Feeling Alone While with Others

Carol Ann Leverich Gouty
Loyola University Chicago

Follow this and additional works at: https://ecommons.luc.edu/luc_diss

Part of the Nursing Commons

Recommended Citation
https://ecommons.luc.edu/luc_diss/3637

This Dissertation is brought to you for free and open access by the Theses and Dissertations at Loyola eCommons. It has been accepted for inclusion in Dissertations by an authorized administrator of Loyola eCommons. For more information, please contact ecommons@luc.edu.

This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 3.0 License. Copyright © 1996 Carol Ann Leverich Gouty
LOYOLA UNIVERSITY CHICAGO

FEELING ALONE WHILE WITH OTHERS

A DISSERTATION SUBMITTED TO
THE FACULTY OF THE GRADUATE SCHOOL
IN CANDIDACY FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY

MARCELLA NIEHOFF SCHOOL OF NURSING

BY

CAROL ANN LEVERICH GOUTY, RN, MSN

CHICAGO, ILLINOIS
MAY, 1996
Copyright by Carol Ann Leverich Gouty, 1996
All rights reserved.
ACKNOWLEDGEMENTS

This research would not have been possible without the assistance and support of my dissertation committee Esther Matassarin-Jacobs, Rosemarie Rizzo Parse, and Mary Ann McDermott. Dr. Matassarin-Jacobs and Dr. Mc Dermott provided much needed support and guidance throughout the dissertation process. Dr. Parse offered me the opportunity to come to know the human becoming theory and research methodology. She shared her time, energy, knowledge, and enthusiasm for research and theory without reservation.

I would like to thank my sons, Kyle and Eric, and my mother, Kathleen Collins Leverich, for their patience and support. I would also like to thank those who participated in this research.

In sharing their lives, each of them have changed how I think about others, and how I am with others.
# TABLE OF CONTENTS

**ACKNOWLEDGEMENTS** .................................. iii

**Chapter**

**I. INTRODUCTION** ................................. 1

- Phenomenon of Interest ......................... 1
- Study Population ............................... 3
- Purpose of the Study ......................... 3
- Significance of the Study ..................... 3
- Research Question ............................. 4
- Nursing Perspective ........................... 4
  - Assumptions ................................ 5
  - Principles .................................. 7
- Summary ...................................... 12

**II. LITERATURE REVIEW** .......................... 13

- Psychology Literature ...................... 14
  - Theoretical Literature ................... 14
  - Research Literature ....................... 17
- Existential Philosophy ..................... 21
- Nursing Literature .......................... 27
  - Totality Paradigm ......................... 27
  - Theoretical Literature ................... 27
  - Research Literature ....................... 30
- Simultaneity Paradigm ....................... 35
  - Theoretical Literature ................... 35
  - Research Literature ....................... 36
- Summary ..................................... 41

**III. PARSE'S RESEARCH METHODOLOGY** .......... 43

- Background of the Method ................... 43
- Description of the Method .................. 44
- Purpose of the Method ....................... 46
- Processes of the Method ..................... 47
  - Participant Selection ..................... 47
  - Human Subjects' Protection ............... 48
  - Dialogical Engagement ..................... 49
  - Extraction-Synthesis ....................... 50
  - Heuristic Interpretation .................. 51
- Rigor and Credibility ....................... 51
- Summary ..................................... 56

**IV. PRESENTATION OF FINDINGS** ................. 57

- Participant One ............................... 59
  - Essences: The Participant's Language .... 59
<table>
<thead>
<tr>
<th>Participant</th>
<th>Essences: The Participant’s Language</th>
<th>Essences: The Researcher’s Language</th>
<th>Proposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two</td>
<td>60</td>
<td>60</td>
<td>60</td>
</tr>
<tr>
<td>Three</td>
<td>61</td>
<td>61</td>
<td>61</td>
</tr>
<tr>
<td>Four</td>
<td>62</td>
<td>62</td>
<td>62</td>
</tr>
<tr>
<td>Five</td>
<td>63</td>
<td>63</td>
<td>63</td>
</tr>
<tr>
<td>Six</td>
<td>64</td>
<td>64</td>
<td>64</td>
</tr>
<tr>
<td>Seven</td>
<td>65</td>
<td>65</td>
<td>65</td>
</tr>
<tr>
<td>Eight</td>
<td>66</td>
<td>66</td>
<td>66</td>
</tr>
<tr>
<td>Nine</td>
<td>67</td>
<td>67</td>
<td>67</td>
</tr>
<tr>
<td>Ten</td>
<td>68</td>
<td>68</td>
<td>68</td>
</tr>
<tr>
<td>Propositions</td>
<td></td>
<td></td>
<td>69</td>
</tr>
<tr>
<td>Core Concepts</td>
<td></td>
<td></td>
<td>71</td>
</tr>
<tr>
<td>Recognition of Diversity Amidst an Exhausting Turmoil</td>
<td>71</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disclosing-Not Disclosing in Flight for Solace</td>
<td>72</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambiguous Possibilities in Engaging-Disengaging</td>
<td>72</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Structure of the Lived Experience</td>
<td>74</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heuristic Interpretation</td>
<td>74</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Structural Integration</td>
<td>74</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conceptual Interpretation</td>
<td>74</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V. DISCUSSION OF FINDINGS</td>
<td>75</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The Core Concepts and The Human Becoming
Theory .............................................. 76
Recognition of Diversity Amidst an
Exhausting Turmoil ................................. 76
Disclosing-Not Disclosing in Flight
for Solace ........................................... 79
Ambiguous Possibilities in Engaging-
Disengaging .......................................... 83
Related Literature ................................. 89
Feeling Alone while with Others, Health,
and Quality of Life ............................... 101
Methodological Considerations .............. 104

