, 1994). This also enabled Elaine to analyze and improve her
interviewing technique. This team approach continued through further discussions with both supervisors.

While allowing concepts and themes to emerge, Elaine used the four existentials of lived space, lived body, lived time, and lived human relation to deepen the analysis. For example, lived space enabled reflection on how participants had expressed their feelings about home and other spaces. This process resulted in the creation of a large number of themes that were then compared and merged into thematic categories aligning with the four existentials. These categories then represented the main themes essential to the structure of the experience of caring for a veteran with PTSD.

Methodological Issues Arising

One of the aspects revealed by this research was the internal emotional journey described by the participants. During the course of her dissertation, Elaine undertook her own journey of developing an understanding of the phenomenon that, on reflection, was not without some personal challenges, as we discuss below.

In interpretive phenomenology, the researcher explores the meaning of the lived experience through the development of a rapport and conversational style with the participant. As van Manen highlights, interpretation within interpretive phenomenology starts when the researcher seeks clarification of meaning. The use of face-to-face interviews permits the researcher to pick up on body language, tone of voice and other nuances, such as periods of silence, that may suggest that this clarification of meaning is necessary (Van Manen, 1990, p. 112). While a semi-structured interview approach enables flexibility in the exploration of meaning, it can present an element of unpredictability as the conversation can venture into territory that can be potentially difficult for the novice researcher to manage. The interview techniques used by the researcher in these situations can then encourage or limit the exploration of the phenomenon. Interviewing should be viewed as a challenging activity that requires a level of competence, especially when the interview is about a sensitive subject and has the potential to elicit distress for the participant. During the course of this research, Elaine had several interviews that included discussion of topics such as violence, abuse and poor participant mental health; but it was her first interview with Audrey (a pseudonym) that she found the most difficult.
Although Elaine was a former social worker, she had not interviewed for several years and was unclear how far to probe for clarification of meaning. She found the texts by Hilary Arksey and Peter Knight (1999) and Steiner Kvale and Svend Brinkman (2009) useful in reviewing interviewing techniques such as the importance of maintaining eye contact, active listening, and asking probing questions. Although she undertook such preparation, she entered the interview with Audrey lacking some confidence in her research skills, which then impacted her ability to develop the rapport required to encourage Audrey to unfold her narrative.

Audrey had been married for 41 years to a Vietnam War veteran and described how she coped in the past with her partner’s drinking of alcohol.

_Audrey_: Ahm well I would suggest that it wasn’t a good idea and er we had young children and you know we would get into an argument... so that wasn’t pleasant.

_Interviewer_: um..(comments about drinking cup of tea, both laugh)

Clearly, Elaine was uncomfortable and reticent to probe further in case this caused Audrey distress. Audrey had already revealed that she suffered from PTSD and depression as a result of her relationship. Elaine’s reticence to pursue a potentially emergent theme limited the opportunity for Audrey to provide a rich description of her experience and for Elaine to elicit the meaning it held for her. Instead Elaine made assumptions about meaning based on her own pre-understandings and did not convey the deep interest and openness that phenomenology requires. While focusing on her poor interviewing techniques Elaine missed opportunities offered by 'markers' to probe for deeper meaning in this interview. 'Markers' are important pieces of information that can be offered when talking about something else (Hesse-Biber & Leavy, 2011, p. 106).

Audrey used the word 'savior' on three separate occasions when describing activities she enjoyed. It is a word strongly suggesting liberation from a difficult situation but Elaine failed to pick up on it during the interview and ask why she chose to use it.

_Audrey_: (laughs..) ah yes the body aches but I keep up with exercise. It’s been the _savior_ for me ...

_Audrey_: yes I have exercised all my life and that’s been a _savior_ so mmm
Audrey: ...plus I always had animals and they have been a great savior. um we did a lot of fighting, in those days.

Elaine left the interview with feelings of guilt, critically reflecting that she had not done Audrey's participation justice and that she needed to overcome her hesitance to probe deeper. Listening to the transcript reinforced her lack of concentration on not only the words used, but also the silences and other gestures. A process of reflexivity and a questioning of her assumptions with one of her supervisor as they worked through the interview transcript proved critical at this time.

The ability to question one's own presuppositions with a skilled and supportive supervisor is essential for the novice researcher in interpretive research. In interpretive phenomenology, the researcher enters the research process with forestructures of understanding shaped by his or her background, and cannot eliminate or suspend (bracket) culture, tradition or point of view (Wojnar & Swanson, 2007; Guignon, 2012). The researcher uses prior knowledge and insights to interpret and uncover hidden meanings, with personal experiences and prejudices acknowledged as having an influence on understanding of the phenomenon and important in interpretation (Dowling, 2007). These presuppositions are adjusted during the research process as the researcher uses this background of understanding to interpret the phenomenon and on the basis of this revises the general sense of what things mean, clarifying and deepening understanding (Guignon, 2012; Polt, 1999).

