In compliance with the Canadian Privacy Legislation some supporting forms may have been removed from this dissertation.

While these forms may be included in the document page count, their removal does not represent any loss of content from the dissertation.



# FINDING MEANING IN ADVERSITY

Ву

NANCY E. JOHNSTON, RN. MHSc.

A Dissertation

Submitted to the School of Graduate Studies in partial fulfillment of the requirements for the degree of 
Doctor of Philosophy

(Nursing)

McMaster University

@Copyright by Nancy Johnston, September 2002.

To Bob

Doctor of Philosophy (2002) (Nursing)

McMaster University Hamilton, Ontario

TITLE: Finding Meaning in Adversity

AUTHOR: Nancy E. Johnston RN. MHSc. (McMaster University)

SUPERVISOR: Dr.Regina Browne

NUMBER OF PAGES: xv, 183.

#### **ABSTRACT**

#### FINDING MEANING IN ADVERSITY

# Nancy E. Johnston

Experiencing hardship, suffering and loss and finding a way to learn from one's experiences rather than being overtaken, diminished and embittered by them, constitutes an inevitable human challenge. Yet surprisingly, little has been written about the structure of the experience of adversity. Equally astounding is the fact that although there is considerable knowledge about the personality traits and behavioral patterns of people who are resilient in adversity, little is known about how people actually construct meaning in such a situation. Part of the reason for this missing knowledge may be the prevailing dominance of quantitative methods in health research. Although these methods are useful for revealing factors associated with positive patterns of adaptation they are less adequate in revealing both the structure of human experience as well as the practices that humans engage in to make sense of their world.

By describing and analyzing the shared lived experiences of twenty –five people who have lived through a situation of adversity, as well as the practices they engaged in to recover meaning, and the meanings they gave to their experience, this hermeneutical

phenomenological study uncovers new knowledge related to the structure of adversity. In doing so knowledge is gained about how personal coherence can be preserved under extreme conditions. In particular, the study unfolds the structure of adversity in terms of three key themes - turning, dwelling and calling. In addition, the practices that people engage in as ways of dwelling amidst adversity are discussed. Ways of dwelling are thus compared and contrasted to reveal those that call forth, or alternatively conceal, authentic possibilities in life. In order to clarify the existential and ontological challenges at stake in situations of adversity, the philosophical frameworks of Kierkegaard, Heidegger, Marcel and Gadamer are brought into a converging dialogue with the stories and conversations gathered for this study. Inferences for health professionals in general, and nurses in particular are drawn. These inferences are offered in consideration of the professional commitment to care for people during times when meaning breaks down and when the presence or absence of human solicitude and caring has far reaching implications.

#### **ACKNOWLEDGEMENTS**

My journey in becoming a scholar has not been alone.

My committee, Dr. Gina Browne, Dr. G.B. Madison, Dr. Catherine Tompkins and Professor Jackie Roberts have offered me their encouragement, insights and guidance as I have worked to complete this dissertation.

Special gratitude goes to my advisor and chairperson Dr. Gina Browne. Her patience and her steadfastness in encouraging the pursuit of my deepest passion in research, despite the effort already exerted in another scientific paradigm, were well beyond the call of duty. Her encyclopedic knowledge of stress and coping and her willingness to share practical insights gained from her own clinical practice have enriched and challenged my thinking tremendously.

Deep appreciation is extended to Dr. G. B. Madison, who opened, and keeps opening doors to new realms of understanding. He has enlarged my world, anchored my experience and liberated my thinking. His wholehearted support and encouragement along the way have been an amazing and propitious gift.

I also would also like to acknowledge Dr. Catherine Tompkins whose classes in the philosophical basis of nursing research constituted an important turning point in my journey as a scholar. The thinking that began there and her ongoing support have helped me become more truly who I am.

Gratitude is also extended to Professor Jackie Roberts whose calm, responsive and inquisitive approach as well as her solid record of scholarship helped me gain focus, confidence and clarity.

I would like to thank Nadine Cross - a Heideggerian scholar of depth and a friend, who has provided valuable intellectual and personal companionship along the way as I struggled with opaque philosophical passages, challenging texts and elusive meanings.

Dr. Ingrid Harris is appreciated for sharing her knowledge of hermeneutical phenomenology, for being available for animated conversations and for her reading of my work. All of these contributions have made for better understanding and clearer expression.

Most of all I wish to thank my husband Bob Johnston for his belief in the value of this project, for his unfailing faith in me and for his willingness to sacrifice a great deal for my sake. He has most substantively provided the meaning that has made this effort worthwhile.

Thanks also to my children Michael and Sarah who by their support and encouragement, their vision for the future and their own concerted efforts toward important goals have inspired me and helped me to persevere.

Very special appreciation is also given to my parents James and Muriel Porter. Their manner of 'faithful', resolute dwelling has been an ongoing source of revelation to me about what matters most in life.

Very special thanks also to Professor Ruth Pallister who knows what it means to befriend and offer refuge through a time of great challenge.

Thanks also to my colleagues in the School of Nursing at York University. They generously gave me a summer to think and to write and by so doing lived out their meaning of being a community of scholars.

Finally I would like to thank all the people who engaged in conversation with me and who wrote stories for this project. They truly have been my teachers and to them I am deeply indebted.

# TABLE OF CONTENTS

ABSTRACTv
ACKNOWLEDGEMENTSvii
CHAPTER ONE: INTRODUCTION AND OVERVIEW1
The Phenomenon of Interest1
Relevance to Nursing 2
Background to the Study4
Approach to Inquiry 6
Research Method
Summary Statement of Purpose
CHAPTER TWO: REVIEW OF THE LITERATURE17
Classical Conceptions of Change
The Self and Change
Stress and Adaptation 22
Hardiness, Coherence and Resilience
Life Events
Attachment, Grief and Loss
Crisis
Anxiety and Depression: Clinical Symptoms or Moods of Attunement? 28

Philo	osophical Thought, Personal Coherence and the Reshaping of Meaning	1
Findi	ing Meaning in Difficult Situations: Phenomenological Studies	2
Sumi	mary, Conclusions and Future Directions 3	33
CHAPTER '	THREE: DLOGY AND DESIGN OF THE STUDY	36
P	roblem Statement 3	36
P	hilosophy of Science 3	18
	Intersubjectivity and the Self	18
T	he Self as Narrative	<b>4</b> 9
	Art, Poeticizing and Literature as Disclosing Human Experience	51
St	tudy Participants	53
D	ata Gathering	54
D	ata Analysis	56
CHAPTER I	FOUR: Y AS TURNING, DWELLING AND CALLING	61
A	dversity as Turning	65
	Turning away from the Everyday and the Taken-for-Granted	65
	Turning toward the Alien, Appalling and Ominous	70
A	dversity as Dwelling	14
	Dwelling in Captivity and Exile	15

Dwelling With	1 the finite	.84
Dwell	ing Resolutely and Dwelling Resignedly	.88
Findir	ng Refuge and Awakening	96
Facing Defea	t and Acquiescing	108
Adversity as Cal	lling	112
Calling as Dis	scovery and Concealment	112
Conce	ealment as Apathy and Abandonment	116
Disco	very as Presence, Caring and Belonging	118
	Becoming Free for Authentic Possibilities or Seeing What Really Matters	119
	Finding the Gift	120
	Healing by Helping	121
	Transforming Bad with Good 1	122
	Finding Meaning in Being	122
	Seeing Life in a Different Light	124
CHAPTER FIVE: CONCLUSIONS AND SUI	MMARY	129
Introduction		129
Relevance for N	ursing	31
Implications f	For Nursing Science	133
Person	nal Challenges and Conceptual Shift 1	138
Implications f	for Nursing Practice	142
Attune	ment andAccompaniment	,143

# Exemplary Care, Nursing Knowledge and

Expanded Understandings	146
Limitations	156
Contributions	158
Future Directions	. 162
Conclusion	. 166
BIBLEOGRAPHY	170
APPENDIX A LETTER OF EXPLANATION TO PARTICIPANTS	. 184
APPENDIX B CONSENT FORM	185
APPENDIX C QUESTIONS AND DIRECTIONS TO GUIDE WRITTEN STORIES AND INTERVIEWS	188
APPENDIX D PERMISSION TO USE FIRST NAMES	189
APPENDIX E LETTER OF APPROVAL FROM RESEARCH ETHICS BOARD	190

#### CHAPTER ONE

#### INTRODUCTION AND OVERVIEW

The purpose of this chapter is to introduce the study of how people come to understand and give meaning to an experience of adversity and to provide a working definition of the concept of adversity. Next, the relevance of the topic for the practice of nursing will be discussed in detail. Following this, some background to the study will be offered including a brief analysis of my preunderstandings and how I as a person of a particular social position and historical time interact with the stories and conversations gathered for this research. Finally, a brief justification will be offered for interpretive hermeneutical phenomenology as an approach appropriate to the questions addressed by this study.

## The Phenomenon of Interest

"Why?" "Why did this happen to me?" "Is there any meaning in this apparently senseless event that has happened?" "How can life be meaningful when everything I rely upon to make it so has been lost?" "Will I ever regain a sense of purpose in life?" These questions, universal in the human experience, are not only ones commonly encountered by all nurses in their daily working experience, they are ones we all come to ask ourselves, especially during times of great hardship. Common as these questions are in moving us to consider what

matters in life, they constitute the most difficult questions to answer. As such, they have provided throughout history a significant challenge to philosophical reflection, theological thinking, clinical intervention and ordinary human experience. This study tackles these difficult questions by exploring how people understand and give meaning to their experiences of adversity.

## Relevance to Nursing

In a post-modern era when control over matter and the capacity to perpetuate 'life' has never been greater, penetrating questions pertaining to "what matters" are becoming more and more important. Nurses, as members of a profession that promotes health, perpetuates life, and ameliorates suffering, come to witness the full gamut of human experience. In their role as witnesses to the extremities of human experience, nurses encounter situations of desperation in which all that has been anticipated, indeed expected, of life comes to be jeopardized, thereby throwing into question both meaning and direction in life. Yet, in some situations and with closer and more sustained examination of these situations, it can be seen that meaning can be retrieved - even in the face of the most improbable conditions (Leonard, 1994). Nurses working in palliative care, for example, tell stories of some families' triumphant transformation of longstanding conflict into tenderness and caring in the face of the impending death of a loved one. Nurses working in psychiatric and mental health settings

tell of the anguished yet gentle and steadfast abiding toward the return of meaning that is witnessed in the actions of caring family members whose beloved has become psychotic or attempted suicide.

Given the presence of nurses at critical junctures in the lives of human beings, it is reasonable to ask how skilled we are in grasping what can be lost in a situation of adversity. Without a sense of what has been lost, we will nurse 'at a distance' thereby losing opportunities for intimate and healing human encounters. Just as important as understanding what has been lost or is being threatened in a situation of adversity is the ability to grasp what is being revealed in the situation as that which is of greatest importance, 'humanly' speaking. The attention of nurses to the shifting priorities in the lives of their patients, introduced by adversity itself, enables more attuned engagement. This is because attuned engagement is the capacity to decipher the finer nuances and to notice the subtler sensitivities accessible in the situation. Attuned engagement therefore brings to awareness a larger sphere of possibilities that can be pursued.

Creating possibilities is a complex and skillful art that goes well beyond restoring function, sharing knowledge, offering reassurance, and providing advice. Rather, the art of 'being with' people amidst suffering and devastation requires the ability to provide comfort in a way that does not patronize with facile answers to difficult questions. As nurses, we need to ask ourselves whether we really grasp how we can be with grieving people in a way that enables what has

been lost to be fully mourned, yet does not promote malignant self-preoccupation or despair. Are there ways, for example, of being with the patient in a situation of devastating breakdown that restore a sense of personal coherence and belonging? The question then becomes how can nurses remain alert to the arrival of new possibilities even in the midst of uncertainty, grief and anguish?

In pursuing the question of why is it so important that nurses be skillful in detecting the possibilities for meaning at hand in times of human extremity, it can be seen that one answer to the question lies in noting that positive clinical outcomes are related to the meaning given to events (Brown, 1997; Garmezy & Masten 1994). Another answer lies in understanding what it means to be human and to engage in practices that recover meaning.

## Background to the Study

Among all beings, human beings as self-reflective and self-interpreting beings are the only entities able to ask questions about the meaning of life (Taylor, 1985; Madison 1997). All experience involves the search for satisfactory answers to questions and all unanswered questions imply a negativity of experience that can be characterized as pain or suffering (Gadamer, 1999). Relieving human suffering then involves engaging in social practices that enable the search for new avenues of meaning and satisfactory answers to the 'why'and 'how' questions that are inevitably posed during times of loss and hardship.

Two lines of inquiry that seem to run in different directions are opened up by the question of 'Why?' and 'How?' One direction invites questions of causation and answers of explanation whereas the other direction leans toward questions of meaning and answers oriented toward understanding<sup>11</sup>. While these why and how questions are often asked by people who are confronting adversity in seeking to understand the experience, the same questions can be posed by the researcher. This study, in exploring how people come to understand an experience of adversity is primarily directed toward questions of meaning. As such, it is neither a descriptive study of how nurses practice nor is it an intervention study of patients' responses to specific strategies. Neither normative standards, guidelines for practice, nor causal explanations linking particular personality characteristics to adaptive coping styles in the face of adversity can be offered. Instead, this study seeks to illuminate the common experiences and practices of people who describe having lived through an experience of adversity.

Why is such a study important? An understanding of people's actual experiences of living through adversity, which focuses particularly on how meaning comes to be restored is essential to grasping both how suffering may be endured, alleviated and transcended. Developing a better understanding of how people endure that which cannot be escaped and how they find meaning within a

<sup>&</sup>lt;sup>1</sup> 'Understanding' as used in hermeneutical phenomenology is not achieved by way of a method that the inquirer applies to an object of interest. Rather understanding occurs or becomes an event when an interpretation is convincing (Gadamer, 1996).

web of relationships and concerns is of direct relevance to nursing as a profession committed to promoting health and healing (Benner & Wrubel, 1989; Morse, 2001). With a unified understanding of the co-constituting influences of personal meaning and social practices, nurses can strive to facilitate the most favourable conditions for the reconstruction of meaning in times of human extremity.

# Approach to Inquiry

An essential aspect of the hermeneutical approach involves understanding how and why one comes to a phenomenological study. Van Manen (1990) has suggested that a researcher working within the interpretive hermeneutical paradigm should begin by sketching in his/her own understandings and preconceptions of the phenomenon of interest. This study of how meaning comes to be reconstructed in a situation of adversity was shaped by my preunderstanding of human action and engagement. Pointing out this preunderstanding at the outset is important because it reveals how it has directed my approach to the study and has shaped the mode of inquiry used to gather stories and engage in conversations. As a point of departure I understand that human lives, situated within a web of activities, demands, concerns and relationships, both set up and close down possibilities. Although human beings are free to choose a course of action, they are never radically free because their possibilities are constrained by the situation in which they find themselves. Moreover, what is taken-for-granted

in life only becomes apparent in some kind of situation of breakdown. An experience of adversity or situation of great hardship, difficulty or tribulation is thus a time when what has been assumed can no longer be relied upon and when the meaning of life comes under the most intense questioning. In the disruption of the taken-for-granted, new challenges regarding self-understanding arise. A time of great difficulty is by definition a time when obstacles arise to impede an individual's progress toward a self-chosen goal, or when dreams for the future are eclipsed.

Accordingly, the region of human experience of interest to this study can be understood as how meaning comes to be constituted in those times in a person's life when circumstances thwart that which has been willed or desired. In thwarting the will, adversity destroys the illusion of unobstructed passage into a future that has been projected and planned for, and, because it has been planned, is expected. In this way, adversity violates both the person's intentions and expectations. Adversity assaults the sense of personal security to the extent that it suggests that one's own actions, the actions of others, and one's self-generated future scenarios can no longer be relied upon to deliver the future intended for oneself. Adversity may also offend one's belief in receiving the due reward for one's actions. Thus it may challenge a basic trust in the justice and reliability of human experience.

Adversity as that which thwarts desire has a similar but slightly different character. In assaulting desire, adversity injures not so much one's intentions and expectations but it does violence to one's hopes and dreams. Hopes and dreams are not confined to the realm of the probable, given one's concerted efforts toward a set of reasonable goals; rather hopes and dreams seem to reach beyond the rational and reasonable to that which is unseen, mysterious, and cosmic. Desire as a longing and craving for that which has not yet been secured, seems related to outstanding questions regarding what will be revealed as one's fate, luck, or destiny. In the absence of adversity, it is assumed that we are fortunate individuals or at least persons to whom fate has been benignly indifferent.

Suddenly or gradually adversity encroaches on the territory formerly experienced as safe and secure. That which formerly has been taken for granted comes to be questioned and it is at times like these that questions of 'Why?' and 'To what end?' are most likely to arise.

In coming to an understanding of adversity as circumstance that thwarts the will and/or desire, it can be seen that adversity is neither a wholly concrete event nor the product of pure ideality and mental construction. Rather, something happens or an action is taken which sets into play events that are experienced as other than what one intended, expected, desired, or hoped for. Thus, what is expressed in language as 'adversity' seems to hold with it the notion of concrete historical events or happenings as well as personal interpretation in relation to

these events. Personal interpretation involves not only that which is thought and felt but also how the situation comes to be experienced and, in the experiencing of it, how it comes to be understood.

Ouestions of interest to this study have to do with how people find their way through the profound disorientation that seems to characterize the experience of adversity. In the experience of being lost in an alien territory, do new and potentially meaningful landmarks emerge, or alternatively, does every possibility merge into a featureless fog – each possibility as hazy, remote and unlikely as the next? What kind of searching enables new opportunities to be finally grasped and acted upon? What manner of being <sup>2</sup>, on the other hand, finds through its manner of searching only desert mirage? What kinds of experiences constitute landmarks that enable finding one's way in alien territory? Alternatively, does finding one's way constitute a return to points of reference established earlier in one's experience? How is the experience of the foreign and fearsome that seems characteristic of adversity transformed into the familiar and trustworthy? How is it that some people dwell hopefully and wait patiently for the foreign to become familiar whereas, for others, the foreign remains foreign and existence comes to be endured as a lifetime sentence of homeless exile? How is it that some people

<sup>&</sup>lt;sup>2</sup> Being is the primary concept of Heidegger's hermeneutic phenomenology. Being is the hidden meaning and ground of entities, which show themselves obviously and overtly. Using the example referred to by Polk (1999), it is easy to grasp the entity "cat". Describing the "being" of a cat is a more challenging task however. To ask about the Being of something is to inquire into the meaning of that phenomenon. van Manen (1990) emphasizes that "Being" is the fundamental term of human science research.

appear to be "improved" by adversity - becoming more courageous, steadfast, compassionate and generous - while others become more timid and rigid or, alternatively, insensitive and oppressive?

An etymological analysis of the word adversity reveals that it is derived from the Old French adversite, from Latin adversitas, opposition from, adversus turned against. But also interesting is the related word advert, borrowed again from Old French avertir, from Latin, advertere (ad - to + vertere - to turn around toward) (Oxford English Dictionary, 2002). Thus, the word adversity is a term that implies orientation and holds within it the sense of both disorientation and reorientation. There seems to be in adversity the notion that one is both opposed and turned but, also, that in this being obstructed and displaced, one encounters something else, something new, something that had until now escaped attention. The word itself, with careful examination of its root meanings, and when considered ontologically, seems to reveal its nature as experience that holds within it the **potential** (but not necessarily the actuality) of being coming to be turned around in relation to the being that it is. Another way of saying this is that adversity seems to hold within it the potential of disclosing a more complete understanding of one's being (nature) and one's becoming (possibilities).

As part of the background to this study, I will now describe how I came to be interested in the way in which meaning comes to be reconstituted in an experience of adversity. I will also situate myself within a particular social and

historical context and state briefly how this may influence how I interact with the stories and conversations gathered for this research. Before attempting to situate my interest and position in relation to the phenomenon of adversity, I will elaborate on why gaining such a perspective is so important to the hermeneutical phenomenological approach.

As a post-modern movement, hermeneutical phenomenology does not preserve the modern illusion of objectivity nor the belief that it is possible to see clearly into the true nature of things (Madison, 1997; Gadamer 1999). Instead, it requires an intense questioning that opens up and keeps open a future of possibilities (Gadamer, 1999). The ability to question intensely means to "interrogate something from the heart of our existence, from the center of our being" (van Manen, 1990, p.43). Interrogating something from the heart of one's existence requires the capacity to fully engage one's total being while simultaneously holding one's foreknowledge of the phenomenon "off to the side". Heidegger suggests that, in questioning and interpreting, our task is "never to allow our fore-having, fore-sight and fore-conception to be presented to us by fancies and popular conceptions, but rather to make the scientific theme secure by working out these fore-structures in terms of the things themselves." (B&T. p.153) Holding off from naming things, calling into question taken-for-granted assumptions and adopting an open 'unknowing' stance are strategies

characteristic of phenomenological research (Munhall, 1994; Madjar & Walton, 1999).

Being fully engaged with the phenomenon of interest, while holding oneself in abeyance in an attitude of unknowing in order to let the other speak, necessitates coming to an understanding of one's own experience as being socially and historically situated. Gaining such a perspective can thus clear the way for informed engagement and seeing afresh. Accordingly, effort is made (as much as is ever possible) to characterize the lens through which one sees as an interpreter and to distinguish the lens through which the participant sees as well. In this way, the researcher's ability to both engage the phenomena and gain distance from it builds bridges to understanding the experience being unfolded by the research participants. Awareness of the converging and diverging experiences of researcher and participant, as well as the social positions of both, is integral to the process of interpretation since convergence of experience and similarity in social position allows the researcher to stand inside the experience and to appreciate it, while divergence initiates a spirited dialogue and intense interrogation as experiences and understandings are contrasted. Common and diverging experience thus illuminates the heart of the interpretive enterprise.

Returning to a discussion of my interest in the topic and my position as researcher, it is evident that I come to this study as a white, middle-aged, middle-class, female who is also a daughter, sister, niece, mother, wife and university

professor. Much of my career has been spent working in the area of psychiatric and mental health nursing as a clinician, administrator and educator. In my personal life as well as my professional life, I have been afforded the opportunity to be with individuals who have experienced adversity and I have observed how some people have been successful in finding positive meaning in adversity and some have not. Those who have had great difficulty have frequently sought professional assistance. Thinking about how meaning comes to be reconstituted in naturalistic settings with no or little professional intervention and thinking about the formal approaches used in institutionalized settings has led, in more recent years, to my search for a broader, overarching understanding of the ways in which humans view life itself. This search for such an understanding has, of necessity, encompassed not only the most severe breakdowns in human experience which can result in psychosis and attempted suicide, but, also, how ordinary people encountered in everyday life confront crushing disappointments and severe setbacks. In particular, I have been intrigued with how people come to evaluate these adverse events in the context of how they understand the meaning of their lives. As a clinician I have often wondered whether it could be possible to illuminate the kinds of views of life that seem best to enable people to confront life's vicissitudes courageously and skillfully. With these questions in mind, I have been drawn to ontological and existential inquiry since it provides a suitable

framework for studying how people come to grasp what it means to be human and to live in the light of this understanding.

Who am I as a person coming to this study, what have my experiences with adversity been, and how might my experiences influence the way I approach this study? Times of adversity that I have experienced include two serious illnesses (from which I recovered), a serious illness experienced by my husband (from which he also recovered), living in two situations of dangerous political instability as well as unemployment and financial hardship. My parents and sibling are living. Two children (one a teenager and the other a young adult) are healthy and have been able to achieve developmental milestones. All of my grandparents have lived to ripe old age and I have never experienced divorce, death of a spouse, natural disaster, hunger, homelessness, political persecution, profound despair or permanent disability and disfigurement. Some close friends have struggled with mental illness and chronic disease and two have died. While there have been times of anguish, uncertainty, and bereavement, which have, I believe, enabled me to form a common horizon of understanding with those experiencing pain and suffering, I am conscious of the fact that there are large expanses of human suffering of which I have no personal knowledge. The awareness of this alerts me to the need to hold my own experiences and understandings of adversity in openness so that I may be taught by the experiences of others.

#### Research Method

What research approach best facilitates the study of *how* humans come to understand themselves as well as enables uncovering of *what* in particular they understand about themselves? What philosophical framework deals specifically with the meaning of being? As has been briefly alluded to above, phenomenological approaches are useful for answering questions of meaning, when the task at hand is to understand an experience as it is understood by those having it. Hermeneutical phenomenology encompasses this purpose while going beyond it. Thus, hermeneutical phenomenology seeks not only to illuminate how others experience their world but also to interpret the meaning of their experience. Gadamer (1986, p.68) offers perhaps the clearest and most succinct clarification of the differences between phenomenology that is descriptive and phenomenology that is hermeneutical or interpretive. He says that descriptive phenomenology is a "pointing to", whereas hermeneutical phenomenology is a "pointing out".

# **Summary Statement of Purpose**

This hermeneutical-phenomenological study explores how individuals come to understand and give meaning to an experience of extreme hardship, difficulty, or loss. Understanding how meaning and purpose is recovered following situations of overwhelming adversity is important because positive understandings have been associated with positive clinical outcomes and because

health professionals are in a position to influence positively the meanings that people give to their experience. While extant knowledge has revealed positive relationships between clinical outcomes and the meaning given to events (Brown 1997; Garmezy & Masten, 1994), less is known about the manner in which individuals actually construct meaning in the face of overwhelming circumstances (Kaplan, 1999). A better understanding of the practices in which people engage to recover meaning as well as of the dynamically fluid nature of their understandings is important for nursing practice. This is because such unified knowledge of the co-constituting influences of personal meaning and social practices can enable nurses, who are often present during times of human vulnerability and suffering, to be alert to the possibilities present in the situation at hand.

#### **CHAPTER TWO**

#### LITERATURE REVIEW

This chapter reviews literature pertaining to key concepts contained or implied in the definition of adversity. It begins with consideration of classical conceptions of change, and then considers key concepts as they have come to be understood in the clinical/empirical literature. A discussion comparing and contrasting empirical and phenomenological approaches, assumptions and findings is then offered. Next, an analysis of remaining gaps in knowledge and future directions for research is given and finally, the contribution of this study is described.

The literature review commenced by reviewing the fields of nursing, medicine, the social sciences and humanities using Medline, Psychinfo, Social Sciences Index, CINAHL and Dissertation Abstracts. All works since 1990 (as well as those prior to 1990 that were considered particularly germane) were reviewed. Keywords used to conduct the search included 'lived experience', 'adversity' and 'meaning'. No titles were found that incorporated all of these concepts. One phenomenological study using Parse's Human Becoming Theory was found. This was a study that described the structure of persevering through a difficult time for eight women with ovarian cancer (Petardi, 1988).

Next a broad cross-disciplinary literature review was conducted to reveal philosophical and theoretical concepts implied in the examination of the roots of the word adversity. As has been discussed previously the nature of adversity was seen to be an experience of *turning* which is disorienting, thwarting, alienating and opposing. It is also one that encloses the *potential* (but not necessarily the *actuality*) of reorientation, new opportunities and new meanings. Sub-concepts included change, coping, stress and adaptation, hardiness, personal coherence, resilience, adverse life events, grief and loss, crisis, anxiety, depression, perseverance, suffering and the construction of meaning.

# **Classical Conceptions of Change**

In unfolding the ontology of change and the nature of reality, Eastern philosophies describe change as fundamental to existence. Observing the natural world and the world of human beings, they discovered an inner unity of opposites. Focusing on the idea that explicit opposition conceals implicit unity, they noticed that change occurred through the interaction of bipolar opposites; for example, day and night bring light and darkness, and winter and summer bring cold and heat. In the human realm, love and hate, attraction and repulsion, faith and reason, pain and pleasure, goodness and evil are all experienced. According to views drawn from Taoist, Buddhist and Hindu myths and images, all polarities are only possible because of their underlying unity (Lee 1994, Watts, 1963).

Acknowledging that positive and negative elements are always present in the human character, such teachings thus instruct a manner of living that is led by superior qualities so that thoughts and actions are free of inferior influences.

Qualities enabling equanimity in the face of change are modesty, acceptance, adaptability, compassion, restraint, innocence, perseverance, tolerance, reticence, devotion to inner truth, patience, openness, detachment, conscientiousness, balance and inner independence. Qualities said to interfere with the process of yielding to change at life's turning points include fear, anger, desire, arrogance, aggressiveness, anxiety, harshness, cunning, goal orientation and self-indulgence (Walker, 1992).

Hebrew Scripture (specifically The Book of Ecclesiastes ) expresses the nature of change as that which has its time and then passes away. Disclosing an understanding, not dissimilar to Eastern philosophies, of the polarities in human experience and of change which comes as a result of the interactions of opposites, times of birth and death, planting and reaping, killing and healing, destroying and building, embracing and parting, listening and speaking etc. are contrasted. As a beacon that guides throughout all of life's changes and as a buffer that insulates one from meaninglessness, wisdom is said to be worth pursuing. Evidence of wisdom is manifest in the capacity for friendship, the enjoyment of work, keeping promises, freedom from envy, living one day at a time, respect for God and the consciousness of the ephemeral nature of life. An analysis of these ancient

eastern and Hebrew understandings of change compared to modern conceptions of change reveals a fundamental difference: Ancient views unfold change as a basic unity of the evident polarities of life while modern conceptions of change imply advancement or ascendancy of the new over the old (Rauzon & Legeza, 1973).

# The Self and Change

When considering western developmental-psychosocial epistemologies against the backdrop of ancient ontologies, an individualistic concentration on the self and how it knows what it knows emerges. Modern epistemologies focus on ways the self develops and comes to know itself. Accordingly, the self, the self-concept and self-esteem are thought to develop in a normative sequence throughout the life span. When attempting to explain the manner in which individuals respond to change, social psychology literature focuses primarily on external processes and the social origins of change, whereas the psychology literature has emphasized the internal process of personal change in natural settings and in therapy (Curtis & Stickler, 1991). Recent developments suggest that neither internal nor external processes are primary; instead it has been shown that both sets of factors must be taken into consideration (Cui & Vaillant, 1996).

Other epistemological and theoretical developments include an increasing awareness of the active role of the change seeker in the process of change.

Bandura (1986) synthesizes a number of approaches in describing the processes

through which people control their goal directed behaviours. Interest in motivational aspects of volitional change is demonstrated in the emphasis placed on personal goals as instigators of behavioural change. Examples of research in this area includes work on personal strivings (Emmons, 1986); personal projects (Little, 1983) and life tasks (Cantor & Langston, 1989 and Klar, 1992).

