




Bridging abstraction and action: Phenomenology and public health research and practice

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ABSTRACT

Objectives: To explore the role of phenomenological research in public health, highlighting its contributions, challenges, and practical implications.

Study design: A narrative review informed by studies employing phenomenological methodologies published in the journals *Public Health* and *Public Health in Practice*.

Methods: Using the search keywords “phenomenology” and “phenomenological”, eligible original studies were identified in the journals *Public Health* and *Public Health in Practice*. The characteristics and findings of the studies were reviewed and discussed in relation to how phenomenology may lead to actionable public health interventions.

Results: A total of six studies were reviewed. Data collection methods across the studies included semi-structured interviews, audio and written diaries, and participatory approaches. Analysis techniques commonly used frameworks like Colaizzi’s method and interpretative phenomenological analysis (IPA). The studies addressed a range of public health issues, including barriers to postpartum diabetes screening, experiences of midwives during the pandemic, and strategies for chlamydia screening. Key findings included the depth of lived experiences, the impact of stigma, and the importance of culturally adapted interventions, albeit findings derived from small, purposive samples may face criticism regarding generalisability.

Conclusions: There is a notable paucity of phenomenological research in the field of public health. As a methodology, phenomenology enriches public health research and practice by illuminating subjective dimensions of the lived experience often overlooked by traditional metrics. Though challenging to execute, the methodology can achieve a balance between abstraction and actionable outcomes, advancing public health practices that are both empathetic and inclusive.

1. Introduction

Phenomenology, particularly in its descriptive form as articulated by Edmund Husserl, seeks to explore the essence of experiences by setting aside researcher biases [1]. This practice, known as ‘epoché’ or ‘bracketing,’ allows the researcher to focus on the intrinsic meaning of phenomena as they appear to individuals [1]. In public health, a field often associated with quantifiable metrics and applied interventions, descriptive phenomenology’s emphasis on subjective meaning might seem incompatible. Yet, this apparent dissonance masks a potentially complementary relationship. It is known that public health interventions are most effective when they are tailored and grounded in an understanding of the populations they serve [2], and phenomenology’s

capacity to uncover the lived realities of individuals provides insights for tailoring interventions.

The inherent abstraction of descriptive phenomenology is linked to its focus on essences, that is, the universal structures underlying experiences. This abstraction, while philosophically robust, can appear disconnected from the ontological and practical orientation of public health, which often requires actionable data to inform policy formulation and practice. However, the abstraction of phenomenology can be considered a strength rather than a limitation. By prioritising the depth and specificity of lived experiences, phenomenology as a qualitative research methodology illuminates dimensions of health and illness that traditional methods may overlook. For instance, quantitative studies on healthcare access might measure clinic attendance rates or treatment

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adherence, but phenomenology can reveal the barriers individuals face on a daily basis, such as feelings of stigma, mistrust, or cultural incongruences with healthcare systems.

This study explores the application of phenomenology in public health, focusing on its contributions, strengths and challenges, through reviewing published studies that have employed phenomenology to address public health questions.

2. Methods

To identify relevant studies, the journals *Public Health* and *Public Health in Practice* were searched using the keywords “phenomenology” and “phenomenological”. Both journals were chosen for their specific focus on public health research and practice, providing a targeted snapshot of the ways phenomenological approaches have been applied in this field. The search aimed to include studies explicitly utilising phenomenological methodologies such as descriptive phenomenology or interpretative phenomenological analysis (IPA) to explore public health topics. The search was performed on January 1, 2025.

3. Results

This search yielded six eligible studies, all published in the journal *Public Health*, that employed phenomenological methodologies to address public health challenges. Each study used qualitative techniques rooted in phenomenology to explore specific public health issues. Data collection methods included semi-structured interviews, audio and written diaries, and participatory approaches like response art. The analysis commonly employed descriptive or interpretative frameworks, such as Colaizzi’s method or IPA, to uncover the essence of participants’ lived experiences. The key characteristics and findings are summarised in Table 1.

4. Discussion

Across the studies reviewed, phenomenology provided keen insights into the subjective dimensions of public health challenges. For instance, Cronin et al. (2023) identified not only structural barriers to postpartum screening but also participants’ emotional concerns driven by COVID-19 anxieties [3]. By delving into lived experiences, phenomenology in this case revealed how stigma, health beliefs, and broader social circumstances intersect to shape postpartum health behaviours. By exploring these dimensions, phenomenology provides an enriched understanding of health and illness, paving the way for interventions that are not only medically effective but also socially and emotionally supportive as individuals manage their own conditions on a day-to-day basis. These

findings can then inform targeted interventions, such as community-based programs to improve access, outreach campaigns to reduce stigma, or telehealth initiatives to overcome geographic barriers. Similarly, Fumagalli et al. (2023) demonstrated how volunteering midwives in Italy experienced both professional and personal growth despite pandemic-related challenges—an insight that may inform the design of supportive frameworks for frontline healthcare workers in crises [4].

