

Journal of Psychopathology and Clinical Science

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Gil Grunfeld, Laura F. Bringmann, and Daniel Fulford

Online First Publication, August 29, 2024. <https://dx.doi.org/10.1037/abn0000928>

CITATION

Grunfeld, G., Bringmann, L. F., & Fulford, D. (2024). Putting the “experience” back in experience sampling: A phenomenological approach. *Journal of Psychopathology and Clinical Science*. Advance online publication. <https://dx.doi.org/10.1037/abn0000928>

VIEWPOINT

Putting the “Experience” Back in Experience Sampling:
A Phenomenological ApproachGil Grunfeld¹, Laura F. Bringmann², and Daniel Fulford^{1, 3}¹ Department of Psychological and Brain Sciences, Boston University² Department of Psychometrics and Statistics, University of Groningen³ Sargent College of Health and Rehabilitation Sciences, Boston University

A central challenge of clinical science is understanding psychopathological constructs and their manifestations. In conventional definitions and measures of psychopathology, subjective experience of mental disorder is often lost. We argue for an integration of phenomenology—or prioritization of subjectivity—in psychopathological construct definition and measurement, particularly through experience sampling methods (ESMs). ESMs capture idiographic, contextual, and longitudinal elements of lived experience that can expand our current conceptualizations and classifications of psychopathology.

We propose three novel applications and extensions: (a) leveraging ESM for subjective construct definition (i.e., phenomena detection), (b) mixed-methods approaches, like cognitive interviewing, to improve the validity of ESM measures (Stone et al., 2023), and (c) incorporation of novel ESM approaches (e.g., audiovisual data capturing) to expand understanding of subjective, daily experience of psychopathology. Merging phenomenological tradition with ESM serves to expand our understanding of psychopathology and bring “experience” back into experience sampling.

Missing the Trees for the Forest: Barriers to Deep Understanding of Psychopathology

Interdisciplinary scholars highlight the fallibility of existing definitions of subjective psychopathological constructs (Kendler & Parnas, 2015). While latent classification of clinical phenomena yields robust group-level generalizations, it rarely translates to individual experience (Hamaker, 2012). Furthermore, data that drive models for symptom onset, clusters, and correlations rarely integrate accounts of participants with lived experience—instead, hypotheses are gleaned

from behavioral observations from clinicians or researchers (Brown & Jones, 2021). As a result, subjective experience of psychopathology is often left out at the earliest stage of study design.

In addition to addressing limitations of group-to-individual quantitative interpretations, clinical science can further expand its understanding of psychopathology by centering subjectivity. This not only requires idiographic approaches that apply statistical methods to individual data but also qualitative firsthand accounts to deepen our knowledge of within-person processes.

Recentering Subjectivity in Clinical Science

Applying phenomenology to psychopathology research involves centering subjective experiences of individuals with mental disorders (Stanghellini et al., 2019). This approach prioritizes phenomena detection (description of subjective experience) to better inform theory, including putative mechanisms of psychopathology. Methodologically, phenomenology suspends assumptions (a priori predictions) to capture rigorous firsthand descriptions of mental phenomena. The primary goal is to describe, define, and understand psychopathology from the lived perspective. While research is increasingly attending to idiographic, person-level measurement (Fisher et al., 2018; Wright & Woods, 2020), phenomena detection can further uncover subjective experience in naturalistic settings and provide construct clarification to support theory development (Bringmann et al., 2022).

The phenomenological method has often been associated with the analysis of rich qualitative interviews; however, phenomenological investigation has also been applied to the development of clinical assessment tools. The Examination of Anomalous Self-Experience (EASE), for example, is a scale designed to capture experiences related to self-disturbance (e.g., “anomalous self/bodily experiences”) in psychosis (Parnas et al., 2005). Phenomenologically informed, the EASE enhances conventional psychosis assessment by highlighting subjectively reported symptoms, historically overlooked in the clinical setting (Parnas et al., 2005). The EASE exemplifies the twofold advantage of phenomenology for clinical research: items on the scale were developed to integrate firsthand accounts of psychosis, which have in turn generated clinical measurements better reflecting the subjective experiences of those assessed.

Sampling the Daily Experience of Psychopathology

While phenomenology has been applied, albeit sparingly, to the development of psychological assessments, the approach has yet

Aidan G. C. Wright served as action editor.