Lieberman (1992) in studying changes in self-image as a consequence of various life circumstances (eruptive crises and normative life transitions) found that an immutable self-image in the face of adversity provided some psychological protection. Similarly for those individuals seeking change, a stable self-image appears to offer protection against the stress associated with life change. The conclusion is drawn, therefore, that "although flexibility may be a desired adaptive characteristic, such a characteristic when expressed through an ever changing self-image seems to constitute a psychological burden" (p.55). Lieberman does acknowledge that longitudinal study is required to elucidate the relationship among specified benefits, to whom, under what conditions and with what degree of revised self-image.

Prochaska, DeClemente and Norcross (1992) have developed a transtheoretical "stages of change" model to describe and explain how people intentionally change. Stages of change are described as precontemplation, contemplation, action and maintenance. Processes of change within these stages include: consciousness raising, self-liberation, dramatic relief, counter-

conditionning, stimulus control, helping relationships, environmental reevalution, social liberation, self-reevaluation and reinforcement management. Ferguson (1980) discusses personal transformation through paradigm shifts. Integral to personal transformation is the discovery of freedom from attachment that emerges with uncertainty and responsibility.

# **Stress and Adaptation**

Appraisal of stressors and the effect on adaptation has constituted another large body of knowledge. Selye (1974) offered a representational notion of stress and adaptation as the accretion of variables reflecting the person and environment. Lazarus moved toward a phenomenological view by hypothesizing a transactional approach which viewed stress as the result of the person's grasp of the meaning for the self (Lazarus and Folkman, 1984). Ongoing work in this field of research attempts to link external events with coping strategies. Thus, appraisal has been examined from the point of view of physiological, cognitive, affective and behavioural responses. As an evaluation of the significance of an event for the person's well-being, the stressor takes on meaning and intensity by the interpretation and significance given to it by the person. Cognitive appraisal is a critical part of this model and according to Monat and Lazarus (1991), there are three types of cognitive appraisal to stress: Harm or loss that has already

occurred; threat or anticipated future harm, and challenge, in which the focus is placed on potential gain, growth or mastery rather than on the possible risks.

### Hardiness, Coherence and Resilience

The notion that some people are able to appraise a stressful situation primarily as a challenge, rather than a harm, loss, or threat has spawned a whole generation of research that has tried to delineate the characteristics and coping patterns of people who cope well under difficult circumstances. Theories have been proposed which suggest that psychologically hardy people are less likely than non-hardy people to fall ill as a result of stressful events. Three dimensions of a hardy personality have been delineated (Maddi & Kobasa, 1991; Tartasky 1993). Characteristics of "hardy" people include: Commitment – the ability to involve oneself in whatever one is doing; Challenge – the belief that change rather than stability is to be expected in life, so events are seen as stimulating rather than threatening; and, Control – the tendency of the individual to feel and believe that they influence events rather than feeling that they are helpless in the face of life's problems.

Noting that stress is part of the very nature of human existence and that many people remain healthy despite large amounts of stress, Antonovsky (1990) also has sought to explain why some people become ill while others do not. He has shown that a sense of personal coherence is associated with positive health outcomes. Three key constructs (remarkably similar to those found by researchers

studying psychological hardiness) contribute to a sense of coherence. These are:

Comprehensibility – the sense that information in one's environment makes
sense, is ordered and consistent rather than chaotic, random and inexplicable;

Manageability – the sense that resources are at one's disposal and that one is not a
victim of events; and, Meaningfulness – the sense that at least some of the
problems and demands in life are worth engaging in. Of the three constructs,
meaningfulness was found to be the most crucial. Without meaningfulness,
comprehensibility and manageability were found to be at best, temporarily
sustainable.

Research focused primarily on children and adolescents who appear to have avoided mental health problems despite living amidst unfavourable conditions have yielded 'broad stroke' knowledge generally referred to as 'resilience' research. Variables implicated in diverse studies include stable relationships with caring/competent adults, good intellectual ability, problem solving and communication skills, outgoing disposition and positive self-esteem (Masten, 1994; Masten and Coatsworth, 1998; Werner, 1989). In a review of what has been learned and what remains for future research to uncover, it has been acknowledged that "finer grained" inquiry is necessary, i.e., that there is a need to uncover the conditions that produce the capacity to weather adversity well. Developments in the understanding of psychopathology and resilience research have underscored the recognition that psychopathology cannot be

understood without an understanding of normative development. At the same time normative development cannot be understood without an understanding of risks and deviance. Two important points made by Masten (1999), regarding potential future developments related to helping people develop resilience are: Helping people who are having difficulty must be guided by theory and the accrued knowledge of multiple fields of inquiry and that the key to intervention in the future could lie in triggering or facilitating naturally protective systems. The question is asked as to whether such efforts could and should be modeled on naturally occurring resilience.

#### Life Events

The relationship between illness and life changes has been studied for many years. Building on the work of Adolf Meyer, a psychiatrist who noted that illness tended to occur around significant events, transitions and crises in people's lives, Holmes and Rahe (1967) developed a ranking of the general impact of life events. The ranked questionnaire was developed, by asking people how much adaptation or accommodation each event demanded. The work, which served a purpose in bringing attention to the interface of stressful events and illness, later fell under considerable criticism since it was noted that not all events constitute comparable and quantifiable levels of stress for all individuals. Intervening and mediating mechanisms, such as the meaning of the event for the person, were left

out of the equation, as was consideration of the applicability of the scale for particular groups such as students, working mothers, the elderly, the poor, or the persistently mentally ill (Stuart and Laria, 2001).

Despite the criticism of life events research, Brown (1994, 1995, 1996, 1997) has found examining the relationship between life events and psychopathology to be a useful and heuristic field of inquiry. Refining the methodology, he has examined the impact of stressful life events on the development of depression in particular. Findings to date show that depression and life-events are linked through the meaning given to the events by the person. Specifically, life events interpreted to be severe are responsible for triggering initial depression. "Severe" events typically involve loss – of a valued person, of a role, or an idea about oneself. Thus, in Brown's work, the examination of external events and the internal world of the person, are unified by exploring the meaning of the loss for the person experiencing it. Humiliation (a personal interpretation of an external event), according to Brown's research, constitutes the greatest assault on the self and the one most likely to result in depression. Loss of a person or role constitutes the second greatest blow. The best defense for people with a biological vulnerability is a "good enough" marriage that both absorbs external humiliations and minimizes them.

### Attachment, Grief and Loss

Much of the work relating to grief and loss builds upon work done by Bowlby (1971, 1988). This research, based on what has come to be called Bowlby's Theory of Attachment, traces patterns of response in relation to early losses as they are later discerned in life. Reviewing the most significant understandings afforded by his work, Bowlby has concluded that the capacity to withstand adversity and loss is seen as being accomplished in the presence of an empathic other. He concludes that:

Intimate attachments to other human beings are the hub around which a person's life revolves, not only when he is an infant or a toddler or a schoolchild but throughout his adolescence and his years of maturity as well, and on into old age. From these intimate attachments a person draws his strength and enjoyment of life and, through what he contributes, he gives strength and enjoyment to others. These are matters about which current science and traditional wisdom are one. (p.448)

Factors associated with mourning processes that were uncomplicated, complicated or pathological include: childhood experiences, especially the loss of significant others; a history of psychiatric illness; the nature of the relationship with the lost person; the process of dying (if applicable) whether anticipated or not; social support systems, secondary stresses; and, emergent life opportunities (Stuart and Laraia, 2001).

#### Crisis

By integrating a broad range of theories of human behaviour including those of Freud, Hartman, Rado, Erickson, Lindeman and Caplan, Aguilera and Messick (1999) have come up with a model for crisis intervention. This model which has not been empirically tested appears to have stood the test of time in providing a basic, general and practical framework for clinicians working with individuals in crisis. Now in its 8<sup>th</sup> printing, their book outlines two types of crises: maturational crises and situational crises. Maturational crises are developmental events that require role changes, for example, successfully moving out of the parental home to attend university. Transitional periods during adolescence, marriage, parenthood, mid-life, loss of parents and retirement and loss of spouse are all times of risk for maturational crises. Situational crises occur when a life event upsets an individual or group's equilibrium. Such events include loss of a job, relocation, onset of an illness, accident or traumatic injury, school problems, war, hostage-taking or natural disaster. Three sets of balancing factors are said to positively influence the resolution of the crisis. These are a realistic perception of the event, adequate situational support and adequate coping mechanisms.

# Anxiety and Depression: Clinical Symptoms or Moods of Attunement?

Anxiety has been defined in the clinical literature as a subjective experience and an emotion without a specific object. It is differentiated from fear

that does, on the other hand, have a specific object. Stuart and Laraia (2001, p.275) state that the crux of anxiety is self-preservation and that anxiety "occurs as a threat to a person's selfhood, self-esteem, or identity. It results from a threat to something central to one's personality and essential to one's existence and security. It may be connected with the fear of punishment, disapproval, withdrawal of love, disruption of a relationship, isolation or loss of body functioning".

Depression is viewed as a clinical illness that is severe, maladaptive and debilitating. Affective symptoms associated with depression include anxiety, anger, apathy, guilt, despondency, helplessness, hopelessness and a sense of personal unworthiness. Cognitive and behavioural symptoms include ambivalence, anhedonia, diminished concentration, indecisiveness, intolerance, social withdrawal and underachievement (American Psychiatric Association, 2000). Theories pertaining to the etiology of depression include aggression turned inward (Freud, 1966), object loss (Fairburn, 1985), learned helplessness (Seligman, 1975) errors in thinking (Beck, Rush, Shaw & Emery, 1979) poor parenting (Field, 1995) and sub-optimal person environment interaction (Lewinsohn, et al, 1979).

In contrast, the philosophical literature has understood anxiety and depression as attunement to the meaning of being. For Heidegger (1996), anxiety and depression, (variously translated as angst), is a time of confusion in which the

meaning of life is shattered and one feels homeless, unsettled and alienated. In explicating Heidegger's concepts of anxiety and depression and the manner in which they provide avenues for authenticity, Polk (1999) posits that we need the familiar and predictable to live out our lives. However, the familiar and predictable both offers a sense of necessary stability to our lives while at the same time lulling us into a dull torpor. Strong emotions, including angst or anxiety and depression, upset our ease and call our assumptions about life into question, providing an avenue for thinking and acting differently. According Heidegger's philosophical thought, anxiety and depression illuminate that which is problematic, fragmented and partially hidden from understanding. As such, both anxiety and depression offer a challenge to bring that which is fragmented, split off, or unacceptable to the self into a new and integrated "whole" and acceptable understanding. These philosophical ideas will be extensively elaborated in the next chapter.

In considering the assumptions and imperatives underlying the clinical, medical view of anxiety and depression, it can be seen that these views arise within a framework of obligation to treat and to cure. The philosophical phenomenological view can be contrasted as one that arises within a framework of obligation to understand or reveal meaning. Psychoanalytic thought has straddled these diverse worlds of meaning and action through its commitment to heal the self by restoring a sense of coherent meaning (Kohut, 1984).

## Philosophical Thought, Personal Coherance and the Reshaping of Meaning

With reference to the work of Kohut (1977, 1984), Stern (1991), Stolorow & Atwood (1992) Stolorow, (1994, 1998) and Orange (2000) all practicing psychoanalysts, it can be seen that existential and ontological thinking is reshaping the contours of psychoanalytic thought, particularly as it pertains to the restoration of personal coherence through the reshaping of meaning. Important discussed by these authors and ones said to be key to the reshaping of meaning include empathy, attunement, and mutuality.

Empathy is defined as emotional knowledge gained by participation in a shared reality. This knowledge comes from the analyst's attunement to the emotional reality shared in the intersubjective situation (Orange, 2000).

Validating attunement constitutes a response that occurs at the interface of interacting, affectively attuned subjectivities (Stolorow & Atwood, 1992).

Significantly, intersubjectivity theory represents a departure from the conventional objectivist epistemologies since it rejects the notion that it is possible to have privileged access to the essence of the patient's psychic reality and to the objective truths that the patient's psychic reality obscures. As a contrasting viewpoint, the intersubjectivity theorists such as Spence (1982) and Schafer (1983), in drawing heavily on the philosophical understandings of Heidegger and Gadamer, pertaining to the nature of truth, experience, and self-knowledge, emphasize the constitutive interplay between worlds of experience.

This leads inevitably to a stance in which the analyst joins the other in the healing process of making sense together (Kohut, 1984, 1985; Bacal, 1990; Brandshaft, 1985; Stern, 1991, 1992; Stolorow & Atwood, 1992; Orange, 2000). Implicit to its methods, which are directed toward the healing of psychic wounds caused by disruptions to primary human bonds is the building of the capacity for emotional understanding. Emotional understanding is facilitated in an atmosphere in which the analyst "undergoes the situation" with another. An understanding of dialogical conversation unfolds as that which is triadic rather than dyadic since the nature of understanding is neither the understanding of the analyst nor the understanding of the patient but, rather, a new understanding that arises out of a situation of mutuality, connection and relatedness.

## Finding Meaning in Difficult Situations: Phenomenological Studies

Although no studies of the lived experience of adversity were found, three phenomenological studies which implied explorations of how people lived through situations of great difficulty and suffering were sampled for key findings and understandings. These studies included the experiences of women living through ovarian cancer (Petardi, 1988); the experience of being critically ill in the ICU (Parker, 1999); and surviving breast cancer (Shin, 1999). In addition, one article pertaining to the experience of meaning in suffering was reviewed (Steeves & Kahn, 1987), as well as an article summarizing the findings of a research program exploring the behavioural-experiential nature of suffering (Morse, 2001).

Examination of these studies did not illuminate the structure of an experience of adversity, however common themes, i.e., insights people that had arising out of their difficult experiences could be identified. These included recognizing that one is ultimately alone, learning to live in the shadow of death (Shin, 1999), understanding the importance of family (Parker, 1999), becoming richer for the experience and finding deeper meaning in living (Morse, 2000; Parker, 1999; Kahn & Steeves, 1988). Practices in which people engaged to get themselves through a difficult time or to find meaning in suffering included deliberately persevering, seeking support, drawing on one's faith, hoping, having a sense of humour, suppressing feelings and enduring at some times and releasing feelings at other times, solitude, reevaluating one's life, choosing a new set of priorities, and reformulating the future (Petardi, Shin. Morse, Kahn and Steeves).

### Summary, Conclusions and Future Directions.

In summarizing the literature reviewed for this study, key concepts contained or implied in the definition of adversity have been explored. Beginning with ancient conceptions of reality and change as an interaction of opposites, we have seen that the ancients emphasized wisdom and moral virtue as means of mitigating the inevitable suffering associated with change. In contrast, modern conceptions of change have emphasized the ascendancy and progress of change.

In keeping with this view of reality, knowledge acquisition has been related to strengthening the capacity of individuals to cope with change.

Accordingly, much attention in recent times has been devoted to determining the factors associated with "positive" adaptation to change as well as delineating those variables that put adaptation at risk. The objective of such studies ultimately has been to reduce risk and enhance personal adaptation. In addition to these "empirical" approaches, a genre of philosophically based research and practice has arisen which also seeks to offer an empirical basis for understanding. By studying "the things themselves" or the lived experiences of people in all of their richness and complexity, this genre aims for a better understanding of the structure of human experience and the social practices that people engage in to construct meaning. Ultimately, the objective of these kinds of studies is to raise to awareness options and ways of being that operate either to deepen human experience and render it more meaningful or alternatively to uncover the practices that dismiss, trivialize or demean it. Thus, perhaps it could be said of philosophically-based interpretive research that, in being not only a "pointing to" but a "pointing out", the search for new knowledge is refined to a quest for wisdom.

Despite their evident differences in views of reality and how it can be understood, both the quantitative empirical research strategies and qualitative, human science approaches address a common intentional horizon in the sense that

both are oriented toward enhancing human life. Significantly, the cutting edge empirical research that has been reviewed so far (Lazarus, Kaplan, Brown, Antonovsky, Masten & Coatsworth) seems to be moving toward an area of common habitation with phenomenological research. This is a place that recognizes the centrality of meaning in the human experience. Thus looking at events or variables as causes is yielding to examining the meaning of life change for the individual as mediating mechanism (Haggerty, Sherwood, Garmezy & Rutter, 1994). In addition, it is now recognized by leading empirical researchers, that multiple fields of inquiry are needed in order to unlock the mysteries of how people construct meaning. At the present time, there is a paucity of information about how to trigger or facilitate naturally protective systems, although the psychoanalytic tradition is uncovering some important understandings that may inform this question. We do know that the reconstruction of personal coherence has a lot to do with an experience of empathy, mutuality and a sense of connection. In view of the role of science in identifying remaining gaps in knowledge and addressing them, it is here suggested that understanding how naturally protective systems work to enable people to be resilient in the face of adversity offers valuable insight into a question that is of significant social and clinical importance. Such, in part, is the purpose of this study in which I aim to uncover how ordinary people in everyday life confront a situation of extreme difficulty and how they come to understand and give meaning to their experience.

#### CHAPTER THREE

#### METHODOLOGY AND DESIGN OF THE STUDY

In this chapter, I build upon the introduction offered in Chapter One. I begin with a problem statement and then I elaborate on the overall philosophy of science and the research methodology that guides the design of this study. Next, the approach selected for this study is situated within key understandings of Kierkegaard, Marcel, Heidegger, and Gadamer, which are considered to be of particular relevance for this study. Next, procedural aspects of the research process are presented, including a description of the participants, methods of gathering data, and the hermeneutic/interpretive method of analysis.

## **Problem Statement**

While extant knowledge has revealed positive relationships between clinical outcomes and the meaning given to events (Cohen, 1988; Garmezy & Masten, 1994), less is known about the manner in which individuals actually construct meaning in the face of overwhelming circumstances (Kaplan, 1999). A better understanding of the way that people actually confront adversity, the practices that they engage in to recover meaning, together with the nature of their emergent and dynamically fluid understandings of themselves, is important for nursing practice. This is because such unified knowledge of the indivisible and

mutually constituting influences of personal meaning, action, and social practices can enable nurses, who are often present during times of human vulnerability and suffering, to be alert to the possibilities present in the situation at hand.

The purpose of this study is to describe and to analyze the shared lived experiences, the common practices in recovering meaning, and the meanings given to the experience of persons who describe living through a situation of extreme shock, hardship, difficulty or loss. In particular, this study seeks to illuminate a range of human meanings that come to be constructed in response to the challenges associated with adversity – circumstances that may dramatically alter the individual's situation, fracture their social web, and call forth new concerns and actions. In analyzing the shared meanings and common practices in which people engage to restore meaning to their experience, a new set of possible ways of thinking about and responding to adversity are revealed. This new set of possibilities has implications for health professionals in general, and nurses in particular, given their commitment to care for people during times when meaning breaks down and when the presence or absence of human solicitude and caring practices has far-reaching implications.

# Philosophy of Science

Interpretive, hermeneutical phenomenology is the approach used to explore the experience and meaning of having lived through, or being amidst, a situation of overwhelming difficulty or hardship. This way of thinking presents an alternative to the traditional scientific approach to inquiry. While natural science typically attempts to exclude or isolate rich sets of relationships that comprise experience, this interpretive approach explores how humans relate to their worlds and gives scholars a way to probe what has meaning in human experience (Young, 1999). In addition, this approach does not assume that intersubjective realities can be reduced to brute data or that all of social reality can be distilled to an individual attitude or belief. Rather, it takes the position that social reality is co-constituted by not only the individual but also by practice. Moreover, as has been briefly discussed, interpretive hermeneutical phenomenology understands humankind to be an open system, and one that cannot be sheltered from contaminating factors for study. Man is understood to be self-defining, and self-definitions themselves are dynamic and fluctuating. Practice has within it certain rules about appropriateness, and appropriateness, in turn, connotes a vision of the agent in relation to society. Empirical methods can neither capture practices that constitute mutual action nor the social matrix wherein individuals act (Taylor, 1987).

Benner and Wrubel (1989) point out that the significant breakthroughs of the 20<sup>th</sup> century have been related to the capacity to understand human physiology and disease processes, which in turn derives from the technological view that grew out of the Enlightenment. This detached, objectifying approach reduces phenomena to techniques such as cause and effect modeling and orders dependent and independent variables in such a way as to make them amenable to statistical manipulation. While important for answering certain kinds of questions, these methods cannot account for the everyday, common, human experiences that are both historical and temporal, and are based on participating in language and cultural practices. Thus, ahistorical and atemporal methods, which disregard language and cultural practices, strip human experiences of their meaning and, in doing so, tend to close down rather than open up the exploration of human experience in all its richness (Benner, 1985; Allen, Benner & Diekelmann, N., 1986; Plager, 1994).

Summarizing the views of several nursing authors on the advantages to nursing of research based on interpretive phenomenological approaches, Annells (1995) states that these methods facilitate a focus on the experience of nurses and patients existing in a health attainment/maintenance environment; a valuing of whole persons who create meanings; a consideration of contextually meaningful experience; a seeking to understand daily living and practical concerns; and consideration of nurses and patients as entities, or beings of Being. Munhall

(1994) takes the position that nursing care planning requires an understanding of the various lived experiences which arise from persons telling their stories and suggests that understanding is perhaps one of the most important gifts that one human can give another. Reeder (1995), sees the advantages of interpretive inquiry to be: an emphasis on the universality of language and a fostering of the art of listening to the speaker and to the context /meaning of the experience. In addition to these views, other authors have disclosed the moral ethical aspects of nursing as dimensions that demand full consideration, especially in a profession that finds itself at the crossroads of technological demands for efficiency and human pleas for caring. Authors such as Benner and Wrubel (1989), Watson (1985), Bishop (1996), Bishop and Scudder (1990), Gadow (1990) and Chinn & Watson (1994) all strongly assert that nursing care is a moral ethical undertaking and thus cannot, and must not, be divorced from the processes of personal engagement, reflection and interpretation. Hermeneutical phenomenology offers a way to engage, reflect upon, and interpret human experience and ensures that the process (when followed in a manner that is consistent with the philosophy) is thoughtful, cautious, ethical, modest, tactful, connected, open, and attuned.

The phenomenological approach is based on a constructivist semantic conception or worldview that makes a number of assumptions including the view that all theory is based on interpretation. According to this view, there is no such "thing" as objective reality since all observing involves seeing from a particular

perspective, based on a certain experience, and all explanation involves understanding. Everything we know is thus subject to interpretation.

Accordingly, subjectivity and context do not "get in the way" of understanding but are themselves important routes to understanding. As has been discussed in a previous chapter, much care is taken in trying to discern the historical and social contours that shape the preconceptions of both the author/participant and the author/researcher. This process of discernment is not done with the objective of ridding studies of bias but rather creating an appropriate "fusion of horizons" <sup>3</sup> (Gadamer, 1999).

Hermeneutical interpretive phenomenology is also an approach to thinking about what it means to be human and it is an approach that illuminates appropriate ways of "getting at" how humans understand themselves. Building on ideas originated by Husserl and Dilthey, which were primarily epistemological in character (i.e. how we come to *know*), the philosophers I have selected to inform this study, i.e., Kierkegaard, Heidegger and Marcel, all came to expand these concerns to ones of ontology (i.e., how we come to *be*). Gadamer, another

<sup>&</sup>lt;sup>3</sup> Ricoeur (1998), points out that Gadamers notion of 'fusion of horizons' is a very helpful and fruitful one because it enables us to see that interpretation is about an intersection that comes to be where the experience of the author/participant and the understanding and experience of the interpreter cross paths. One attempts to come near while at the same time maintaining distance. This signifies that we live neither within closed horizons, nor within a unique horizon, thus there is a tension between what is one's own and what is alien, between the near and the far and hence the play of difference is included in the process of convergence."(p 62).

philosopher whose understanding guides this study, emphasizes a different way that existing beings relate to the world. Agreeing that what makes humans human is their overriding interestedness in who they are and being themselves, truly and understandingly (Madison, 1988), these philosophers share a common interest in the modes of being and the processes by which the basic structures of being are made known.

In illuminating modes of being, Kierkegaard (from whom Heidegger drew much of his inspiration) suggested that we exist only in the mode of becoming. Thus, what we most fundamentally are, is not anything that is determined or fixed, but rather what we can become, i.e., possibility (Madison, 1994). An important part of Kierkegaard's project was thus moving beyond the objective, rational notions of arriving at truth by reaching certainty, to work out instead an approach to subjective truth in a life context that relies upon uncertainty to necessitate decision and to illuminate possibility. For Kierkegaard, uncertainty is not so much a defect of subjective truth as its essence. Uncertainty is a consequence of what is most essential to human life, namely our freedom to decide and our freedom to decide implies our responsibility (Kierkegaard, (1849/1989). Even if we cannot aspire to theoretical or intellectual certainty, we nevertheless have a responsibility to strive for truth. We have no choice but to choose because we must live life in one way or the other, and we must live with the consequences of the choices we make. It therefore follows that not to choose

is also to make a choice of a certain kind, albeit a less conscious one. Our responsibility to choose and to strive for subjective truth means that freedom is something that humans endure as well as enjoy (West, 1996).

If for Kierkegaard the meaning of being, or truth, is revealed in becoming and choosing in the face of uncertainty, then for Marcel the meaning of being is revealed in choosing to participate. To be a person, according to Marcel is to be "with", that is to say, to be a person is to be a part of, and a contributor to, in relationship with, something larger. There are three levels of participation discerned by Marcel: "the level of incarnation, which is actualized through sensation and the experience of the body as "mine"; the level of communion, which is actualized through love, hope and fidelity; the level of transcendence, which is actualized through the ontological exigence, primitive assurance and "blinded intuition" of being" (Gallagher, 1975. xiii). Marcel understands the relationship between level three and level two as one that is recursive. According to Marcel, being is only revealed in creative acts, i.e., the presence of being is only observable by being read back out of human experience. What kinds of creative and participative acts reveal the presence of being? Marcel points specifically to those acts that do not arise from solitary egos turning inward to contemplate themselves and their success in amassing goods and resources, but rather, being is revealed in generous acts that arise from, and are simultaneously constituted by, a self which is a self-in-communion. Self-in-communion, like the

work of an artist, which only comes to be in the artistic process, acts to reveal the meaning of being through love, hope and fidelity.

Heidegger's understanding of hermeneutics is that it is an interpretation of Dasein's being. Dasein is the German word for "being there". In the way that Heidegger uses this word, Dasein means the human capacity to comprehend its own existence. Similar to Kierkegaard's understanding of "interestedness" and Marcel's notion of participation as a mode of being, comprehending human existence for Heidegger can only be accomplished in the company of, and by understanding one's relationship with, other entities in the world. Thus Dasein's primary way of Being-in-the-world is one of concern, i.e., who we are is constituted by the concerns that engage us in our world and who we are is how we interpret ourselves in our practices and ways of engaging socially (Kock, 1995). It is in this practical, concernful engagement with the world, that the meaning of being comes to be revealed. Furthermore, not only is Dasein understood to be the capacity to comprehend human existence, it is also the openness, "the there being" in which meaning occurs or is disclosed (Grondin, 1990).

Heidegger helps us to understand that hermeneutics is the study of the phenomena of the world as they are presented to us, how we go about understanding the world in which these phenomena are presented, and how we understand being itself. Heidegger's philosophical project was to understand the meaning of being and the manner of its disclosure within the human experience.

In showing how being is revealed to us, he showed how temporality makes possible the understanding of being. As will be elucidated in the chapter to follow, the meaning of temporality only becomes obvious in a situation in which the finitude of existence is grasped. For Heidegger and following Kierkegaard, the understanding of being is the capacity to grasp one's own utmost possibilities for being. Accordingly, understanding is a capacity, an action, a projection and an event which discloses its character as futural. Young (1999), in quoting from a lecture given by Sheehan in 1999, says in regard to Heidegger's understanding, that "human beings live out their possibilities as they live *in* possibility; there is always something present and there is always something coming. It is when we synthesize these, or pull together "what I am" and "what I can be" – that we act to become ourselves". This notion of return to the self while projecting oneself forward upon one's possibilities, Heidegger calls Wiederholung, which literally means the fetching back of life's possibilities. A similar notion has been discussed by Kierkegaard as repetition, and by Marcel as recollection (Kochelmas, 1984). This movement of the self will be taken up in further detail in the chapter to follow.

Gadamer explores not so much the existential structures that reveal the self as a self to the self, but rather how we go about understanding the world in which phenomena present themselves. Coming to grips with how to understand the phenomenal world is, according to Gadamer, the appropriate concern for

Human Science. Seeking to show how inappropriate the method used by natural science to understand physics or chemistry is for studying human "being", Gadamer sought to show how the naïve belief in objectivity must be replaced by reliance on the fundamental human capacity for understanding. Only in this way can an approach appropriate for a human science be reached. In elaborating on Gadamer's thinking, Madison (1990) suggests that there are three central theses, which explain why understanding is not, and cannot be directed toward revealing the objective truth. These theses are:

- 1. To understand is to interpret. There is therefore no epistemologically "correct" representation of some objective state of affairs. Thus understanding is not reproductive but productive and transformative in nature;
- 2. All understanding is bound up with language. Language is the universal medium in which understanding itself is reached;
- 3. The understanding of the text is inseparable from its application. Thus, "understanding always involves something like the application of the text to be understood in the present situation of the interpreter" (p.109).

Unfolding a similar understanding of Gadamer's thought, West (1996) says that the interpreter's point of view is not something that can ever be escaped so there is no uniquely "true" interpretation. There can however, be better and worse interpretations. How to judge the adequacy of an interpretation is not a subject taken up by Gadamer, but is nevertheless, a subject that Madison considers important. Addressing the lack of clarity in this area, Madison (1988) offers nine criteria by which to judge the adequacy on an interpretation. These are:

- 1. Coherence. The interpretation presents a unified picture and does not contradict itself. If contradictions exist in the text itself, the interpretation makes sense of these contradictions.
- 2. Comprehensiveness: The interpretation presents a unified picture of the thoughts of the author as a whole.
- 3. Penetration: The interpretation brings out the underlying intention of the author as an attempt to resolve a central problematique.
- 4. Thoroughness: The interpretation answers or deal with all the questions it poses to the interpreted text, or which the text poses to the interpreter's understanding of it.
- 5. Appropriateness: The questions the interpretation deals with are ones raised by the text itself, i.e. the interpreter avoids using the text to deal with one's own questions rather than the questions the author was concerned with.
- 6. Contextuality: The author's thoughts must not be taken out of context, i.e. without due regard for the circumstances and the historical, social context in which the author was situated.
- 7. Agreement: The interpretation agrees or fits with what the author is saying. This means that the interpreter does not attempt a 'hermeneutic of suspicion' whereby the author's words are disregarded as not disclosing what was really intended.
- 8. Suggestiveness: The interpretation is fertile in that it suggests questions that stimulate further research and interpretation.
- 9. Potential: The interpretation is capable of being extended in that it reveals implications that relate in a harmonious way to each other (p.29-30).

