The Hermeneutics of Transcript Analysis

Joyce G. Love

Lynn University

Follow this and additional works at: http://nsuworks.nova.edu/tqr

Part of the Quantitative, Qualitative, Comparative, and Historical Methodologies Commons, and the Social Statistics Commons

Recommended APA Citation


This Article is brought to you for free and open access by the The Qualitative Report at NSUWorks. It has been accepted for inclusion in The Qualitative Report by an authorized administrator of NSUWorks. For more information, please contact nsuworks@nova.edu.
The Hermeneutics of Transcript Analysis

Creative Commons License

This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 4.0 License.
My goal was to understand the subjective understandings that medical couples have about their lives. My interest in career and home life dates back fifteen years to the time that I completed a master's thesis on medical and law students. After taking a rather extended hiatus which included marrying a physician, having children, and divorcing a physician, I decided to compare my own experience with the experiences of other medical wives. As I reviewed the published literature on medical couples, it soon became evident that the trend included a rather bleak view of physicians and their marriages. The overall theme that ties together the several hundred articles and books on the topic reflects a pathologizing perspective discussed in the familiar deficit descriptions depicted in the medical model of doctors' and their spouses' personalities. Such descriptions include the doctor as a compulsive, workaholic, emotionally distant robot and his wife as a dependent shell of a being whose most characteristic feature is that of an emotional cripple. By the time I exhausted the literature on the topic of medical marriages, I knew that a significant element of the research was missing. I knew that the research should invite the voices of the couples themselves and explore these couples' lives by exploring the perspectives, meanings, understandings, descriptions, and interpretations the couples themselves brought forth. I wanted what ethnographic research typically calls an emic or native perspective. The goal of emic understanding is elaborated in hermeneutic and phenomenologic methodologies (Kvale, 1983; Packer, 1985).

The "hermeneutic circle" described by Schleiermacher (Palmer, 1969) became a useful concept in my methodology since it addressed the ways in which two people in conversation, or a reader reading a text, mutually transform each other's ideas through continuing interaction. Gergen (1988) uses "the dance" in describing the ever changing and continuous movement of partners, their relatedness and their reasoning in social interchange. Additionally, there is an internal dialogue in the hermeneutic circle in which the researcher continually uses metaphors, explanatory principles, and prior knowledge to understand what is read or heard in an interview. Geertz (1983) uses the baseball game as an example of this aspect of the hermeneutic circle (see p. 69). Geertz (1983) further emphasizes how we can know another's thought through our own words and mind. He describes an "intellectual movement,...a conceptual rhythm...a continuous dialectical tacking between the most local of local detail and the most global of global structure (p. 69).

I chose seven couples who varied by the following: medical specialties, spouses' careers, ages, stages in life in terms of years married, number of marriages within couple, and number and ages of children. All but one of the couples depicted the traditional marriage where the husband was the physician. I conducted in-depth, semi-structured interviews centering around issues that I found in the literature, around my own preconceived notions, prejudices and biases, and around ideas that the couples brought up or focused on. I had no goal or particular hypothesis to prove or
disprove as would be along the lines of quantitative research methods. I merely wanted to hear the ways the couples managed what appeared to be stressful lives, how they balanced busy careers and hectic, demanding family lives, and what methods or avenues they took to create workable or not so workable lives.

My creativity was set in motion when the struggle to utilize a hermeneutic methodology collided with the challenge to interpret the transcribed interviews. How was I to determine what was important enough to discuss and what was not? I needed signs, indications, manifestations, symbols that I eventually called "features of significance." These features tapped revealing information of difference—difference from my presuppositions, prejudices, and biases; difference from what was discussed and interpreted in previous literature; and, difference from what the interviewees determined to be acceptable and mundane understandings of their lives.