VI. CONCLUSIONS, RECOMMENDATIONS, REFLECTIONS

Conclusions ........................................ 109
Recommendations ................................. 112
Reflections ......................................... 113

Appendix

A. UNIDIMENSIONAL LONELINESS MEASURES ........ 115
B. MULTIDIMENSIONAL LONELINESS MEASURES ....... 117
C. SITUATIONAL ASPECTS OF STRUCTURES OF ALONENESS 119
D. PARTICIPANT EXPLANATION LETTER ............... 121
E. CONSENT FORM .................................. 123

REFERENCES ...................................... 125
VITA ................................................. 142
CHAPTER I
INTRODUCTION

This study investigated the meaning of feeling alone while with others for persons who experienced the loss of a significant other. The theory guiding the research was Parse's (1981, 1987, 1994, 1995a) theory of human becoming. The theory was selected as it is unique to nursing and congruent with the researcher's perspective. Parse's (1987, 1992, 1995b) research methodology was used in conducting the study. Arising from the theory of human becoming, it is the appropriate methodology to answer the research question.

Phenomenon of Interest

The phenomenon of interest for this research was feeling alone while with others. As a critical care nurse, administrator, and ethics consultant, the researcher witnessed the experiences of many persons who lived through the loss of a loved one. The researcher conducted focus groups for these persons to better understand their experiences. Several themes surfaced from their descriptions of the events, feelings, and thoughts surrounding these experiences. One significant theme was feeling alone while with others. When the researcher shared the information from the focus group participants with nurses, they communicated
a desire to have an enhanced understanding of the experience of persons who are feeling alone while with others.

In developing the concept of feeling alone while with others, the researcher first developed the concept of feeling alone, a universal lived experience that occurs even in the presence of others (Acorn & Bampton, 1992; Booth, 1983; Gouty, 1994; Nisenbaum, 1983/1984; Powell, 1985; Valente & Aoyama, 1992). The concept of feeling alone while with others evolved from further investigation based on a review of the literature in psychology, existential philosophy, and nursing.

Extant literature in nursing and related health care fields did not adequately address the experience of feeling alone while with others. This literature discussed the concepts of feeling alone and feeling alone while with others in a linear, cause-effect, prescriptive manner. The human was viewed as a bio-psycho-socio-spiritual entity who could be guided to better health through interventions by the nurse, who was viewed as the expert.

Such a view is not congruent with the researcher's view of the human as a unitary being, cocreating the process of life with the universe. Parse's nursing theory of human becoming, arising from the simultaneity paradigm of nursing, is congruent with the researcher's worldview. Thus the theory of human becoming was also utilized in further developing the concept of feeling alone while with others.
Study Population

While feeling alone while with others is a universal human experience, the researcher was interested in the experiences of persons who had lost a significant other. This researcher had observed the struggles of these individuals in the acute care and home care settings for 15 years. These observations, private dialogue with persons who lost a significant other, the recurrent theme of feeling alone while with others voiced by the participants in the focus groups, and interest voiced by nurses surfaced the population for this study as adults who have lost a significant other some time in their lives.

Purpose of the Study

The purpose of this study was to advance nursing science by gaining an understanding of the lived experience of feeling alone while with others from persons living the phenomenon.

Significance of the Study

Studying the universal lived experience of feeling alone while with others contributes to the general understanding about the phenomenon. It advances nursing science as it contributes to nursing knowledge by enhancing the human becoming theory and research methodology. Understanding gained from the research of this experience can be used in practice, as nurses strive to be in true
presence with persons who are in situations where they feel alone while with others.

Parse’s theory of human becoming has as the goal of nursing, quality of life from the person’s perspective. Feeling alone while with others is a health-related experience reflecting a way of becoming that incarnates quality of life and value priorities (Parse, 1987).

The goal of nursing research with the human becoming methodology is to "uncover the structure of lived experiences" (Parse, 1992, p. 41) for the purpose of advancing nursing science. Conducting research using Parse’s (1987, 1990, 1992, 1995b) research methodology, the distinct method arising from the human becoming theory of nursing, contributed to the understanding and value of that research methodology.

Research Question

The research question was: what is the structure of the lived experience of feeling alone while with others?

Nursing Perspective

The researcher’s views are congruent with the perspective of the simultaneity paradigm of nursing. The simultaneity paradigm differs from the traditional totality paradigm of nursing in several ways as discussed in Chapter II. Thus, Parse’s theory, arising from the simultaneity paradigm, was chosen to guide this research.
Assumptions

The assumptions of Parse's theory arise from a unique synthesis of ideas from Rogers (1970, 1980) and concepts from existential-phenomenological thought; primarily from Heidegger, Sartre, and Merleau-Ponty (Mitchell, 1995; Mitchell & Cody, 1993; Parse, 1981, 1987). Rogers' (1970, 1980) principles of helicy, complementarity (now called integrality), and resonancy were used along with the four building blocks of her theory in the creation of the human becoming theory. The four building blocks are energy field, openness, pattern, organization and pandimensionality. These principles and concepts address the belief that the human evolves in a rhythmical pattern mutually with the environment without cause and effect. The concept of wholeness, the human as more than the sum of parts, emerges from the four building blocks. The ideas of mutuality, rhythmicity, and continuously fluctuating boundaries also emerge from these building blocks (Parse, 1981).

The existential-phenomenological tenets of intentionality and human subjectivity along with the concepts of situated freedom, coexistence, and coconstitution were synthesized with Rogers' principles and concepts. Intentionality reflects Heidegger's (1927/1972) beliefs. Intentionality means that being human means being "involved with the world through a fundamental nature of knowing, being present and open" (Parse, 1981, p. 18).
The freedom and desire to reach beyond oneself, found in intentionality, surfaces the concepts of coexistence and situated freedom. Coexistence means that humans are never alone and reflects the idea of multidimensionality. Situated freedom means that one participates in choosing the situations one finds oneself in, both reflectively and prereflectively. The human also chooses how to be in situation. All choices are made with responsibility for the outcomes even though knowledge of the outcomes are not entirely known (Parse, 1981).

