

Special Article

Applying Colaizzi's Phenomenological Research Method in Nursing and Health Sciences: A Review of Methodological Rigor and Research Practice

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Abstract

Introduction: Phenomenological inquiry holds a central position in nursing and health sciences as it enables the systematic exploration and interpretation of individuals' lived experiences related to health, illness, care, and recovery. Among descriptive phenomenological approaches, Colaizzi's method is widely adopted due to its structured, transparent, and practice-oriented analytic framework.

Aim: The aim of this review is to examine the application of Colaizzi's phenomenological research method in nursing and health sciences, with a specific focus on methodological rigor and research practice.

Method: A narrative methodological review was conducted, critically analyzing the philosophical foundations of Colaizzi's method, its analytic steps, and its use in applied nursing and health research. Key methodological criteria, including credibility, dependability, confirmability, and transferability, as well as ethical and reflexive considerations, were systematically explored.

Results: The review highlights that Colaizzi's method provides a clear and rigorous analytic pathway for exploring lived experience, supporting transparency and consistency in qualitative analysis. When applied reflexively, it enhances the trustworthiness of findings and facilitates the translation of experiential data into practice-relevant knowledge. Common challenges include superficial application of analytic steps, difficulties with bracketing, and variability in the implementation of participant validation.

Discussion: Colaizzi's phenomenological method remains a valuable and robust approach for nursing and health research, provided it is grounded in phenomenological philosophy and applied with methodological reflexivity.

Conclusions: Strengthening analytic rigor and ethical awareness enhances the contribution of phenomenological findings to clinical practice, education, and health policy, supporting the generation of meaningful and context-sensitive evidence.

Keywords: Phenomenology; Colaizzi's method; Qualitative research methodology; Nursing research; Evidence-based practice.

Introduction

Over the past decade, nursing and health sciences research has shown a marked shift toward approaches that foreground human experience, meaning-making, and contextual understanding, alongside traditional biomedical and outcomes-based paradigms. Contemporary research agendas increasingly

recognize that clinical effectiveness, patient safety, and quality of care cannot be fully understood through quantitative indicators alone. Instead, there is growing acknowledgment that individuals' subjective experiences of illness, care, professional practice, and health-related transitions are central to both knowledge production and evidence-informed decision-making

(Ningsih, 2025). This trend has been further reinforced by the rise of person-centered care, recovery-oriented models, and holistic approaches to health, which emphasize patients' voices, lived realities, and relational contexts as core components of high-quality care (Allman et al., 2024).

Within this evolving landscape, qualitative research has gained renewed prominence as a means of accessing experiential knowledge that remains largely invisible to purely quantitative methodologies (Firouzkouhi et al., 2022). Qualitative approaches allow researchers to explore how people interpret symptoms, navigate health systems, negotiate professional roles, and make sense of vulnerability, uncertainty, and change. Among qualitative traditions, phenomenology occupies a particularly influential position in nursing and health sciences because it is explicitly concerned with the study of lived experience (Zhou et al., 2022). Phenomenological inquiry seeks to move beyond surface descriptions to uncover the essential structures and meanings of experiences as they are lived and perceived by individuals in their everyday worlds (Guimba et al., 2024).

Phenomenology aligns closely with the epistemological and ethical foundations of nursing. Nursing practice is grounded in attentiveness to the person as a whole, encompassing physical, emotional, social, and existential dimensions of health (Ningsih, 2025). As such, phenomenological research resonates with nursing's commitment to understanding patients not merely as cases or diagnoses, but as meaning-making subjects embedded in relational and cultural contexts. Similarly, in broader health sciences, phenomenology has been employed to illuminate experiences of illness trajectories, treatment adherence, caregiving relationships, professional identity formation, moral distress, and encounters with health systems (Lee et al., 2022). These insights have contributed to the development of more responsive clinical practices, educational strategies, and organizational policies (Jeong et al., 2025).