Gil Grunfeld  <https://orcid.org/0000-0001-5932-6775>

Daniel Fulford serves as a subject matter expert for Click Therapeutics and Boehringer Ingelheim.

Gil Grunfeld served as lead for conceptualization and writing—original draft. Laura F. Bringmann served in a supporting role for conceptualization and writing—review and editing. Daniel Fulford served in a supporting role for conceptualization and writing—review and editing.

Correspondence concerning this article should be addressed to Gil Grunfeld, Department of Psychological and Brain Sciences, Boston University, 900 Commonwealth Avenue, Second Floor, Boston, MA 02215, United States. Email: grunfeld@bu.edu

Table 1
Integration of Phenomenology and Experience Sampling in Psychopathology Research

Approach	Definition	Application to experience sampling	Examples in psychopathology research
Phenomena detection	A research approach that suspends hypotheses or causal assumption, with the priority of obtaining highly descriptive firsthand accounts of subjective phenomena that can inform theory and study design	Expansion of construct definition through naturalistic, idiographic data collection to better reflect individuals' lived experience	<ol style="list-style-type: none"> 1. The investigation of self-reported loneliness following daily social interactions 2. The exploration of subjective daily lived experience of chronic depression
Cognitive interviewing	A qualitative technique that prompts participants to reflect on their subjective interpretation of scale items and/or construct definitions	Refinement of experience sampling measures by accounting for subjective variability in interpretation	<ol style="list-style-type: none"> 1. Asking participants following initial study administration "What does 'loneliness' mean to you?" 2. Asking participants to elaborate on their interpretation of items on the Beck Depression Inventory to adapt the assessment for ESMs
Audiovisual data collection	The incorporation of nonlinguistic phenomenological data research methodology	Expansion of experience sampling to capture data from mobile devices beyond linguistic explanation of phenomena	<ol style="list-style-type: none"> 1. Collecting participant-prompted audio recordings in which they reflect on momentary experiences of social disconnection 2. Having participants self-indicate on a body-map diagram where "depression is felt in their body"

Note. ESM = experience sampling method.

to be used in the context of ESM. The utility of phenomenological research is its emphasis on the collection of descriptive, dynamic, first-person data. To date, however, ESM has used measures developed through traditional quantitative approaches that largely ignore phenomenology.

There are exciting opportunities for improving our understanding of psychopathology through application of phenomenology in experience sampling (see Table 1). Given its application to naturalistic research, ESM presents avenues for phenomena detection previously limited to the laboratory or clinic. We outline three modes of integration: (a) construct definition through phenomena detection; (b) mixed methods to enhance measure development; and (c) novel approaches that go beyond traditional self-report.

1. Phenomena detection through experience sampling: Little attention has been given to experience sampling as a tool for phenomena detection; that is, for the sake of understanding and defining psychopathology at the individual level, without the goal of making generalizable or causal inferences. This applies to early stages of study design, where ESM is used for exploratory research. Such work may complement existing computational approaches by prioritizing a rigorous understanding of lived experience applied to hypothesis generation and data interpretation.
2. Phenomenology-informed measure development: Cognitive interviewing—in which researchers probe participants on their understanding and definition of constructs of interest—can highlight differences in item interpretation due to culture, language, and subjective understanding. Questions can be redefined according to participant feedback through the clarification of terminology, creating response options, or adding questions based on subjective accounts left out from existing conceptualizations of psychopathological constructs of interest.
3. Novel phenomenological approaches to data collection: Subjectivity-centered research is not only advantageous

for theory and assessment development but also in the expansion of types of data collected to research clinical phenomena. Given that phenomenology is often concerned with processes of meaning-making, it encourages both linguistic and nonlinguistic media. ESM can document lived experience that goes beyond the written word, leveraging multimedia data captured with mobile technology (e.g., audiovisual diaries; Mehl, 2017), or other unique applications (e.g., interoceptive mapping; Benson et al., 2019).

Presenting current limitations to subjective-construct validity, and proposing phenomenological tools at the framework, methodological implementation, and clinical research level, we call for enhanced rigor and expanded opportunities for descriptive research in psychopathology, with the advantages of ESM. Integrated phenomenological orientation can yield more precise constructs to inform hypothesis generation, measurement development, and data collection approaches enhancing quantitative analysis. This orientation paves novel approaches to clinical science research and deepens our understanding of subjective psychopathological phenomena to better serve and collaborate with those with lived experience.

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Received April 15, 2024

Accepted April 24, 2024 ■