The tenet of human subjectivity posits that humans and the environment are in a dialectical relationship, cocreating human becoming. Coconstitution, arising from this tenet, means that situations are cocreated by humans in mutual process with the universe and others (Parse, 1981).

The assumptions of this unique theory of human becoming focus on beliefs about the human and health. Parse's (1981, 1987, 1992, 1994, 1995a) theory views humans as open, unitary beings, free to choose, cocreating meaning with the universe. Parse views health as "a process of becoming and a set of value priorities" (Parse, 1987, p. 136). There are no standardized sets of norms for health. Health is defined by the person. Parse's goal of nursing is quality of life from the person's perspective. The person, not the nurse, is the expert (Parse, 1987).

The researcher's synthetic definition of feeling alone
while with others surfaced through earlier work. Congruent with the assumptions and principles of Parse's (1981, 1987, 1992, 1994, 1995a) theory of human becoming, "feeling alone while with others is an intense ebb and flow moving with and apart from the cherished in the burdening-unburdening struggle of inventing new ways of becoming" (Gouty, 1994, p. 6). The synthetic definition is related to each of the principles of the theory in the following discussion.

Principles

Three principles arise from the assumptions of the human becoming theory. The first principle of the human becoming theory is "structuring meaning multidimensionally is cocreating reality through the languaging of valuing and imaging" (Parse, 1981, p. 42). This principle means that humans cocreate personal meaning in each situation by choosing among options that arise in various realms of the universe all-at-once. Each human structures personal meaning through imaging, valuing, and languaging. Imaging refers to explicit-tacit knowing. Explicit knowing, that which is reflected upon critically, is lived all at once with tacit knowing, which is acritical (Parse, 1981). Humans know through an individual frame of reference which incarnates value priorities. Valuing is the process of living cherished beliefs while incorporating new experiences into a personal worldview through appropriating-not appropriating the new. Humans show the meaning given to a situation through
languaging, speaking-being silent and moving-being still. Valued images are expressed through symbols, words, and gestures. New meanings arise as individuals become more diverse through living different experiences which surface new images. These new images cocreate other possibilities as value priorities change (Parse, 1981, 1987, 1992, 1994).

Feeling alone while with others is a freely chosen way of being with a situation. It is the personal meaning cocreated with the universe through choosing options from multiple realms. Humans choose the personal reality of feeling alone while with others by what they know and what they cherish. Feeling alone while with others is a sense of being without others while existing in close proximity with them. Living the phenomenon reflects experiencing close relationships with loved ones while believing they cannot really understand the situation. The meaning of feeling alone while with others is languaged in the words and metaphors used by persons as they choose to speak or not speak about the experience while moving-being still.

The second principle of human becoming is "cocreating rhythmical patterns of relating is living the paradoxical unity of revealing-concealing, enabling-limiting while connecting-separating" (Parse, 1981, p. 50). This principle describes modes of cocreating with others, self, and world in paradoxical rhythmical patterns of relating that surface in living day-to-day. For Parse, paradoxes are "two sides of
the same rhythm that coexist all-at-once" (Parse, 1992, p. 38). The human becomes more diverse while experiencing the apparent contradictions of the two sides of the same rhythm all-at-once, in the day-to-day relating of value priorities. Experiences surface other possibilities as views shift and what one values is present in different ways (Parse, 1981, 1987, 1992; Mitchell, 1993).

The paradox of revealing-concealing is a rhythmical process of choosing to disclose and not disclose to self and others. One can not know all there is about oneself so all cannot be revealed or concealed (Parse, 1981, 1987, 1992). Living feeling alone while with others is a way of revealing-concealing in that one reveals some ideas, values, and beliefs with another and self yet conceals other ideas, values, and beliefs simultaneously. It is the lived ebb and flow of disclosing-not disclosing that incarnates the chosen meanings of feeling alone while with others.

The rhythmical process of enabling-limiting refers to the opportunities and limitations in all choices. Opportunities and limitations arise in all directions, those chosen and not chosen (Parse, 1981, 1987, 1992). There are both limitations and opportunities in feeling alone while with others as the meaning given to the situation unfolds a lived reality. The burdening-unburdening struggle of feeling alone while with others relates to the limitations and opportunities that arise in the possibilities that are
created as choices are made reflecting that which is cherished.

Connecting-separating is the rhythmical process of moving together with one phenomenon while simultaneously moving away from other phenomena. In cocreating patterns of relating, humans come together to be with one another and as they come together they move away from others. The paradox of connecting-separating is a mutual process, a human unfolding. Through living rhythmical patterns the human, with others and the universe, cocreates new ways of becoming (Parse, 1981, 1987, 1992). In feeling alone while with others, the aloneness-togetherness of being with and apart from cherished others happens all-at-once as described by Cody (1991, 1995), and Davis & Cannava (1995). Participants in Cody’s (1991, 1995) study described significant relationships with loved ones, who were estranged or dead, yet they spoke about deeply personal meanings that surfaced aloneness in the separation. Retired persons described making plans for the day that might or might not include others and keeping busy at times to not get involved with others living in the same place (Davis & Cannava, 1995). Feeling alone while with others is a unique being with and not with others simultaneously. It is the moving with and apart from memories of the cherished as humans, in inventing new ways of becoming, struggle with the choice of valuing communion with new people, objects, events, and ideas while
valuing solitude all-at-once.