At the same time, the growing use of phenomenological research has intensified longstanding debates regarding analytic rigor,

transparency, and methodological consistency. While phenomenology emphasizes openness, reflexivity, and sensitivity to participants' descriptions, researchers are also expected to demonstrate systematic and credible analytic processes (Chatzea et al., 2022). This dual demand often creates tension: excessive structure risks reducing phenomenology to a technical procedure detached from its philosophical roots, whereas insufficient structure may undermine trustworthiness and invite criticism regarding subjectivity or lack of rigor. As a result, nursing and health researchers continue to grapple with how best to operationalize phenomenological principles in applied research settings (Firouzkouhi et al., 2022).

In response to these challenges, several phenomenological analytic frameworks have been developed to guide researchers through the process of data analysis while preserving fidelity to phenomenological philosophy. Among these, Colaizzi's phenomenological research method has achieved sustained and widespread use in nursing and health sciences (Ningsih, 2025). The method is particularly valued for its clearly articulated, step-by-step analytic process, which offers transparency and replicability without abandoning the descriptive focus central to phenomenology (Firouzkouhi et al., 2022). By guiding researchers from immersion in participants' accounts to the identification of significant statements, formulation of meanings, thematic clustering, and synthesis of the phenomenon's essential structure, Colaizzi's method provides a practical pathway for transforming experiential narratives into coherent and meaningful findings (Allman et al., 2024).

The appeal of Colaizzi's method is further enhanced by its explicit inclusion of participant validation, which is intended to strengthen credibility by returning findings to participants for confirmation. In applied health research, where ethical accountability and respect for participants' voices are paramount, this feature is often viewed as a significant methodological strength (Lee et al., 2022). Consequently, the method has been applied across a wide range of topics in nursing and health sciences, including experiences of chronic and acute illness,

mental health challenges, caregiving burdens, professional role development, ethical dilemmas, and health-related transitions across the lifespan (Zhou et al., 2022).

Despite its extensive adoption, concerns have emerged regarding how Colaizzi's method is understood, applied, and reported in contemporary research. In some studies, the method appears to be used in a largely procedural or mechanical manner, with limited engagement with its phenomenological foundations (Chatzea et al., 2022). Analytic steps are sometimes presented as checklists rather than as reflective processes requiring philosophical sensitivity and methodological judgment (Allman et al., 2024). Additionally, key concepts such as bracketing, reflexivity, and meaning formulation are occasionally underdeveloped or ambiguously described, raising questions about the depth and coherence of the analytic work (Guimba et al., 2024). These issues are compounded by publication constraints that may encourage abbreviated methodological reporting, further obscuring the rigor of phenomenological analysis.

Moreover, while Colaizzi's method is often cited as a means of ensuring rigor, there is variability in how researchers address core criteria such as credibility, dependability, confirmability, and transferability. Participant validation, in particular, is inconsistently implemented or insufficiently justified, and ethical and reflexive dimensions of the method are sometimes treated as peripheral rather than integral components of phenomenological inquiry. As nursing and health sciences continue to emphasize evidence-informed practice, these methodological ambiguities risk undermining the contribution of phenomenological findings to clinical, educational, and organizational decision-making (Firouzkouhi et al., 2022).

Against this backdrop, there is a clear need for critical and integrative examination of Colaizzi's phenomenological research method as it is currently used in nursing and health sciences (Lee et al., 2022). While descriptive accounts of the method are widely available, there remains a relative lack of focused analysis that systematically links its

philosophical underpinnings, analytic procedures, and practical implementation in applied research contexts. In particular, there is a gap in the literature regarding how methodological rigor can be strengthened without compromising phenomenological openness, and how researchers can avoid superficial application while maintaining transparency and consistency (Shahrad et al., 2024).

This gap highlights the importance of reviewing Colaizzi's method not merely as a set of analytic steps, but as a methodological framework that requires reflexive engagement, ethical sensitivity, and philosophical coherence. Addressing this need is essential for supporting nurse researchers, clinicians, and graduate students in conducting high-quality phenomenological studies that generate credible, meaningful, and practice-relevant knowledge (Zhou et al., 2022).

Philosophical Foundations of Colaizzi's Method

Colaizzi's phenomenological method is firmly grounded in descriptive phenomenology, a philosophical tradition that originates in the work of Edmund Husserl. Descriptive phenomenology emerged as a response to positivist and naturalistic approaches that sought to explain human experience primarily through causal, empirical, or theoretical frameworks. In contrast, Husserl proposed a return "to the things themselves", advocating for the systematic study of phenomena as they are experienced and consciously perceived by individuals, prior to interpretation, categorization, or theoretical abstraction. Within this philosophical orientation, experience is not treated as a secondary or subjective by-product of reality, but as a legitimate and rigorous source of knowledge (Ningsih, 2025).