Data collection in phenomenological research typically involves in-depth, semi-structured interviews, where participants are encouraged to share their experiences in their own words. These interviews, often recorded and transcribed verbatim, form the foundation for thematic analysis. Reflexivity is integral to this process, with researchers maintaining diaries to document their thoughts and biases, ensuring that their interpretations remain grounded in participants’ narratives. Nevertheless, even in disciplines such as nursing where phenomenology has enjoyed certain popularity and been frequently used in studies, several scholars have often pointed out the atheoretical nature and frequent misapplication of phenomenology, noting that many nursing researchers tend to offer merely qualitative descriptions of subjective accounts [9]. Such approaches overlook the essence of a phenomenon, and the way it appears, evolves, and interacts, leading to results that may not truly reflect phenomenological insights.

It is thought that capturing a phenomenon requires ‘intuition’, a metaphysical abstract which some believe is constituted experience and the imaginative variation needed to grasp the structural essences of experience and make sense of the phenomenon. Superficial or poorly structured data collection methods that do not capture the depth of participants’ experiences can fail to grasp the essence of the phenomenon, leading to incomplete and/or inaccurate findings. Superficial engagement by the researcher with the interviewees can also result in a lack of depth in the findings.

Phenomenology inherently demands deep immersion into the participants’ world to understand their experiences. Phenomenology also seeks to elucidate the specific essence of an experience rather than to generalise findings across populations. Attempting to make broad generalisations through phenomenological research undermines its purpose and diminishes the specificity and depth of the insights gained. In the same way, without proper ‘bracketing’, researchers may unknowingly impose their interpretations or biases onto the data, which contaminates the findings and distorts the essence of the participants’ experiences. Employing a structured framework like Colaizzi’s to analyse data thus ensures that each step—from extracting significant statements to formulating meanings and identifying themes—is done meticulously [9]. This also helps researchers pay attention to subtle yet critical aspects of the phenomenon.

Table 1
Characteristics of studies published in the journal that has used phenomenology as a methodology (arranged alphabetically by first author’s last name).

Author, Year	Study Methodology	Research Focus	Participants (N)	Data Collection Method	Key Findings
Cronin et al., 2023 [3]	Descriptive phenomenology	Barriers and facilitators for postpartum screening	N = 27 women with gestational diabetes	Semi-structured interviews	Identified barriers (e.g., COVID-19 impact, test confusion) and facilitators (e.g., health concerns)
Fumagalli et al., 2023 [4]	Interpretative phenomenology	Experiences of midwives volunteering during COVID-19	N = 59 Italian midwives	Audio and written diaries	Volunteering provided professional and personal enrichment despite challenges
McNulty et al., 2008 [5]	Descriptive phenomenology	Strategies for chlamydia screening implementation	N not specified, Chlamydia screening coordinators	Semi-structured interviews	Success linked to champions driving processes, reminders, and time-saving strategies
Okoye et al., 2018 [6]	Interpretative phenomenology	Awareness and perceptions of glaucoma	N = 28 participants in Nigeria	Face-to-face interviews	Awareness was higher among urban, educated participants; key barriers identified
Potash et al., 2013 [7]	Interpretative phenomenology	Impact of art exhibits on empathy and social change	N = 46 healthcare professional and families	Surveys, art response, discussion groups	Art exhibits promoted empathy and challenged stigma
Zhang et al., 2024 [8]	Empirical phenomenology	Mpox prevention and control challenges in China	N = 42 stakeholders	Semi-structured interviews	Collaboration challenges, stigma, and privacy concerns identified; recommendations offered

Another example of phenomenology's applicability can be seen in research that examined the lived experiences of working-age adults diagnosed with inherited retinal diseases (IRDs), rare genetic conditions that eventually result in severe visual impairment or blindness [10]. While epidemiological research provides valuable prevalence data, it often fails to capture the personal and societal impacts of living with such conditions. Phenomenology delves into the lived experiences of individuals with IRDs, uncovering insights into the psychological, social, and economic challenges they face and their sense-making [10]. The participants described a continuous redefinition of their self-identities, as they navigate the tension between their past, sighted self and the emerging realities of vision loss. It is an ongoing dialogue between who they were and who they must become, through and as a result of their altered embodiment. These narratives provide verisimilitude and an understanding that can be useful for advocacy efforts and to guide interventions, such as workplace accommodations, genetic counselling and psychological support programs, or public policies aimed at ensuring equitable access to healthcare.

Public health audiences, including policymakers and practitioners, often prioritise actionable recommendations over purely philosophical nuance. Researchers must therefore articulate their findings in ways that bridge this gap. One strategy is to integrate phenomenological insights with quantitative data, creating a holistic understanding of health issues. Quantitative data provides the "what"—the measurable scope and scale of a problem—while phenomenological insights provide the "why" and "how," illuminating the lived realities that underpin the data. Together, these approaches create a comprehensive foundation for interventions that are both evidence-based and contextually sensitive.