The third principle is "cotranscending with the possibilities is powering unique ways of originating in the process of transforming" (Parse, 1981, p. 55). It describes a process of moving beyond the now with hopes and dreams. Powering is the continuous pushing-resisting rhythm in human becoming (Parse, 1981, 1987, 1992). Originating is creating new unique ways of living the struggles with the paradoxes of day-to-day moving with new experiences. The paradoxes of conformity-non conformity and certainty-uncertainty surface as people make choices to be unique and the same all-at-once, and to be sure while living with the ambiguity of never fully knowing the consequences of choices as new ways of seeing the familiar are created. The third concept of the principle is transforming, "the changing of change" (Parse, 1981, p. 62). New discoveries and shifts in how one views the familiar cocreate new ways of being in the ongoing human-universe process (Parse, 1981, 1987, 1992).

The pushing-resisting rhythm of powering is present in the struggle of inventing new ways of becoming as persons move beyond the now to the not-yet in feeling alone while with others as what-was incarnates the now and will-be all-at-once. The conformity-non conformity in feeling alone while with others lies in the comfort-discomfort of living a unique worldview while existing in the same world as others who do not share this view. The struggle is to be connected
through conforming and yet unique as personal experiences and values surface the paradox of feeling alone while with others. The paradox of certainty-uncertainty relates to feeling alone while with others as the person struggles in choosing new ways of becoming. New ways of becoming arise with the hopes and dreams that surface as the familiar is seen in a new light.

**Summary**

Feeling alone while with others, the phenomenon of interest for this study, was introduced in this chapter. The relevance of the study population and the significance of the study for the enhancement of nursing science were established. The principles of human becoming theory with the synthetic definition of feeling alone while with others supported use of the human becoming theory to guide this study.
CHAPTER II
LITERATURE REVIEW

This literature review expands on the review (Gouty, 1994) conducted when developing the concept of feeling alone with an emphasis on the research and measurement of feeling alone while with others. Both reviews include a comprehensive search of dictionaries; the thesaurus; a computerized literature search in medical, nursing and allied health, law, psychology, general literature, and the Dissertation Abstracts Index databases; a review of research known to the researcher on feeling alone, aloneness, and feeling alone while with others; and articles identified as key by repeated citations in the literature. Key search words included feeling alone, aloneness, alone, loneliness, solitude, feeling lonely, feeling alone with others, and "feeling and alone". Articles concerning the loss of a loved one were included as the researcher's interest in feeling alone is in that context. Articles not published in the English language were excluded from these reviews.

The review of the literature demonstrates that feeling alone is typically described as synonymous with alone, aloneness, and loneliness (Auger, 1986; Barrell, 1988; Csikszentmihalyi & Csikszentmihalyi, 1993; Nisenbaum,
1983/1984; Peterson, 1992; Powell, 1985; Samter, 1992; Shear, Cooper, Klernan, Bush & Shapiro, 1993). The experiences of feeling alone and feeling alone while with others are rarely discussed. The latter is discussed only as a variation of feeling alone or it is associated with psychopathologies and psychological aloneness (Adler & Buie, 1979; Cohen, 1991).

Literature and research from the law, sociology, and popular press are not relevant to the researcher's question and methodology. This theoretical literature and research focuses on issues tangential to the purpose of this research on the universal human experience of feeling alone while with others. Also, the perspectives of authors and researchers in these areas are more congruent with a cause-effect, linear perspective (Booth, 1983; Boyd, 1994; Flam, 1994; Moore, 1994; Ochse, 1991; Taslitz, 1993).

The focus of this study is the experience of feeling alone while with others, not the permutations of loneliness. However, as loneliness is used synonymously with feeling alone, the literature on loneliness was explored. Aloneness is accepted and used by the researcher as the noun for feeling alone. The literature selected for this review is limited to psychology, existential philosophy, and nursing.

Psychology Literature

Theoretical Literature

Since 1932 psychological publications on the topic of
feeling alone typically address only painful, distressing loneliness or pathological experiences of loneliness and aloneness (Peplau & Perlman, 1982). When authors do write about the experience of feeling alone, the labels include alone, separate, alienated, isolated, lonesome, lonely, loneliness, solitary, and others. These words are used interchangeably with one another, and in conjunction with other experiential terms meant to differentiate varieties of feeling alone and aloneness. Some authors describe aloneness as a derivative of another psychological phenomenon with an experiential component like depression (Adler, 1993; Andersson, 1986; Barrell, 1988; Bond, 1990/1991; Larson, 1990; Nisenbaum, 1983/1984; Peplau, Russell & Helm, 1979; Pine, 1979; Richman, 1986; Richman & Sokolove, 1992; Russell, 1982; Shear et al., 1993).

The theoretical literature encompasses physical aloneness, psychological aloneness, psychopathologies, depression, loneliness, and nonempirical theoretical papers on psychodynamic precursors of loneliness. Feeling alone while with others surfaces in the literature addressing psychological aloneness and psychopathologies as a variation of feeling alone, as psychological aloneness, or as a symptom of psychopathology (Adler, 1993; Adler & Buie, 1979; Andersson, 1986; Cohen, 1991; Firestone, 1984; Fromm-Reichman, 1959; Henwood & Solano, 1994; Pine, 1979; Sadler, 1978; Yerushalmi, 1992). The literature addresses

Nonempirically derived definitions of aloneness have both positive and negative connotations. These connotations are not paradoxes or rhythms but are dichotomies or occur on a continuum of value judgments ranging from "good" aloneness to "bad" aloneness. Aloneness is viewed in a positive sense as creative separateness, mature aloneness, solitude, or creative aloneness (Adler, 1993; Auger, 1986: Larson, 1990; Yerushalmi, 1992). A negative connotation is assigned to aloneness when it is defined as physical, emotional, psychological, or social alienation, and isolation from self or others. Feeling alone while with others surfaces in the discussion about "bad" aloneness in that it represents emotional, psychological, and social alienation or isolation from others, while being physically present (Adler, 1993; Auger, 1986; Nisenbaum, 1983/1984; Richman & Sokolove, 1992; Shear et al., 1993; Yerushalmi, 1992).