Having outlined some of the key tenets of hermeneutical phenomenology as a human science, and the implications that arise for a method that is congruent with the philosophy, I now discuss the construct of intersubjectivity and its relation to the notion of the self.

Intersubjectivity and the Self

Why is an understanding of these constructs important for this study? The chapter to follow offers the findings of the study and brings the philosophical frameworks of Kierkegaard, Marcel, Heidegger, and Gadamer into converging conversation with the texts gathered for the study. In this way it is shown that individuals undergoing adversity experience themselves as changing. Adversity brings about a situation in which the *self* may be experienced as being fragmented, flawed, confused, perplexed, lost, fearful. Yet, in reflecting subsequently on the whole experience some participants describe themselves as having grown or become better people as a result of the experience. Other individuals, on the other hand, see themselves as having been more or less permanently robbed and diminished by adversity. Thus, it is important to ask some questions about how it is that some "selves" come to be enlarged and enlightened while others come to be minimized and degraded. Further reflection on these questions reveals that the question of what the self is and how it comes to know itself must first be broached and I turn again to the philosophers for help in addressing this outstanding question. Is the self "what" we are in our essence, and, if so, where does this essence come from? Alternatively is there another way of understanding "who" the self is and how it comes to be constituted?

#### The Self as Narrative

Hermeneutical phenomenology, which can be understood as a project devoted to overcoming the mind/body or objective/subjective split begun by Descartes, takes the position that the self is not a 'what'. The self is not a kind of thing "that can be conceptualized as some kind of essence which somehow underlies, supports, is the basis and cause – or else, the transcendental, overarching unity" (Madison, 1988. p. 9). Drawing on the work of Schafer, (1978), Madison asserts rather that the self is a manifestation of human action. It is itself an action, the action of speaking about itself. When we tell stories to ourselves about ourselves, we are simply enclosing one story within another. Schafer (1981, p.31) states that the story about the self is "the story that there is a self to tell something to, and a someone else serving as an audience who is oneself or one's self. The self is a kind of telling about one's individuality. It is something one learns to conceptualize in one's capacity as agent; it is not a doer of actions. The inner world of experience is a kind of telling, not a place" (Schafer, p.86). Madison, (1988, p.12), drawing on Gadamer's understanding of the linguisticality (or dependence on language) of all of human experience, says further that:

The self is the way we relate our actions, past, present and future. The self is the way we relate, account for, speak about our actions. The self is the story we tell ourselves and others, weaving together into a single fabric, as

any good story teller does, actions and events; it is the autobiography we are constantly writing and rewriting.

So if the self is the stories we tell ourselves and others about ourselves, and if there is no such thing as self as essence, how, according to hermeneutic phenomenology, are we to judge whether our own stories about ourselves, or other's stories about themselves, are authentic, true and coherent or are alternatively contrived, false, and inconsistent? Madison (1988, p.13) says that:

The problem of "personal identity" of the unity and constancy of our selfhood, is nothing other than the problem of maintaining coherence and continuity in our stories, and of following up and doing those things that we tell ourselves and others that we will do.... Thus we may say that the self is the unity of an ongoing narrative, a narrative which lasts a thousand and one nights and more — until, as Proust might say that night arrives which is followed by no dawn.

So far we have seen that truth, according to hermeneutical phenomenology, is not objective certainty and self is not essence. Yet, reaching these conclusions about the nature of reality does not mean a descent into either nihilism or relativism, where everything goes and one understanding or interpretation can be considered as good as the next. As Madison has shown, interpretation strives for truth based on attention to principles that disavow partial views, precipitous formulations and self-serving agendas. In addition, the tradition of hermeneutical humility assumes that no one interpretation can ever be considered final or ultimate; everything is always "open" for discussion. But, if human truth can neither be seized and

caused to stand still using objective tools of measurement, nor secured by retreats into isolated subjectivism, (as Marcel in particular pointed out), where then, can we look for experiences and understandings that neither err by objectifying nor privilege by subjectifying?

Art, Poeticizing and Literature as Disclosing Human Experience

Heidegger, Marcel and Gadamer all agree that art of many forms helps us to see into the heart of the hermeneutical experience. This is because art (at least good art) speaks to, and resonates with that which is universal in the human experience, i.e., we experience in a work of art a deeper appreciation of our own and the artist's human experience, and we appreciate that the artist in some way has attempted to address and interpret a human problem, challenge, or dilemma. Marcel possessed a keen insight into the capacity of art to disclose human experience since, as a playwright and a philosopher, he published a number of plays. In reading these plays, some of which have been collected and published by Gallagher (1975), one is transported beyond mere definitions of existential and ontological concepts to experience compellingly some of the dilemmas and conflicts that lie at the heart of the human search for meaning. Heidegger and Gadamer also shared an understanding of art as unconcealment of being, and both contemplated the poetry of Holderlin and the prose of Rilke (1934) in depth. It was from these sources that they drew

many of their insights into the nature of being and the role of language in the hermeneutical experience.

Gadamer (1999), in illuminating the importance of art to the interpretive enterprise, says that it is the encounter with art that helps us escape the technical virtuosity of our day with its intent of filing things into pigeonholes. Poetry fulfills itself and does not seek verification of its understanding elsewhere (T& M. p.111). Watson (1994, p. 9), in drawing extensively on Gadamer's thinking to encourage nursing to develop its aesthetic ways of knowing, says:

A genuine poem allows us to experience "nearness" in and through the linguistic form of the poem. In other words, although fundamental human experiences always change and are constantly subject to change, the poem does not fade, for the poetic word brings the transience of time to a standstill. It stands written, where its own presence is in play....The poem not only helps us in "making ourselves at home", but also stands at the side, holding up our familiarity to us as if in a mirror.

Munhall (1994, p.116) suggests that art, as nursing, "challenges us to confront tension, ambiguity and disorder. Unpredictability is not filtered out but presented as part of being." Van Manen (1990) both endorses and describes the use of literary sources (poetry, novels, plays, biographies and autobiographies etc.) as case material and textual resources for phenomenological writing because these kinds of sources convey powerful examples, sometimes through the exquisite use of language, of vicarious and actual lived experiences. He offers three reasons for consulting extant

publications as part of a phenomenological study (p. 74 - 76). These reasons include:

- 1. Phenomenological literature may contain material that has already addressed in a descriptive or interpretive manner, the very topic or questions that preoccupy us.
- 2. The work of other phenomenologists turns into a source for us with which to dialogue, thus helping us to partake in a tradition.
- 3. Selected phenomenological materials enable us to reflect more deeply on the way we tend to make interpretive sense of lived experience. By reading the way other scholars have innovated methodologically, looked at phenomena or revealed dimensions of meaning, we are able to develop an approach that brings out our own strengths and we are also able to notice the opportunities that exist for gaining greater interpretive depth.

Having elaborated on the overall philosophy of science and the research methodology that guides the design of this study and having discussed understandings of Kierkegaard, Marcel, Heidegger and Gadamer considered to be of particular relevance for this study, I will now address the procedural aspects of the research process. This account will offer a description of the participants, methods of gathering data and the hermeneutic/interpretive method of analysis.

## **Study Participants**

Twenty people who endorsed living through an experience of adversity participated in this study, either by writing a story of their experience of adversity (seven), or engaging in a conversation, or a series of conversations about their

experience of adversity (thirteen). Of the twenty people who either wrote stories or engaged in conversation about their experience, twelve were women and eight were men. The age of women ranged from mid-thirties to late seventies and the age range of men was mid-forties to early eighties. Of the twelve women participating, eleven were Caucasian and one was Asian. Of the eight men participating one man was Afro-American and the rest were Caucasian. Marital status among men and women included single, common-law, married, divorced and widowed and employment status included individuals who were unemployed and receiving social assistance, home-makers, those employed outside the home and retired persons.

# **Data Gathering**

In addition to the participants who were recruited for this study and, consistent with hermeneutical phenomenological approaches, I carefully read six extant autobiographies pertinent to the lived experience of adversity. Descriptions that stood out as particularly significant were used to identify themes and these passages were excerpted to substantiate themes. Autobiographies selected included the story of losing career aspirations and other hopes for the future due to a chronic disease (Goldstein, 2000); the story of traumatic injury in a diving accident (Selder, Kachoyeanos, Baisch & Gissler, 1997); surviving the collapse of the trade towers (Devito, 2001); losing an important relationship (Nouwen,

1996); growing up in a dysfunctional family (Dane, 2002) and two stories of becoming ill and struggling with depression (Mays, 1995; Solomon, 2001).

Individuals who were recruited specifically for this study and who wrote stories or engaged in conversations about their experience came by referral from colleagues, by self-referral, by identifying themselves and providing email addresses in newspaper articles or were referred by other participants in the study. Upon receiving information regarding individuals' suitability for the study or potential interest in the study, I initially contacted people by emailing them or by speaking with them in person or by telephone. Details about the study were given, and a follow up letter providing written explanation of the study was provided (Appendix A). In addition, a consent form (Appendix B) was given to all persons who expressed interest in this study. After consent for participation in the study was received, I engaged participants in conversation about their experience or I provided guidelines for the writing of their stories. Guidelines for conversations and writing stories are contained in Appendix C.

As stated in the consent form, the anonymity of the participants was guaranteed at all times by altering the names and locations given in stories or conversations such that the identity of participants could not be reconstructed. In some cases however, participants upon reviewing interpretations of their stories, explicitly requested that their real names "stand". Reasons given for such requests included the wish to "contribute a gift with a name attached", the sense

of wanting "to reveal myself more fully" and the sense that a "phoney name takes away the sense of total truthfulness". When such requests arose participants were asked to sign a form (Appendix D) verifying their choice to reveal their first names, despite the guarantee of complete anonymity. In addition, participants were given the choice to withdraw from the study or refuse permission for the use of their interview or text at any time. Participants were offered the options of writing a story or engaging in conversation. Those who preferred to engage in conversation were offered the choice of being tape-recorded or not. In cases where tape-recording occurred, all tapes were kept in a locked drawer and transcripts of tapes were altered such that names and places were replaced by pseudonyms in order to preserve the anonymity of participants. In cases where conversations occurred without the aid of tape-recordings, pseudonyms were also used in field notes and field notes were stored in a secure, locked place.

### **Data Analysis**

The participant narratives and relevant published stories were analysed hermeneutically using the interpretive phenomenology previously described. The analysis revealed the common experiences and shared practices and meanings of being a person who had experienced a situation of adversity, in which life turned upside down and meaning and purpose in life proved to be elusive. I was guided in the development of my interpretive skill by a research team comprised of Dr.

G. B. Madison, a doctorally prepared 'hermeneut' and a Doctoral Student pursuing studies in hermeneutical phenomenology. I conducted the primary ongoing data analysis or, more appropriately stated for giving an account of work done within the interpretive paradigm, all interpretations were done by me, while seeking clarification and agreement through regular input from the research team.

The approach to interpreting a text is difficult to describe. Trying to offer a written description of how interpretation occurs suggests a linearity that belies the complex, fluid, interwoven nature of the experience (Diekelmann & Ironside, 1998). Nevertheless, it is important to give an account of the careful, rigorous approach taken to distilling the meaning conveyed in stories and conversations. Data analysis began with a careful reading and rereading of each story or conversation. As each text was read, attention was given to particular parts of the text which stood out as being particularly relevant for what was of interest to this study. These parts of the text were excerpted and interrogated deeply for the meaning they conveyed. The meaning of the excerpts was then condensed into a theme. The themes or parts of the story were then brought back into consideration with the meaning of each story as a whole by formulating and interpreting the personal ontological/existential challenge posed by adversity, and related in the story. Once themes had been identified, the philosophical understandings of Kierkegaard, Heidegger, Marcel, and Gadamer were brought into converging conversations with each story for the purpose of illuminating both the meaning of the story and the meaning of adversity as that which calls the meaning of being into question. Often, I searched for and included poetry that resonated with the nature of the ontological challenge or breakthrough that the participant described, as a way of deepening my understanding of the experience by coming "close to it". I found Watson's understanding of the role of poetry to understanding to be "true"; it does hold up one's familiarity with the experience as if in a mirror. Reflections on the story as a whole and the use of poetry to evoke a deeper understanding of the ontological dilemmas and possibilities contained in the story, signalled a readiness to embark on an overall interpretation of the text of the story. Care was taken to consider Madison's 9 criteria by which to judge the adequacy of an interpretation in the development of an interpretation of each story. Stories and transcribed conversations and their accompanying thematic analyses, ontological formulations and overall interpretations were then given to members of the research team for review and feedback and the participant was given a copy of the interpretation as well. Participants were invited to meet to meet with me to discuss the interpretation of their story and many accepted the invitation. This was not done to seek validation of having arrived at the "correct" interpretation as some form of Schleiermachian deepening my understanding of their experience. Feedback from participants was a very positive experience for me as I learned of the therapeutic effect of having one's story considered in depth and having the ontological issues clarified. One

research procedure<sup>4</sup>, but rather to engage participants in further dialogue with a view to participant remarked: "I really feel understood and what is more, I understand myself better".

As story after story and conversation after conversation were analysed, certain themes began to appear with regularity and, when this occurred, care was taken to articulate themes in a way that captured accurately and precisely the common meaning of the themes. Care was also taken to record themes from each story in a manner that enabled easy retrieval. While several good software packages for qualitative work are available, my desire to stay as close as possible to the data, necessitated developing my own system for data storage and retrieval. Thus I took note of when strong consistency in emergent themes became apparent from one story and conversation to the next, as the correct time to bring themes with their accompanying excerpts together into one text. The text generated from this compilation of themes and accompanying excerpts constituted a kind of anthology of experiences, meanings, actions and practices and this text was then analysed for patterns or relationships among themes. Once patterns were identified, the insights of the aforementioned philosophers were again brought

<sup>&</sup>lt;sup>4</sup> Schlieremacher contended that the criteria of a good interpretation should be congruence with the meaning intended by the author. Heidegger disagreed with Schlieremacher stating that this understanding restricted interpretation to the psychological and individual, blocking ontological understanding of the meaning of being. Gadamer (1999, p.295-296) says that interpretation is directed to revealing the "in between"; that which is between the familiar and the alien. Moreover interpretation is not mere reproduction but it is production of something new. Madison goes one step further and suggests that a useful interpretation is one that is transformative!

into a converging conversation with the patterns until the structure of the experience of adversity was revealed as well as the practices that people engaged in to reconstruct meaning. As I reflected deeply on people's interpretations of what had been learned from living through adversity, it became apparent that they were beginning to articulate not only the meaning of the experience of adversity, but the way in which they had come to view the meaning of life.

Having elaborated on the overall philosophy of science and the research methodology that guides the design of this study, as well as having outlined some key understandings of Kierkegaard, Marcel, Heidegger, and Gadamer that are particularly germane to this study, I have then presented procedural aspects of the research process including a description of the participants, methods of gathering data and the hermeneutic/interpretive method of analysis. With this foundation in place I am now ready to present the findings of this study.

### CHAPTER FOUR

### ADVERSITY AS TURNING, DWELLING, CALLING

#### Introduction

As reflections on adversity as a time in life when the world is turned upside down, or when significant hardship, difficulty and frustration are experienced, all stories, conversations and extant published autobiographical accounts gathered for this study describe a common experience. This is an experience in which plans for the future come under grave threat and life is thrown into uncertainty and confusion. Expectations and hopes for the future are called into question and plans undergo significant revision or are ultimately relinquished. Yet, although all stories and conversations reveal a common experience in which major disruption as traumatic turning occurs, two very divergent understandings emerge in the meanings that people give to their experiences and to life.

Some people, in reflecting on their experience of adversity, see in it a set of losses that are more-or-less permanent, unremitting and inescapable, whereas others find in their experience of adversity hidden opportunities, new directions, liberation and deeper meaning in life. The interpretations of life that capture these differences are: 'Living as Losing' and 'Living as Learning'.

The interpretation of Living as Losing unfolds an understanding of adversity not only as irreparable breakdown, but an underlying experience of *life* as irreplaceable loss, perpetual suffering, and narrowing possibilities. Living as Learning, on the other hand, illuminates an understanding of adversity as difficult but profound experience from which much has been learned. This perspective engages life as a dynamic process, i.e., that which never stands still but which rather is continually changing. As such, living life fully means learning to yield to the inevitable loss and suffering associated with change and learning to discover, in the midst of disruption and disjuncture, new meaning, direction and purpose. Adversity, according to this understanding, is not a fixed and diminished end point nor is it reducible to a wasteland experience.

This chapter traces diverging interpretations of the meaning of life as they come to be understood by reflecting on a time of adversity. This is accomplished by first uncovering the structure of the experience of living through adversity and then by tracing similarities and differences in interpretations, practices and ways of living through the experience. Accordingly, three main themes describe the structure of the experience and enable a discussion of dimensions. These themes are: Adversity as Turning, Dwelling and Calling. Dimensions are organized under each of the themes to illuminate, more specifically, common and diverse interpretations and practices. Findings are discussed with reference to these themes and dimensions, and are substantiated by drawing on excerpts from stories

and conversations. These understandings are then brought into dialogue with the philosophical frameworks of Kierkegaard, Heidegger, Marcel and Gadamer not only to uncover the existential and ontological challenges imposed by adversity, but to disclose the very structures of human existence which reveal the challenges as challenges. With a clearer sense of the existential and ontological confrontations, collisions, invitations and possibilities imbedded in the experience of adversity, I am then in a position to discuss the various ways in which people come to understand their experience of adversity and the ways they conceptualize the meaning of life. A schematic depicting the relationship of dimensions, themes and patterns is depicted (Figure 1).

# Fig. 1 Structure of Adversity, Practices and Meaning of Life

### Turning

Turning away from the Everyday

Turning toward the Alien and Ominous

## **Dwelling**

Dwelling in Captivity and Exile

Dwelling with the Finite

Dwelling Resolutely Finding Refuge & Awakening

Dwelling Resignedly Facing Defeat & Acquiescing

### Calling

Calling as Discovery
Presence, Caring, Belonging
Becoming Free
Finding the Gift
Healing by Helping
Transforming Bad with Good
Finding Meaning in Being
Seeing Life in a Different Light

Callling as Concealment
Absence, Apathy & Abandonment

# Meaning of Life

Living as Learning

Living as Losing

### Adversity as Turning

Conversations, stories and published autobiographical accounts of living through a time of great difficulty confirm an understanding of adversity as a time of turning in which one turns and is turned away from that which is familiar, desired and expected. As such, this turning is experienced as the threatened or irrevocable closing down of possibilities. The turning involves loss, separation and alienation of varying severity and it can occur abruptly or gradually. In addition, the turning brought about by adversity can arise as disquieting inner turmoil or unbidden external event. Whether arising from within or from without, the experience of turning and being turned in a new direction, common to all forms of adversity, is an experience of pain, perplexity, disruption and departure. That which is familiar fades from view and, in its place the alien, ominous and appalling looms.

Turning Away from the Everyday and the Taken for Granted

Sarah describes the familiarity and ease of life before her teenage daughter's gradual downhill slide:

We were a young family. We had married young, at age eighteen and twenty, and we bought our first house. Our plan was to raise our children in a loving home, and have wonderful family times with our extended families. This is what I had expected our lives to be — a perfect family, healthy and happy, doing normal family things, on a normal timeline. We lived in nicer homes and took nicer vacations as the family finances

expanded in an appropriate way. We had lots of friends who admired our drive and accomplishments. Life was unfolding as it should....But then things changed. It was little things at first, just irritations – typical teenage stuff, everyone said. Small amounts of money missing, calls from the school that she was skipping classes, defiance at home, foul language, no respect for other's property. But then she quickly moved into stealing the car, staying out all night, sleeping all day (age 14)! .... Ultimately she was expelled from several schools. There were drugs, alcohol, body piercing, tattoos, the clothing and language of a prostitute....

John, an executive working for a trading firm in the Trade Tower on September 11, 2001 describes an abrupt jolt from his usual morning work routine (Devito, 2001. pp. 18,20):

It was ... [a] sparkling September Day when I unlocked our office on the eighty-seventh floor of Tower One in the World Trade Center... I checked my e-mail, glanced through the papers on my desk, reached for the phone to – the room lurched right. I nearly fell off my chair, then clutched the desk as the room jolted left. An earthquake? A ceiling tile clattered onto my desk. Light fixtures dangled, wires spitting. "It's a bomb!" someone yelled.... The rest of the corridor was gone. Where a row of doors had been, I found myself starring down into a hellhole of fire and twisted steel.....the ceiling exposed wires sent showers of sparks into the crowd. Small fires crept along the floor. There were screams, people crying, people praying.

Katrina, contrasts the lightness and luxury of life before the discovery of her husband's malignant lump with the radical challenges following it:

I wondered how many persons were looking out their window, for the return of someone – a child – late from school; a spouse – too long at the pub; or, as in my case for a husband who was consulting with a doctor about a disturbing lump. How long had I been waiting? He was late! It did not look good! Yet, I still kept hoping there could have been an emergency and the doctor was delayed. Soon we would be laughing about the harmless lump under his arm. A car door slammed; I saw my husband emerging from a cab, paying the driver, and head bowed, he walked across

the square. I bolted down the stairs with hope and dread, flung open the door, and stomach tightening, read the expression on his face. It could be serious, and probably was! My husband was a successful scriptwriter.... We enjoyed a wonderful social life and the sense of humor of the Londoners. London was a dynamic city – something always happening – it was a bustling place.... All of that changed with the appearance of a lump. Ironically enough, 'the malignant lump' came during the time of great enjoyment, possibly the best time of our life.

Tom tells a story of immense, horrific and catastrophic loss descending suddenly out-of-the-blue in the prime of his life (Selder, Kachoyeanos, Baisch & Gissler, 1997, page #):

Some years ago, while vacationing in Florida, I went swimming off the Sarasota Bay. I was jumping off a tree that hung over the bay. The first time I landed on my feet in shallow water, so when I climbed onto the tree again, I dove out further, toward what I thought was deeper water. But the water was not deeper. I hit a sandbar and fractured my sixth and seventh vertebrae. ... The next thing I knew my brother was pulling me out of the water onto the shore. Then I blacked out. I'm told the paramedics came and quickly took me to the local hospital. I woke up in the intensive care with a severed spinal cord. I was on a turning bed with stabilizing tongs in my head... I was virtually helpless and was told my paralysis would be permanent. I had no movement from the armpits down. The nurses had to do everything for me: brush my teeth, bathe me, take care of all of my bodily functions.

David an American University Professor describes the sense of life caving in on him when he wakes up in hospital and realizes that a mail bomb has irreparably damaged his eye and hand (Gerlerntner, 1997, p.16):

When my life came to a screeching halt and I woke up in the hospital, I was the driver who only remembers at the instant he slams on the brakes that he has piled a ton of baggage on the rear seat, and it is all streaking toward the back of his head.

Thus we see in all of these excerpts the sense of adversity as a gradual or abrupt turning away from the expected range of possibilities characteristic of living in the everyday. That which was formerly anticipated and relied upon is swept away and a new set of concerns and priorities suddenly come into view.

Thus the "perfect" family is confronted with imperfection; survival suddenly supplants business as a priority, and health, ease, luxury, independence, career, family life and social standing are all jeopardized. An important question that arises in consideration of such evidently severe disruptions is how these individuals come to understand themselves during these experiences and as they subsequently reflected on these experiences later in life. What existential dilemmas and ontological challenges are posed? What insights if any, are gained? Do these insights, where they accrue, have any lasting impact on subsequent choices and ways of living?

Kierkegaard suggests that the loss of being able to take the unfolding of life for granted has potentially far reaching implications. He explains why is so. The loss of the taken-for-granted is a loss of the state of immediacy. Immediacy is, a mode of being that does not reflect upon its' actions in relation to the being that it understands itself to be. Rather immediacy promotes a kind of unreflective, automatic finding of one's way around one's world, based on conventional notions of what one can and should do:

The immediate person (in so far as immediacy can occur entirely without reflection) is specifiable only as soul, his self and he himself a something

included in the scope of the temporal and worldly, in immediate continuity and it presents only an illusory appearance of having something eternal in it. Thus the self coheres immediately with the Other – desiring, craving, enjoying etc... (F&T/R p.81)

Heidegger illuminates a similar understanding of the existential effect of being caught up in the everyday. The more one comes to define one's self as the self in relation to the conventional other, the more one risks becoming estranged from the self, or, to put it another way, one risks becoming inconspicuous as a self to the self. Thus, a life lived out in the everyday and the taken for granted holds within it the risk that what is crucially important to the self never comes to be understood. Or, even if some consciousness of that which is important does exist, this awareness can all too readily be covered over by slipping back into an assessment of the self that is based on conventional measures of success and value:

In taking care of the things which one has taken hold of, for, and against others, there is a constant care as to the way one differs from them, whether this difference is to be equalized, whether one's own Dasein has lagged behind others and wants to catch up in relation to them, whether Dasein in its priority over others is intent on suppressing them.... Existentially expressed, being-with-one-another has the character of distanciality. The more inconspicuous this kind of being is to everyday Dasein itself all the more stubbornly and primordially does it work itself out.... Dasein stands in subservience to the others. In itself it is not; the others have taken its being away from it. The everyday possibilities of being of Dasein are at the disposal of the whims of the others. These others are not definite others. On the contrary, any other can represent them. What is decisive is only the inconspicuous domination by others that Dasein as being-with has already taken over unawares. One belongs to the others oneself, and entrenches their power....The who is not this one and not that one, not oneself and not some and not the sum of them all.

The "who" is the neuter, the they." (B&T. pp. 118-119).

Implicit in the understandings of Kierkegaard and Heidegger is the idea of the lulling and tranquilization that occur in life as it tends to be lived in the everyday. In this taken-for-granted mode of existence there is no particular reason to question the meaning of one's life since all is unfolding according to plan. With reference to the stories, the idea has been explored that adversity changes all of that. Adversity is experienced as a painful departure; a wrenching away from the everyday – a situation of profound shock where nothing, or at least very little, can be taken for granted. This turning away from the everyday may hold within it the possibility for further reflection on the being that one is, disentangled from the seductions, whims, fashions, conventions and subtle coercions of the day. Yet, if Kierkegaard and Heidegger imply that there are hidden possibilities within adversity, the wrenching disjuncture does not, according to the accounts encountered in this study, offer quick access to meaning guaranteed to be acceptable to the self. Rather, as the discussion of stories and conversations subsequently reveal, access to acceptable meaning is most often gained only by way of a journey into alien, appalling and ominous territory.

Turning toward the Alien, Appalling and Ominous

Sarah says of her feelings in relation to witnessing the deteriorating behavioural pattern of her daughter:

I felt as though I was living in a war zone, unable to relax, feeling a permanent sick feeling in the pit of my stomach. This was my beautiful, brilliant daughter! We no longer recognized our child anymore. It was as though she was now alien to us. My child had died and been replaced with a monster.

In the events following his diving accident, Tom reveals how the alien and appalling shows up as the relinquishment of the personal and private to the impersonal and public (Selder et al, 1997, p. 64):

Right away [upon arrival at the Rehab hospital] they [Rehab staff] gave me the first shower I had had in six weeks. I was rolled naked into the bathroom on a cart that looked like a fishnet and sprayed down like an object. I felt very vulnerable. Before this I'd always been a private person and now I had to live with several people in the same room for many months. I felt an acute loss of privacy. I had to take showers with other people around and other people took care of my most intimate needs. There was never a place where I could get away by myself.

Natalie describes the theft of the safe and familiar by the dangerous and strange at a time when her son was an infant, when her husband was seriously ill with hepatitis, and when war broke out in the country where the family had been posted:

The next few months were a descent into hell. Despite the medication he [husband] was on, he continued to lose ground. When he woke up in the morning you could see the outline of his body as a yellow residue on the sheets. He became frightened and depressed and cried frequently ... apologizing for bringing us to the country and being a poor father and husband etc., etc. The person he became was a stranger and certainly not the person I married or expected to be the father of our son. To make matters worse, civil war broke out in the country. It seemed to me that everything was breaking down around me. This was not at all what I had expected of life.

David, the unfortunate recipient of a package containing a mail bomb, says in further confronting the spectre of life without a functional eye and hand (Gerlerntner, 1999. p.42):

It is not easy to convey the sense of stupefying unfamiliarity. My deep confusion is not a question of everyday tactics, it is the rest of my life. Permanent damage brings the whole rest of your life into play, pulls everything out of every closet and drawer and dumps it in a pile in front of you and wherever you go there is the rest-of-your-life-problem to climb over.

With reference to these exemplars, it has been shown that adversity constitutes a turning, and that characteristic of all 'turnings', there is the sense of departure, disappearance and absence; the sense of being moved in a different direction – one that is not of one's choosing. The familiar fades from view and in its place the fearsome and formidable looms. The etymological roots of the word turning reveal a meaning of being whirled around an axis or center, or of being reversed and inverted. The action and art of moulding, shaping or working something on a lathe are also conveyed in an analysis of the roots of the word. Other root meanings of the word include the notion of a point where a road or path turns off and where one embarks on a tortuous course of deflection, deviation and winding (Oxford English Dictionary, 2002). Reflection on these definitions raises the possibility of considering two metaphors to reach a deeper understanding of the experience of adversity. These metaphors are the block of wood being turned on a lathe and the tortuous and winding path through

unfamiliar territory. Invoking the metaphor of lathe to stand for adversity as a life experience which moulds and shapes, and imagining a piece of wood as a symbol for human being which comes to be moulded and shaped by adversity, new questions arise. These are, what contours are becoming visible, and what purpose is being shaped in the interface of the wood with the lathe? As I further consider the lathe and the block of wood, it becomes clear that some types of wood lend themselves more readily to be shaped for some purposes than do others. I also see that a certain purpose for the wood is shaped by holding the wood in particular positions for certain lengths of time. There is thus a way of dwelling which is a "lending" of oneself to the coerciveness of being shaped by an experience of adversity. When I consider the metaphor of the winding and tortuous path through unfamiliar territory, I wonder whether, and how, people are sustained along their journey and how and whether they find their way home. Is there a way of dwelling in the turning with the unfamiliar, winding and tortuous that is self sustaining or which sustains the self? In order to pursue these questions I found it helpful to consider the turning as the context that calls forth a manner of dwelling.