Central to descriptive phenomenology is the assumption that lived experience possesses an essential structure—a core meaning that transcends individual variations while remaining grounded in concrete descriptions. Colaizzi's method adopts this assumption by seeking to identify the invariant features of a phenomenon through disciplined engagement with participants' narratives. Rather than

aiming to explain why experiences occur, the method focuses on what the experience is like and how it presents itself to consciousness. This philosophical stance is particularly compatible with nursing and health sciences, where understanding patients' and professionals' experiences is fundamental to ethical, person-centered care (Shahrad et al., 2024).

A key philosophical concept underpinning Colaizzi's method is intentionality, which refers to the idea that consciousness is always directed toward something. Experiences are never isolated mental events; they are always oriented toward objects, situations, relationships, or meanings in the world. From a phenomenological perspective, illness, pain, caregiving, or professional practice are not merely internal states but lived realities shaped by social, relational, temporal, and cultural contexts. In nursing and health research, intentionality enables researchers to explore how individuals experience health-related phenomena as meaningful aspects of their lives, rather than as detached clinical conditions. Colaizzi's method operationalizes this concept by preserving the contextual richness of participants' descriptions throughout the analytic process (Guimba et al., 2024).

Another foundational principle of Colaizzi's method is bracketing, also referred to as epoché. Bracketing involves the deliberate effort by researchers to identify and temporarily suspend their pre-existing assumptions, beliefs, theoretical commitments, and personal experiences related to the phenomenon under investigation. The aim is not to eliminate these influences entirely—an objective widely recognized as unattainable—but to cultivate ongoing reflexive awareness of how they may shape data collection, analysis, and interpretation. In this sense, bracketing is less a technical procedure and more a continuous philosophical attitude that requires openness, humility, and critical self-examination (Jeong et al., 2025).

In nursing and health sciences, bracketing presents particular challenges and opportunities. Researchers are often clinicians, educators, or practitioners who possess extensive experiential knowledge of

the phenomena they study. While this insider knowledge can enhance sensitivity and ethical understanding, it also increases the risk of imposing professional frameworks or normative judgments onto participants' accounts. Colaizzi's method addresses this tension by emphasizing reflexivity as an integral component of phenomenological rigor. Through practices such as reflexive journaling, analytic memoing, and transparent documentation of decision-making, researchers are encouraged to engage critically with their positionality rather than deny it (Shahrad et al., 2024).

Colaizzi's approach further distinguishes itself through its commitment to description over interpretation. Unlike interpretive or hermeneutic phenomenological approaches, which explicitly seek to interpret meanings through theoretical or philosophical lenses, Colaizzi's method aims to remain as close as possible to participants' original accounts. Meanings are derived inductively from the data, grounded in significant statements and formulated meanings that emerge directly from participants' words. This descriptive orientation reflects a philosophical commitment to honoring participants as primary knowers of their experiences, rather than positioning the researcher as the authoritative interpreter (Allman et al., 2024).

This emphasis resonates strongly with the clinical ethos of nursing and allied health professions, which prioritize attentive listening, respect for patients' narratives, and the co-construction of understanding. By foregrounding description and participant validation, Colaizzi's method aligns phenomenological philosophy with ethical principles of respect, autonomy, and relational care. As such, its philosophical foundations not only shape analytic procedures but also reinforce the moral and epistemological values that underpin nursing and health sciences research (Jeong et al., 2025).

Overview and Methodological Rigor in Colaizzi-Based Research

Colaizzi's phenomenological method is distinguished by its systematic and clearly articulated analytic structure, which guides researchers from rich, unstructured qualitative data toward a comprehensive and coherent description of a phenomenon as it is lived and

experienced. This structured pathway is one of the primary reasons the method has been widely adopted in nursing and health sciences, fields in which researchers often seek both philosophical depth and methodological transparency (Shahrad et al., 2024). While the method is commonly described as involving seven sequential steps, it should be understood not as a rigid formula but as a flexible analytic framework that can be thoughtfully adapted to suit different research contexts, populations, and ethical considerations, provided that its phenomenological foundations are preserved (Jeong et al., 2025).

