
HIGHLIGHTING THE RELEVANCE OF PHENOMENOLOGY AS A VERITABLE RESEARCH TOOL FOR ADVANCING PEACE AND HEALTHCARE DELIVERY FOR ECONOMIC DEVELOPMENT IN AFRICAN STATES

By

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Abstract

Political acrimony and tribal sentiments have made Africa to be persistently ravaged by conflicts and wars, insurgencies and violence. Aside HIV/AIDS, tuberculosis, malaria, maternal and child mortality including malnutrition are attributed to these. Development, productivity and economic growth have been impacted upon negatively. Dialogue employed often as a tool for resolution based on reports seemed not to be yielding results as expected. Experiences of people as related personally in form of hunger, pain, fear, grief and stigmatization are vital to finding solutions, if used. These experiences form the background of phenomenological research. An understanding of people's experiences in a pure form can give insight on how to channel resources and bring about peace, improvement, a sense of wellbeing and economic growth. As a qualitative research tool, phenomenology has gained momentum in both social and health sciences' research. Concepts like bracketing and description underpin its scope. This paper therefore attempts to highlight core aspects in phenomenology which can be employed in research findings on social and health spheres so as to advance peace and healthcare services in Africa. This is believed, can bridge the gap between grievances and hidden facts and contribute to economic development of African states. Curriculum review of social and health-related courses including nutrition to feature phenomenology is recommended to further strengthen its relevance.

Keywords: phenomenology, experience, bracketing, description

The contemporary global setting is marked by the dynamism of change in behaviours, attitudes, lifestyle, leadership, governance, and climate. Besides this, events such as violence, insurgencies, conflicts and wars, diseases have equally come into play. Almost the five continents of the world are affected. While natural disasters, namely tsunamis, hurricane, earthquakes, wildfires, flood, and terrorist activities seem to be peculiar occurrences in western countries of continents outside Africa, Africa itself has had its spheres subjected to incessant human-masterminded disasters associated with insurgencies, conflicts and wars. Tribal sentiments and political acrimony have in part, made the continent to be ravaged by these developments. Currently as evidence, Democratic Republic of Congo (DRC), Mali, Egypt, and Libya among others are threatened by war and civil unrest respectively.

Notwithstanding, the aforementioned situations, HIV/AIDS pandemic, malaria, tuberculosis, and non-communicable diseases such as obesity, cardiovascular diseases (CVDs) and diabetes mellitus equally constitute serious problems to Africa (Conference of African Ministers of Health, 2005). These are in addition to the existing problems of hunger, poverty, and malnutrition (Adeloye, 2003). Consequently, the continent bears the burden of diseases and war, and ultimately falls below the threshold of peace. Presently, UNAIDS released the statistics that about 293,300 people have died of HIV/AIDS related cases in eastern and western regions of the continent (Okafor, 2013). At the extreme, economic growth and agricultural productivity have dwindled (Adeloye, 2003), and individual as well as corporate existence to an extent have been impacted upon.

Although measures to address those threats have been ongoing through mediation and dialogue, grants and aids, the continent still falls short of positive results. Quite often the measures appear to be based on reports fuelled by western media. The experiences of the affected people in its latest form are ignored supposedly. Being at the source of events and taking cognizance of the feeling of pain, hunger, grief, loss, marginalization, stigmatization and fear which constitute the experiences of people are vital. Such measures are necessary because they can contribute to finding solutions, if carefully considered. Apparently, phenomenology tactfully focuses on these experiences as a foundation of its research. To this end, this article highlights the usefulness of phenomenology in situations that call for peace and healthcare delivery with due consideration to the basics of experience, bracketing and description.

The Concept of Phenomenology and Its Relevance

Phenomenology is referred to as the scientific investigation of phenomena (Smith, 2009), and the way the phenomena came into view in addition to what they mean (Smith, 2008). Situations or events that occur and thrive as the case may be constitute phenomena (Macmillan English Dictionary for Advanced Learners, 2007).

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Thus, insurgencies, violence, uprisings, conflicts, disease pandemic, economic decline, among others represent such events or situations. Experiences usually generate from these situations. Accordingly, it is these lived experiences of people that concerns phenomenology (O'Leary, 2010). For example, the lived experiences of war refugees regarding trauma, displacement, uncertainty, loss and nostalgia; communities and youths' feeling of betrayal, deceit, marginalization and frustration. Phenomenology portrays its relevance on these through its peculiar technicalities and goals, by employing to a very high degree the concepts of experience, bracketing and description.

The technicality of working to unravel the reasons for the situation is not the first priority of phenomenology. Its primary preoccupation is collating and describing the phenomena in the way they are experienced by the real people and victims, and doing everything possible to preserve the uniqueness of the experience (Denscombe, 2011). To an extent, it uses the quizzical procedure of 'how' to unravel one's view of the manner that things take place (Bryman, 2008).