### Adversity as Dwelling

In the turning brought on by adversity, recognizable landmarks and comfortable dwelling places are relinquished to an ongoing experience of being whirled on a lathe, climbing a tortuous path through foreign territory or being perpetually lost in an unsolvable maze. Life takes on the features of treacherous territory, sustained wandering and homeless exile. Moreover, there is the experience of taking up habitation with the uncertain, strange and fearsome. The self comes to be experienced as bereft, betrayed, bewildered, ill-equipped, insubstantial and even unrecognizable. In the losing of one's way, both inner and outer points of reference are simultaneously lost, as the stories the self tells the self about the self no longer make sense to the self. The plot-line has been lost. Life careens madly off course in the turning and skids to a stop in the face of an insurmountable obstacle. Or, like trying to find one's way in a labyrinth, each rounding of a corner seems like nothing more than a series of mirages, cul-de-sacs and confinement. Thus it can been seen that it is in the "skidding to a stop" in the face of the insurmountable obstacle or the sense of being lost in a labyrinth, that the sheer inescapability of the situation necessitates simply dwelling with what is.

Dwelling with "what is" is an experience that has been variously described as desert or wilderness experience – an experience of confrontation with danger and of formidable struggle. The etymological roots of the word from the earliest Old English include the idea of *duel* – of being stunned, led into error, hindered

and delayed, while later understandings of the word encompass the notion of abiding and continuing for a time in a place, state or conditon, as well as letting things remain as they are or letting be (Oxford English Dictionary, 2002) Dwelling with "what is" as a hindering or being held in a particular position as on a lathe, carries the meaning of captivity – a compulsory mode of existence, the sense of being confined and restricted to a realm of limited choices. Exile is another form of a compulsory mode of existence – the experience of being alienated and cut off and banished from access to support and authentic engagement (Marcel, 1963. Homo Viator: A Metaphysic of Hope [HV] p. 30). An abyss of confusion, chaos and insatiable need is yet another expression for the experience of living through adversity (Nouwen, 1996). Lacking a purpose and particular goals to strive for, there is no or only a vague sense of destination and thus little that compels action and striving. Accordingly, desire and will are diminished. Moreover, since there is no desired endpoint nothing has significance as a landmark along the way by which to judge one's movement. Movement loses the sense of progress and takes on the form of a vicious circle.

### Dwelling in Captivity and Exile

Sarah tells us what it was like to face the fact that her hopes for her daughter were not going to come to fruition:

I still thought that she would wake up one day and decide that if she wanted to go to university and become a veterinarian, she had best stop

this nonsense. This dream slipped away as I began to accept that this was not a "phase".... Sometimes, I felt that my eyes would always burn from crying, and that the lump in the back of my throat would never go away."

Katrina offers a glimpse into adversity as a confrontation with captivity. She tells what it was like to have to conceal loss and be confined by the demand of keeping up appearances in the face of her husband's serious illness and treatment for cancer and to be cut off from authentic engagement and support of friends and family:

My husband, the ever considerate person he was, timed his radiation treatments so as not to conflict with his work schedule. Consequently, no one at work ever suspected that anything was wrong with him. And therefore we had no support at all from his fellow workers. We were also cut off from the support of family and friends, as they were all in Los Angeles, California or in Canada [since we were living in London England at the time]. And therefore we had no support from his fellow workers.... While concealing his diagnosis and treatment from his colleagues, my husband also endeared himself to the medical team in England by teasing them about their antiquated machines and their soccer team, but I felt so alone. By keeping our fear to ourselves and acting like we had everything under control, we were left entirely to ourselves without guidance or emotional support.... He was in and out of hospital and he was steadily going downhill but the Doctors never admitted to me that his time was limited. I wondered whether his children from his former marriage should be summoned to visit him but the Doctors never gave me an indication that the end was so near.... By this time we were willing to share the situation with the few friends that we had in Toronto. But, our friends didn't seem to be able to deal with the issues that my husband's impending death seemed to raise for them and they withdrew from us. This was such a hard thing to accept... it was another loss.

Katrina also discloses the source of her greatest suffering – the failure to be intimately engaged with her husband in the co-creation of meaning in the face

of his impending death. This failure to be intimately engaged is experienced as a wounding refusal and senseless suffering:

The hardest thing is seeing my husband suffer like that. He was a good, honest, faithful person. He kept all of his promises. He was absolutely reliable and trustworthy. He suffered so much. He was in terrible pain. He didn't ever talk about what it meant to be dying and not once did he cry. Though a wonderful person, he was not a religious person. He didn't believe in God or in any kind of afterlife... so there was just a sense of the end approaching and of never being able to make any sense of it. We couldn't talk about it. I wanted to talk about it... needed to talk about it, but he just didn't seem to want to go there. My husband died alone.

Allison describes the exile and homelessness of a failed relationship and the ending of her hopes and dreams following her live-in boyfriend's suicide:

I'll never forget the telephone call when the cops called to say that they had found him [dead] in a motel. At one time I had hoped that we would be married but none of my dreams have ever come true. I had kicked him out of my mother's apartment where we had been living for a year, because he was back on drugs and wasn't working and was just basically living off my mother. The counselor told me to kick him out. That is the last time I will ever listen to a counselor. The situation was that I had no idea of what to do. I was pregnant with his kid, not able to work and he was dead. I didn't have many friends left. Nobody really wanted to help me. Needless to say the future didn't look bright.

John describes the sense of confusion, chaos and futility in the Trade Tower and characterizes it as an absence of God:

Burning debris cascaded around me. Without thinking, I snatched a broken piece of wallboard and beat at the flames. It was a moment before sanity returned. I rushed back to my office, where others were doing futile things too: collecting files, packing up big desktop computer... As chief operating officer I knew I should give some kind of direction, but what? Where to turn? I was a churchgoing man, but at that moment of fear and mounting chaos God seemed awfully far away.

Tom shares his desolate experience of exile as he reviews his apparently limited options following his diving accident (Selder, p.65):

I was very despondent. Before my accident I'd had a marriage, a child, a good car, a home and a job. Afterward, I was sitting in an apartment by myself reliant on others. I knew in the condition I was in I would not be able to get satisfying work. So I contemplated suicide, even planned how I would do it.

Joanne describes the sense of being banished into a world that has no meaning when her Doctor delivers bad news:

Well my doctor had been noticing that my white blood count had been low for some time...but not much was thought about it ... and then I just started losing weight... like I lost about 30 pounds pretty rapidly and she said... J, we've got to get to the bottom of this. So I said... Okay well lets get the tests done that need to be done... So I had a full battery of tests... including a bone marrow... And like my GP was going away on holidays...but she said she just wanted to get these tests done before she left but that I probably wouldn't hear back from her until she came back. So the next thing is that I hear from Dr. K. I couldn't tell anything was different...it didn't show on her face or I didn't see it and then she told me the bad news [that there were malignant secondaries]. It was like the world stopped... stopped completely...like there was nothing there in my world... it wasn't moving... it was frozen... nothing was real, and all I could think was your life is over. You're dead! You're dead!

Interwoven throughout these apparently diverse experiences is the sense of groundlessness that occurs when meaning breaks down. Life is without direction; one is no longer able to situate oneself at a given point along a coherent life plotline. Accordingly, as has been said there is the sense of descending into an ontological abyss. The necessity of making sense of current circumstances and

coming to an understanding of the self in relation to these circumstances arises as an urgent and necessary antidote to meaninglessness. Never before has that which was lost seemed so valuable and paradoxically it is the loss itself that points in the direction where new meaning can be found. Marcel (HV. p.31) says: "It may be in reality that, in tearing me out of myself, it [loss] gives me an opportunity of realizing far more acutely than I should have done without it, the nature of that lost integrity which I now long to regain."

In the face such lost integrity, the overriding questions become "Who am I and what is, and can be, the meaning of my being?" Alternatively stated the problem posed is "How is the self to understand itself, when what it needs to rely upon in order come to an acceptable understanding of itself, has apparently been threatened or lost?" From the excerpts above, it can be seen that Katrina yearns for what might have been but will now never be. John is a successful trader and a man who believes in God, yet, amidst the burning debris and human wreckage, direction is absent and God seems strangely hidden. Following his diving accident, Tom comprehends the enormity of what has been lost, and questions whether there is any kind of acceptable future in store for him. Joanne experiences a moment of extreme existential dread with the delivery of a very unfavourable diagnosis. Existentially speaking, Allison seems to be falling from a shaky footbridge into a yawning chasm below with the loss of relationship and then the loss of her boyfriend's life itself. Common to all of these stories is an experience

of extreme angst.

What is angst and how is it significant in enabling meaning to be restored or relinquished? Conventional understanding of angst sees it as a manifestation or symptom of loss of meaning but less readily grasped is how angst can be a conduit to meaning. Heidegger, in considering angst, acknowledges the presence of breakdown of meaning but moves beyond this rudimentary understanding to unfold the possibility of meaning arriving as potential that is hidden in the very experience of meaninglessness. According to Heidegger, various moods and feelings such as fear, love, boredom, guilt and angst are modes of attunement that reveal the meaning of being. Whereas fear discloses the world in a particular way as a place where threat from a particular source is likely to appear, angst as dread, unease, anxiety, malaise, displacement is more insidious and less identifiable. Angst, unlike fear, is not about a specific thing; rather, angst manifests concern about one's very being in the world. Hence, angst strips the world of its involvement, totality or significance. "In a deeply jarring experience, Dasein loses its' individualized concerns and is stripped down to its' naked self" (Inwood, 1999, p.17). In angst there is a sense of strangeness, of not being at home, or of the uncanny. "The security of everyday existence, in which the meaning of life seems well grounded and obvious, has been shattered. Anxiety is a moment of meaningless confusion, as the everyday perspective has it – but it is "meaningless" not in the sense that it is trivial, but in the sense that it involves a

deep crisis of meaning" (Polk, 1999, p.77).

For Heidegger, there is:

In angst the possibility of a distinctive disclosure since *Angst* individualizes. This individualizing fetches Da-sein back from its falling prey and reveals to it authenticity and inauthenticity as possibilities of its being. The fundamental possibilities of Da-sein, which are always my own, show themselves in *Angst* as they really are, undistorted by innerworldly beings to which Da-sein, initially and for the most part clings. (B&T, p. 178)

By these statements Heidegger takes us a step further into a deeper understanding of how adversity holds the potential for the 'they' self to become an individualized and authentic self. If the jolt out of the everyday and taken-forgranted brings throws into question the meaning of life, the angst associated with dwelling in meaninglessness is a further drawing away one away from the banal concerns of mundane survival involving as it does acquiring things, meeting social obligations and competing for recognition and power. As such, angst "individualizes", i.e., it reveals what really matters to *me* thereby bringing me in touch with who I authentically am. Without an experience of angst I will live out my life unconsciously enmeshed in conventional notions of what is important. Thus it has been shown by reference to stories and one conversation, that a feeling comparable to that described by Heidegger as angst, shows up in the dwelling with captivity and exile characteristic of living through adversity.

# Dwelling with the Finite

As is hinted at in the stories above, all of which involve elements of alienation, coercion and restriction, angst itself, as a mode of attunement to the meaning of being, arises in the consciousness of human finitude. Expressed alternatively, anxiety as an experience that necessitates meaning-making comes to presence most compellingly when one's very being is called into question. Thus, it is in the dwelling with the finite that a disquieting insight comes. This is that all of one's plans and dreams may not, or now evidently will not, be realized. Taking the notion of the finite as 'end' to its furthest conclusion, the understanding is reached that it is the facing up to death, as ultimate "end" in itself that the most intimidating and insurmountable challenge to meaning-making is posed.

Ann tells how her "close call" caused her to think about the importance of her own life in relation to her husband and children and how this understanding spurred her to a particular act which disclosed mutual recognition and caring:

I nearly died! I was driving along when suddenly the world looked strange and less recognizable. It was as if everything was framed in black and the frame was getting thicker and thicker and the world was getting smaller and smaller and more blurred. My heart was pounding and I realized suddenly that I was losing consciousness. I pulled over to the shoulder of the road and felt a sense of dread. My heart kept pounding and the beat seemed irregular too. I thought "You could die here.... I lay there for half an hour, thinking a lot of thoughts... I thought about my daughter, how lovely she is... I wanted to see her again. I thought about how lost she would be without me, how let down, how angry that I hadn't taken better care of myself. I thought about her beautiful smile, her laughter and her belief that life was a wonderful thing and that almost

anything was possible. Would my death destroy all of that for her? I thought about my son, so bright ... his deepness of thought, the darkness of some of his thoughts, his questioning and restless spirit. If I died, would there be anything he could ever take for granted again? I thought about my dear husband, left with the kids. How would it be for him – a house empty without my presence? A picture of him as aimless and alone ...so sad, so solitary, overwhelmed, missing me... In the midst of these thoughts, a sense of urgency took root. I thought "You have to make it home. You have to tell Mark how much you love him.

Natalie relates how in a situation in a foreign country that provided very limited access to crucial medical treatment, the meaning of her relationship with her husband presents itself clearly. This insight comes in the face of the realization that her husband was seriously ill and might not survive:

I could imagine very clearly what life would be like without him [husband]. I thought it possible that I could be taking him home to Canada but that my infant son and I would be in passenger seats in the front of the plane and that Mark would be in a coffin, as freight, in the back of the plane. I thought about how empty my life would be without him – the safety of his love, his adventurous spirit, his amazing encyclopedic knowledge of history and politics, his amazing sense of justice and his idealism, his red hair and his fiery temper and his ability to get over his anger quickly. I thought about our heated discussions and our plans for the future... lost, never to come to fruition. I thought about James [infant son] growing up without a father and of never being able to have his father at his wedding. I thought of never being able to grow old together and to have the comfort of uninterrupted companionship and shared memories. It was only then that I realized how much I loved him and needed him.

Elizabeth tells the story of her friend's experience of adversity as his health declines and a business deal cannot be concluded. With the sense of limited time left, a poignant urgency arises as possibilities that could restore some

sense of meaning are imagined. Simultaneously it is recognized that these possibilities may never be actualized:

About six months after the first attempt to sell the business fell through another buyer appeared. Again, we held our breath and prayed fervently. David was getting weaker and was in more pain; we could see it and feel it. Curative treatment had been abandoned and he had been told that all that could be offered now was palliative care. Time was so precious. If he could sell the business, there would be the time and money to spend with his wife and the girls [his daughters] doing the things now that he had hoped to do with them during his retirement.

The exemplars offered above substantiate the idea that adversity as an encounter with the finite, introduces the possibility of achieving personal freedom as a self that is disentangled from subjugation to others' notions of what is important. Yet, as the excerpts below will reveal, potentiality is not actuality. Some people's manner of dwelling with the finite does not call forth an urgency to find meaning but rather discloses malaise induced by a devastating assault.

Allison, in relating her continuing experience of adversity almost 3 years after the suicide of her boyfriend and father of her son, says:

A couple of weeks ago I got the news that my liver is not in good condition. In fact the Doctor told me that I had better make out my will. The news didn't come as a big shock to me. I have been drinking heavily for a long time. What do I think about the diagnosis [of advanced liver cirrhosis]? In a way I will be glad when my life is over. Other than my son and my mother no one really cares whether I live or die. My mother is in a nursing home and my son is developmentally delayed. I don't have a clue of what will happen to him after I am gone.

Gloria relates dwelling with the decline and death of her daughter, not as an abiding with the finite that calls forth meaning, but as a landslide that has buried her alive:

My daughter had many, many health problems and she was intellectually handicapped as well. I coped with her health problems and her slowness but then she got cancer on top of everything else. For three years there was nothing else in my life but her. My husband and I took turns taking care of her, night and day until she died... When she died I felt that I died too. I haven't been able to enjoy life at all since that time [10 years ago]. Two years ago my son was killed in a car accident. Many people said that I would go completely to pieces but I didn't. I just felt pretty much the way I have felt for 10 years... numb.

A consideration of the ways of dwelling revealed in all excerpts so far begins to trace some important differences. Although angst and a sense of running up against an impenetrable barrier seems to be common to all stories, in the experience of Ann, Natalie, and Elizabeth - the friend of David, clarity begins to emerge as to what really is really important. Ann's collision with the finite, for example, enables a fresh understanding of how intensely meaningful her life is in relation to her husband and children. Natalie grasps with greater clarity how much she loves her husband. In the context of time running out, Elizabeth comprehends just what is at stake for David and his family. In contrast, the stories of Allison and Gloria reveal the elusiveness of meaning. Unease is not linked to clarity or the compulsion to take action. Rather, there is a pervasive sense of passivity, lassitude and disablement, of dwelling in necessity, i.e., a resignation to life as it is, devoid of possibility and hope – mere survival. In

David, we see that it is the very consciousness that the time left to be with important others may be running out that illuminates the others and the self as cherished and beloved. Moreover, it is the treasured quality of being with others that illuminates time as that which is fleeting and precious. Being as that which comprehends, i.e., actively grasps and fully confronts its own finitude, has moved out of the everyday and the taken for granted, and has come to presence as that which is ephemeral and cherished. Listless survival on the other hand dwells in necessity emptied of possibility. In a human state of languid stagnation Being seems remote, indifferent, and shrouded.

Gadamer illuminates an additional dimension of experience that accrues in a kind of dwelling that actively grasps the significance of its' own finitude. This manner of dwelling not only holds forth the possibility that an understanding of what truly matters can become clear, but a certain humility in relation to life begins to emerge. In understanding that all that might be wished for may not happen, that time runs out, that humans are mortals, that the future cannot be secured and that suffering is inevitable, much is learned and experience is gained:

What a man has to learn through suffering is not this or that particular thing but insight into the limitations of humanity, into the absoluteness of the barrier that separates man from the divine... thus experience is experience of human finitude. The truly experienced person is one who has taken this to heart, who knows that he is master neither of time nor the future. The experienced man knows that all foresight is limited and all plans uncertain. The idea that everything can be reversed, that there is always time for everything and that everything somehow returns, proves

to be an illusion. Rather, the person who is situated and acts in history continually experiences the fact that nothing returns. To acknowledge what is does not just mean to recognize what is at this moment, but to have insight into the limited degrees to which the future is still open to expectation and longing or, even more fundamentally, to have the insight that all the expectation and planning of finite beings is finite and limited (T&M, p. 357).

Heidegger says of the experience of facing up to one's own death that it is the ultimate experience of individualization and disentanglement. This is due to two factors that must be confronted. These are that death is non-relational, (i.e. no one can die on my behalf or with me; when my time comes I will make the journey alone) and that death cannot be bypassed. "Thus Da-sein in grasping its own death, becomes disentangled from every and all dictates of the 'they' and free to relate " to *itself* as an eminent potentiality-of-being". (B&T, p. 234). By this Heidegger is saying that, in facing up to one's own death, one becomes free because the placing of one's life alongside the sure knowledge of one's coming death, reduces to sheer insignificance my former preoccupations with how others should have behaved in relation to me, or with how I fit on a scale that weighs conventional measures of success, status or power. Rather, I confront myself as I am, naked and stripped of all artifice and self-deception.

In a story comparable to Ann's and Natalie's stories (above), Joanne relates how her diagnosis of cancer enables her to face her own finitude and thus to see the importance of establishing different relationships with her grown children:

While my kids were growing up, life was difficult. My husband was abusive and there were often terrible fights. My kids were confused by all fighting that went on and they didn't know whose side to be on. At times they would side with my husband and at other times with me. After awhile they grew up and just drifted away trying to get their own lives going. When I understood that my time was limited, I felt so bad about all that had been wasted. I wanted to make it up to them and I could see that I needed to change but I was so worried that it might be too late!

Thus, it has been shown that, although the experience of adversity is a common experience, the understanding or interpretation of this experience can differ. Whereas all stories and conversations referred to in this study have described an experience which illuminates adversity as the turning from the familiar and desirable toward the alien and ominous which necessitates dwelling in exile with the knowledge of finitude and in the presence of angst, these stories have also begun to show a bifurcation in personal interpretations of adversity.

Amidst adversity and reflecting later upon it, some individuals come to a clearer meaning of what is important to them and are even overtaken by urgency to take action in light of this understanding whereas, for others, adversity is experienced as a near fatal blow that leaves them debilitated and apathetic. At this point, ways of dwelling such that possibilities begin to appear or alternatively remain concealed will be considered in further depth.

## Dwelling Resolutely and Dwelling Resignedly

As has been seen, an important dimension in stories and conversations is the angst of dwelling in the twilight zone between the meaning that 'has been' and the meaning 'yet to arrive', (or what has been characterized as groundlessness or abyss). Angst arises in relation to the questioning of one's very being. Thus 'dwelling resolutely' demands the absorption, taking in and ultimately the integration of what has occurred. One is no longer the 'who' that one was before the intrusion of adversity; life has changed fundamentally and new meaning must be made of oneself in relation to the circumstances one now finds oneself immersed in. Heidegger explains that resoluteness "does not escape from reality, but first discovers what is factically possible in such a way that it grasps it as it is possible as one's ownmost potentiality of being in the they." (B&T, p.275). By this, Heidegger enables an understanding that resoluteness brings forth a realistic and authentic evaluation of who I am and can be in relation to my circumstances. The ability to confront oneself squarely and without self-deception, (i.e. to stand anxiously and courageously in the 'no-way out') is a way of being that in itself seems to give rise to a sense of integrity and a coherent life plot-line. Heidegger says that resoluteness is seen when it "brings the self right into its being with things at hand, actually taking care of them and pushes it toward concerned being with others" (B&T, p. 275). A turning away from "facing up to" oneself and one's circumstances by neglecting to take care of things, on the other hand, seems to give rise to fragmentation, rigidity, constriction of the self and a diminishment of concerned being with others (dwelling resignedly).

Marcel (HV.p.36) further clarifies the differences between dwelling that is

resigned and dwelling that is resolute. He speaks of dwelling resolutely as non-capitulation that results in a kind of relaxation toward life whereas what has been called dwelling resignedly in this study, he refers to as a capitulation that results in a "tightening up" in relation to life. (HV. p.38).

At this point, a detailed examination is offered of the processes that elicit relaxation or rigidification of the self as they have been described in stories and conversations gathered for this study. First, however, and as a step on the way to examining these processes, attention is drawn to the fact that the challenge in confronting the self in relation to overwhelming events is not accomplished merely with a courageous 'facing up to'. Rather, a further gargantuan demand is experienced. This is to undertake a revised understanding of oneself not only in relation to that which presents itself variously as threat, captivity and exile, but this revised understanding must additionally move beyond confronting what has changed to be able then to integrate the meaning of the change into one's life. Such an integration of meaning is fundamental to the development and restoration of personal unity and coherence. Thus, this abrupt disjuncture or problematic episode brought on by adversity in one's life must be written into the plot-line of the personal story such that the unforeseen episode not only fits or bridges with what has gone before but also blends into, and harmonizes with, the plot-lines of projected future chapters. Projections of the future can be dismal and defeating, unrealistic and unachievable or they can gradually give way to constructive

liberating images arrived at with an admixture of realism, hope, imagination and resolve.

Nouwen (1996, p.114) in recounting his own time of dwelling with adversity when an important relationship failed, stresses the importance of coming to an understanding of the experience such that the understanding enriches rather than diminishes possibilities. He says: "You are faced...with a choice. You can choose to remember this time as a failed attempt...or you can remember it as a precious time when new things were begun"...[which needed] "to be brought to completion."

Thus, we see the complexity of coming to a new constitution of meaning. This new constitution must be based on a novel understanding of the past, present and future which has integrated and harmonized aspects of the nature of human existence as contingency (uncontrolled random events), necessity (the situation one finds oneself in which is not of one's choosing) and possibility (that which may yet arrive, is thus projected, imagined, hoped for, and appropriated).

Katrina gives us a glimpse of some of the difficulties encountered in coming to an acceptable self-script following the death of her husband:

I thought I would never get used to coming home from work and putting the key in the lock and feeling an almost physical blow in my stomach that my husband would not be on the other side. I felt angry with the Doctors; I thought they should have been able to do more. I found myself taking offense with people for little or no reason and would start an argument. I really thought I was going crazy. I didn't recognize or respect the person I had become.

Tom describes the loss of self that came with his complete dependency on staff to take care of his basic needs following his diving accident:

I lost a sense of who I was. I felt like a piece of meat. It took a long time to get my identity back.

Margaret says of her experience of living in the shadow of a very successful older brother:

I so wanted for my life to have mattered and to make a difference in the lives of those around me, but felt that I was never going to be anything but a disappointment in comparison to [my brother].

Ann shares how her own being comes to be questioned as she confronts the threat of losing her husband:

It was only when having these awful thoughts that I think I understood what it truly meant to love another human being and to be truly married to them. Our lives had become so melded together that I felt that I could be on the verge of not only losing him but of losing myself.

Robert says of the self-doubt he experienced when as a boss he was required to discipline a person he considered a personal friend:

This situation nearly drove me nuts. I had nightmares about it. I couldn't figure out what to do because I couldn't figure out what I valued most... my own self-respect as a decent and loyal friend or my success as an upwardly mobile career person.

Barbara says of her dawning awareness that she cannot be the person she is expected to be by her family and her religious community:

I think I kept trying to fit in and succeed, on their terms. But, that was like trying to fit a square peg in a round hole....I picked up many subtle and not so subtle messages that as a single woman, I had no social status: I was invisible and would remain so.

In all of the above excerpts, the self is scrutinized and evaluated for the extent to which it understands itself to be a unified, coherent, acceptable and more or less consistent whole. In an experience of adversity the self is not revealed to itself as a unified whole but as a part that is incomplete, wounded, conflicted or flawed. This is so since that that which was relied upon to unify the self as its meaning, purpose and direction has now been threatened or lost and the self that one wishes to become cannot be built on the self that has been. Insight as a seeing into the inner heart of things arrives but it is frequently insight at a price and without relief, since the possibility of regret and self-alienation has now been introduced. The awareness is reached that in life, as Gadamer so eloquently has articulated, not all possibilities are open and some possibilities will never return. Fissures and impassable crevices may thus open up in the self between the person that one is, the person one has been, the person one wishes one had been, and the person one wishes to be in the future.

For Marcel, this period of resolute dwelling and intense questioning is a necessary period of recollection, silent reflection and concentration and one which necessarily precedes and calls forth the experience of refuge, release and awakening. As well as a time of reflection and recollection, intense questioning

is an intentional and virtuous act. It is an act that intends the attainment of unity and freedom and it is an act that manifests courage and steadfastness in the unwavering pursuit of self-truth

...Recollection taken in its primary meaning of silent reflection or concentration of thought ... is the act by which I recover my being as a unified whole, with this recovery or reprise assuming the aspect of a relaxation or a release. In the depths of recollection I take a stand with respect to my own life and in some way I withdraw from that life, but not at all as a pure epistemological subject. For in this withdrawal I bear with me what I am and what my life perhaps is not... Recollection is probably what is least spectacular in the soul. It does not consist in looking at anything; it is a reprise, an inner reflection, and, I would add, we may wonder if it is not the principle of unity...The only approach to freedom is through the reflection of a subject on himself. Properly speaking, this reflection allows me to discover – not that I am free, or that freedom is an attribute with which I could be invested – but rather that I must become free – that is my freedom must be won.... Recollection [may be understood, as a re-establishment of contact with an illuminating source .... Recollection bestows upon us certain resources for the exploration within ourselves that we have to make in the direction of what I have called plenitude, or the full life. If this is so, it is undoubtedly because recollection shields or protects us from all kinds of distractions that tend to estrange us from our true selves and to divert us from the unity which is at once both behind and before us." (Marcel, Searching [S]. p.86-88)

This period of recollection and dwelling resolutely toward unity and freedom, shielded from distractions and stripped of illusions, unveils disquieting visions. These include the specter of absences and disappointments to be endured as well as lost dreams to be grieved and expectations to be relinquished so that the choices that may remain can be vigorously grasped and pursued. Clearly, this movement toward unity and freedom is one that is excruciatingly painful and one that requires great courage to undertake. Nouwen (1996, p.88) speaks of this

movement back to the self as one in which pain is "brought home". He says:

As long as your wounded part remains foreign to your adult self, your pain will injure you as well as others. You have to incorporate your pain into your self and let it bear fruit in your heart and the heart of others.

Resolute dwelling then is understood as a movement that is *not around* but through pain. It is a movement in which the self moves toward the self.

Resigned dwelling on the other hand, does not bring the pain "home" but instead turns away from suffering and in so doing conceals itself from itself. In resolute dwelling the self stands out to itself in all of its starkness, and life opens from within life toward itself. In resigned dwelling, the self camouflaged from itself becomes more and more inconspicuous to itself as a self, and life, rather than being replenished closes down and is diminished.

This "life-giving" movement of the self back to the self has been given various names. It has been called *recollection* by Marcel, *repetition* by Kierkegaard and *retrieval or Wiederholung*, (the opening of life that occurs by retrieving, literally fetching back, possibilities in life) by Heidegger. In his exegesis of Heidegger's use of Kierkegaard's notion of repetition and Heidegger's own concept of retrieval, Risser (1997, p.34) says that resolve is "manifested as repetition *and* retrieval: "Dasein takes over its past through repetition by fetching back time and again its possibilities. In its fullest sense, in retrieval/repetition Dasein comes *toward* its authentic potentiality for Being when it comes back to itself, when it comes back to that which it has been all along".

# Finding Refuge and Awakening

An important aspect of attaining refuge, relaxation and release in a time of adversity is found in the capacity to open oneself fully to the sadness of loss.

Many stories unfold a process of opening that involved a necessary period of solitude — of drawing apart. This is a time once again to treasure that which was lost, to mourn that which would never be, and in this process of cherishing and grieving to be able to let go. Letting go is not accomplished without sadness; reconnection is not accomplished without saying good bye to that which has passed. Marcel (S.p.157) helps us to understand the meaning of drawing apart by clarifying the meaning of solitude:

It does not in fact mean isolation, for isolation is a lack, a deprivation whereas solitude is a fullness.... Solitude is an essential to fraternity as silence is to music. We should remember that fraternity is perhaps above all a form of respect, and that there is not respect without distance, which in this case means that every human being must have access to an interior space without which he withers like a plant or a tree.

Thus solitude is understood as stillness, space and silence that distances and shields from distraction and demand. Solitude offers refuge. In refuge is found retreat from danger and the possibility of recollection, repetition, retrieval – the fetching back of life's possibilities. Paradoxically, it can be understood from the discussion of solitude that retrieval involves relinquishment. Thus we see that the fetching back of life's possibilities necessitates a letting go. Sadness and grieving are a time of yielding to that which is passing; a time of saying farewell.