The first analytic step involves familiarization with the data, during which researchers read and reread all participants' descriptions in their entirety. This phase is essential for developing a holistic understanding of the phenomenon before analytic fragmentation occurs. Rather than approaching the data with predefined categories, the researcher engages in immersive reading to gain a sense of the overall tone, emotional texture, and contextual richness of participants' experiences. In nursing and health research, this stage supports sensitivity to nuances such as vulnerability, uncertainty, suffering, and relational meaning that might otherwise be overlooked if analysis begins too quickly at a thematic level (Allman et al., 2024).

The second step consists of identifying significant statements, defined as phrases or sentences that directly relate to the phenomenon under investigation. These statements are extracted verbatim from participants' narratives and serve as the empirical foundation of the analysis. In nursing research, significant statements often capture embodied sensations, emotional responses, interpersonal interactions, and perceptions of care, illness, or professional practice (Jeong et al., 2025). The careful selection of these statements is critical, as it determines which aspects of experience are foregrounded in subsequent analytic stages. Transparency in reporting how significant statements are identified contributes directly to methodological rigor (Shahrad et al., 2024).

The third step involves formulating meanings from the significant statements. At this stage, the researcher articulates the implicit

meanings embedded within participants' explicit descriptions, while remaining grounded in the original data. This process requires disciplined analytic judgment, as the researcher must balance abstraction with fidelity to participants' voices. In Colaizzi's method, meaning formulation is not intended to impose theoretical interpretations, but rather to clarify what participants appear to be expressing about their lived experience. This step is often supported by reflexive practices that help researchers monitor how their assumptions and professional backgrounds may influence analytic decisions (Guimba et al., 2024).

The fourth step entails clustering formulated meanings into themes, which represent recurring patterns across participants' experiences. These thematic clusters reflect shared dimensions of meaning that cut across individual narratives, such as vulnerability, resilience, loss of control, hope, or transformation. In health sciences research, thematic clustering allows researchers to move from individual accounts toward a collective understanding of the phenomenon, while still respecting experiential diversity. Methodological rigor at this stage depends on maintaining clear links between themes, formulated meanings, and original statements (Jeong et al., 2025).

The fifth step involves developing an exhaustive description of the phenomenon by integrating all thematic clusters into a rich, comprehensive narrative. This description seeks to capture the full complexity of the lived experience, including its emotional, relational, and contextual dimensions. Rather than summarizing themes in isolation, the exhaustive description weaves them together to present a coherent and holistic portrayal of the phenomenon as it is experienced in real life (Serafica & Operiano, 2024).

The sixth step requires identifying the fundamental structure of the phenomenon. This step distills the exhaustive description into a concise and integrative statement that expresses the essence of the experience. The fundamental structure is not a simplification, but a synthesis that captures what is invariant and essential across participants' accounts. In nursing research, this essence often holds particular relevance for practice, as it

highlights core experiential dimensions that may inform care, education, or policy (Firouzkouhi et al., 2022).

The final step involves participant validation, commonly referred to as member checking. Findings are returned to participants to confirm whether the description accurately reflects their experiences (Argyriadis et al., 2021). This step reinforces credibility by acknowledging participants as co-constructors of knowledge and ensuring that analytic representations resonate with their lived realities. While participant validation can be challenging to implement, it remains a distinctive and ethically significant feature of Colaizzi's method (Guimba et al., 2024).

Methodological rigor is a central concern in qualitative research, especially in phenomenological studies where analysis is inherently interpretive and context-sensitive. In Colaizzi-based research, rigor is closely tied to transparency, reflexivity, and systematic engagement with analytic procedures. Credibility is enhanced through prolonged engagement with the data, careful extraction of significant statements, and participant validation, supported by rich descriptions and illustrative quotations that allow readers to trace interpretations back to the data. Dependability is strengthened by the method's structured analytic pathway and by maintaining a detailed audit trail documenting analytic decisions and reflexive insights. Confirmability is supported through reflexive journaling, peer debriefing, and transparent reporting, particularly important in nursing research where professional experience may influence interpretation (Guimba et al., 2024). Finally, transferability is facilitated through thick description of participants, contexts, and settings, enabling readers to assess the relevance of findings to their own practice environments.