Nevertheless, it falls under qualitative research methodology (Bryman, 2012; Barbour, 2008). Thus, it is an area of study that does not in any way depend on presuppositions, but uses description to bring to the open the definite proof of life as experienced by people (Lassaman, 2003). In any case, the principles of phenomenology align with social science research methodologies like case studies, action research, ethnography (Costley, Elliot and Gibbs, 2010).

By and large, the goal of phenomenology further expounds its importance and techniques of producing positive results. On note, it is highly inclined to social issues (Kuper and Kuper, 2003). Taking this into consideration, attention to how individuals regard life as lived and its effect on the pattern of socialization remains its major goal (Davies, 2007). In all fairness, the existing facts and/or unquestionable genuineness as found and grasped remain the cornerstone of shrewd understanding (O'Leary, 2007). By implication knowing the lived reality of the event is what matters most (O'Leary, 2010). Thus, 'when', 'what' or 'why' of an issue are not to be taken seriously like the emotions of the phenomena such as joy, stress.

At the secondary level, phenomenology attempts to know the underlying reasons and causes for the lived experiences of the aggrieved people. This emanates from the fact that due attention to such can, and does offer a broader view and expand as well an understanding, when for instance; giving solutions to the lived experiences becomes expedient. It remains relevant at this juncture. In insurgencies, conflicts and war situations therefore, understanding the lived experiences of the affected communities, states or refugees is not an absolute yardstick for appeasing them or giving assistance. Looking into, and considering the root cause of the crisis can

contribute greatly to the mechanisms meant to be rationalized for mediation and dialogue.

Moreover, phenomenology is relevant in the field of natural sciences (Gomm, 2004), for instance biology. In this regard, it has advanced from social sciences to health sciences having been found useful and capable for example, in discovering on time difficulties and problems traceable to clinical phenomena in the management and/or cure of some psychological or mental disorders (Nelson, Yung, Bechdolf and McGorry, 2008). However, the relevance of phenomenology through the use of the concepts of experience, bracketing and description is considered subsequently.

Experience in Phenomenology and Its Relevance

The reflection and use of experience in phenomenology is of a high degree due to the way people perceive things (Denscombe, 2011). This makes it a dominant concept of its research. Explicitly, it comes from life-world (Todres and Galvin, 2004). For example, experiences often come from stress, strife, threats, isolation, poverty and pain, among others.

By and large, experience is composed of some pillars. These include:

1. Understanding and consciousness
2. Yearning and/or longing
3. Feelings or affection
4. Non-verbal phrase and self-conduct
5. Ideas
6. Discretion and determination
7. Language expression
8. Socialization and collective act (Smith, 2008).

The pillars are useful and relevant to understanding people's life on a daily basis. With reference to health disorders, an understanding of HIV/AIDS victims' experience of facing stigmatization or kidney patients' experience for financing and undergoing dialysis weekly can give an insight on how to handle each of the conditions, and bring about improvement subsequently. Interestingly, it is people who have experiences that are able to reveal the meanings they create and in this direction solution can be proffered for positive results of what they undergo (Cohen, Kald and Steeves, 2000). While this holds, the use of experience requires adherence to some basic principles.

Basic Principles of Experience

Whether on health or social issues, it is necessary for some principles to be observed. Thus, for the aim and purpose of phenomenology not to be defeated:

1. Experience should not be centered on twisted facts, but on fresh or latest ones, and from the real people who have the experiences (Denscombe, 2011).

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2. The affected people must not be ignored or excluded for the meaning sought.
3. The preconceptions of the researcher are not to be used to influence the facts (Miller and Crabtree, 1992). This refers to bracketing according to Husserl (Bentz and Shapiro, 1998).

The Concept of Bracketing

Bracketing as used in phenomenology entails the description of experiences as lived in words that has nothing to do with societal and personal thinking (Groenewald, 2004). It dates back to the beginning of the last millennium following its propagation by Husserl (Blaikie, 2007). The ideology behind it emphasizes that the attitude or feelings of the researcher should be devoid of assumptions and the true state of the mind empty while personal beliefs, opinions and ideas are kept aside (Blaikie, 2008; Bentz and Shapiro, 1998). Maintaining this standard makes bracketing important for obtaining current and factual meaning (Gray, 2006).

Bracketing is implicating. A predisposed mind can negate and influence facts and meaning of lived experiences. Conflicting stance and distrust can develop; attention and assistance on one hand could be relaxed. For instance, the lived experiences of disease stricken communities or war victims in DRC as well as other insurgent and violent areas of the continent if twisted by one's view, can delay global attention and/or cause allied aid to be withdrawn. Besides, human and material resources will continue to be wasted with accompanying economic deterioration and backwardness. Furthermore, political disharmony may continue while peace is eluded. What we see and hear on satellite news and television concerning United States of America (USA) contentious military presence in Pakistan, Afghanistan including their persistent reports on social crisis in Africa has made them to be hated by the Arab world. Bearing this in mind therefore, the viewpoint of the researcher, interviewer has to be set aside and absolute consideration given to the experiences as revealed (Cresswell, 2007). Nevertheless, "the researcher is required to make a substantial amount of judgment calls while consciously bracketing his or her own presuppositions in order to avoid inappropriate subjective judgments" (Groenewald, 2004: p.18, 19). The result will then be valid and cherished. Further, it will be "new meaning, fuller meaning or renewed meaning" (Gray, 2006:p.22).