Solitude as refuge then is not only a retreat from danger and distraction, it is also shelter for the safe outpouring of grief. Solitude as sanctuary suggests an additional dimension beyond that of the safety and stillness of refuge. A sanctuary houses the holy, mysterious, sacred and illuminating. It is a place of awesome beholding – of seeing into and beyond – of seeing things as they are in the light of a greater truth.

Katrina says of her pain and her need for solitude as a safe place apart to come to terms with the death of her husband:

My bedroom was like my womb to me. I wanted to keep the world away and retreat to a safe place.

Tom says of his sorrowing and his necessary retreat from involvement with professionals:

There were counselors available, but I never felt comfortable talking with them. At night, I'd lie in the dark for hours thinking about what was happening to me and what I'd do with my life. I'd cry when no one could see me.

Beth says of her need for stillness and silence following the loss of a job:

I found that I needed some time to myself away from everyone just so I could cry and be sad and think about my future. I didn't want to listen to friends' well-intentioned reassurance that I had lots of talent and prospects and that soon I'd have another job. I'd given a lot and I'd lost a lot and I didn't really know what I wanted to do in the future. I didn't want any of that to be glossed over.

Rilke (1934) powerfully expresses the release of perplexity paralysis and sadness through being alone with the alien thing in the stillness, silence and

### sanctuary of solitude:

Were it possible for us to see further than our knowledge reaches, and yet little way beyond the outworks of our divining, perhaps we would endure our sadnesses with greater confidence than our joys. For they are the moments when something new has entered into us, something unknown; our feelings grow mute in shy perplexity, everything in us withdraws, a stillness comes, and the new which no one knows stands in the midst of it and is silent. I believe that almost all our sadnesses are moments of tension that we find paralyzing because we no longer hear our surprised feelings living. Because we are alone with the alien thing that has entered into our self; because everything intimate and accustomed is for an instant taken away; because we stand in the middle of a transition where we cannot remain standing. For this reason the sadness too passes: the new thing in us, the added thing has entered into our heart, has gone into its inmost chamber and is not even there any more, is already in our blood. And we do not learn what it was. We could easily be made to believe that nothing has happened, and yet we have changed, as a house changes into which a guest has entered. We cannot say who has come, perhaps we shall never know, but many signs indicate that the future enters into us in the way in order to transform itself in us long before it happens. And this is why is it is so important to be lonely and attentive when one is sad; because the apparently uneventful and stark moment at which our futures sets foot in us is so much closer to life than that other noisy and fortuitous point of time at which it happens to us as if from outside. The more still, more patient and more open we are when we are sad, so much the deeper and so much the more unswervingly does the new go into us, so much the better do we make it ours, so much the more will it be our destiny, and when on some later day it "happens" (that is, steps forth out of us to others), we shall feel in our inmost selves akin and near to it. And that is necessary. It is necessary – and toward this our development will move gradually-that nothing strange should befall us, but only that which has long belonged to us. (pp. 64-65).

Thus we have seen that dwelling resolutely involves a return to the self (recollection) and a relinquishment of that which has passed (grieving), there is an additional movement that seems to accompany the movement from solitude toward engagement and connection. This movement which is futural in its

orientation is hope. A close look at the nature of hope, Marcel reminds us, does not reveal a simple capacity for naïve optimism. Rather, it is an arduous and difficult "dwelling toward" which anticipates the renewal and refreshment that has not yet arrived and in its anticipation it actually appropriates the rejuvenation it seeks. Nouwen (1996, p.50) describes this as dwelling in the "not yet". He says that it is important "...to stay with your loneliness. Avoid the temptation to let your fearful self run off. Let it teach you its wisdom; let it tell you that you can live instead of just surviving." In a similar vein, Marcel shows us that dwelling hopefully "means first accepting the trial as an integral part of the self [and], while so doing considering it [trial] as destined to be absorbed and transmuted by the inner workings of a certain creative process." (HV. p. 38).

Hope requires patience and patience requires hope. Hope consists in placing our confidence in a certain process of growth and development such that the process is embraced. Marcel reminds us that the etymological definition of patience (which interestingly shows some affinity to the root meanings of dwelling) is a simple letting things alone or allowing them to take their course. "It is developing an intimacy or connection with the event or circumstances comparable to that which I have with the other person when I am patient with him [that] a certain domesticating of circumstances occurs (HV. p. 40). There is the sense that I am no longer in exile and captivity. I have ceased searching for my true home. In finding meaning amidst my current circumstances and taking care

of the things at hand, I am at home. Dwelling resolutely makes of the journey a home.

Sarah contrasts her way of being (as harsh judgment and preoccupation with the negative evaluations of others) at the beginning of her trial with her teenage daughter, with her way of being now as she has learned to dwell resolutely and hopefully (with courage, intimacy and patience) with her circumstances:

A part of me wanted to hide from everyone, to deny this was happening. This type of thing usually meant that the family was dysfunctional, and the parents grossly incompetent. Waiting alone hours outside courtrooms, hoping I wouldn't meet anyone I knew, I felt I was covered in a sticky coat of shame.... I survived this by telling myself that I was doing this for my future, so that I would always be able to stay that I was there for my child. I never missed a court appearance in the early days, even when she would not even look at me when she was brought handcuffed into court and I held my head up when everybody turned to see the mother of this girl....We as a family learned to weather my daughter's mood swings and personality shifts and recognize them for what they are... Sharon [daughter] is maturing, albeit slowly, with the responsibility of a child in her life. She has been making some progress towards creating possibilities in her life and reaching basic goals. My husband and I have made a commitment to each other that we will endeavor to stand for Sharon as she makes her way through life, and we will try to learn to accept her (hard as it is sometimes), and open ourselves to the value of her life as she wishes to live it, and not our expectations.

Lin Hu Bing a retired nurse living in the Peoples Republic of China tells of her experience of dwelling that transforms exile and captivity into home and community:

During the so-called Cultural Revolution, I was considered to be politically undesirable. I was sent far away into the countryside and told

to clean and repair toilets. That was my job. There were no jobs lower than that. I was torn away from my husband and two tiny children. I couldn't believe what had happened to me and I thought I would die from loneliness and missing my family and my little children. But then I decided, you can still have a life here. Be the best toilet cleaner and fixer they have ever seen. I learned more about toilets than you could ever believe. I could fix them all. Then I made some friends there (other people who were being "rehabilitated") and we became wonderful friends. I felt safe and respected and close in their company. We used to laugh and share stories and talk about how it would be when we got back to our families again. When we were sad and lonely and down we would encourage each other. Gradually life went from being barely tolerable to being quite enjoyable at times. I realized I was going to survive my time in the "countryside.

Helen describes learning to dwell patiently and intimately with adversity:

My marriage had been on the rocks for some time but we kept it going because we [my husband and I] shared a common dream of owning a beautiful resort. But the problem was that the resort wasn't making any money and we were working like dogs. Then things got even worse. I fell down the stairs, carrying a heavy load of laundry and I broke both ankles severely, ended up in casts and had to use a wheelchair. I couldn't work. We lost the resort, my husband took up with another woman, the surgeries were unsuccessful, I suffered from chronic pain, and I fell into a really horrible depression. I saw a psychiatrist and numerous types of antidepressants were tried. I also saw a chronic pain specialist. Nothing helped. I had side-effects from the pills and really didn't feel much better. The pills and advice didn't change the fact that life had caved in on me. Some days I longed for death. Then one day it came to me that nobody could help me if I didn't want to live and wasn't willing to help myself. But the problem was that even if I wanted to live I didn't seem to be able to help myself. So I said to God "If you are up there and you really care, you had better help me." So there weren't any miracles but I got the idea that I had to maintain a spiritual discipline of meditating and the habit of exercising everyday. So everyday I put on a candle and I concentrated on releasing the darkness in myself into the light which I saw as Christ. Things started to change. I was able to begin lose weight and to walk short distances and then I met a friend who invited me to swim with her everyday. I lost more weight and became fit and developed a good friend in the process.... Five years later I can say that I am happier now than I

have ever been in my life.

As well as dwelling hopefully and patiently such that the sense of being sheltered is experienced, some stories gathered for this study (like Helen's story above) unfolded profoundly mysterious experiences of Being coming to presence. Some people named this experience "God" while others saw it as a glimpse into the true meaning of life. God was explicitly named in some stories, while in others, references were made to a "still small voice" or conscience that prodded, nudged, counseled and comforted. Other stories disclosed an experience of presence, or God being glimpsed and encountered in the caring and selfless acts of other human beings. Two stories used the word "grace" to describe the propitious arrival of a perfect gift at the right moment, while one story unfolded an experience of "Light" and release.

Katrina shares her experience of sanctuary as a place where God, as benevolent presence, shows up auspiciously in nudgings, synchronous solutions and the loving caring actions of a friend:

In thinking back on this time in my life, however, I think that God, or something divine, was watching over me. I wrote to a friend in London England and shared with her how I was feeling. It turned out that she was open to coming to Toronto, a city she had visited earlier and liked very much. We were able to work out a deal whereby she became our housekeeper and I paid her. She told me that she couldn't handle my depression but that she would take care of the practical things, e.g., cooking and other things and keep them running and that maybe by helping to lessen the load, I would be able to begin to heal and she was absolutely right. She had just ended a relationship so the timing for coming to Toronto was right. She stayed with us for 3 years. My sons really loved her and still do. She came into my life at a crucial time. We

are still close friends now though we lead very separate lives.

John, a survivor of the Trade Tower collapse, shares his experience of God appearing in the selfless act of a courageous fireman and the generosity, nobility and dignity of other human beings (Devito, p.21):

As a terribly burned woman was carried past, I battled the fear clawing inside me. I wondered where God was in all the terror... People stumbled and fell. Others helped them up. I could no longer see anyone from my office. Forty-sixth... forty-third... forty-first... It was then that I saw him. He was a fireman toiling up the stairs, heavy equipment strapped to his back and sweat streaming down his face. He stopped just below me and tugged off his helmet. Short-cropped blond hair, brilliant blue eyes, the map of Ireland on his face. He was red with exertion – but there was a glow about him I thought was more than that. Why did I feel I ought to know? "You look like you need some water," I said, holding out the halffull bottle. The blue eyes looked into mine." "I'm all right," he told, me. "Give it to somebody else." He put his helmet back on and kept climbing. I went on down. Thirty-eighth floor... thirty-sixth. Give it to somebody else. And suddenly I knew whose face I'd seen above that fireman's raincoat. It was the face of Jesus. Thirty-fifth floor...thirty-fourth. I began to notice something I'd seen without taking it in. In that stairwell jammed with terrified people, there's been no shoving. Wedged together in a narrow stairway of a burning building, no one pushed ahead of the slow movers. Over and over I'd witnessed just the opposite! The handicapped given precedence. Men stepping aside for women. The young giving place to the gray-haired. As injured and burn victims were carried past, everyone flattened against the wall, called encouragement, waited. Same too as the firefighters climbed up. Twenty-ninth floor... twenty-eighth. I blinked. That young Asian woman with her arm around a frail older lady - surely it was Jesus who looked out of eyes! Again... I glimpsed him in the eyes of the Pakistani man motioning me to go first. God far away? God was right here, all around me on that crowded stairway, wherever one person reached out to help another.

Tom describes a presence that prevents him from committing suicide at a point when the spectre of a life with paralysis overwhelms him (Selder, p.65).

I knew in the condition I was in I would not be able to get satisfying work. So I contemplated suicide, even planned how I would do it. Something stopped me.

Elizabeth tells of the time when her friend David relayed bad news about his medical condition:

I remember so clearly when he shared with us that he had received some very unwelcome news. We were shocked, outraged, sorrowful and very much afraid for him. But David seemed calm. Sure, the news was not what he wanted to hear [that the cancer had spread] and he would rather not have to endure what he knew lay ahead of him, but he told us that he felt he was dwelling at the eye of a storm. The eye of a storm he reminded us, is a place of quiet, calmness and tranquility and it was within this "eye" that he felt most strongly the presence and love of God.

We feel in this excerpt a profound serenity and steadfastness arising from a religious faith. Madison (1982, p. 339) says that religion gives people poise and peace and "can survive all manner of adversity. Religion in fact enables people to live tragically, to accept the ultimate and inevitable failure of their life, their death, with a kind of impassioned indifference. Religious faith and hope is more than mere optimism and wishful thinking. Here faith is faith in spite of deception and hope is hope in spite of adversity."

Melissa a young woman struggling with rapidly progressing lupus, confronts the loss of her dream to pursue a life of teaching and tells of grief giving way mysteriously to divine light (Goldstein, 2000, p.234):

I went into my room and crawled into bed... I was devoured by a grief that left me nothing, not even the release of tears. In its wake, my mind became blank, empty and dark, as if a twister had swept across it. I do not

know how long I lay like this, but gradually there arose a cry out of my black quiet, a wordless expression of the deepest need. It did not go unheeded. For it was then that the Light came to me, every part of me, filling the emptiness, transforming the darkness. The Light grew ever stronger, until it assumed an unspeakably powerful, beneficient radiance. Not a word had been uttered during these moments, for I did not experience the Light in words, only in images and emotions beyond language. But I knew that I was in the presence of the Source who had created the world and lived in its core. Gradually the Light faded, leaving me, but not alone. Never again alone. For I had been given a revelation and a promise of its presence, in the world, in my life. ...Despite the disease's continual onslaught, this sense of security stayed with me and sustained me.

How are we to understand such experiences of absence becoming presence, despair giving way to hope, darkness becoming light, danger becoming sanctuary? Can these experiences only be understood with reference to religious belief? Kochelmans (1984, p. 249) expresses his understanding of danger, turning and insight as the place where new possibilities as the illumination of Being, as presence arrive. These experiences are not, and cannot be produced in a deliberate manner and are not understood with reference to causal models of explanation. Rather the phenomenon is mysterious, surprising and paradoxical – forgotteness enfolds truth and danger discloses freedom:

Thus, the self-witholding of the truth of Being, which tries to hold it in forgotteness, hides a yet ungranted favor, namely, that a turning will come-to-pass, a turning of Beings's forgottneness into Being's truth. Thus, where danger is as danger, there also is the freeing of Being. This turning, however, can happen only abruptly. It is not brought about by anything except Being itself; and it is certainly not brought about in a cause-effect relationship. The abrupt opening up is the flashing of a lightening flash. It brings itself into its own light, which it has brought along. When the truth of Being flashes in the turning of the danger, the

coming-to-presence of Being opens up and the truth of Being's issuance come-to-pass.

Relating Kochelman's thoughts to an experience of adversity, it can be understood that life in the everyday and the taken for granted manifests a forgotteness of Being. The value, beauty, gift of life is so easily forgotten in the quest to survive and succeed. Yet, it is this very forgotteness that provides the context and necessary conditions in which to experience the turning and jolt of adversity. No awareness or new learning comes without a sense of contrast, negativity, danger and disjuncture. Disjuncture is by definition a place of both danger and openness, since it constitutes a gap or dehiscence arising from breakdown, tearing away, and separation. It is into this place of the "wounded gap" of painful awareness, suffering openness and resolute dwelling that Being arrives as illumination, insight and truth.

But what is Being, given that it has been described in the gathered stories as God, mystery, grace, light, source, guidance and conscience? Kochelmans (1985, p.52) says that Being "is the totality of all meaning". As such, it is not something that humans can grasp and hold still in the sense of being able to ascribe a cause and effect and establish a particular and ultimate ground for all that is. Rather:

Being is...the holy, the ultimate source of the conserving power that guards beings in the integrity of their Being..... Because Being is the holy, it is also the awesome; by its very coming it dislodges and deranges every experience from the patterns of everydayness. It is also the eternal heart

of things because it is the innermost source of their presence and because it is the perpetual Being that lets all abiding be. It is the omnipresent and the undefiled.

Being, according to Marcel, is that which does not frustrate expectation. Being is fullness, plenitude, the upsurge of Joy (Gallagher, 1975). This seems to suggest then that emptiness, "non-being", is despair that can only be understood as a desperate and bottomless exigence. Gallagher (1975, p. 52.) in his exegesis on Marcel's thought asks the question:

What does it mean to lose the sense of being? It means to lose the presentiment of inexhaustibility which stirs in the depths of every experience of presence. Being is what quickens and refreshes – and always promises more refreshment. Once and again Being is fulfillment.

Returning to the stories and conversations gathered for this study, the meaning of dwelling resolutely has been unfolded as an experience of movement and stillness, self-questioning and listening patiently and hopefully. This experience of movement and stillness has been variously discussed as recollection, repetition, retrieval, refuge and sanctuary. In this way, and by contrast, the groundwork has been laid for further consideration of the meaning of dwelling resignedly. Dwelling of this nature does not reveal the presence of Being as inexhaustible replenishment but, instead, dwelling resignedly is experienced as a humiliating conquest in which one has suffered defeat. In defeat, the self closes in on itself, slips its moorings and drifts languidly without a sense of destination.

## Facing Defeat and Acquiesing

Excerpts from the stories of Allison and Gloria discussed above are revisited together with additional excerpts from conversations.

#### The words of Allison:

What do I think about the diagnosis [of advanced liver cirrhosis]? In a way I will be glad when my life is over. Other than my son and my mother no one really cares whether I live or die.... "Everybody has been on my back telling me to go to AA. I tried it and it doesn't work for me. There is something that I just don't agree with them about and that is that you are responsible for your own life. I didn't ask to be born and I didn't ask to have all of these horrible things happen to me, so how am I supposed to be responsible for all that?

In this excerpt, two things stand out as poignantly significant — Allison's sense of not being loved and her pervasive sense of futility. Are the two linked? Marcel (S. p.66) suggests an inextricable relationship between love and hope. "Love insofar as it is love, exhibits an incomparable dignity by which it transcends mere feeling... What the mystics rather than the philosophers have recognized is this: love and hope must not be separated. For a person without love, hope is not possible." Could it also be said that a person without love is a person without possibility?

#### Gloria's view of her life:

When she [my daughter] died I felt that I died too. I haven't been able to enjoy life at all since that time [10 years ago]. Two years ago my son was killed in a car accident. Many people said that I would go to pieces but I didn't. I just felt pretty much the way I have felt for [10] years... numb....I just don't think that I was cut out for the life that I ended up with. I was an only child and I was blessed with a nice voice. I sang in a

lot of choirs... and was a soloist. I was proud of my appearance too. My parents brought me up with the idea that I was special and that my life would be special too. When I got married and had children and then one of them was developmentally delayed... well life wasn't very glamorous at all. I can't go back to the way it was and I don't like it the way it is... so what am I going to do? I just go on.

In Gloria's words there is also a sense of passive relinquishment to the situation at hand; an acquiescence to life which is experienced not as fulfillment but as intractable, unremitting frustration. Marcel (HV. p. 40) says that:

There is in despair the belief that the wound one has suffered is incurable and moreover that this wound which is inflicted by separation is separation itself. It is as if the sufferer says "I shall never again be anything but the wounded mutilated creature I am today. Death alone can end my trouble; and it will only do so by ending me myself".... The despairing man not only contemplates and sets before himself the dismal repetition, the eternalisation of a situation in which he is caught like a ship in a sea of ice. By paradox which is difficult to conceive, he anticipates this repetition." What manner of 'dwelling' then enables fulfillment as replenishment versus frustration as emptiness?

Gallagher (1975), in his interpretation of Marcel's thinking about "Being" says Being is the eternal dimension of my existential situation. Being is that to which I aspire. It is not something I either have or do not have. Men and women develop or do not develop spiritually and their spiritual development is seen in the acceptance of their situation and in the awakening to the possibilities for being that are present in their situation. One's existential situation can be transformed into a vehicle for Being if it is accepted in the sign of the eternal, i.e., not as some deterministic acceptance of what is likely and probable, given one's deficits and

liabilities. What makes the difference in seeing beyond the calculation of probabilities based on "what is" into the inexhaustibility of life is quite simply the manner of response. One's situation is a bearer of Being not only and so much because I choose to accept my situation rather than see myself as a victim of it, but because my free attachment to Being enables me to accept the situation. Thus it is seen that there is in the experience of accepting what Marcel calls "the sign of the eternal" the outline of a larger purpose, a calling to the self from afar which is yet near.

Allison says of her disengaged relations with her siblings:

I feel that I am no longer welcome in their homes and I am sick of their lectures. They have set down rules and regulations that I am not allowed to drink if I come to their homes (yet there is liquor in their house and I know they drink themselves). The other thing is they are always lecturing me. "You should do this. You should do that!" None of them have ever had to live with the problems I have so what gives them the right to tell me what to do? If that [not having me visit them] is what they want, they can have it their way. I just won't go [to visit them].

Gloria relates the failed attempts of some women from the church where she formerly attended to help her become re-involved and to enlarge her life:

You know that after my daughter died, a few of them [parishioners] came for awhile to visit me. They tried to urge me to come back to the Church and to start singing in the choir. They said it would be good for me to get involved in things. I tried going back but I just couldn't stand it. The Music Director was a real tyrant and the choir was pathetic. I would sooner not listen to music at all than have to listen to that. It was painful. After awhile they [the women from the Church] just stopped coming [to visit me]. There wasn't much to talk about.

With reference to stories and conversations dwelling resolutely in the turning of adversity has been illuminated as an abiding patiently and hopefully. It is a dwelling that is transformative since such abiding reinterprets and translates an experience of captivity and exile into one of refuge and awakening. An awakening is a coming to awareness from out of a state of slumber. As such it is an enlivening and expanding openness and a yielding to a new range of possibilities. Dwelling resignedly, on the other hand unfolds a fatalistic acquiescence to a life sentence of imprisonment or banishment. It is a mode of existence in which nothing new is expected, where every event is experienced as inevitable and where discouragement diminishes the willingness to consider anything outside of a narrow range of experience (Nouwen, 2001). As such, it is an enervating and rigidifying capitulations to a reduced range of possibilities.

Returning to the metaphors of lathe and journey contained in the etymological roots of the word turning, dwelling can be thought of as the manner of being that lends itself to being shaped and moulded by the lathe of adversity. Alternatively, and with reference to the second metaphor, we can consider dwelling as the manner of journeying that does, or does not, make of the journey, a home. The question that arises in relation to what more can be learned from the stories and conversations gathered for this study is whether we are afforded a glimpse at the purposes, directions and dwelling places that have been shaped, discerned and built in an experience of adversity. In pondering

how best to "get at this question" and to reveal the answers it elicits, adversity is revealed as a calling.

## Adversity as Calling

Calls occur in everyday life for many reasons. They may be invitations to participate in a variety of activities or they may constitute summons to be present at obligatory events. They may also bid us to bear witness to important human transitions and rites of passage. Calls initiate conversations and they suggest possibilities. The one who calls requests a response yet reflection on human experience shows that a range of responses can be given. Calls may be heard and responded to or they may go unheard, disregarded or refused. While it is beyond the scope of this project to explore the myriad potential psychological and psychobiological explanations for a range of responses, I now consider some of the existential and ontological conditions that enable hearing and responding as well as ways of being that obstruct and hinder it.

# Calling as Discovery and Concealment

A calling cannot, Marcel reminds us, be heard by a being who is "occupied or cluttered up with himself. Rather "he reaches out, on the contrary, beyond his narrow self, prepared to consecrate his being to a cause which is greater than he is, but which at the same time he makes his own" (HV. p.25).

This reaching out toward that which appears to be beyond oneself and even beyond what one judges oneself to be capable of, is at the same time a creative act and an act of self discovery. It is a movement of creation and it is a movement of self discovery because on the one hand it will appear as if the person has created a new order, or way of being, while at the same time it will appear that one has touched an essence which has been present but hidden all along. One both reaches outward as well as deeply within to discover the connectedness of all things and to connect with one's self in its very truth. There is then an element of surrender and emptiness to this outward and inward reaching that clears out the clutter, and turns down the din, in order to hear and connect with others and oneself.

Marcel has characterized this clearing or emptiness as *disponibilite*. This is an availability that fetches back possibilities in the form of a new responsiveness to life – a manner of being in which the doors of one's heart have been left ajar. Disponibilite, according to Marcel, (1951, p. 69):

"... does not of course mean emptiness, as in the case of an available dwelling (local disponible), but it means much rather an aptitude to give oneself to anything which offers, and to bind oneself by the gift. Again it means to transform circumstances into opportunities, we might even say favors, thus participating in the shaping of our own destiny and marking it with our seal...[Giving oneself to anything that offers and binding oneself by the gift] depends on whether the call is recognized as a call, and strange as it may seem, in this matter it is true to say that it comes both from me and from outside me at one and the same time; or rather, in it we become aware of that most intimate connection between what comes from me and what comes from outside, a connection which is nourishing or

constructive and cannot be relinquished without the ego wasting and tending towards death."

## Heidegger illuminates calling as:

"...A mode of discourse. The call of conscience has the character of summoning Dasein to its ownmost potentiality-of-being-a-self, by summoning it to its ownmost quality of being a lack.... In the tendency toward disclosure of the call lies the factor of a jolt, which in stopping us has also the character of an abrupt arousal. The call calls from afar to afar. It reaches him who wants to be brought back.... What is summoned? Evidently Dasein itself.... And to what is one summoned? To one's own self".... Conscience calls the self forth from the lostness in the they. Is it perhaps the ownmost potentiality-of-being that functions as the caller. The call is precisely something that we ourselves have neither planned nor prepared for nor willfully brought about. It "calls" against our expectations and even against our will.... The call comes from me, and yet over me" (B&T, pp.249-253)

By this, Heidegger helps us to understand that the call and the response to the call constitute a dialogue that takes place within the self. Yet, it seems that the dialogue involves two selves that constitute at the same time the unity of the self. This call seems to come from without since it represents a summons to something higher and nobler than the self currently experiences itself to be. In addition, responding to the call is infinitely more taxing than pursuing a conventional path. As a call to something nobler and more difficult, then the call is something that may engenders within the self a strong resistance, even a desire to flee. At the same time, the call as an awakening is only elicited in those who are already attuned in some way to the meaning of being or to what really counts in life.

I shall shortly return to the stories to offer specific examples of ways in which individuals have lent themselves to the lathe of adversity, have endured the coerciveness of undesired circumstance and have lent themselves patiently to the moulding and shaping process and have awakened to a clearer and in some cases even nobler purpose in life.

In the stories of Allison and Gloria, the call comes, as it does to all persons who experience overwhelming adversity, as the imperative to make meaning of an apparently meaningless situation. But, meaning cannot be made by continuing in the usual manner of being and doing. Great losses require deep, prolonged and expansive searches to heal. They must move out beyond the confines of the psychological realm to embrace the ontological as well. Nouwen (1996) grasps the significance of this insight when he says that healing the wounds inflicted by adversity is an invitation to move from consideration of my pain, to be in solidarity with "the pain" of a common humanity. It is an invitation to find in life a reason to care, some sense of connectedness to others - a way of bearing witness to others' suffering - a manner of participating — a cause which beckons — something larger than oneself, a metanarrative which encompasses and unifies an incoherant and fragmented plot-line.

Unable to respond to the summons, there is in Gloria and Allison's stories, as we have seen, the sense of stagnation. There is little or no movement within the self. Rather the self continues to experience itself as bereft, betrayed,

bewildered, ill-equipped, insubstantial and even unrecognizable. The self seems to have become inconspicuous and concealed as a self to itself and the stories the self tells the self about itself stop short of the truth. The self does not stand out clearly as a self which assumes ownership of its own life but rather a self emerges that understands itself to be determined by the ravages of fate. This self in being robbed of its possibilities becomes a victim of circumstance. Life is lived in exile and captivity and without any recourse to unifying metanarratives and beliefs there is little or no hope of deliverance. The worlds of Allison and Gloria have become small, narrow, dismal places – places where little is expected of life except more of the same.

### Concealment as Apathy and Abandonement

Unable to find anything in particular to care about or specific goals to strive for, purpose remains elusive and apathy is pervasive. Invoking the metaphor of the lathe, we see that although there is the sense of being whirled on a lathe, no particular shape seems to be emerging. Rather, there is the sense of being whittled and diminished for no apparent reason or purpose. With nothing to be concerned about, no energizing cause to commit to, apathy takes over.

Remaining engaged with others becomes more and more problematic since where there is no mutual concern, there is no engagement and where there is no engagement, abandonment is inevitable. In Gloria's story, we see the fellow

parishioners ultimately giving up their efforts to reconnect her to the church community, and in Allison's story, we see her inability to remain in rehabilitation and refrain from drinking as further eroding the relationships left with her family. These stories speak to us of the concealment of being that seems to arise in a context of resigned dwelling and in conditions in which the individual cannot, or chooses not to reach out beyond themselves to discover a larger and unifying meaning. Moreover, these are conditions in which others seemingly cannot or do not sustain the unconditional and one-sided giving that disrupts the trenchant view of life as inevitable disappointment, departure and loss.

In other stories, however, the existential and ontological conditions are more conducive. These are conditions that enable receiving and responding affirmatively to the call. With reference to the excerpts that follow, I focus specifically on the nature and place of sensitive scanning and attuned listening that is associated with receiving the call. Stories reveal the capacity to notice subtle signs and to be aware of inner resonances that reveal landmarks along the way. A sense of significance and direction is being restored. Hearing has become acute now since din and distraction have been distanced and a sheltering, yet unconfined space – (a clearing) particularly conducive to listening and hearing - has come to be inhabited. Yet, despite the now favourable setting within which to discern direction and welcome new meaning, a sense of direction and meaning do not arrive attractively packaged and fully assembled. Rather, direction and

meaning turn up fraught with frustration and amidst the temptation to despair.

Yet, in an atmosphere of attuned listening, the pursuit of a clarified understanding of what really counts or matters in life, can propel the open, hearing dweller into territory which may be distinctive, challenging, risky, evocative, tender, selfless, poignant and healing.

## Presence, Caring and Belonging

The following stories unfold the call as that which manifests presence and calls forth, even demands, new ways of caring and belonging. These new ways of being illuminate a process of looking beyond the losses that lie immediately at hand and believing that meaning and purpose will be found. This is a waiting for and a responding to a call. As has already been discussed, this call cannot be heard by escaping the circumstances at hand, but rather by maintaining amidst the circumstances, an expectant alertness. There is in this alertness a courageous opening into the unknown that expresses itself in a willingness and intention to find new ways of caring and belonging. This open, willing yielding weaves new threads into a tapestry that has been ravaged by loss. The severity of the damage to the tapestry may be such that new patterns and figures may need to be woven in. Even the background landscape may need to be altered, yet the tapestry achieves a new unity, power and poignant beauty not in spite of its damage, but because it has transcended damage. In hearing and responding to the call there is

the sense of deliberately and consciously choosing a new path but there is also the sense of being chosen or "called" to a different, clearer, and in some cases deeper meaning and larger purpose in life.