Research Practice in Nursing and Health Sciences

The application of Colaizzi's phenomenological method in nursing and health sciences reflects the wide range of contexts in which lived experience constitutes a primary source of knowledge (Serafica & Operiano, 2024). Across clinical, educational, and organizational domains, this method has been employed to illuminate how individuals

experience health, illness, care, professional roles, and systemic challenges. Its structured yet experiential orientation makes it particularly suitable for disciplines that aim to integrate scientific rigor with humanistic understanding (Zhou et al., 2022).

In clinical nursing research, Colaizzi's method has been extensively used to explore patients' experiences of chronic illness, acute health crises, end-of-life care, hospitalization, and rehabilitation processes. These studies often focus on how individuals perceive symptoms, bodily changes, uncertainty, dependency, and interactions with healthcare professionals. By systematically analyzing patients' narratives, researchers are able to uncover nuanced dimensions of suffering, adaptation, hope, and resilience that are not readily captured through standardized measures. The resulting phenomenological insights contribute directly to the development of patient-centered care practices, informing care planning, communication strategies, symptom management, and psychosocial support. For example, understanding how patients experience loss of control during hospitalization or ambiguity during treatment trajectories can guide nurses in tailoring interventions that promote dignity, trust, and emotional safety (Jeong et al., 2025).

Beyond patient experiences, Colaizzi's method has also been applied to explore the perspectives of family members and informal caregivers, particularly in contexts such as chronic illness management, palliative care, and mental health (Kim et al., 1999). These studies highlight the emotional, relational, and ethical complexities of caregiving, offering valuable knowledge for designing supportive interventions that address caregiver burden and relational strain. In this way, phenomenological research contributes to a more holistic understanding of care as a shared and relational process (Allman et al., 2024).

In the domain of nursing education, Colaizzi's method has been used to investigate students' and educators' lived experiences of learning, assessment, clinical placements, and professional socialization. Such studies provide insight into how learners experience transition, stress, confidence-building, and

identity formation within educational and clinical environments. By grounding educational research in learners' lived realities, phenomenological findings support curriculum development, pedagogical innovation, and the design of learning environments that are responsive to students' needs. For educators, understanding how teaching practices are experienced by students can inform reflective teaching and foster more inclusive and supportive educational cultures (Firouzkouhi et al., 2022).

Colaizzi's method has also been employed in organizational and leadership research within nursing and health sciences. Researchers have used this approach to examine how healthcare professionals experience organizational change, ethical dilemmas, workload pressures, moral distress, burnout, and interprofessional collaboration. These studies shed light on the subjective impact of institutional structures, policies, and resource constraints on professional well-being and practice. Phenomenological insights derived from such research are particularly valuable for informing organizational development, leadership strategies, and workforce support initiatives. By articulating how professionals experience systemic challenges, Colaizzi-based research contributes to evidence-informed policy-making that is sensitive to the realities of clinical work (Serafica & Operiano, 2024).

Across these varied research contexts, Colaizzi's method supports the translation of experiential knowledge into practice-relevant insights. Its emphasis on participant validation and descriptive depth enhances the credibility of findings, increasing their potential to inform clinical guidelines, educational frameworks, and organizational policies. Importantly, the method allows researchers to bridge the gap between individual experience and broader professional or institutional concerns, highlighting how personal meaning intersects with structural conditions (Zhou et al., 2022).

However, effective research practice using Colaizzi's method requires careful attention to methodological rigor and reflexivity. The diversity of applications across nursing and health sciences underscores the need for researchers to adapt the method thoughtfully

while maintaining fidelity to its phenomenological foundations. When applied rigorously, Colaizzi's approach enables nursing and health sciences to generate rich, context-sensitive knowledge that complements quantitative evidence and strengthens the evidence base for compassionate, person-centered care (Serafica & Operiano, 2024).

Common Challenges and Critiques

Despite its strengths, the Colaizzi method is not without challenges. One common critique concerns the risk of superficial application, where researchers follow the analytic steps mechanically without engaging deeply with phenomenological philosophy. This can result in descriptive summaries that lack interpretive depth or conceptual coherence (Firouzkouhi et al., 2022).