During the interviews, Elaine heard stories of veteran control, verbal criticisms, emotional distancing and unpredictable anger. Participants described how they suppressed their own feelings and needs within their relationships and how they 'walk on eggshells' in order to avoid confrontation. Most of these interviews left Elaine feeling emotionally drained, with a feeling of sadness for the suffering experienced during these long relationships, which she noted in my field journal. For example, after the sixth interview she made the following note:

The constant question in my mind is 'why do they stay with these veterans?' So far, they have all described how they suppress their own identity in their relationships which seems so wrong. I'm feeling sad about these lives lived this way for so many years.
As Elaine had former experience in counseling women experiencing family violence, it was difficult for her to not simply view these narratives through a lens of violence in relationships. Through the process of journaling, reflection and discussion, she challenged her pre-understandings. Participants had attributed the behavior of their male partners directly to the psychological impacts of military service and to the symptoms of PTSD. They had all presented as resilient women who chose to remain with their partners because they care, not because they fear for the consequences. This process of challenging her own thinking helped Elaine deepen her understanding of the phenomenon of caring for a veteran with PTSD from the perspective of these women.

During the process of transcribing and analyzing the text by moving from the parts to the whole, Elaine also experienced the stories over and over. Strong and consistent themes emerged from the data. Applying the four existentials deepened the analysis and enabled her to grasp the complexities inherent for the participants in caring for a male veteran partner with PTSD; but it also deepened her own emotional reactions to the data. For example, *lived time* revealed the internal changes within the participants in order to cope and the fundamental importance of time for themselves in a caring relationship marked by its long-term nature. *Lived body* drew attention to the physical and emotional manifestations of the long-term stresses of caring on the body. Elaine found she had to step back from the cumulative exposure that resulted from immersing herself in the data by taking regular breaks each day, listening to music, walking and engaging in regular reflexive debriefing with her supervisors. She also had an understanding support system in place. In short, she limited her exposure to these stories and looked to self-care strategies.

Elaine’s emotional reactions transferred from sadness to anger when she started writing the discussion chapter for her thesis. She felt she had been privileged with being given a glimpse into the lived experiences of the participants to see how they integrated caring for a partner with PTSD into the context of their lives, the coping strategies they used and the meaning they derived from the challenges. She was able to look at and critically discuss the existing literature with this new insight, but felt angry with existing literature which had applied negative labels to partners of veterans with PTSD, particularly where essential coping strategies had been labeled as maladaptive. She also felt angry about literature positioning the partner as a resource in veteran care, and felt particularly angry with the lack of understanding conveyed through government policy. However, she was able to
channel this emotion into the writing of the discussion chapter and the recommendations offered—a process she found to be very cathartic.

**Practical Lessons Learned**

Reflecting upon the research process is good practice for further research and we make the following suggestions for students using interpretive phenomenology.

1. Prepare as much as possible for the interviews; practice asking questions and responding to information. A practice session with a supervisor can help in developing confidence in interviewing skills.
2. Be aware that exposure to stories involving issues such as violence, stress and trauma can have an emotional impact on you as an interviewer. Be prepared for this and discuss potential self-care and de-briefing strategies with your supervisor before you start the interviews and throughout the process of data collection, analysis and write-up.
3. Where possible, include a supervisor familiar with the vulnerabilities in your sample population on your supervisory team. Elaine found this invaluable in helping her to engage with the data, particularly after the early interviews.
4. We cannot overemphasize the importance of keeping a field journal as a record of your thinking, impressions and assumptions. It helps develop your self-awareness of the impact on the interview data on you and why you felt that way. It then provides insights into the data interpretation process, acting as a bridge between the researcher and the participants’ experience.

**Exercises and Discussion Questions**

1. Discuss the benefits of using interpretive phenomenological methods in research. What are the limitations? How would you address the limitations in your write-up?
2. Issues of trust and stigma about mental health are common across military veteran populations regardless of country. In light of this, what recruitment strategies would you consider if doing similar research with partners of veterans? Issues of trust need to be addressed in research with vulnerable populations in general. These populations include people with mental illness, women who experience family violence and refugees. How would you go about developing trust when interviewing vulnerable participants?
3. How would you prepare yourself for sensitive interviews? What practical steps would you take?
4. Intercoder agreement is one example of ensuring rigour in interpretive phenomenology. Discuss other strategies that could be used for ensuring rigour.
5. Discuss the benefits of peer support when conducting sensitive research. Should this be formal or informal support? Why?
6. How does journal writing help with reflexivity?

**Further Readings**


**Web Resources**


**References**