Becoming Free for Authentic Possibilities or Seeing Really Matters.

Tom finds, in the adversity brought on by a diving accident, a summons to move beyond narrow definitions of social acceptability and the resolve to pursue fulfilling work:

When I was ready, I was given the opportunity to go back to the company where I'd worked before my injury. The job they offered me, however, was answering phones- for one-third the salary I'd earned previously... I decided that answering phones wasn't for me. Even though I was afraid to keep living my life as it was now, I decided that I had to go forward and do the best I could. With the help of my friends and the people at the rehab hospital, I set goals that I believed I could achieve and also a time frame in which to achieve them. Approximately two years after I was hurt, I became involved in a national spine injury association and now I am the President of the local chapter. I make visits to newly injured patients in area hospitals. I think it helps people to see that someone like me – someone who was in the same boat they're in – has been able to move and make it. I'm also chairman of the board of a housing development for individuals who have suffered spine injuries and I am training to take part in the national marathon for handicapped people.

Margaret offers advice to others based on insights reached when she was able to find her own way by listening to her own inner guidance rather than seeking the approval and acclaim of others:

You cannot always judge the rightness or wrongness of what you are doing by the reactions of others. There will always be people who applaud and people who sneer at your convictions, beliefs, and decisions, and the deeper or more decisive the decision, the stronger these responses will be. You must expect that, and so you must be able

to determine within yourself that your journey, decisions, actions are in keeping with what you believe and walk within your convictions regardless of what others think of those decisions.

Elizabeth reflects on David's ability to grasp a final opportunity to create meaning in the face of the ultimate human extremity:

As D. neared the end of his journey and the Cancer crept stealthily along his spine and into his brain, he became confused and disoriented at times. He was always glad to see his friends but sometimes he couldn't express himself coherently. One day just a few days before he died, he "came to" and called the girls [his daughters, young adults] to his bedside. His mind was clear and he was able to give them his full blessing and to talk to them for awhile. Apparently D. indicated that he knew things would be difficult for them all and especially for H. his wife. He told the girls that he was counting on them to take over for him; to be there for their mother to and love her.

# Finding the Gift

Nadine tells of finding a gift in the incontrovertible evidence of a human bond. It was a time when she cared for both of her elderly parents who were in fragile condition as well as coped with a high stress career. Ultimately, she was forced to interrupt her career when her mother died and her father who was struggling with a stroke and dementia, needed more and more of her time.

Standing at his bedside one day, changing his diaper, she wondered how to make sense of all that had happened to her. She says:

And then it came to me... that to look after my father in this way was a gift. When I was looking after my Dad, caring for him tenderly and lovingly and reassuring him and keeping him calm, I realized that this was the reason he continued to live on. Something had been given to me now, by giving to him. I felt very, very grateful that I had been able to do that

and be there for my father. It somehow put everything into perspective for me and made it all worthwhile.

Harold tells of the time he finds the gift by responding to a call to become a father in the midst of grieving the loss of his own son:

You know that when my son committed suicide I was unable to make any sense of it at all. I went over and over in my mind what I might have done differently, how I should have understood how hopeless he was feeling and saved him but I didn't see it and I didn't take action and there was just this sense of terrible loss... When we brought his body back for the funeral, (son had been living in the States) his wife Susan decided to come too. She had come from a pretty rough background – drinking, fighting, poverty, - no family life really. She was amazed at what she saw when she came up here. For days our friends and family poured into the house, food arrived, people came to sit with us and comfort us. She'd never seen anything like that before said she wanted us to adopt her into our family. At first I thought she was kidding but she was serious. So I said "Sure you can be part of our family". Now she comes up here (from the States) for her vacation. We go down there to visit her just as we go to see our other kids. We are on the phone to her all the time. She is getting through it and so are we. I will never get over missing my son, but I can say now that not everything was lost. She has a family and we have a new daughter.

# Healing by Helping.

Fiona tells of her discovery that self-healing and meaning in life comes from helping others:

Some people ask me how I can do this kind of volunteer work (visit the elderly in nursing homes and the sick in hospital). They think that it must be very depressing and that I must be some kind of saint to do it but I tell them "Don't think too much about it. I really do it for myself". They are kind of surprised when I say that but it's the truth. I found when my marriage ended and my daughter died that I could be overcome with bitterness or I could find a way to help other people who were as scared and sad as I was. When I do these things I am making a statement about life... sure its scarey and sad but it is also really good. There are always

good people around who do kind things. Count on it and be one of them!

# Transforming Bad with Good

Sam tells how he responded to the call to move from fueling his anger about the ignorance and oppression he encountered, to finding a constructive path to justice and freedom:

I had a lot of time to think while I was lying in the hospital (after having been shot while attempting a robbery). I had to have two surgeries and I had a colostomy. A lot of the people that took care of me were white. some of them were really good to me and some weren't very nice at all. Some of them called me "that Big Nigger" and such. I had to make a decision either to let my anger rule me in which case I'd find a reason to continue to get into trouble or to find something positive to do with my life. Ultimately I found a sense of direction in the Muslim faith and I became involved in the Civil Rights movement. Right now I am working as a recruiter for a heart study in the very hospital that saved my life. Too many Afro-Americans are dying young from heart problems. I like to think that I am helping in some small way to change that by working on this study.

### Fnding Meaning in Being

Abraham tells a heart-rending story of losing what was most valuable in life, having to hang on, hope against hope, in order to hear the call to recognize a common humanity, to forgive and to be in solidarity even with his "enemies".

His story begins with his son being killed in the Israeli/Palestinian conflict:

My son wasn't only my son. He was my best friend. We did everything together. Then one day he took off for work as usual but he never came home. He was blown up in the bus he was traveling in by a suicide bomber. I felt that my life had stopped completely, that everything was over for me. I am a religious person, so I had really big questions about where God was in all of this. God seemed cruel and far, far away. I became terribly depressed; I couldn't do anything. I couldn't eat. I

couldn't sleep. I couldn't make any sense of it at all. I wanted to die just to be with my son again. Then one day I was reading the book of Job [Hebrew scripture]. You know the story of Job? He loses his possessions, his family everything. "But he says, to God, even though you seem to want to kill me I am going to trust you." I thought that this is what I have to do. As a religious person I have to trust God, even though it looks like he is killing me. So I say to myself, every day I am trusting you. I am not giving up. I am trusting you. I am not giving up and then one day, it starts to make sense to me. I am watching TV. I see Palestinian people weeping and wailing because their sons have been killed by Israeli soldiers. Their coffins are being carried through the streets and suddenly it just hits me. They feel just as bad as I do. Their hearts are breaking just like mine, and I feel so close to them. They are not my enemies they are my brothers and sisters! And then I know what I have to do. I go to a Palestinian family and I say to them that I am so, so, sorry and I tell them that I lost my son too and then we just all sit down and we weep together as we share with each other stories about our sons that we lost. It is like we share one broken heart together. Then we embrace and we are family... and then the idea takes root that we have to do this more; we have to ask more Israeli and Palestinian families to get together and try to find a way to stop the war. Now we have formed an organization now for Palestinian and Israeli families who have lost children and want the war to stop. War is not a solution... we are killing each other and we are actually brothers and it makes no sense.

Katrina unfolds an similar understanding that illuminates the meaning of life not as distancing oneself from suffering but, as Marcel says, abiding with pain patiently, letting it speak in such a way that the deepest understanding of what it means to be authentically human comes to be understood:

I think that in my moments of greatest clarity, I see that we humans are all connected and that I am not separated from the one who does bad things or who suffers. Ultimately, the bad things that others do or the way other humans suffer also affects me. I also believe that the small things that I do, have a ripple effect that potentially affect many, many people... although I can't see it myself, that doesn't matter. I take it to be true. I have come to see that meaning in life is not something you grasp as a concept but it is something that you experience through the actions you

take. You overcome your fear of suffering by being compassionate yourself.

Seeing Life in a Different Light

Tom says of life following his diving accident and his decision to reject paid employment for work that engaged his soul:

Even though I do not receive pay for these activities, I am now happier than I was when I had a full-time job before the accident... Today, I am married to a person I really love and who loves me. Between us, we have two daughters, who we love very much.... I also have free time to enjoy my family; before I was so caught up in my career that I didn't take time to enjoy life. Now I can take off with the family whenever I want; yet I am involved in very worthwhile projects that are fulfilling and also help others.

Sarah and her husband who have struggled with how to "be" in the face of their daughter's choices say:

I think that we have learned much about our expectations of life, and our own strengths. We have more insight with regards our own decisions — what makes us happy, more compassion for others, and less need for control, which is an illusion. We have learned that needing support is not shameful, and that letting go of the responsibility — or sharing it — may be the only way to survive. We were able to see how much of our lives was lived for the approval and admiration of others, and try to recognize these traits when they appear in our decisions now. This adversity has had a tremendous impact on our lives in many ways. We are different people than the ones who would be here today if Sharon had not turned our world upside down. We have learned that suffering is part of the blessing. Now when we meet with adversity, unwanted changes or hardships, we can sometimes remember that there may be an opportunity here to learn or some unexpected gains. I actually feel very lucky to have the life that we have.

Katrina shares her changed view of herself and her life:

Although the disappointments... and the loss of my husband were really, really hard I also learned important things about myself. One lesson I learned was that I really could go on. I learned that I was a stronger person that I ever imagined myself to be and that even though things look impossible, relief and support do come. (My friend who looked after all of us, while I was so depressed and holed up in my bedroom). The other thing that I learned through suffering was a lot about compassion. I really do not believe that you can become a better person until you have had to suffer. When you suffer you learn how important compassion is... i.e. that someone else is willing to suffer along with you and care for you and to hope that your suffering will lessen somehow. In the end, life can be pretty scary and it is true that ultimately you face your fear alone, unless you believe in God. I believe in God and I have a relationship with God. Human love is so important and I am so thankful that I have the love and companionship of my boys and my close friends but I also have the sense (most of the time) that God too loves me and that I will be taken care of and given strength for what ever I am called to face in life.

Barbara, in comparing the person she is now to the person she used to be, and offering advice to others experiencing adversity, says:

Today I am the same person, yet different. For one thing, I am much more comfortable with myself. I think I've gotten over feeling angry and bitter .... I believe that happiness lies in liking who you are and going after what is personally important. I've made a lot of progress on both fronts, although becoming who you want to be is a life-long journey. I am very thankful to have a small circle of friends who mean a lot to me, and I stay in touch with some family members that I am closest to. If I was asked to offer advice to someone whose world had turned upside down, I would say, try to sort out what is most important to you (whatever that takes!), seek out some true friends to see you through the tough times, and keep reaching for your dreams.

Abraham shares his insights and compares the person he is now to the person he used to be. As Nouwen (1996) would say Abraham has let his pain become *the* pain that connects him to a suffering humanity and to God in a deep and intimate bond:

I never, never ever get over missing my son. I go to his grave every week and sometimes more than once a week. I go there to connect with his spirit and to tell him what I am doing (to make friends with the Palestinians) and I have the sense that he is proud of me. But losing him is like losing a finger. I can still do things but it is always like..., how do they say it? Like a ghost pain. It always hurts and life will never be the same for me again. Today I am a different man, and some people don't want anything to do with me. They want to keep up the barriers that I want to tear down. Still I know what is important and I realize that it is my pain that connects me with suffering of other people and has made me a better person. I feel that God is close by and that in some way his purpose is being worked out in my life.

Andrew Solomon (2001, p. 440) who has experienced three lifethreatening encounters with clinical depression relates how this adversity has changed him and shown him how precious life is:

I take my mental temperature often. I have changed my sleeping habits. I give up on things more readily. I am more tolerant of other people. I am more determined not to waste the happy time I can find. A thinner and finer thing has happened to my self; it won't take the kind of punching that it used to take, and little windows go right through it, but there are also passages that are fine and delicate and luminous as egg. To regret my depression now would be to regret the most fundamental part of myself. I take umbrage too easily and too frequently and I impose my vulnerabilities on others far too readily, but I think I am also more generous to other people than I used to be.... Since I have been to the Gulag and survived it, I know that if I have to go to the Gulag again, I could survive that also; I'm more confident in some odd way than I've ever imagined being. This almost (but not quite) makes the depression seem worth it. It do not think that I will ever again try to kill myself; nor do I think that I would give up my life readily if I found myself in war, or if my plane crashed into a desert, I would struggle tooth and nail to survive. It's as though my life and I, having sat in opposition to each other, hating each other, wanting to escape each other, have now bonded forever and at the hip.

Offering advice to others who struggle with depression as a particular form of adversity, Andrew says (2001, p. 430):

The most important thing to remember during a depression is this: you do not get the time back. It is not tacked on at the end of your life to make up for the disaster years. Whatever time is eaten by a depression is gone forever. The minutes that are ticking by as you experience the illness are minutes you will not know again. No matter how bad to you feel, you have to do everything you can to keep living even if all you can do for the moment is to breathe. Wait it out and occupy the time of waiting as fully as you possibly can. That's my big piece of advice to depressed people. Hold on to time; don't wish your life away.

Thus, it has been shown that adversity as calling constitutes a covenant which is both a giving and a binding. Adversity as calling is also a discourse in which the self connects with that which is eternal and is called to from its utmost potentiality of being. The summons is to refuse the lure of conventional attractions, to connect with larger causes and to discover in life deeper meaning and purpose. As such, the call is a call neither to distance oneself from suffering, nor seek control over it. Rather than camouflaging concealing pain, the call is to yield to, abide with, and come into an intimate relationship with life's inevitable losses and suffering. This intimate yielding is a patient, hopeful, relaxed dwelling with, such that the alienation characteristic of adversity is transformed into connection and belonging. Pain and suffering come to be seen, not as that which separate one from life and cause one to feel depleted, lost and abandoned, but as that which points out that which is important, conveys direction and unites one with a common humanity. Seen from this vantage point, captivity

and exile become teacher and the self becomes learner. Together teacher and learner unfold an epic that stretches beyond the story of adversity to narrate the meaning of life. Living life fully is learning to appreciate life as a dynamic and continuously replenishing process. Admitedly, change does bring danger and loss but danger and loss also bring possibilities for deeper meaning, clearer direction and nobler purposes in life. Living life fully is learning to dwell resolutely in the turning of disruption and disjuncture and listening attentively for the call to one's utmost potentiality and unique purpose in life.

### CHAPTER FIVE

# IMPLICATIONS, LIMITATIONS, CONTRIBUTIONS AND FUTURE DIRECTIONS

#### Introduction:

In this concluding chapter, I bring the parts of this study together, and in keeping with the hermeneutical interpretative tradition, I generate a unified text as a whole in order to ask the question: How does the approach used and the new understandings generated by this study speak to nursing as an applied profession, i.e., a profession that has been entrusted with the privilege of caring and healing as well as one which is held accountable for the services it provides? By considering the text as a whole, including the philosophical and methodological approach, the extant literature, and the new understandings arising from the study, I am able to analyze the relevance of the study for nursing science and nursing practice. In addition this analysis provides opportunity to discuss contributions to the body of knowledge pertaining to stress, resilience, meaning and healing.

I begin by establishing how this study in seeking to uncover how people find meaning amidst, and in subsequent reflections upon, a time of great hardship is relevant the caring and healing objectives of the nursing profession. I argue that as a study of how meaning comes to be constructed in the human experience this study promotes discussion of the gains to be made by a nursing science that

can expand its range of inquiry beyond its current emphasis. With reference to this study I show that the relationship of meaning to healing in the human experience necessitates an existential and ontological framework in which to consider the phenomena. From this vantage point I then discuss the benefits for nursing science of expanding its conceptual horizons beyond its current epistemological emphasis to take in existential and ontological dimensions as well.

Moving from these broad philosophical and methodological considerations, I then explore more practically, how this study can help nurses be more attuned to the ontological challenges experienced by people undergoing adversity. Insights gained from this study are then discussed as considerations that need to be taken into account when nurses offer skilled accompaniment and afford generous hospitality to those embarked on tortuous journeys through unfamiliar territory.

The last section of this chapter places what has been learned from this study alongside the extant literature pertinent to how people cope with stress, loss, and adverse life events. In this way, I show that this study contributes knowledge related to **how** people dwell with adversity, (i.e. the practices they engage in, the experiences they undergo and what they learn from their experiences). The study also offers some insight into **why** some practices enable flexible adaptive responses. A limitation of this study, however, is that it offers little concrete

information on questions related to **who** copes well (i.e., specific personality traits and detailed information on prior life experiences associated with adaptive or non-adaptive coping skills). Having outlined the implications for practice and the limitations of the study in terms of its ability to answer questions being asked by researchers interested in how people cope resiliently with stress, comments are then offered to show how this study provides (despite its limitations) some clues that hold potential for addressing questions that remain unanswered in the extant literature.

I then conclude the chapter with a description of some future directions that could be explored given the avenues of inquiry opened up by this study, with a review of what has been accomplished, along with some personal reflections on what has stood out as my most significant learnings.

# Relevance for Nursing

Although the study of how people find meaning in adversity is neither an intervention study nor a descriptive study of how nurses practice, it nevertheless has wide-ranging implications for the way nurses and other health-care professionals practice. Relevance is established in consideration of how adversity almost invariably brings individuals into contact with nurses and health care systems, either because the health problem itself constitutes the adversity, or because disease and illness are commonly associated with experiences of

hardship, breakdown and loss (Holmes & Rahe, 1972; Dohrenwind & Dohrenwind, 1974; Parkes, 1972, Cadoret, 1980; Kleinman & Good, 1985; Brown, 1994, 1995, 1996, 1997).

An analysis of data collected for this study substantiates this claim in that of the 20 stories and conversations gathered for this study, 12 of them involve personal experiences of physiological symptoms, disease processes or loss of function as a result of accident. Examples of such personal health problems include the diagnosis of cancer (David and Joanne), lupus (Melissa), liver cirrhosis (Allison), spinal cord injury (Tom) and traumatic injury (Helen, Sam, Michael). Significantly, all personal stories in which the adversity is seen to be a loss of physical health manifest a concomitant and marked diminishment of spiritual and psychological well-being. The accompanying loss of well-being ranges from severe depression, suicidal ideation and wishing for death (Tom, Andrew, Helen) to fear, anger and anxiety (Melissa, Jane, Sam, Michael, Natalie), to shame and humiliation (Tom), and marked anhedonia (Allison, Gloria).

Also noteworthy is the fact that the remaining eight stories and conversations that do not disclose an experience of adversity as a personal health problem per se (but rather an experience in which a spouse, child or close friend either dies or encounters serious set backs or health problems), manifest a similar experience of suffering. In some cases, the experience of anguish is of comparable intensity to those directly and personally confronting life-limiting disease and

disability. Examples of these kinds of intense experiences in relation to the loss of, and losses experienced by, important others include: the death of a spouse or child – depression (Katrina, Abraham, Harold, Fiona); the serious illness of, or separation from, a spouse, child, parent or sibling – anxiety (Ann, Barbara, Margaret and Lin).

Whether the stories are stories of personal encounters with disease or losses of well-being associated with the deaths and serious set-backs experienced by family members and close friends, it is clear that adversity dislodges the structures of life. The disruption constitutes a severe assault on health and well-being. Restoring health and well-being necessitates coming to an acceptable understanding of the event(s) in relation to the overall direction and purpose of one's life. Healing involves the restoration of meaning.

# Implications for Nursing Science

Through the lens of interpretive phenomenology, I have explored the idea that the disjuncture of adversity throws into focus fundamental questions relating to the meaning of being. Thus, a response to questions of this nature ("Who am I and what is the meaning of my life?") requires an existential/ontological horizon in which to address the questions. The position taken here is that most of what currently counts for nursing knowledge is epistemological in nature, i.e., it is taken up with patterns of knowing (Carper, 1978; Silva, Sorrell & Sorrell, 1995).

While such an approach is logical and even desirable for a discipline that is accountable for developing knowledge of how to assess and intervene in many circumstances ranging from life-threatening to health-promoting, I question whether the horizons of the profession could and should be further expanded by devoting more attention to existential and ontological considerations.

Specifically, how could nursing as a practice discipline benefit from developing a deeper understanding of how meaning in life is both lost and regained in a time of illness, disjuncture, and loss? The question is an important one since the answer given could signal a philosophical shift. "How nurses, especially nurse educators, view the emerging philosophical shift and synthesis of epistemology and ontology affects the values transmitted and, consequently, the professional, scientific, and ethical behaviors of students" (Silva et al, 1995. p.12). Whether nursing gains momentum in effecting an epistemological and ontological shift depends on the relative importance placed by the profession and those it serves on "fact" over meaning. An emphasis on fact will stress the development and dissemination of technologies to battle disease and perpetuate life. A post-modernist emphasis on meaning, such as is the orientation of this study, will establish priorities focused on quality of life and "will invite consideration of context, connections, relations, multiplicity, ambiguity, openness, indeterminacy, patterning, paradox, process, transcendence and mysteries of the human experience of being-in-the world" (Watson, 1992, p. 61).

Havel (1994. p. A10) asserts that:

The relationship to the modern world that [natural] science has fostered and shaped now appears to have exhausted its potential ... [given that] it fails to connect with the most intrinsic nature of reality, and with natural human experience... [and given that science] is now more of a source of disintegration and doubt than a source of integration and meaning... [and considering that this has resulted in a situation] where man as observer is becoming completely alienated from himself as a being.

Taking into consideration Havel's analysis of science, nurse academicians must give careful consideration to how they will shape nursing science for the future. Of paramount concern must be finding a way of developing knowledge and understanding such that the world of nursing does not become chaotic, disconnected, and confusing. How will nursing chart a course that enables inner understanding of phenomena in our experience in a world where everything seems possible but where nothing is certain?

As I consider how my learnings from this study will affect the way I think and teach nursing in the future two concrete steps present themselves. These include: a) the cultivation of programs of nursing and interdisciplinary research that illuminate and demonstrate the relationship between meaning and healing and b) the development of pedagogies informed by phenomenology whereby educators show students the importance of linking events (which bring people into contact with health professionals) to the ensuing ontological crises that inevitably unfold. Such research and teaching approaches would advance nursing science by providing clinically relevant knowledge and enhanced personal

understanding. With such approaches students could learn to offer care that truly integrates concern for the physical body, psyche, *and* soul or spirit.

A very practical and personal way of deepening appreciation for the ontological dimension of human experience is to help students understand the issues that have come up for them in their own lives, or in the lives of members of their own families as hardship and loss were confronted. Such personal understandings would then anchor students in an understanding of what it means to be human and would go well beyond teaching interviewing and good communication skills. With approaches like these students would be enable students to gain a firmer grasp on the centrality of meaning in the human experience.

Some stories, notably the story of Katrina whose husband died alone while health professionals concentrated on keeping him alive, show just how important a nursing science that enables the capacity to think ontologically is. As healers, nurses need to be able to dwell ontologically with patients as well as to intervene epistemologically. By this, I mean to convey the idea that there is a difference between undergoing a situation with a patient, whereby the conditions conducive to meaning and healing are cultivated, compared to delivering technically skillful care that meets 'objective' standards but which may be stripped of human meaning and authentic engagement. One point of view preserves the patient's sense of agency whereas the other may, in its sincere desire

to improve standards of care and its concern to ensure that patients receive the "best" care, actually achieve the unintended and paradoxical effect of distancing the nurse from the patient. We need to harness technology in the service of freeing nurses to be more, and not less, authentically engaged with the people they serve.

In considering how the stories in this study illuminate a relevant, incisive, values-based nursing science for the future, it becomes clear that we need a science that can critique technology, exposing its underlying assumptions and ultimate ends and examining the extent to which it frees or enslaves. An ontological framework is invoked not with a view to returning us to some romantic, antideluvian state of existence, but to differentiate between technologies that enhance human connectivity, and reveal the meaning of being and technologies that isolate, distantiate, conceal, and enshroud being. Marcel asks the question:

What are we to make of ourselves in the face of the fact that we are gradually being thoroughly manipulated by a technology that we ourselves have devised?... What I particularly want to stress is man's growing tendency to understand the world around him – and even himself- in terms of technology. But then of course I should specify what I mean by technology. I consider it a specialized and rationally elaborated skill that can be improved and taught to others. When we speak of technology we do not have in mind the cumulative sum of a variety of different skills. Technology is not a unity we can amass. It is human reason in so far as it strives to manage, so to speak, the earth and everything living within it.... To maintain as I do that man is being misled, to understand the world and himself in reference to technology, postulates that man is under the impression he can modify the world methodically by his own industry in such a way as to satisfy his needs in an increasingly perfect manner.

Some time ago I called attention to the fact that this kind of thinking gives rise to a genuine anthropocentrism. Man tends to look upon himself as alone being capable of giving meaning to an otherwise meaningless world. Doubtless this will have a remarkable effect on man's ability to admire the things around; there will be an increased tendency to admire the products of his own technology- as they appear to afford a matchless measure of perfection and precision. ... eventually man will see himself as something of a nuisance, almost refuse for being nothing but human. And then he will set about rectifying the evident shortcomings in what he understands by "nature". (S p.43).

Having thought about the future of nursing science in the light of postmodernist assumptions and the warnings of Havel and Marcel, and having offered a concrete example of how nursing research and education could take up the challenge of bringing meaning into a place of centrality in health care, I would like to consider in a little more depth how a nursing science, with meaning and healing at its center, challenges the very personhood of nurses as human beings.

# Personal Challenges and Conceptual Shifts

I have suggested that nursing as a discipline and a science devoted to caring and healing could be strengthened considerably by vigorous effort being exerted to understand first and foremost the centrality of meaning in the human experience. From this vantage I see that other questions can be addressed such as the relationship between the restoration of meaning and the process of healing. Questions pertaining to meaning take nurses into new territory. This is related to being and how being comes to presence or is alternatively concealed. Questions

related to being would require nurses to think about the meaning of their own being and the extent to which meaning in their own lives is present and coherent, or concealed and fragmented. One concern that may emerge with movement in this direction could be that such questions might result in a kind of self-preoccupation or navel-gazing that might obscure and detract from the central purposes and goals of the profession. However, as was explored in a previous chapter, a better understanding of the intersubjectivity and mutuality necessary for the development of personal coherence could result in not only improved clinical outcomes for patients and significant findings for researchers but enhanced working experiences for nurses. A consciousness on the part of nurses of how they engage with their work could give rise to ways of relating not only with patients but also with colleagues such that more mutuality and connectedness could be experienced.

It is this unifying understanding of intersubjectivity and being that can only be reached by learning how to think ontologically that requires further development in nursing. If, for example, nurses were to give consideration to the meaning of adversity for themselves as well as their patients and if they were to grasp more fully the experience of adversity as a "dwelling in exile and captivity" that can become either "resigned or resolute", then more thought might be given to what it means to be in this world in such a way that one is either offered, or

able to hear the call to extend to others, liberating accompaniment and helpful hospitality especially, but not only in, a time of personal crisis.

Until nursing comes to grips with the need for an ontological/existential framework to guide its way of thinking, care will continue to address physical and psychological well-being which is acceptable and good as far as it goes. The question of the meaning of the adversity for the person undergoing it, will however receive only scant attention. In addition, nurses may continue to perform their work in an everyday way – matching up nursing diagnoses to clinical manifestations, implementing practice guidelines, following critical pathways and meeting standards of care - so that there is a danger of missing the unique opportunities present in a particular situation. There is also the risk of routinizing care so that nurses no longer notice whether their own needs for meaning and purpose are being addressed.

As we have seen in the foregoing stories, attention to existential and ontological issues is crucial to the restoration of health and should be of interest to nursing because it is the putting together of acceptable meaning that enables people not only to get on with their lives but to grasp what is fundamentally important to them. The grasping of that which is fundamentally important paves the way for not only restoring meaning but also for living in a deeper and more satisfying way. As human beings, nurses and patients do not differ in this respect!

As a study oriented to revealing the ontological and existential issues which lie at the heart of an experience of adversity, this study is part of a genre of nursing research which strives to build momentum for an epistemological-ontological shift. In justifying this stance, I have incorporated Watson's description of postmodern assumptions and I have drawn from the thinking of Marcel and Havel. From there, I have gone on to offer some concrete suggestions as to how the scope, relevance and power of nursing practice could be augmented. What is required is an increased capacity of nursing science to incorporate epistemological concerns about how knowledge pertaining to the psychological processes of thinking and feeling is constructed into the more a primordial and wider-reaching inquiry of how people come to understand the meaning of their lives.

Much more could be said about the very concrete and practical ways that it matters whether nurses understand how to be present in a way that grasps the ontological and existential issues at stake in the situation. Amidst all the reasonable and justifiable demands for technical expertise, professional accountability, risk-management, and evidence-based care, how important is it that nurses still be alert to the particular and individualized possibilities for meaning that exist amidst ominous and life-shattering circumstances? I return to the stories and conversations gathered for this study to substantiate just how important such vigilance, skill, and discernment can be.

# **Implications for Nursing Practice**

Of significance in the stories was the fact that health care professionals were frequently but not always helpfully encountered. Some seemed to intuitively grasp the ontological possibilities in the situation, while others seemed caught up with their habitual ways of being and doing. Some were actually seen as potentially intrusive or unwittingly concealing the possibilities at hand. Still other stories revealed the limitations of professional help in the face of human agency when for example, a decision was taken by a person to refuse professional help or when the lack of desire to live thwarted all professional attempts to intervene.

Sarah says of how health professionals helped her and her family to gain perspective on how to preserve that which was important in the face of her daughter's apparently destructive behaviour:

They certainly helped us in understanding ourselves and learning to protect what was left of our family from her. For that we will be eternally grateful.

Tom reveals how at times he needed and relied on the help of professionals while at other times he preferred to work out a way of being on his own:

I had no movement from the armpits down. The nurses had to do everything for me: brush my teeth, bathe me, take care of all of my bodily functions. I had to be turned frequently to avoid bedsores. They did this by strapping me down and literally flopping me over. At first that was very scary; I wasn't sure if I'd fall or not. Later I learned to trust the

nurses and I felt safe and cared for [but I]... lost a sense of who I was. I felt like a piece of meat. It took a long time to get my identity back... There were counselors available, but I never felt comfortable talking with them. At night, I'd lie in the dark for hours thinking about what was happening to me and what I'd do with my life. I'd cry when no one could see me.