Andersson (1986) distinguishes aloneness from loneliness by defining aloneness as an objective state and loneliness as a subjective state. He identifies three parts to loneliness: (a) emotional estrangement which is a lack of intimacy; (b) social estrangement or the experienced lack of
a relationship to social environment; and (c) existential loneliness which is the inevitability of the human's finiteness. The negative connotation found in Andersson's description of loneliness is typical of the definitions of loneliness in the psychology literature. These types of aloneness can occur while in the presence of others (Bond, 1990/1991; Booth, 1983; Fromm-Reichmann, 1959; Peplau & Perlman, 1982; Richman & Sokolove, 1992; Sadler, 1978; Samter, 1992).

Research Literature

thoughts, and ideas; fantasies and dreams; traits and attributes; and, unconscious motives and thoughts (Anderson & Riger, 1991; Brough, 1994; Joubert, 1990; Richman, 1986; Rubino et al., 1990).

No quantitative studies were conducted on feeling alone while with others, per se. When the phenomenon did surface, it was as a variation of feeling alone or aloneness, or a psychopathology, typically indicative of borderline personalities. The review of representative studies conducted since 1990 demonstrated the emphasis on scales, measurement tools, and hypothesis-testing. These quantitative studies were based on assumptions about cause-effect linear relationships which are not congruent with the researcher's perspective (Boldero & Moore, 1990; Bonner & Rick, 1991; Brough, 1994; Hartschore, 1993; Koenig, Isaacs & Schwartz, 1994; Rotenberg & Morrison, 1993).

Although not congruent with the researcher's methodology, a review of the literature in psychology is incomplete without a brief discussion of the tools used to measure aloneness and loneliness. Tools are either unidimensional or multidimensional. Unidimensional measures view loneliness as a unified phenomenon, varying only in the intensity with which it is experienced. The assumption is that regardless of the particular cause of the experience, there are common themes in the experience of loneliness, therefore the same scale should be sensitive to everyone
Appendix A details the unidimensional scales, number of items, response format, reliability data, and validity data.

Multidimensional measures assume that loneliness is a multifaceted phenomenon and try to differentiate among the various manifestations of loneliness instead of focusing on the commonalities of the experience (Russell, 1982). Appendix B details the multidimensional scales, number of items, response format, reliability data, and validity data. There is no research that clearly indicates that either scale is superior.

The UCLA Loneliness Scale, a unidimensional tool, is the most widely used measure for assessing aloneness in the natural science disciplines. The original scale was revised to resolve potential problems with response bias related to negative social desirability and negatively worded items. The scale has a high internal reliability with a Cronbach's coefficient alpha of .94 (Russell, 1982).

The qualitative research literature that discusses feeling alone while with others is minimal. Three research studies (Barrell, 1988; Nisenbaum, 1983/1984) on feeling alone are relevant to the study of feeling alone while with others as the investigators use a phenomenological approach, and there is reference to feeling alone while with others. The phenomenological perspective focuses on the experience of feeling alone rather than on the causes, characteristics,
or consequences of feeling alone. As Parse's research method is phenomenological, it was believed to be helpful to review phenomenological studies.

Two research studies conducted by Nisenbaum (1983/1984) construct a taxonomy of the structures of aloneness from a phenomenological perspective. Nisenbaum shares some of the beliefs held by Parse in that he believes feeling alone is the individual's chosen personal meaning of a situation thus, an individual's description of the experience is crucial in identifying its structure. Unlike Parse, for Nisenbaum, aloneness is a paradox in which one experiences being without others, yet at the same time is aware of others who are felt to be missing, however that relationship is separate and distinct, not a rhythmical process occurring all at once (Nisenbaum, 1983/1984).

The nine structures of aloneness that arose from Nisenbaum's (1983/1984) first work are used in a second study (Nisenbaum, 1983/1984) with ten normal and ten psychiatric patients to demonstrate that they could be used to reliably classify types of aloneness. Feeling alone while with others is not identified, per se, but can be identified as tangentially related in the situational aspects of five of the nine structures: (a) lack of connectedness to others in a setting; (b) closeness to others as increasing personal vulnerability and possible rejection; (c) singular decision making in times of difficulty; (d) an absent presence; and
(e) lack of affirmation by others (Nisenbaum, 1983/1984). The situational aspects are described in Appendix C.

A third study, conducted by James Barrell (1988), uses a phenomenological approach to discover the thematic structure of the experience of feeling alone. Four themes, each with two subthemes, surface from Barrell’s study. They are: (a) missing (yearning, emptiness); (b) barrier (different, indifferent); (c) vulnerability (supported, unsupported); and (d) freedom (to, from) (Barrell, 1988).

Feeling alone while with others surfaces in the themes of missing, barrier, and vulnerability. In the missing theme, one feels alone while with others when one becomes cognizant that others in the group have the type of relationship that one desires, and that awareness triggers memories of absent relationships and persons. The phenomenon is strong in the barrier theme where one wants to relate to another or others and yet feels separate from others "as if there were a distance between self and others" (Barrell, 1988, p. 123). In the vulnerability theme the experience of feeling alone while with others surfaces in individuals’ descriptions about feeling alone because they feel overwhelmed, helpless, or out of control while with or without others (Barrell, 1988).

Existential Philosophy

Existential philosophy and theology offer perspectives significant for the study of feeling alone while with others
because they address aspects of human experience, such as aloneness, differently from natural scientific literature. The review of existential literature is also important to the research as Parse’s (1987) theory is underpinned by some of the tenets and concepts of existential phenomenology. These include intentionality, human subjectivity, coexistence, situated freedom, and coconstitution.