Adherence to bracketing is both ways. The affected individuals or respondents have to contribute to the success of the meaning sought. That is bracketing equally applies to them. While focusing on their minds, the lived experiences are neither to be related in line with the public's view nor their human intellect (Groenewald, 2004). Relating this to TB, malaria, HIV/AIDS or other diseases threatening development in Africa, the victims' notion of being isolated at the work place; denied treatment should not have anything to do with personal feelings and societal assumptions going on in

many communities. Personal facts of the experiences alone must be upheld. In this way, bracketing is highly acclaimed and commendable by experts who conduct research involving phenomenology as being relevant for obtaining meaningful and authentic facts for solution to problems (O’Leary, 2010).

Description in Phenomenology

Description is rated useful and significant in research linked to phenomenology for obtaining a detailed and clear account of real experiences (O’Leary, 2010). Facts and realities that portray uniqueness or originality are vividly outlined and not superficially (Denscombe, 2011). For example, the typical qualities of the experience of grief, insomnia, pain on social or health situations are articulated and made appropriate to the generality of such individuals. Explanation is not involved in any way to investigate the lived experience of people (Denscombe, 2011). Moreover, contradiction or sentiments on the part of those affected or were affected are noted. This can reveal those who are not the actual people, and communities that had the experience. In essence, diversification and economic waste can be averted.

Prerequisites for Successful Description

The possibility of making description achievable requires putting certain things in place and following up thereafter.

1. Getting the real facts requires long and detailed interview which involves people who are actually facing the situation (Miller, 2007; Cresswell, 2007; Denscombe, 2011; O’Leary, 2010).
2. Area of interest in relation to the real situation (Groenewald, 2004), like a war amputee’s lived experience of grief, aggression, adjustment; stigmatization of HIV mother single parenting or fear to disclose oneself as a carrier has to be considered.
3. Since phenomenology is a qualitative research methodology (Barbour, 2008), sample size has to be chosen and could be 10 (Cresswell, 2007) or from five (5) to 15 (Gray, 2006).
4. Standardized semi-structured, unstructured or structured questions with clarity of words and explicitness are needful. Likewise sensitivity to respect, honesty, confidentiality, non-discriminatory stance, and trustworthiness as ethical issues must be followed (British Association for Applied Nutrition and Nutrition Therapy, 2010).
5. The way questions are asked, plus the feelings inside can have impact on the outcome or meaning (Finlay, 2008). Therefore, it is expedient for the researcher to

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exhibit a sense of preparedness, rapt attention and true disposition (Finlay, 2008), so that things are seen as they are undistorted.

6. Sign of uneasiness, facial expression or doubt must be restrained so that the person does not omit vital information. Mind puzzling and abstract questions like ‘can you tell me what stigmatization means to you’ must never be used. This is very important since the outcome of phenomenological research is all about description (O’Leary, 2010). Therefore it is more useful to ask ‘could you describe any day you were made to feel stigmatized’. In this way also, a more detailed information can be gathered (Finlay, 2008).

The above prerequisites further show the relevance of description in exploring individual’s experience of a particular event or phenomenon.

Conclusion

People are actually living in an environment that is interwoven by events such as disease pandemic, conflicts, insurgencies, violence. These events impact on people’s wellbeing, distort peace and subject African states to near perpetual backwardness economically and otherwise.

The experiences that generate from the situations and which phenomenology taps and describes make meanings. The meanings as obtained are employed as useful mechanisms for proffering solutions to both social and health related problems. Due attention to the experiences as related is important and the issue of bracketing quite necessary. It is noteworthy that phenomenology with its core concepts of experience, bracketing and description is relevant as a tool that can possibly be used to foster peace, wellbeing and ultimately economic development of African states.

Recommendations

1. Solutions to problems in Africa and amongst African states should not be based on bias and reports showcased by especially the western media. Experiences of people should be sought and the meanings obtained used as part of the yardstick for dialogue or assistance
2. Literatures and textbooks by Africans on phenomenology are limited. Research and publications on it should therefore be stepped up by social and health scientists.
3. Curriculum review of medicine and allied fields including psychology and nutrition to feature phenomenology as a research methodology on issues that affect Africans should be considered by educationists.

4. Research is relevant to economic growth and technological development. As such funds or grants for research in phenomenology should not be ignored while canvassing for government, philanthropists and non-governmental organizations to support and make funds available for research programmes.

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