Katrina says of her encounters with health professionals who aggressively treated her husband who was dying, and who were apparently completely oblivious to the profound human needs in the situation:

When asked bluntly, "Is he dying?" the doctor always answered with hope, talking of new treatments and how Daniel had improved from the day before. I didn't see the improvement and I wondered if his children from a previous marriage should be called to his bedside. But the medical staff knew best, didn't they? My husband died in the early hours of February 21st, 1981 – alone. We were not prepared.

Helen says of her difficult circumstances, her loss of well-being, and the limitations of professional approaches in restoring meaning in her life:

We lost the resort, my husband took up with another woman, the surgeries were unsuccessful, I suffered from chronic pain, and I fell into a really horrible depression. I saw a psychiatrist, and numerous types of antidepressants were tried. I also saw a chronic pain specialist. Nothing helped. I had side-effects from the pills and really didn't feel much better. The pills and advice didn't change the fact that life had caved in on me. Some days I longed for death. Then one day it came to me that nobody could help me if I didn't want to live and wasn't willing to help myself.

# Attunement and Accompaniement

These excerpts help us to see just how complex intervening in situations of human extremity really is. In all of these stories, the situation "causing" the adversity could not be altered, neither could those living through the situation

distance themselves from their suffering. While pharmacologic aids and advice on coping were offered in some situations, there was no cure for what had been meted out by life itself. All storytellers were forced to "dwell with" and construct meaning amidst adversity rather than escape from it.

The implications for health professionals of these stories are related to discerning the particular and individualized possibilities at hand in a situation of adversity. We recall that adversity is a situation that necessitates dwelling in captivity and exile but even in such situations, or especially in such situations, exquisite attunement, skilled accompaniment and generous hospitality can make a difference. The hopeful, patient, intimate abiding with the patient in a situation on the part of the nurse can be the kind of accompaniement that cultivates the conditions for resolute, versus resigned dwelling on the part of the patient. The stories gathered for this study suggest that in some cases, health professionals were attuned to the profound human need arising in the situation, whereas in other situations, the objective of gaining control over disease and malfunction obscured the possibilities for spiritual and psychological healing.

In Sarah's story of her trials with her teenage daughter, we see, for example, that, contacts with health professionals could not change her daughter's behaviour. Nevertheless, the time spent with professionals was deemed beneficial in that this enabled the family to face up to themselves, to salvage that which was good, and move on with their lives. This story helps us to gain appreciation of the

importance of professional help that does not attempt to "fix", but which rather truly "hears" i.e. is attuned to what the other has to say, and abides with the person or family such that perspectives are transformed and resolute dwelling is promoted.

In Tom's situation we see that, despite the fact that he trusted professionals to take care of his most basic physical needs, he was unable or unwilling to share his inner doubts about whether meaning could be restored in his life. Reconstructing meaning was something he chose to do on his own. This story should humble us as health professionals and remind us that, in the final analysis, we can only be *invited* to accompany another on a difficult journey. Nevertheless, we can ask ourselves how can we "be" in such a way that we are welcomed as wise, skilled and preferred guides rather than avoided as meddling intruders. In Katrina's situation, we are left wondering how the medical team might have been with her and her husband in such a way that the possibilities at hand might been more securely grasped. How could the final days with her husband Daniel have been different if the medical team knew how to dwell hopefully toward meaning rather than to persist with their dogged but doomed efforts to battle the disease? How could Helen's protracted period of resigned dwelling in despair be eclipsed and her resolute pursuit of recovery be precipitated?

Exemplary Care, Nursing Knowledge and Expanded Understandings

Reflection on these questions reveals that exemplary care is not just a question of drawing on objective "evidence-based" knowledge and technological skill. Rather, seeing the possibilities in the situation at hand has much to do with the health care professional's own insight into what it means to be human and how meaning that honours human being can be both constructed and discovered. New possibilities and meaning arrive mysteriously in a context of engaged human relatedness and intersubjectivity.

These conclusions about what is important in the human experience, and what is necessary in exemplary nursing care are, not unique conclusions. The last two decades in Nursing have seen a steady appreciation and development of the relevance of such concepts as presence, co-constructed meaning, spirituality and intersubjectivity for nursing practice (Patterson & Zderad, 1988; Cody, 1995). In a landmark book, Benner and Wrubel (1989) warned about the pitfalls of objectifying knowledge and laid out an approach based on hermeneutical phenomenology that illuminated nursing practice as honoring human being.

Nursing theorists such as Rogers (1994), Parse (1995), Margaret Newman (1979) and Watson (1990) have all explicated the domain of nursing as that which is primarily focused on human transpersonal process. Psychiatric nursing, drawing upon the insights of Peplau (1952) and the psychodynamic tradition has a history of placing the nurse-client relationship at the center of all its interventions, despite

the incursions of psychobiology with it's tendency to privilege chemical imbalance as *the* cause of psychological and spiritual distress.

Against this backdrop of limitations in nursing knowledge, as well as the evident progress that has been made in gathering momentum for the epistemological to ontological 'shift', I return to the more practical considerations of how in particular this study expands nursings' understanding of what it means to live through a adversity and whether this study offers nursing any insights as to how to be with people in such a situation.

In answering this question, I put forth the perspective that nurses' understanding of human extremity is generally extremely narrow and that this narrowness of view restricts nurses to a style of practice that may close down possibilities rather than enabling them to arrive. In general, nurses are taken up with the losses that occur to patients. They are familiar with the burden of tragedy, pain and suffering brought on by adversity, and they often suffer themselves beneath the weight of this evident burden. I offer the view that nurses are very much less familiar with and open to the possibilities and gifts that lie hidden within an experience of adversity.

How could nursing practice be different if there were a thorough understanding that in adversity one is not only turned away from the familiar and desirable but that one is turned toward something new, which had formerly been hidden from view? Possibly nurses themselves would not feel so overwhelmed

and burned out by an apparently tragic and mechanistic view of health care as a wasteland of deficits and problems awaiting repair. Nurses themselves might be more hopeful if they understood that within adversity hidden favors are found. In their hopefulness it is possible that they might be more alert to the possibilities at hand rather than wilting beneath the burden of fixing problems and producing outcomes.

How could nursing practice be different if there was a deep understanding that cure may, or may not, be the primary objective and but that healing always is? What if, for example the glance of the nurse not only took in the pallor of the patient but the look of terror on his son's face? What if the terror on the son's face enabled the nurse to understand how afraid the son was of losing his father and that this understanding, in turn, opened the door for the nurse to enable the son and father to become "more" to each other? How could nursing practice be different if it were understood that even, and especially in, the final hours of life, healing and restoration of meaning are possible, not only for the person leaving this life, but for those who will live on with their memories? What if positive clinical outcomes incorporated patients' and families' subjective experiences of exquisite caring even amidst the most shattering of experiences. What if nurses understood that the movement from that which is shattering to that which is restorative could begin and gain momentum by the way that nurses arrived and remained on the scene?

In consideration of how nurses might arrive and remain "on the scene", thus enabling resolute dwelling, we return briefly to the stories. We recall that meaning began to return with the gifts and friendships of generous caring others. Meaning arrived in the presence of grieving and of relinquishing that which was past, with dwelling hopefully "toward" meaning — anticipating and believing in its arrival before it arrived. Importantly, meaning appeared with engagement in work or activities that contributed in some way to the well-being of others or restored a sense of usefulness in life. Significantly, the stories did not reveal that meaning returned and then engagement with others ensued. Meaning returned with relinquishment of that which was past and with an active response to a call for personal engagement in the present.

Five important insights are offered as considerations that can be taken into account by nurses caring for those who are amidst adversity.

First, it is fundamentally important to those who are traversing the darkest passages of adversity that they have the sense that they do not travel alone. Thus the sense of accompaniment on the way, rather than abandonment, is in itself a form of refuge than enables healing. There is much that we in nursing have to learn about being sensitive, compassionate and wise guides. We must not only take into account the terrain over which people are traveling, but their energy level and resources, if their capacity for steady progress is to be maximized. Good guides know when to set up camp, take nourishment and rest, and where and how

to find places of refreshment and hospitality along the way. Good guides also know how to teach those they are accompanying how to use a compass so that they may chart their own course. Accordingly, it must be acknowledged that sensitive nursing care, psychotherapy, and counseling offer important and life-saving professional accompaniment through difficult transitions. In the end however, professional accompaniment is temporary and time-limited.

Professional caring cannot and should not replace the natural caring that results from situated relationships and living in community nor the resolute dwelling that comes from the recognition that in life there is, even among the most coercive of circumstances, the freedom to choose.

By returning to the stories, we see that while health professionals may have been important catalysts in the quest for meaning, participants did not place health professionals in the role of main protagonists. Family members, friends, colleagues, neighbours, and fellow parishioners were given a central and constituting role.

## Barbara says:

One thing that helped me to get through this painful time is that I had one close friend who was my confidante. She listened to me as I talked about my experiences... In her loving, non-judgmental presence, I tried to make sense of what was happening and to choose how to be with it.

# Ann says:

I remember breaking down completely one day, in the company of my friend and telling her how frightened and desperate I felt. She took a

pretty "no nonsense" approach. She let me cry but then told me that I had to pull myself together.

# Harold says:

When we brought his [son's] body back for the funeral,... For days our friends and family poured into the house, food arrived, people came to sit with us and comfort us...

If these stories disclose that family and friends, rather than health professionals, played a central role in helping people get through adversity, then what supporting role can nurses play in the restoration of meaning? As we have seen above, nurses can be skillfully present at critical junctures but nurses cannot engineer social life such that suffering people are the recipients of generous caring actions. Nurses can, however, look for opportunities to bring generosity and suffering into close proximity, such that healing is initiated and sustained.

Models of care delivery that enable nurses to move easily and seamlessly between hospital and community afford opportunities for nurses to have the depth knowledge of communities and relationships within them that provide possibilities for sustained and sustainable caring. Silo models of health care delivery, wherein hospitals and community health services operate in isolation from each other, reduce the possibilities for natural and sustainable systems of care.

The second insight related to dwelling with adversity afforded by this study is that suffering can be endured when it is understood that one's suffering is

not unique and that there are others who have traveled along a comparably difficult path and survived. The stories of Fiona (whose marriage ended and whose daughter committed suicide) of Tom (who was paralyzed in a diving accident) and Abraham (whose son was killed by a bomb) speak eloquently of the relief that can come from finding a deep connectivity with others who also suffer. Accordingly, nurses could benefit from a deeper understanding of the needs that self-help groups can meet. Specifically, it should be acknowledged that one who has never experienced the adverse phenomena, whatever it might be, can never have as much insight into the nature of the suffering as one who has. This is not to argue for the replacement of psychotherapy and professional counseling by self-help but rather to suggest that both have their appropriate place.

The third insight related to dwelling with adversity pertains to the way that meaning was recovered in being with others. Meaning was not recovered in just 'any' way of being with 'any' others. Recall that Tom does not return to his place of employment even though he was offered a paying job. Instead he chooses a meaningful but not lucrative role for himself. Abraham found that his capacity to identify with and make friends with Palestinian parents who had lost children in the Israeli-Palestinian conflict separated him from people he had formerly considered friends. He chooses meaning over compromised companionship. Sarah goes from being an exemplar of middle-class respectability and achievement to being an ordinary and worried parent who first wants to hide from

sight, but then learns to reveal herself. In so doing she is able to share her burden with friends who care. She achieves a sense of belonging. In these stories, we see meaning arriving with reaching out and establishing a deep connectivity with others based on an authentic understanding of who I am, as well as the resolute decision to reveal one's true being to others rather than to conceal it. In these stories and others, meaning arrives in the process of authentic social engagement.

Nurses need to understand that people who go through overwhelming adversity are people who may be changing in very profound ways. Helpful accompaniment by nurses is not about patching people up and returning them to life the way it was before the crisis. It is about helping people to dwell toward meaning and to understand who they are becoming.

A fourth important insight comes from reflecting on the presence of the mysterious and sacred in the stories of those who were able to dwell resolutely. In considering how powerful these experiences were in enabling people to dwell hopefully, patiently and expectantly, I wonder how nursing and health care would really be different if amidst all of our diagnoses and prognostications, we really left room for the miraculous and surprising. This is not to suggest the abandonment of the empirical and rational, but to argue for a respectful, even appreciative, co-existence between that which can be predicted to some extent and controlled to some extent and that which is undeniably uncertain, indefinite and intangible. Could there be a place for healing rituals, grace and prayer in that

which is considered Best Practice? What if nurses were able to see in the wounding of the body and mind not just as danger to be covered over as quickly as possible, using all the technical know-how available, but, like adversity itself, an opening and potential access? What if caring for wounds to the self, such as is the work of psychiatric nurses, was an occasion for becoming more human, more in touch with the sacred, more in touch with ourselves?

Echoing the words and warnings of Marcel, Eugene Peterson (1994, p.168.) cautions those of us in the helping professions to think through our ways of caring and to acknowledge that it is not all up to us. Despite our massive knowledge, sophisticated systems, best practice guidelines and good intentions there is much that we don't know, can't control and need to let be, so that possibilities arrive rather than are closed down. Commenting on the spiritual depletion that can accompany compulsive caring, Peterson urges care-providers to cultivate a different orientation – one of contemplative caring.

Teach us not to care
So that we have energy and space
To realize that all our work
Is done on holy ground and
In your holy name.
That people and communities in need
Are not a wasteland
Where we faithlessly and feverishly set up shop
But a garden, a rose garden
in which
We work contemplatively.
Suffer us not to mock ourselves with falsehood.
Teach us to care and not care.
Teach us to sit still, even among these rocks.

#### Amen.

A fifth insight comes from recognizing the important role of suffering in the process of reaching meaning, freedom, and liberation. By this statement, I do not mean to valorize or romanticize suffering nor am I advocating the cessation of valid and necessary medical treatments. In achieving a balance between looking to, and beyond, human technology, I am reminded of Andrew Solomon's (2001) insights. As a person who has suffered three life-threatening episodes of clinical depression, he strongly urges people to learn as much as possible about psychopharmacologic approaches for depression so that they can insist on the most up-to-date and appropriate treatments. He inserts, however, an important caveat. Obtaining good psychopharmacological treatment is not pursued with the intent of replacing or relinquishing the search for meaning. Rather, it is done with a view to augmenting, energizing and sustaining the search for meaning in life. Technological advances including psychopharmacological strategies could conceal what it means to be human if nurses approach the loss of meaning in life simply as evidence of chemical imbalance to be rectified. Coming to a new and acceptable meaning necessitates dwelling with suffering rather than denying, distancing or controlling it. As has been discussed at length, finding meaning in adversity is an experience that ultimately must be brought home, befriended, entered into intimacy with, resolutely dwelt with, listened attentively to, and

actively acted upon. Only in this way can the ontological possibilities be revealed in terms of who I am and can be.

By approaching the study of how people find meaning in adversity through the hermeneutical phenomenological lens, I have suggested some implications for nursing practice. The first part of this chapter dealt with the implications of this study for nursing science and it has situated this study within a genre of thought intended to move nursing toward a philosophical and ontological shift. The second section focused more concretely on the implications of this study for nurses who daily encounter people who are experiencing adversity. Although hermeneutical phenomenology has enabled these important insights, as with any research methodology, there are limits to which one can take it.

#### Limitations

As we have seen, hermeneutical phenomenology is best suited for answering questions about the meaning of human issues and concerns. These are, for the most part, "what" and "how" rather than "who" questions (Plager, 1994). This study, as has already been acknowledged in an earlier chapter, was not able to offer reliable predictions on who will dwell resignedly and who will dwell resolutely, nor was it able to establish from among the various ways of dwelling with adversity, which approaches were most "effective". In addition, the study could not point definitively to variables of interest to researchers interested in the

phenomenon of psychological resilience, such as mediating mechanisms that explain how some people, despite poor early experiences and ongoing deleterious circumstances are able to "beat the odds" and live reasonably satisfying lives.

Although most participants did touch briefly on their childhood experiences, the methodology of this study did not provide an appropriate framework for examining the relationship between effective parenting, early childhood experiences and the capacity to weather adversity well. The study did not establish the influence of sociodemographic factors such as poverty on the capacity to cope with adversity, nor did it examine the impact of social engagment as a buffering factor. Although the study included some people whose spouses, children or parents had died, it did not address the question as to whether normal or pathological grief patterns were demonstrated.

Since interpretive phenomenology makes no pretence to being able to produce results that can be generalized, it does not attempt to control for bias. Thus, from the perspective of a quantitive researcher concerned about representativeness of the data, it is quite possible that in permitting self-selection as a recruitment approach for this study and in soliciting self-authored stories, the study was skewed in favour of those who found a deeper meaning in adversity. Accordingly, it could be arugued that those who experienced ongoing loss of meaning or meaninglessness were underrepresented in this study. In addition, the approach used for this study was, for the most part, retrospective in nature, i.e., it

gathered reflections on past experiences more than *in vivo* experiences of ongoing adversity. While this retrospective methodological approach was sufficient to illuminate overall patterns of meaning clearly, it was inadequate for the purposes of tracing minutely the oscillations of everyday dwelling that a prospective study would have revealed. A prospective study stretching over a 5 year span, which explored peoples' thoughts and feelings as they lived through adversity might, for example, reveal time or phase-related characteristics of dwelling as combinations and alternating patterns of resigned and resolute dwelling.

#### Contributions

Despite the limitations of this study the findings did resonate with the findings of some empirical studies. In keeping with the work of Brown (1994,1995, 1996, 1997) and Monat and Lazarus (1991), we have seen that the challenges posed by adversity and the outcomes that ensue in relation to it, cannot be fully explained with reference to the event itself, nor in relation to the pre-existing personality characteristics of the person undergoing the event. Rather, the challenges posed by adversity reside in the meaning given the event. This study takes this understanding a step further and illuminates an understanding that it is not just the meaning given the event that can be understood in relation to particular outcomes, but, the manner of dwelling amidst the circumstances, that transforms the meaning and alters the life course. Other research, particularly the

work of Antonovsky (1990) comes a little closer to this understanding, given his focus on both meaning and coping as factors which both reflect and give rise to a sense of personal coherence. Antonovsky's notion of Comprehensibility - the sense that information in one's environment makes sense, is ordered and consistent rather than is chaotic, random and inexplicable; Manageability – the sense that resources are at one's disposal and that one is not a victim of events; and, Meaningfulness – the sense that at least some of the problems and demands in life are worth engaging in, sketch some of the outlines that are also observable in this study. This study of adversity as turning, dwelling and calling does not, however, establish that the characteristics of comprehensibility and manageability are present from the outset in an experience of adversity but, rather, that one's way of dwelling amidst adversity is what renders a chaotic situation comprehensible and an overwhelming situation manageable. Of Antonovsky's three constructs, meaningfulness was found to be the most crucial. Without meaningfulness, comprehensibility and manageability were found to be, at best, temporarily sustainable. This finding of Antonovsky's dovetails well with the finding of this study which show that it is in the active engagement and giving to others and finding a cause and a reason for being, that meaning is both retrieved and discovered. Retrieving and discovering meaning is what makes life comprehensible and manageable.

This study also resonates with the work of Maddi & Kobasa (1991), and Tartasky (1993) who have looked at the characteristics of hardy people:

Characteristics that they have found to be associated with psychological hardiness include: Commitment – the ability to involve oneself in whatever one is doing;

Challenge – the belief that change rather than stability is to be expected in life, so events are seen as stimulating rather than threatening; and, Control – the tendency of the individual to feel and believe that they influence events rather than feeling that they are helpless in the face of life's problems. These findings are remarkably in line with the findings of this study, which reveals that resolute dwellers do not fight change, nor do they become debilitated and apathetic in the face of change. Rather, they dwell hopefully and patiently waiting for meaning to arrive. In this way, they begin to appropriate that which is not yet present. Their understanding of life is of replenishing source from which much can be learned rather than an inevitable process of depletion and loss.

Lieberman (1992), in studying changes in self-image as a consequence of various life circumstances (eruptive crises and normative life transitions), found that an immutable self-image in the face of adversity provided some psychological protection. He draws the conclusion that flexibility may be somewhat overrated when trying to understand the characteristics that enable versus hinder coping. While flexibility may appear to be a desired adaptive characteristic, such a characteristic when expressed through an ever-changing

self-image, seems to constitute a psychological burden. This study has offered an understanding of why this should be expected. But, the explanation cannot be reached with recourse to the psychological models Lieberman uses. Rather, as has been shown, existential and ontological frameworks that unfold notions of reprise, recollection and retrieval as the fetching back of life's possibilities in the return to that which one has been all along, offer a richer and more expansive horizon in which to consider this pattern in the human experience.

In considering the manner in which research related to the generation of findings helpful in preventing and ameliorating suffering induced by disruption and disjuncture in life might proceed, two important points are made by Masten (1999). These are that helping people who are having difficulty must be guided by theory and the accrued knowledge of multiple fields of inquiry and that the key to intervention in the future could lie in triggering or facilitating naturally protective systems. The question is asked as to whether such efforts could, and should be, modeled on naturally occurring resilience. I endorse the points that Masten makes and consider them further.

My study of how meaning is found in adversity is a testimony to the importance of accruing knowledge in multiple fields of inquiry. Insights could not have been reached without reading widely beyond my own discipline and without recourse to philosophical and theoretical frameworks that guided me in certain directions and made possible the recognition of what I was looking at.

Quantitative research takes us a certain distance toward generalizability in the findings it produces. It does however need to be remembered, that what it gains in generalizability, it loses in specificity – the ability to record the rich detail and compelling nature of human experience itself. Interpretive phenomenological research also takes us a certain distance but it is in the other direction; it gains the advantages of specificity and rich detail but, as we have seen, there are undoubtedly important questions that it cannot answer. I therefore conclude with Masten, (and countless others who have reached the same conclusion) that we need multiple fields of inquiry with multiple methods to be able to grasp the dangers and possibilities that lie at hand in the human experience.

I also agree with the statement that the key to intervention in the future could lie in triggering or facilitating naturally protective systems. Considering the question of whether such efforts could, and should be, modeled on naturally occurring resilience takes me to the next and final section; future directions.

### **Future Directions**

No one would argue with the idea that nurses could and should be expected to devote our energies to preventing and ameliorating human suffering. Since most, if not all, human suffering comes from change which is unwanted and/or unexpected, it therefore follows that improving the human condition involves improving the human capacity to anticipate, undergo and bear change

well. Bearing change well means enduring change meaningfully, in the consciousness or hope of, a purpose, or coherent plot, or lucid self-narrative being worked out. Gaining wisdom related to enduring change, as we have learned from the classical literature in chapter two, is about seeing into the nature of life and human existence such that a wider perspective is gained. This wider perspective (an existential and ontological one, I might add) enables the perspective that life, because of its very nature, must and *will* change however much human beings struggle to hold it still. How then could it ever be otherwise that helping people weather change must be modeled on naturally occurring resilience?

What is naturally occurring resilience? I offer one definition as the human capacity to dwell resolutely in the face of that which cannot be changed.

Accepting such a definition of resilience overcomes the myriad problems that have assailed the body of work now referred to as resilience research. It does this by skirting the doomed attempts to separate process from outcome as well as side-stepping decisions about how much adversity "counts" in relation to what quantifiable measures of coping well or coping poorly. Consider the wisdom of this circumvention in the light of the fact that people with psychiatric symptoms, according to the resilience literature would not qualify for studies of resilience. This is because they manifest, at least from time to time, symptoms of coping poorly (according to the definitions used of positive coping by this genre of research). Yet, this study has shown, particularly in the story of Andrew Solomon

(2001), the inspiring narration of patient and intimate dwelling with and among a dizzying and potentially debilitating set of psychiatric symptoms. Andrew is resilient not because he has conquered mental illness once and for all, but because he has come into a patient, intimate and ongoing abiding with depression. He has made a home of his journey and he continually and perseveringly brings, his pain home.

It is in the company of such insights that I consider the future directions in which this research could move. Resolute dwelling is a phenomenon that unfolds endless possibilities and I am conscious of the fact that I have only begun to recognize the outermost, and thus most obvious, layer of this experience. The stories of resolute dwellers have, in many cases, mentioned the importance of friendships that provide a sense of refuge in an otherwise wilderness experience. This opens the possibility of considering that resolute dwellers have in their company resolute companions who are able to "hang in" with them even when the reasons and benefits for doing so, are not apparent. Why do, and how do these friends persevere? What in detail, is it like to have a friend as resolute companion on a tortuous journey? How are the experiences of personal friendship and professional accompaniment different?

Another aspect, that is comes to mind for future study is the role of hope in enabling resolute dwelling. In what, does the hope exhibited by resolute dwellers rest? As I consider hope in the experiences and perspectives on life

gained by resolute dwellers, I wonder about the extent to which virtue enters the picture. Have resolute dwellers "made a virtue of necessity" i.e. have they lent themselves as a piece of wood on a lathe, to an unpleasant or obligatory action by focusing their attention on whatever fortuitous benefits might be derived? If so, what kinds of fortuitous benefits do they focus on? What helps to sustain the focus? Are there ways of teaching people virtues versus coping strategies so that they are able to lend themselves more readily and creatively to coercive experiences? Would there be any differences in outcomes measured as satisfaction with, and meaning in life when ontological and existentially based therapy is compared to therapy that is psychologically and cognitively based? It seems to me that an exploration of these aspects of resolute dwelling as well as a comparative study of ontological approaches (which might discuss such concepts as wisdom and virtue) versus traditional approaches which offer such strategies as thought control and counter-conditioning might be a particularly interesting and potentially rewarding field of inquiry.

Also fruitful as a field for future study would an in-depth exploration of how people see life differently as a result an experience of adversity. I have managed to sketch in an outline of this dimension in this study but I am left yearning for the opportunity to move from mere sketch to fully developed, richly embellished painting. I wonder, if people had the perspective on life before the adversity that they gain through the experience, whether the event would even

have been considered an adversity. In other words are there world views, virtues and insights that buffer, support and give meaning to life such that faith and purpose are sustained through hard times?

#### Conclusion

When I reflect on the purpose of this study which is to explore how people come to understand and give meaning to an experience of adversity, I see that the purpose has been accomplished through, and by using, a variety of means. I also see that opportunities for learning arose in this study that were not from the outset fully envisioned and articulated. Among the means and purposes foreseen and pursued was the means of interpretive hermeneutical phenomenology as an approach appropriate to the purpose of revealing the structure of an experience of adversity as well as the practices that people engage in to recover meaning. What came up as an unanticipated opportunity for learning arose in the context of thinking more abstractly about how I was accomplishing my central objectives and the ends to which my objectives were directed. It was by thinking and being in this way that I came into a deeper understanding of the potential of interpretive hermeneutical phenomenology as an approach that can and already is, to some extent, informing and effecting a paradigmatic shift in both psychotherapy and in nursing science.

In laying the groundwork for the study I conducted a literature review to gain a perspective on what is already known relevant to my questions as well as to establish gaps in extant knowledge. From this review of the literature I learned that while some knowledge exists which reveals a positive relationship between the meaning that people give to their experience and the condition of their health and well-being, little is known about how people actually construct meaning in the face of adversity. Gaining this perspective confirmed the need and precipitated my desire to address this gap. Other preparatory work involved gaining perspective on myself as an interpreter and becoming familiar with the criteria for scientific rigor in the interpretive paradigm.

As I moved into the phase of gathering data I soon realized what an intense relational activity this was to become. People seldom tell stories about their most painful experiences to absolute strangers. Much of my effort in this stage of the project was related to getting to know potential participants and letting them get to know me. I was amazed although, in retrospect, I should not have been, at how much people were willing to share with me once an atmosphere of trust was established. Moreover, I was deeply gratified to consider the time that people took to write stories and engage in a series of conversations. My own experience as a researcher thus substantiated the idea that meaning arises in situations of human empathy, attunement and mutuality.

With the analysis and interpretation of the data, came my biggest challenge. This was a dwelling toward meaning which necessitated a patience and intimate abiding that I had not even imagined. Sometimes my faith in my own ability to wait, be still and dwell patiently faltered. The practices of people could not be grasped without an understanding of the structure of the experience, yet it was only when the structure of the experience emerged that the significance of the practices was grasped. This process of relating the parts to the whole and the whole to the parts gave me much clearer understanding of what is meant by patience, iterative process and the hermeneutical circle!

As I draw this study to a close I realize that I have not only gained an understanding of how people find meaning in adversity, I have a better idea of how I can dwell personally and yield gracefully in the face of life's inevitable changes. My hope is that this dissertation may in some measure help others to gain a clearer understanding as well.

Poetry of Rumi (2001) to ponder...

Inside each of us, there's continual autumn.

Our leaves fall and are blown about

There is to life a necessary dying.

Very little grows on jagged rock.

Be ground.

Be crumbled.

So wildflowers can grow up where you are.

You've been stony for too many years.

Try something different.

Surrender.