Imagine a public health initiative aimed at increasing vaccination uptake in a specific subpopulation. Quantitative data might reveal a lower-than-average vaccination rate among this group, highlighting a structural issue that demands attention. However, this data alone cannot explain why members of this group are hesitant to get vaccinated. A phenomenological study could complement these findings by exploring the lived experiences and natural attitudes of individuals within the subpopulation. Unlike other qualitative approaches, descriptive phenomenology requires researchers to actively suspend their own biases and preconceptions through bracketing [1] to access participants' experiences as authentically as possible. In this case, this could involve setting aside assumptions about what mistrust means and allowing participants' narratives to reveal its unique dimensions. By understanding how their experiences are perceived and constituted by individuals in their specific life worlds, it might reveal how historical injustices can shape a mistrust of health systems, experienced as a deep-seated hesitation when faced with medical decisions.

5. Conclusion

Despite its abstract origins, phenomenology has much to offer public health. Its capacity to uncover the depth and complexity of lived experiences provides a critical counterbalance to the field's reliance on quantitative metrics. By integrating phenomenological insights with traditional approaches, public health researchers can develop interventions that are not only evidence-based but also deeply attuned to the realities of the populations they serve. Phenomenological public health can widen the scope of this field to include the lived experiences of affected members of the public and increase understanding of the human factors at play. While its abstraction can seem 'woolly', it is precisely this focus on depth and specificity that makes phenomenology

invaluable.

Ethical approval

Not applicable. No human participants involved.

Data availability

Not applicable.

Contributions

Qin Xiang Ng conceived the original idea and carried out the study, and the relevant data analysis and interpretation.

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Conflict of interest

The authors have no potential conflict of interests to declare.

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References

- [1] M. Christensen, A. Welch, J. Barr, *Husserlian descriptive phenomenology: a review of intentionality, reduction and the natural attitude*, *J. Nurs. Educ. Pract.* 7 (8) (2017) 113–118.
- [2] K. Jang, Y.M. Baek, How to effectively design public health interventions: implications from the interaction effects between socioeconomic status and health locus of control beliefs on healthy dietary behaviours among US adults, *Health Soc. Care Community* (2018), <https://doi.org/10.1111/hsc.12577>.
- [3] A. Cronin, E. Noctor, D. O' Doherty, S. Bowers, E. Byrne, A. Cremona, Facilitators and barriers to attending postpartum screening in women with a recent pregnancy complicated by gestational diabetes mellitus: a qualitative study, *Public Health* 220 (2023) 99–107, <https://doi.org/10.1016/j.puhe.2023.04.022>.
- [4] S. Fumagalli, L. Iannuzzi, G. Toffolo, I. Anghileri, A. Losurdo, N. Rovelli, M.A. Riva, A. Nespola, Volunteering in an emergency project in response to the COVID-19 pandemic crisis: the experience of Italian midwives, *Public Health* 218 (2023) 75–83, <https://doi.org/10.1016/j.puhe.2023.02.020>.
- [5] C.A. McNulty, E. Freeman, I. Oliver, W. Ford-Young, S. Randall, Strategies used to increase chlamydia screening in general practice: a qualitative study, *Public Health* 122 (9) (2008) 845–856, <https://doi.org/10.1016/j.puhe.2007.10.009>.
- [6] R.S. Okoye, L. Bell, I. Papadopoulos, Investigating the level of glaucoma awareness and perception of its risk factors in Anambra State, Nigeria, *Public Health* 160 (2018) 100–107, <https://doi.org/10.1016/j.puhe.2018.03.025>.
- [7] J.S. Potash, R.T. Ho, J.K. Chick, F.S. Au Yeung, Viewing and engaging in an art therapy exhibit by people living with mental illness: implications for empathy and social change, *Public Health* 127 (8) (2013) 735–744, <https://doi.org/10.1016/j.puhe.2013.05.004>.
- [8] W. Zhang, X. Qi, B. Han, L. Fu, B. Wang, K. Wu, Z. Hong, L. Yang, J. He, Y. Zhang, Y. Sun, Y. Chen, S. Liu, L. He, F. Lv, J. Qian, S. Luo, X. Meng, H. Zou, Efforts made, challenges faced, and recommendations provided by stakeholders involved in mpox prevention and control in China: a qualitative study, *Public Health* 236 (2024) 115–124, <https://doi.org/10.1016/j.puhe.2024.07.014>.
- [9] Hassan M. Al-Sheikh, *The use of Husserl's phenomenology in nursing research: a discussion paper*, *J. Adv. Nurs.* 79 (8) (2023) 3160–3169.
- [10] Q.X. Ng, H.W. Chan, R.B.T. Lim, G.C.H. Koh, "This is life": an interpretative phenomenological analysis of the lived experience of working-age adults with inherited retinal diseases in Singapore, *Disabil Health J* (2025) 101819, <https://doi.org/10.1016/j.dhjo.2025.101819>.