Within a few days after an interview, I listened and took notes. I listened for themes of interest and began to attempt to put into my words the ways in which the spouses interpreted their lives. As I received the completed transcripts, I read each one carefully. I listened to the tapes again as I read over the transcripts. Where I noticed items of interest, I placed themal notes in the margins. Transcripts were photocopied and data that was seen as very significant was cut out and attached to index cards. Index cards were coded for identification and location in transcript. The marginal notes and the index cards served as building blocks for perceived themes. Researcher's ideas, hunches, and interpretations were kept in a journal.

A central question throughout these analyses was, "What is a theme?" How was I to recognize, invent, construct, deconstruct, reconstruct, and textualize "themes?" Some might say that anything said by an analyst is a "bias" or a "prejudice." Another voice (e.g., Gadamer, 1976) might celebrate the inner dialogue of the researcher and encourage the author to include such pondering in the text. In the spirit of this voice, I have chosen several ways to voice the themes I heard in the interviews and read in the transcripts.

Themes were identified by utilizing several features of significance. These include (from Love, 1992):

1. Repetition within and across interviews. Ideas, beliefs, concerns, and issues that one or the other or both spouses discuss repeatedly throughout the interview or/and are brought up at least once in an interview and are then again noted in other interviews are considered significant.
2. Levels and nature of affect. This includes emotion that is evident through nonverbal cues such as a sudden rise in vocal volume, change in facial expressions and other bodily movements all noted concomitantly with particular content lend significance to that content or theme.
3. Historical explanations, descriptions, and interpretations. Stories of the past that explain and justify present behaviors and meanings are considered significant.
4. Explicit and implicit interpretations. These require connections between thoughts and activities and meanings ascribed to them whether they be obvious and direct or implied and metaphoric. These interpretations are considered significant.
5. Serendipity. Behaviors and expressions of the participants that are different from what was expected, based upon my reading and experience. These unexpected surprises are significant
since they allow the research to recognize ideas which have not yet been published. (pp. 123-124)

The interview transcripts were extensively annotated with identification of features of
significance, as well as descriptions of my reactions to what they said and what I said. I thoroughly examined each transcript for ideas which seemed to add voices to the discussion on medical families. Also, I closely reviewed the transcripts for signs of my own transformation. As I conducted the interviews, I was intrigued, and somewhat embarrassed, by my own "slips" of the tongue and by my more personal questions of the spouses.

An example of how I used the features of significance to search for themes involves a couple where the husband was a physician and the wife was a dentist. The couple described their decision in terms of the theme "quid pro quo" as the wife assessed both hers and her husband's careers in the following:

As I said before, I mean David's career came FIRST, and so he, that was his first responsibility and mine was more part time so the kids were more my responsibility. (Love, 1992, p. 209)

Several features of significance were used here to determine the importance of this snippet. Repetition was obvious in the comment "As I said before" and also in rereading the entire transcript the theme "quid pro quo" came up on numerous occasions. Levels and nature of affect is noticeable in the word "FIRST" which is capitalized to indicate in the transcript the rise in vocal volume indicating the significance of this comment. Historical explanations was another feature of significance that was used in connecting the present behaviors and meanings to the history of the relationship. Since David's career came first and the raising of the children was the wife's responsibility for the most part, this couple found their day-to-day living to be consistent with their unwritten agreement.

I found that each couple utilized unique maneuvers to make life as liveable and enjoyable as possible. They each tried their best to conduct their lives in the most serene manner as possible. The themes that were invented through the analysis are constructs reflecting the creative solutions I noticed they used in facing the day-to-day challenges of career/family life. In re-reviewing the literature and my presuppositions and prejudices, I found a striking difference between these and what I learned from an emic perspective. As I took an insider's view, I found myself to be totally immersed in the lives of the people I studied. Finally, I began taking on an increased respect and understanding of the lives that at one time were viewed from a pathologizing, negative, and hopeless perspective.

References


Joyce G. Love, Ph.D. is in private practice at 1515 University Drive, #107D, Coral Springs, Florida 33071, phone (305)344-9941. She is also an adjunct faculty member at Lynn University and Saint Thomas University.