#### BIBLIOGRAPHY

- Aguilera, D.C. (1998) (8<sup>th</sup> ed) Crisis intervention: theory and methodology. New York: C. V. Mosby.
- Allen, D. G. (1996). Hermeneutics: Philosophical traditions and nursing practice research. *Nursing science quarterly* 8, 174-182.
- Allen, D. G., Benner, P., & Diekelmann, N. (1986). Three paradigms for nursing research: Methodological implications. In P. L. Chinn (Ed.), *Nursing research methodology issues and implementation* (pp.23-38). Rockville: Aspen Publishing.
- American Psychiatric Association: (2000, 4th edition). Diagnostic and statistical manual of mental disorders. (Text revision). Washington, DC: Author.
- Antonovsky, A. (1990). Pathways leading to successful coping and health. In M. Rosenbaum (Ed.). *Self control and adaptive behaviour*. (pp. 31-61). New York: Springer.
- Arendt, H. (1958). The Human Condition. Chicago: University of Chicago Press
- Bacal, H. (1990). The elements of a corrective selfobject experience. *Psychoanalytic inquiry* 10, 347-342.
- Bandura, A. (1986). Social foundations of thought and action: a social cognitive theory. Englewood Cliffs, N.J. Prentice Hall.
- Beck, A., Rush, A. J., Shaw, B., and Emery, G. (1979). Cognitive therapy of depression. New York: Guilford Press
- Benner, P. (1985). Quality of life: Phenomenological perspective on explanation, prediction and understanding in nursing science. *Advances in nursing science*, 8(1), 1-14.
- Benner, P. & Wrubel, J. (1989). *The primacy of caring*. Reading, MA: Addison-Wesley.
- Benner, P., Tanner, C. A. & Chesla, C.A. (1996). Expertise in Nursing Practice:

- Caring, Clinical Judgement and Ethics: Springer Publishing Company: New York.
- Benner, P., Hooper-Kyriakidis, P. & Stannard, D. (1999). Clinical wisdom and interventions in critical care: A thinking-in-action approach. Toronto: W.B. Saunders.
- Benner, P. (2000). The quest for control and the possibilities of care. In M. Wrathall & J. Malpas (Eds.). *Heidegger, coping and cognitive science*. Cambridge, MA: MIT Press.
- Bently Mays, J. (1995). In the jaws of the black dogs: A memoir of depression. Toronto: Penguin Books.
- Bishop, A. (1996). The nature of nursing. In J. E. Kikuchi, H. Simmons & D. Romyn (Eds.). *Truth in Nursing Inquiry*. Thousand Oaks, CA: Sage.
- Bishop, A. & Scudder, J. R. Jr. (1990). The Practical, Moral and Personal Sense of Meaning: A Phenonomenological Philosophy of Practice. Albany, NY: University of New York Press.
- Bleicher, J. (1980). Contemporary hermeneutics: Hermeneutics as method, philosophy and critique. London: Routledge & Kegan Paul.
- Bowlby, J. (1979). *The making and breaking of affectional bonds*. London: Tavistock Routledge.
- \_\_\_\_\_ (1988). A secure base: Parent—child attachment and healthy human development. New York: Basic Books.
- Brandshaft, (1985). Resistance and defence: An intersubjective view. In A. Goldberg (Ed.). *Progress in self psychology* Vol 2 (pp. 88-96). New York: Guilford Press.
- Brown, G. W. (1994). Life events and endogenous depression. Archives of general psychiatry 51, 525-34.
- (1995). Loss, humiliation and entrapment among women developing depression: A patient and non-patient comparison. *Psychological Medicine* 25, 7-21.
- \_\_\_\_\_ (1996). Social factors and comorbidity of depressive and anxiety

- disorders. British journal of psychiatry 168(30), 50-57.
- \_\_\_\_\_(1997). Loss and depressive disorders. In B. P. Dohrenwend, Adversity, stress and psychopathology. Washington, D.C.: American Psychiatric Press.
- Cadoret, R. et al (1980). Somatic complaints: Harbinger of depression in primary care. *Journal of affective disorders* 2, 61-70.
- Caputo, J. D. (2000). More radical hermeneutics: On not knowing who we are. Bloomington, In: Indiana University Press.
- Carper, B. A. (1978). Fundamental patterns of knowing in nursing. *Advanced nursing science*. 1(1), 13-23.
- Chinn, P.L., & Watson, J. (1994). Art and Aesthetics in Nursing. New York: National League of Nursing.
- Cohen, M.Z., Kahn, D. and Steeves, R. H. (2000). Hermeneutic phenomenological research: A practical guide for nurse researchers. London: Sage Publications.
- Cui, X. & Vaillant, G. (1996). Antecedents and consequences of negative life events in adulthood: A longitudinal study. *American journal of* psychiatry. 153, 21-24
- Curtis, R. B. (1991). Toward an integrative theory of psychological change in individuals and organizations: A cognitive-affective regulation model. In R.C. Curtis and G. Stricker, (Eds.) *How people change: Inside and outside therapy.* (pp.191-210). Plenum series in social/clinical psychology.
- Dane, D. (2002). Dark past, bright future: An abuse survivor rebuilds his life and strives to change a system that fails to protect children. *The Toronto Star. April 6.* (pp.13,14 & 16).
- Diekelmann, N. & Ironside, P. (1998). Preserving writing in doctoral education: Exploring the concernful practices of schooling, learning, teaching. *Journal of Advanced Nursing* 28(6), 1347-1355.
- Devito, J. (2001). The faces of hope. Guideposts: True stories of hope and

- inspiration 4(10),17-23.
- Emmons, R. A. (1987). Personal strivings: Toward a theory of personality and subjective well-being. *Dissertation Abstracts International* Jan Vol 47(7-B, 3151.
- Fairbairn, W. (1985). A revised psychopathology of the psychoses and psychoneuroses. In P. Buckley (Ed.) *Essential papers on object relations.* (pp.71-101). New Haven CN: New York University Press.
- Ferraris, Maurizio (1988), *History of hermeneutics* (L. Somigli Trans.) New Jersey: Humanities Press.
- Field, T. (1995). Infants of depressed mothers. *Infant Behaviour and Development* 18(1), 1-13.
- Frank, A. W. (1995). *The Wounded Storyteller: Body, Illness and Ethics*. Chicago, IL: Chicago University Press.
- Frankl, Victor. (1959). Man's search for meaning. New York: Beacon Press.
- Freud, A. (1966). The ego and the mechanisms of defense. New York: International Universities Press.
- Gadamer, H-G. (1992). Gadamer on education, poetry and history: Applied hermeneutics. D. Misgold and G.Nicolson (Eds.) Albany: SUNY Press.
- \_\_\_\_\_(1996). The enigma of health: The art of healing in a scientific age. Stanford, CA: Stanford University Press.
- (1999). *Truth and Method*. 2nd Revised Edition, J. Weinsheimer & D. Marshall, Trans.). (2nd ed.). New York: Continuum.
- Gadow, S. (1980). Existential advocacy: Philosophical foundations of nursing. In S. Spicker & S. Gadow (Eds.), Nursing images and ideals, opening dialogue with the humanities. New York: Springer-Verlag.
- \_\_\_\_\_(1990). Beyond dualism: The dialectic of caring and knowing. Paper presented at the International Caring Conference, Houston Texas.
- Gallagher, K. T. (1975). The philosophy of Gabriel Marcel. New York: Fordham University Press.

- Garmezy, N., & Masten, A. S. (1994). Chronic adversities. In M. Rutter, L. Herzov, & E. Taylor (Eds.). *Child and adolescent psychiatry*. (3<sup>rd</sup> ed; pp. 191-208). Oxford: Blackwell Publishing.
- Gerlerntner, D. (1997). Drawing life: Surviving the unabomber. New York, NY. Simon & Shuster.
- Goldstein, M. A. (2000). *Travels with the wolf: A story of chronic illness*. Columbus: Ohio State University.
- Grayling, A.C. (1998) (Ed.). *Philosophy 2: Further through the subject*. Oxford: Oxford University Press.
- Grondin, J. (1990). Hermeneutics and relativism. In K. Wright (Ed.), Festivals of interpretation: Essays on Hans-Georg Gadamer's work (pp. 42-62). New York: State of University of New York Press.
- Guignon, C. (1983). Heidegger and the problem of knowledge. Indianapolis: Hackett..
- Haggerty, R. J., Sherwood, I, Garmezy, N. & Rutter, M. (1994) (Eds.). Stress, risk and resilience in children and adolescents: Process mechanisms and intervention. New York: Cambridge University Press.
- Harre, R. (2000). *One thousand years of philosophy*. Malden, MA: Blackwell Publishers.
- Heidegger, M. (1971). On the way to language. New York: Harper and Row (pp. 9-10).
- (1993). Basic writings. (D. Krell Trans.) New York: HarperCollins.
- \_\_\_\_\_ (1996). Being and time. Joan Stambaugh (trans). Albany, NY: State University of New York Press.
- (2001). Zollikon seminars; protocols, conversations, letters.

  M.Boss, (Ed.). Evans, IL: Northwestern University Press.
- Holmes, T. H. & Rahe, R. H. (1967). The social readjustment scale. *Journal of psychosomatic research* 11: 213-18.
- Holy Bible, Contemporary English Version. (1995). American Bible Society

- Howard, R. J. (1982). Three faces of hermeneutics: An introduction to current theories of understanding. Los Angeles: University of California Press
- llich, Ivan (1977). Limits to medicine: medical nemesis: the expropriation of health. New York: Penguin books.
- Johnson, B. D. (2002). Michael: Then and now. *Maclean's: Canada's weekly newsmagazine*. (pp.36-41).
- Kahn, J. (1986). Job's illness: Loss, grief and integration: A psychological interpretation. London: Gaskell.
- Kaplan, H. (1999). Toward an understanding of resilience: A critical review of definitions and models. In M. D. Glantz and J. J. Johnson (Eds.).

  Reslience and development: Positive life adaptations. New York:

  Kluwer Academic/Plenum Press.
- Kendler, S. et al (2000). Stressful life events and previous episodes in the etiology of depression in women: An evaluation of the 'kindling' hypothesis 157 (8), 1243-51.
- Klar, Y. (1992). Directions in the study of personal-change endeavors by clinical and social psychologists: An introduction. In Y. Klar, J.D. Fisher, J.M. Chinsky, & A. Nadler (Eds.). *Self change: Social psychological and clinical perspectives* (pp. 1-20). New York: Springer-Verlag.
- Kleinman, A. & Good, B. (1985). *Culture and depression*: Berkley: University of California Press.
- Kierkegaard, S. (1983). Fear and trembling/repetition. (Howard Hong and Edna Hong Trans) Princeton: Princeton University Press.
- \_\_\_\_\_(1989). The sickness unto death (A. Hannay, Trans). London: Penguin
- Koch, T. (1995). Interpretive approaches in nursing research: The influence of Husserl and Heidegger. *Journal of Advanced Nursing* 21, 827-836.
- Kochelmans, J. J. (1984). On the Truth of Being: Reflections on Heidegger's Later Philosophy. Bloomington: Indiana University Press.

- Kockelmans, J. J. (1985) The self and Kant's conception of the ego. In Elliston, F. (Ed.) *Heidegger's Existential Analytic*. New York: Mouton.
- Kohut, H. (1977). *The restoration of the self.* New York: International Universities Press.
- \_\_\_\_\_(1984). How does analysis cure? Chicago: University of Chicago Press.
- \_\_\_\_\_(1985). Self psychology and the humanities: Reflections on a new psychoanalytic approach. New York: Norton.
- Kuhn, T. (1970). Chicago, IL: University of Chicago Press. *The structure of scientific revolutions 2nd ed.*
- Laskiwski, S. & Morse, J. M. (1993). The patient with spinal cord injury. The modification of hope and expression of despair. *Canadian journal of rehabilitation* 6(3): 143-153.
- Lee, J. Y. (1994). Embracing change: Postmodern interpretations of the I Ching from a Christian perspective. Scranton, PA: University of Scranton Press.
- Linge, D. (1977). (Trans.& Ed.). Editor's introduction in H-G Gadamer, Philosophical hermeneutics. Los Angeles: University of California Press.
- Palys, T.S & Little, B.R (1983). Perceived life satisfaction and the organization of personal project systems. *Journal of personality and social psychology* 44(6), 1221-1230.
- Lazarus, R. S., Folkman, S. (1984). Coping and adaptation: In W.D. Gentry (Ed.). *The handbook of behavioural medicine*. New York: Guilford Press.
- Leonard, V. W. (1994). A heideggerian phenomenological perspective on the concept of the person. In Benner, P. (Ed.). *Interpretive phenomenology: Embodiment, caring & ethics in Health and Illness*(pp.43-63). London: Thousand Oaks.

- Lewis, C. S. (1940/1996). The problem of pain: New York, N.Y: Harper Collins.
- Lynch, J. et al. (1997). Cumulative impact of sustained economic hardship on physical, psychological and social functioning. *New England journal of medicine* (pp.1889-95).
- Madison, G.B. (1982). *Understanding: A phenomenological pragmatic analysis*. London: Greenwood Press.
- \_\_\_\_\_(1988). The hermeneutics of postmodernity. Figueres and themes. Indianapolis: Indiana University Press.
- \_\_\_\_\_(1994). Hermeneutics: Gadamer and Ricoeur. In R. Kearney (Ed.). Continental philosophy in the 20<sup>th</sup> Century: Routledge history of philosophy, Vol viii. London: Routledge. (pp. 290-349).
- \_\_\_\_\_(1997). The practice of theory: The theory of practice. In *The politics of postmodernity: Essays in applied hermeneutics* (pp. 137-159). Dordrecht, The Netherlands: Kluwer Academic Pulishers.
- Maddi, S., & Kobasa, S. (1991). *Stress and coping: An anthology.* New York: Columbia Press.
- Madjar, I. & Walton, J. (2000). Nursing and the experience of illness: Phenomenology in practice. London: Routledge.
- MacGregor, G. (1991). *Dictionary of religion and philosophy*. New York: Paragon House.
- Marcel, Gabriel. (1951). Katherine Farrer (trans).. *Being and having*. Boston: Beacon Press.
- Marcel, Gabriel. (1960). The mystery of being: 1 Reflection and mystery. Chicago II: Gateway Edition, Henry Regnery Company
- \_\_\_\_\_ (1963). Homo Viator. Introduction to a metaphysic of hope. New York: Harper Books.
- \_\_\_\_\_(1967). Searching. Toronto: Newman Press.
- Masten, A. S. 1994. Resilience in individual development: Successful adaptation

- Masten, A. S. 1994. Resilience in individual development: Successful adaptation despite risk and adversity. In M.C. Wang and E. W. Gordon (Eds.), Environmental resilience in inner city America: Challenges and prospects. Hillsdale, N. J.: Lawrence Erlbaum.
- (1999) In M. D. Glantz and J. J. Johnson (Eds.). Resilience and development: Positive life adaptations. Kluwer Academic: New York.
- Masten, A. W. & Coatsworth, J. D. (1998). The development of resilience in favourable and unfavourable environments. *American Psychologist* 53, 205-220.
- May, R. (1977). The meaning of anxiety. New York: W.W. Norton.
- Mays, J.B. (1993). In the jaws of the black dogs. New York: HarperCollins.
- Moltmann, J. (1965). Theology of hope: On the ground and the implications of a Christian Eschatology: London: SCM Press Ltd.
- Monat, A. & Lazarus, R. (1991). Stress and coping: New York: Columbia University Press
- Moore, A. R. (1991). Cry of the damaged man. Melbourne: Penguin Books.
- Morse, J. M. & Doberneck, B. M. (1995). Delineating the concept of hope. Image: Journal of nursing scholarship27, 277-285.
- Morse, J. M. & O'Brien, B. (1995). Preserving self: From victim to patient, to disabled person. *Journal of advanced nursing* (21), 886-896.
- Morse, J. M. & Carter, B. J. (1996). The essence of enduring and the expression of suffering. The reformulation of self. *Scholarly Inquiry for Nursing Practice* 10(1), 43-60.
- Morse, J. M. & Penrod, J. (1999). Linking concepts of enduring, uncertainty, suffering and hope. *Image: Journal of Nursing Scholarship* 31(2),145-150.
- Morse, J. M. (2001). Toward a praxis theory of suffering. *Advances in Nursing Science* 24(1), 47-59.
- Munhall, P. L. (1989). 'Philosophical ponderings on qualitative research methods in nursing. *Nursing Science Quarterly* 2(1), 20-28.

- \_\_\_\_\_ (1993). "Unknowing": Toward another pattern of knowing in nursing. *Nursing Outlook* 41(3), 125- 128.
- \_\_\_\_\_ (1994). Revisioning phenomenology: Nursing and health science research. New York: National League for Nursing.
- Murphy, R. F. (1987). The body silent. New York: Henry Holt.
- Murray, J. (2001). (Ed.). Poems to live by in uncertain times. Boston: Beacon Press.
- Newman, M. A. (1979). *Theory development in nursing*. Philadelphia: F. A. Davis.
- Nouwen, H. J. M. (1972). The wounded healer: Ministry in contemporary society. Toronto: Image Books, Doubleday.
- \_\_\_\_\_(1996). The inner voice of love: A journey through anguish to freedom. New York, NY: Image/Doubleday.
- \_\_\_\_\_(2001). Turn my mourning into dancing: Finding hope in hard times. Nashville: Word Publishing Group
- Olafson, F. A. (1998). Heidegger and the ground of ethics: A study of mitsein. Cambridge, UK. Cambridge University Press.
- Orange, D. M. (2000). Emotional Understanding: Studies in Psychoanalytic Epistemology. New York: London
- Oxford English Dictionary Online (2002). Oxford University Press. Retreived August 7, 2002 from <a href="http://www.Dictionary.oed.com">http://www.Dictionary.oed.com</a>
- Packer, M. (1985). Hermeneutic inquiry in the study of human conduct. *American Psychologist* 40(10), 1081-1093
- Palmer, R.E. (1969). *Hermeneutics*. Evanston, IL: Northwestern University Press.
- Parse, R. (1995) (Ed.). *Illuminations: The human becoming theory in practice and research.* New York: National League of Nursing.

- Paterson, J. G. & Zderad, L. T. (1988). *Humanistic nursing*. New York: National League of Nursing.
- Peplau, H. (1952). Interpersonal relations in nursing. New York: G. P. Putnam and Sons.
- Peterson, E. (1980). A long obedience in the same direction: Discipleship in an instant society. Downers Grove, IL: Intervarsity Press.
- Peterson, E. H. (1994). Subversive spirituality. Cambridge, UK: William B. Erdmans Publishing Co.
- Polk, M. (1999). A Heidegger dictionary. Malden, MA: Blackwell Publishers Inc.
- Polkinghorne, D. (1983). Methodology for the human sciences: Systems of inquiry. Albany NY: State University of New York Press.
- Polyani, M. (1958). Personal knowledge: Towards a post-critical philosophy. London: Routledge.
- Plager, K. A. (1994). Hermeneutic phenomenology: A methodology for family health and health promotion study in nursing. In P. Benner (Ed.). *Interpretive phenomenology: Embodiment, caring, and ethics in health and illness.* Thousand Oaks, CA: Sage Publications.
- Prochaska, J. O. & DeClemente, C. C. & Norcross (1992). In search of the structure of change. In Y.Klar, J.D. Fisher, J.M. Chinsky, & and A. Nadler (Eds.), *Self change: Social, psychological and clinical perspectives* (pp. 87-114). New York: Springer-Verlag.
- Rawson, P., & Legeza, L. (1973). *Tao: The Chinese philosophy of time and change*. London: Thames and Hudson.
- Rogers, M. E. (1994). The science of unitary human beings: Current perspectives. *Nursing science quarterly* 7(1), 33-35.
- Rohde, P. (1959). Kierkegaard. London: Allen & Unwin.
- Reed, P.G. (1995). A treatise on nursing knowledge development for the 21st century: Beyond postmodernism. *Advances in nursing science* 17(3), 70-84.

- Ricoeur, P. (1981). "Logique hermenique?" in Contemporary Philosophy: A New Survey G. Floistad. The Hague: Martinus Nijhoff.
- \_\_\_\_\_(1988) (Edited and translated by J.B. Thompson). *Paul Ricoeur:*Hermeneutics and the human sciences. Paris: Cambridge University

  Press.
- Riegel, B., Omery, A., Calvillo, E., Elsayed, N. G., Lee, P., Shuler, P. & Siegel B.E. (1992). Moving beyond: A generative philosophy of science. Image: Journal of nursing scholarship 24(2), 404.
- Rilke, Rainer, Maria. (1934) (3rd. Ed.). Letters to a young poet. (M.D. Herter Trans.). London: W.W. Norton Company
- Risser, J. (1997). Hermeneutics and the voice of the other: Re-reading Gadamer's philosophical hermeneutics. Albany: State University of New York Press
- Rumi, J. (2001). *The soul of Rumi. A new collection of ecstatic poems*. (C.Barks, J Moyne, N. Ergin, A. J. Arberry, R. Nicholson, and M. G. Gupta, Trans.). San Franciso: HarperSan Franciso. (Original work published 13<sup>th</sup> Century).
- Schafer, R. (1978). Language and insight. New Haven, CT: Yale University Press.
- (1981). Narration in the psychoanalytic dialogue: In W. J. Mitchell (Ed.). *On Narrative*. Chicago: Chicago University Press.
- Selder, F., Kachoyeanos, M., Baisch, M. J., Gissler, M. (Eds.) (1997). *Enduring Grief: True Stories of Personal Loss*. Philadelphia, PA: The Charles Press.
- Selye, H. (1974). Stress without distress. Philadelphia: Lippincott.
- Seligman, M. (1975). Helplessness: On depression, development and death. San Francisco: W. H. Freeman.
- Sheehan, T. (1999, July 6-10). Lectures presented at the Advanced Nursing Institute for Heideggerian Hermeneutical Studies, Madison, WI.

- Silva, M.C., Sorrell, J. M. & Sorrell, C.D. (1995). From Carper's patterns of knowing to ways of being: An ontological philosophical shift in nursing. *Advances in Nursing Science* 18(1), 1-13.
- Solomon, A. (2001). The noonday demon: An atlas of depression. Toronto: Schriber.
- Stern, D. (1985). The interpersonal world of the infant. New York: Basic Books.
- \_\_\_\_\_(1991). A philosophy for the embedded analyst: Gadamer's hermeneutics and the social paradigm of psychoanalysis. *Contemporary Psychoanalysis* (27), 51-58.
- Stolorow, R. (1988). Intersubjectivity, psychoanalytic knowing and reality. *Contemporary Psychoanalysis* 24, 331-338.
- \_\_\_\_\_(1994). The nature and therapeutic action of psychoanalytic interpretation. In Stolorow, R., Atwood, G. & Brandshaft, B. (Eds.). *The Intersubjective Perspective* (pp.42-55). Northvale, NJ: Jason Aronson
- Stolorow, R. and Atwood, G. (1992). Conxtexts of being: The intersubjective Foundations of Psychological Life. Hillsdale, NJ.: The Analytic Press.
- Stickler, G. (1991). How people change: A brief commentary. In R.C. Curtis and G. Stricker (Eds.). How people change inside and outside therapy (pp. 211-214). New York: Plenum Press.
- Stuart, G. W. & Laraia, M. T. (2001). Principles and practice of psychiatric nursing. Toronto: C.V. Mosby.
- Tartasky, D. (1993). Hardiness: conceptual and methodological issues *Image: Journal of nursing scholarship* 25, 225.
- Taylor, C. (1985). *Human agency and language*. New York: Cambridge University Press.
- Taylor, C.(1987). Interpretation and the sciences of man. In P. Rabinow & W. M. Sullivan (Eds.). *Interpretive social sciences: A second look.* (pp. 304-314). Ithaca, NY: Cornell University Press.

- Young, P. (1999). Joining the academic community: The lived experiences of new teachers in nursing education. Unpublished dissertation. University of Wisconsin-Madison, Madison, Wisconsin.
- van Manen, M. (1990). Researching lived experience: Human science for an action sensitive pedagogy. Ontario, Canada: Althouse.
- Walker, B. B. (1992). The I Ching or book of changes: A guide to life's turning points. New York: St Martin's Griffin.
- Watts, A. W. (1963). The two hands of God: The myths of polarity. New York: Collier.
- Watson, J. (1995). Postmodernism and knowledge development in nursing: Nursing science quarterly 8(2), 287-291.
- Werner, (1989 a). Vulnerability and resiliency in children at risk for delinquency: A longitudinal study. In M. Brambring & H. Skowronek (Eds.). *Children at risk: Assessment, longitudinal research and interventions.* (pp. 157-172). New York: Walter de Gruyter.
- West, D. (1996). An introduction to continental philosophy. Cambridge, MA: Blackwell Publishers Inc.

## Appendix A

## Letter of Explanation to Participants

Dear Participant,

Thank you for agreeing to be interviewed or for agreeing to write a story about your experience of living through a time of great hardship and difficulty.

Please fill out and return the enclosed consent form at your earliest convenience.

The purpose of this study is to learn about the experience of living through adversity and the various ways that people have of getting themselves through a very difficult time. I am also interested in how people feel the experience of overwhelming hardship or loss has affected them when they look back and reflect upon that time. What is learned from your experience may have implications for health professionals in general and nurses in particular considering that health professionals and nurses often care for people during times of pain and suffering.

To help you prepare for the interview or for writing a story, I have enclosed some guidelines and some questions.

If you have any questions, please do not hesitate to contact me at the above address, by phone

I am most appreciative of your participation in this study.

Sincerely

Nancy Johnston RN. MHSc. PhD (c)

## Appendix B

#### CONSENT FORM

You are invited to participate in a research project designed to explore the lived experience of adversity. Participation is completely voluntary.

#### What does the study consist of?

The study utilizes a variety of approaches to understand the lived experience of adversity. One approach is an audiotaped interview, lasting about 90 minutes or longer. Another approach is your own written or self-taped story. If you choose to be interviewed, either the principal investigator of her associate researcher(s) will conduct interviews. In an interview you will be asked to relate a story about what it is like to live through an experience of extreme hardship or difficulty. It is possible that you could be contacted by phone following the interview or after submission of your story for clarification or review of the text. If you would prefer not to be recontacted, please indicate by placing your initials here

If you are writing a story a list of questions that you may keep in mind as you write, will be provided. If writing a story, your story may be emailed to the principal investigator Nancy Johnston, at the address provided below.

When the findings of the study have been written, you will be provided with a copy of the findings and will be invited to provide comment. In addition you will be invited to a meeting with all who have participated in this study. The purpose of the meeting will be to celebrate the conclusion of the study, to thank participants for their important contributions and to invite them to comment on the findings and significance of the study. The provision of comments and attendance at this meeting are strictly voluntary.

# Are there any risks to participants?

It is possible that through discussion and recollection of your story, painful memories or thoughts could occur. If this does happen you will be invited

to notify your family doctor or therapist and to follow her/his further recommendations.

If you do not have a family doctor or therapist and your thoughts remain distressing and persistent, you may obtain free 24 hour, crisis support by calling the following telephone numbers:

Toronto - Distress Line (Hamilton - Suicide Prevention Line)

## Are there any benefits to participants?

It is also possible that you could experience some enhanced sense of well being or sense of satisfaction as a result of telling your story. Otherwise there is no direct personal benefit to you.

#### When and where will the interview be done?

The interview will be scheduled at a time and place that are convenient for you. Interviews can be done in person, or over the telephone.

#### Who will have access to the interview material?

The audiotaped interviews and the written stories will be transcribed by the associate researcher(s), a trained secretary or myself and then the audiotape will be destroyed. Any identifying information from the interview will be removed or altered on the written transcript. Should you choose to write or audiotape your story, we will likewise remove identifying information. The transcripts will be shared with a research team consisting of the principal investigator Nancy Johnston and four faculty members and researchers involved in interpretive research and possibly a associate researcher(s)as well. Transcripts will be identified anonymously with numbered codes. Conversations relevant to this study will be transcribed and any identifying information will similarly be removed. No individual identities will be detectable in any reports or publications resulting from the study.

#### What if you change your mind?

You are free to withdraw from this study or to refuse permission for the use of your interview, transcript, story or conversation at any time.

YOU MAY TAKE AS MUCH TIME AS YOU WISH TO THINK THIS OVER. BEFORE YOU SIGN THIS FORM. PLEASE ASK ANY QUESTIONS ON ASPECTS OF THE STUDY THAT ARE UNCLEAR. WE WILL ATTEMPT TO ANSWER ANY QUESTIONS YOU MAY HAVE PRIOR TO, DURING, OF FOLLOWING THE STUDY.

signature indicates that I give my pathe interview, transcript or written publication in research articles, both as for presentation at research sym	, have read search project described above. My bermission for information I provide in story or conversation to be used for oks and /or teaching materials, as well posia and/or nursing education ature indicates that I have received a
Signature	Date
Address	
Telephone Number	
Email address	

If you need further information, please contact the principal investigator:

Nancy Johnston RN. MHSc. PhD (Cand)
School of Nursing
Atkinson Faculty of Professional and Liberal Studies
York University
4700Keele St.
Toronto,Ont.

Please retain on of these copies for your records and return the signed copy in the enclosed envelope. If you do not wish to participate, kindly return both copies unsigned. Thank you.

## Appendix C

# Questions and Directions to Guide Written Stories and Interviews

I am interested in studying experiences that turn your world upside down. These are not the mild surprises or little inconveniences in our lives, but the events in which things go topsy-turvey and we experience unusually harsh hardship and difficulty. These are times when life seems almost too much to bear.

Begin telling your story wherever you would like filling in the details of how your life was unfolding at the time that hardship hit. Stay in your story because this will really help me understand how things happened. Include as much detail as you can possibly remember. If you remember something no matter how insignificant, it belongs with the story. Include other people in your story so I can, as completely as possible, understand this or these event(s) for you.

When you are done telling your story, tell me:

- 1. What do these events that turned you world upside-down mean to you today?
- 2. Did the events change anything for you? If so, how did things change?
- 3. As you reflect on your experience, did you learn anything new about yourself, others or the world in general?
- 4. If you were asked to give advice to another person living through a very difficult time, what would you say?

## Appendix D

## Permission To Use First Names

As a participant in this study, I have been guaranteed complete anonymity, i.e. my identity or any details which might reveal my identity would be removed or altered on any transcripts or published material. Despite this guarantee, I am requesting that my first name be used. I understand that excerpts from my story or conversation might be used in reports, subsequent publications or conference proceedings. Nevertheless it is my preference that my first name, rather than a fictitious name be used.

Name:	(Printed)	Date:	
Signature:			
Witness			

# Appendix E

Letter of Approval from Research Ethics Board





# RESEARCH ETHICS BOARD

April 19, 2002

PROJECT NUMBER:

01-271

PROJECT TITLE:

"Finding Meaning in Adversity"

PRINCIPAL INVESTIGATOR: \OTIL

Nancy E. Johnston

This will acknowledge receipt of your letter dated February 10, 2002 which enclosed a revised proposal, consent form and lay summary. These issues were raised by the Research Ethics Board at their meeting held on November 20, 2001. Based on this additional information, we wish to advise your study has been given final approval by the full Research Ethics Board. The submission, including the consent form was found to be acceptable on both ethical and scientific grounds.

We are pleased to issue final approval for the above-named study for a period of 12 months from the date of this letter. Continuation beyond that date will require further review and renewal of REB approval. Any changes or amendments to the protocol or consent form must be approved by the Research Ethics Board.

We wish to advise the Research Ethics Board operates in compliance with ICH Good Clinical Practice Guidelines and the Tri-Council Policy Statement.

Investigators in the Project should be aware that they are responsible for ensuring that a complete consent form is inserted in the patient's health record. In the case of invasive or otherwise risky research, the investigator might consider the advisability of keeping personal copies.

A condition of approval is that the physician most responsible for the care of the patient is informed that the patient has agreed to enter the study. Any failure to meet this condition means that Research Ethics Board approval for the project has been withdrawn.

> PLEASE QUOTE THE ABOVE-REFERENCED PROJECT NUMBER ON ALL FUTURE CORRESPONDENCE.

Sincerely.

Peter B. McCulloch, MD, FRCP(C)

Retu McCuelolson

Chair, Research Ethics Board

/dm