Another challenge relates to bracketing. In practice, complete suspension of pre-understandings is unrealistic, particularly in nursing research where investigators often share professional backgrounds with participants. Rather than viewing this as a methodological failure, contemporary scholars emphasize the importance of reflexive engagement with one's positionality (Zhou et al., 2022).

Participant validation, while a distinctive feature of Colaizzi's method, can also be challenging to implement. Participants may have limited time, may reinterpret their experiences over time, or may feel uncertain about engaging with analytic descriptions. Researchers must approach this step flexibly and ethically (Serafica & Operiano, 2024).

Finally, reporting constraints in academic publishing can limit the extent to which researchers fully describe their analytic process. Concise reporting requirements may inadvertently obscure methodological rigor unless authors deliberately prioritize transparency (Guimba et al., 2024).

Ethical practice is integral to phenomenological research, particularly when exploring sensitive health-related experiences. Researchers using Colaizzi's method must attend to informed consent, confidentiality, and the emotional well-being of participants throughout the research process (Argyriadis et al., 2021).

Reflexivity is both an ethical and methodological imperative. Researchers are responsible for continuously examining how their professional roles, values, and assumptions shape the research encounter. Reflexive transparency enhances trustworthiness and aligns phenomenological inquiry with nursing's ethical commitment to respect and care (Morrow et al., 2015).

Implications for Research and Practice

The continued use of Colaizzi's phenomenological method in nursing and health sciences reflects its capacity to generate nuanced and practice-relevant knowledge. When applied rigorously, the method supports the translation of experiential insights into improvements in clinical care, education, and organizational practice (Allman et al., 2024).

For researchers, this review underscores the importance of grounding analytic procedures in phenomenological philosophy, engaging in reflexive practice, and reporting methods transparently. For practitioners, phenomenological findings derived from Colaizzi's method can inform more compassionate, patient-centered approaches to care.

Conclusions: Colaizzi's phenomenological research method offers a structured yet flexible framework for exploring lived experience in nursing and health sciences, making it particularly well suited to disciplines that prioritize person-centered, holistic, and context-sensitive approaches to knowledge generation. By providing a clear sequence of analytic steps, the method supports transparency and consistency in qualitative analysis, while simultaneously allowing researchers to remain attentive to the depth and complexity of participants' experiential accounts. This balance between structure and openness has contributed to the method's sustained use across a wide range of research contexts, including clinical practice, education, and organizational inquiry within health care settings.

A defining strength of Colaizzi's method is its emphasis on systematic analysis grounded in participants' own descriptions of experience. Through processes such as the identification of significant statements, formulation of

meanings, thematic clustering, and synthesis of an exhaustive description, the method enables researchers to move carefully from individual narratives toward a coherent understanding of the phenomenon as a whole.

The inclusion of participant validation further reinforces the ethical and epistemological commitments of nursing research by recognizing participants as active contributors to knowledge development and enhancing the credibility of findings.

However, the methodological rigor of Colaizzi-based research does not stem from the mechanical application of analytic steps alone. Rather, rigor emerges from researchers' thoughtful engagement with the philosophical principles of descriptive phenomenology, particularly intentionality, bracketing, and reflexivity. Without sustained reflexive awareness, there is a risk that analytic procedures may be reduced to technical exercises that obscure, rather than illuminate, lived experience.

This concern is especially relevant in nursing and health sciences, where researchers often bring extensive professional knowledge that can both enrich and potentially bias interpretation.

Ethical research practice is also integral to the effective use of Colaizzi's method. Attentiveness to participants' vulnerability, respect for their narratives, and sensitivity to the emotional dimensions of phenomenological inquiry are essential for maintaining trust and integrity throughout the research process. Reflexive and transparent reporting further strengthens the contribution of phenomenological studies by allowing readers to evaluate the credibility and relevance of findings.

By integrating strong philosophical grounding with careful methodological application, Colaizzi's phenomenological method enables researchers to generate credible, meaningful, and practice-relevant knowledge. When applied rigorously, it contributes not only to the advancement of nursing science but also to the improvement of health care practice by deepening understanding of the human experiences that lie at the heart of care.

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