Feeling alone while with others is not discussed per se, but discussions by Moustakas (1961, 1972) and Tillich (1952, 1963) are representative of the existentialist perspective that surfaces the experience of feeling alone while with others as a type of aloneness. Moustakas (1972) describes aloneness as a chosen state of being that includes the feeling of being alone while with others and the loneliness of solitude which is a peaceful state of being alone with people, nature, and the universe. Tillich (1952, 1963, 1967) describes a sense of feeling alone while with others when writing about facets of loneliness that include the loneliness of those in a crowd who realize the human’s
ultimate isolation, and the loneliness of rejection.

Existentialists focus on how people can live their lives with their aloneness rather than on discovering its causes and how to prevent or relieve it. Moustakas (1961, 1972, 1975) believes that the only way the individual can find hope for harmony and unity is by entering into the loneliness to begin anew. Some existentialists feel that loneliness can be transcended in relationships with others, self or God (Batchelor, 1983; Buber, 1923/1958; Frankl, 1946/1963; MacQuarrie, 1966, 1972; McGraw, 1992; Tillich, 1952, 1963, 1967). In contrast, Sartre (1957) sees interpersonal relationships as the source of aloneness, positing that aloneness is created by the human's recognition that others exist. For many existentialists, both relationship and aloneness, and relationship and loneliness are dichotomies, opposites, rather than paradoxical rhythms that occur all-at-once (Frankl, 1946/1963; MacQuarrie, 1966, 1972; Sartre, 1957; Tillich, 1952, 1963, 1967).

one's destiny to be alone, and to search for meaning by asking why one is alone, and how to triumph over being alone. Frankl (1946/1963) posits that fellow prisoners who sought to be alone with their thoughts were alone, but not lonely, while connecting to their past or imagined futures and valued persons, things, or events. In this aloneness, fellow prisoners were struggling to find meaning in their lives. Frankl believes that human beings can transcend anything in life as long as they can find the meaning that exists, awaiting discovery by the individual.


Tillich (1952) believes that one's freedom to choose a way of being is related to courage. It is "the self affirmation of being in spite of non-being" (Tillich, 1952, p. 86). There are two sides to self-affirmation, courage to be oneself and participation in the power of being. Power is the possibility that one has to actualize oneself against resistance (Tillich, 1952, pp. 87-89). In regard to aloneness, loneliness poses a threat to being. Therefore one has to use one's power by choosing an action, carrying it out and transcending the loneliness to be oneself in spite of non-being (Tillich, 1952).

Batchelor (1983) represents the existentialist perspective that views aloneness as a rhythmical paradox. He posits that all people come to the realization that:

I was alone at birth: I must die alone; and, in a sense, I am always alone, for the gulf separating me from others can never satisfactorily be bridged. . . . I am alone, and yet not alone, for I am together on this planet with trillions of living creatures. . . . How and where can I find a well defined purpose and meaning? (Batchelor, 1983, p. 13)

This aloneness occurs all-at-once with togetherness, not as
a dichotomous relationship (Batchelor, 1983).

Buddhism, Batchelor's answer to his question, is concerned with transformation of the person. The ontological presuppositions of Buddhism include the notion that essential features of human existence are structures of being-alone and being-with. The sense of aloneness is found in light of constant coexistence with others, while acknowledging that humans can only be together with others because humans are at the same time separate and distinct individuals, therefore, "the paradox of being-with and being-alone" (Batchelor, 1983, p. 58).

Batchelor (1983) shares Heidegger's (1927/1972) belief in a restricted freedom of choice in that one's future is filled with possibilities to choose from that are only limited by the structure of the person's actual existence. Within the scope of aloneness, existence is suspended in the space of possibility between birth and death. Batchelor's beliefs also reflect Heidegger's (1927/1972) beliefs about human intentionality and coexistence. The human is in the world in the immediate situation and also has connections to ancestors and potential for the not-yet relationships. The human has freedom to choose how one is in the world. Whenever one makes choices one has available new possibilities (Batchelor, 1983; Heidegger, 1927/1972). Heidegger's beliefs about intentionality and coexistence underpin Parse's theory of human becoming.
Nursing Literature

There are two paradigms in nursing from which the researcher explored feeling alone and feeling alone while with others. These are the totality and the simultaneity paradigms.

Totality Paradigm

The totality paradigm focuses on the natural sciences, and thus, the medical model perspective of humans. This perspective conceptualizes the human as a bio-psycho-socio-spiritual organism, the sum of the parts. Humans adapt and cope as effective responses to changing internal and external environments. Humans are believed to respond in cause-effect patterns so that life processes are predictable, verifiable and controllable. Health is defined by a standard set of norms and outcomes. It is a process of physical, psychological, social, and spiritual well-being which is made better through manipulation of the environment. The goals of nursing are to promote health, prevent illness, and care for the ill (Parse, 1987). This perspective differs significantly from that of the simultaneity paradigm.

Theoretical Literature

Feeling alone,aloneness, and loneliness are used interchangeably in the theoretical literature in the totality paradigm. Although feeling alone while with others
surfaces as one aspect of feeling alone, discussion about it is often unclear or superficial. The literature describes cause-effect relationships, symptoms, and prescriptive interventions when discussing feeling alone while with others, loneliness, feeling alone, and aloneness (Davis, Neuhaus, Moritz & Segal, 1992; Deegan, 1993; Jerome, 1991; Servonsky & Piedrow, 1991). Feeling alone while with others surfaces in descriptions of feeling alone experienced as physical and social isolation as a result of: being ill; being institutionalized; and aging (Deegan, 1993; Helgadottir, 1990; Knowles, 1993; O'Brien & Pheifer, 1993). It is inferred as a way of feeling alone in relationship to other feeling states like anxiety, grieving, and depression, and as a symptom, outcome, or cause of these states (Bergman-Evans, 1994; Ricci, 1991).

Many authors touch on feeling alone while with others in discussing the relationship between loneliness, quality of life, and illness or health (Chen, 1994; Lapuma, 1991; Shearer & Davidhizar, 1993; Yellen, 1993). Feeling alone while with others surfaces in writings by nursing administrators who describe feeling alone and loneliness as social isolation experienced in their practice settings (Cook, Harrah, Howard, Rohr, & Uricheck, 1992; Davidhizar, 1992).

Some authors describe interventions to prevent loneliness and feeling alone without discussing feeling
alone while with others (Davidhizar, & Shearer, 1994; Valente & Aoyoma, 1992). Other authors (Helgadottir, 1990; Wyler, 1989) suggest ways to alleviate the sense of aloneness related to the feeling that no one else can understand an experience or situation lived by another when dealing with a health care problem. This sense of aloneness is sometimes experienced in the presence of others.

Brown (1976, 1984), Tedrow (1991), and Servonsky and Piedrow (1991), explore the experience of loneliness from the perspective of Roy’s adaptation model (1976, 1984; Roy & Andrews, 1991). Feeling alone while with others surfaces in discussions about loneliness in that loneliness can occur in the presence of others. These authors (Brown, 1976, 1984; Servonsky & Piedrow, 1991; Tedrow, 1991) utilize definitions of loneliness linked with developmental theory originating in the works of Sullivan, Fromm-Reichman, Mahler, Bowlby, and Erikson, (as cited in Brown, 1976, 1984; Servonsky & Piedrow, 1991; Tedrow, 1991), who are psychologists and psychiatrists. According to Brown (1976, 1984), Tedrow (1991), and Servonsky and Piedrow (1991), loneliness occurs as a result of decreased adaptive ability when the whole, integrated human being does not have affectational adequacy needs in the interdependence mode met. The nurse’s role is to assess behavioral manifestations of loneliness and initiate interventions to alleviate the loneliness.

Common features of the concept of feeling alone while
with others for authors writing from the totality perspective include: emotional separation from, or lack of connection to, others usually accompanied by a sense of something absent; the experience of either self-renewal or loss of self-esteem; awareness of the experience that could be overt or covert; diminished or increased self-awareness; and freedom from social and personal responsibility as well absence of support in carrying out those responsibilities.

From a totality view, feeling alone while with others can be both a positive experience and a negative experience. It is positive in the sense of providing opportunities for self-renewal and creativity. Feeling alone while with others is negative in the sense of separation, sense of loss of something or someone valued, and unpleasant psychological and physiological responses.

Research Literature

The same themes and features ascribed to feeling alone, feeling alone while with others, and loneliness found in the theoretical literature are found in the research studies of the totality paradigm. There are several studies that investigate loneliness specifically. Feeling alone and aloneness are discussed as synonymous with loneliness but the experience of feeling alone is rarely identified as a phenomenon for study specifically. Feeling alone while with others is never identified as a phenomenon for study. When loneliness and feeling alone are distinguished from each
other, loneliness has negative connotations, while feeling alone has both positive and negative connotations (Coward & Lewis, 1993; Kristensen, 1992; Porter, 1991/1992, 1994; Zack, 1992).

Feeling alone while with others surfaces in research findings as one way of feeling alone related to social or emotional isolation (Astrom, Jansson, Norberg & Hallberg, 1993; Barron, Foxall, Von Dollen, Jones & Shull, 1992, 1994; Foxall, Barron, Von Dollen, Shull & Jones 1994; Keele-Card, Foxall & Barron, 1993; Mahon, Yarcheski & Yarcheski, 1993, 1994). Several studies that investigate loneliness as an outcome of illness, grieving, and long term hospitalization identify feeling alone while with others as one way of experiencing loneliness (Acorn & Bampton, 1992; Hegge, 1991; Proffitt & Byrne, 1993; Westra, 1991). Research conducted on the use of pets to prevent and alleviate loneliness and aloneness supports the belief that feeling alone while with others can occur when something of value is absent, whether that something of value is a person or something else (Calvert, 1989; Chinner & Dalziel, 1991; Parlin, 1992). Although identified in these studies, the experience of feeling alone while with others is never clearly described or discussed in depth.

While some studies on this topic are guided by a nursing theory, most studies are conducted without using any theory, or with a non-nursing theory (Alston, Small &

Two studies that surface feeling alone while with others will be discussed to provide an overview of the research on feeling alone in the totality paradigm. The studies selected for discussion are those conducted by Coward and Lewis (1993), and Kristensen (1992).

Coward and Lewis (1993) conducted non-theory guided qualitative research using Colaizzi's (as cited in Coward & Lewis, 1993) phenomenologic analysis technique to describe the lived experience of self-transcendence in eight gay men with AIDS. Aloneness is discussed in one of the themes that describe how these men transcend self-boundaries related to
what the authors identify as the dichotomy of isolation-connectedness. As the men describe their experiences of being alone, feeling alone while with others surfaces in descriptions about their sense of isolation in the presence of others and in the dichotomy of isolation-connectedness. Coward and Lewis's research is inconsistent with the human becoming theory, and thus, the focus of this researcher's study in that they describe cause-effect relationships, interventions, and goals in the discussion of aloneness.

Kristensen's (1992) phenomenological study on the experience of childhood loneliness is also representative of research in the totality paradigm. No nursing theory guides this study. The study population is a convenience sample of fourteen children ranging in age from eight to ten years old. All children are from middle class, Caucasian families living in midwestern settings. Kristensen conducted tape recorded interviews, asking each child to talk about what it was like to be lonely as a child (Kristensen, 1992).

Data were analyzed using a phenomenological approach moving through three levels of analysis. The second level of analysis resulted in identification of nine themes which compose the experience of aloneness. The themes are: (a) physically alone; (b) circle of boredom; (c) social aloneness; (d) emotional aloneness; (e) loneliness when excluded; (f) existential isolation; (g) intense feeling loneliness; (h) authenticity; and (i) coping (Kristensen,
1992). These themes are congruent with the totality perspective as they compartmentalize the experience of aloneness into social and psychological aspects, relationships are conceptualized as linear, and manipulation of the environment is considered a way to adapt. The experience of feeling alone while with others is inferred in the discussions about social and emotional aloneness and loneliness when excluded.

In the third level of analysis, Kristensen identifies the unity of meaning, which is the universal essence of childhood loneliness, as unhappily disconnected. Kristensen posits that the insights gained from the research enable nurses to care more sensitively for lonely children (Kristensen, 1992).

These and other studies (Alston et al., 1992; Bergman, 1992; Keele-Card et al., 1993; Mahon et al., 1994; Porter, 1994; Pruden, 1991; Zack, 1992) conducted from the totality paradigm reflect a focus on attributes and components of human beings, whether qualitative or quantitative approaches are utilized. There is an emphasis on measurement tools, and hypothesis-testing. Nursing interventions are discussed in almost every study. The assumptions about cause and effect, adaptation, linear relationships, and the human as a divisible being are not congruent with the researcher's perspective. The assumptions underlying the simultaneity paradigm are congruent with the researcher's perspective.
Simultaneity Paradigm

Parse (1981, 1987, 1992, 1994, 1995a) and Rogers (1970, 1980) are two nurse theorists who share the simultaneity perspective, although some of their beliefs differ. They both view the human as a unitary being, and as more than a bio-psycho-socio-spiritual organism. Humans are in mutual rhythmical process with the environment. Health is a value, rather than a state of adaptation or homeostasis. Although Parse’s theory builds on some of Rogers’ (1970, 1980) concepts, Rogers’ science of unitary human beings is not directly congruent with the researcher’s views concerning personal meaning of lived experiences.

Theoretical Literature

Rogers' (1970, 1980) science of unitary human beings describes the human and environment as two energy fields in mutual process with each other. Cause-effect processes are negated in this simultaneous mutual process. Rogers believes that the open energy interchange between human and environment creates unique field patterns by which the individual is recognized. Pandimensionality characterizes the energy fields of human and environment. Primary modes of inquiry are both quantitative and qualitative. The primary mode of practice is through pattern appraisal and deliberate mutual patterning, person with nurse. Nursing diagnoses and interventions are not conceptually congruent with her theory (Parse, 1987; Rogers 1970, 1980).
Parse's (1981, 1987, 1992, 1994, 1995a) theory of human becoming views the human as an open being rather than an energy field. She believes that the various universes the human lives all-at-once are multidimensional rather than pandimensional. Parse believes the person is the expert on health rather than the nurse; the person is respected as knowing his or her way. The meaning of the lived experience and quality of life from the person's perspective are the foci of nursing. The primary mode of inquiry is qualitative and the primary mode of practice is true presence (Parse, 1987, 1992, 1995a). Cause-effect relationships, and prescriptive interventions are conceptually inconsistent with Parse's theory. The assumptions and principles underlying Parse's theory of human becoming and research methodology have been discussed in detail in the nursing perspective section of this dissertation.

Research Literature

Two research studies related to the proposed research and conducted using the theory of human becoming as the conceptual framework and the Parse (1987, 1994, 1995b) research methodology are discussed here. The research methodology is conceptually congruent with the theory of human becoming. Although feeling alone while with others has not been studied per se as a unique phenomenon with the human becoming theory, in each of the following studies feeling alone while with others emerges with aloneness and
loneliness as one side of a paradoxical rhythm.

In a study on grieving, conducted with ten families of persons with AIDS, one of the core concepts that surfaced was "bearing witness to aloneness with togetherness" (Cody, 1995, p. 218). Cody discusses this concept as "the lived reality of simultaneous individuality-communality. This concept encompasses dwelling with and apart from the absent presence and others all-at-once, bearing witness to suffering and 'being there' for loved ones" (Cody, 1995, p. 222). Aloneness is described by participants in the rhythms of the distancing-relating process, anticipating an absent presence, and dwelling with and apart from the absent presence and others. Participants describe multiple, important relationships that are cherished yet painful. Solitude is present in the experiences of the participants as is the rhythm of sharing-not sharing. Each family speaks about the importance of being together, supporting each other, and sharing with each other. Each family member also speaks about a strong pervasive sense of solitude, wherein persons seek time alone to be with their thoughts, and feel they are experiencing something no one else can know about, or experiencing something they have to do alone. The aloneness-togetherness does not occur in a sequential or linear fashion but exists all-at-once as two sides of the same rhythm (Cody, 1995).

Parse believes that the human "is not alone in any
dimension of becoming" (Parse, 1981, p. 20). From Parse's (1981) perspective, "the human coexists with predecessors, contemporaries and successors all-at-once. Aloneness is relative and perspectival; presence is not merely bodily location in space but is intentional; the two are not mutually exclusive" (Cody, 1995, p. 223). Cody posits that bearing witness to aloneness with togetherness is a "way of understanding such paradoxical lived experiences through acknowledging and exploring (rather than explaining away) their very reality" (Cody, 1995, p. 223).

Cody integrates the concept bearing witness to aloneness with the theory of human becoming by identifying the process as communion-solitude. Communion-solitude is related to the paradox of connecting-separating in Parse's second principle of human becoming. Connecting-separating is described as an all-at-once experience of cherished presence with close others and suffering in solitude (Cody, 1991, 1995).

Unlike researchers in the totality paradigm, Cody did not use his findings to identify interventions for families who were grieving; rather, he discussed the findings as developing knowledge of family theory and research using nursing theory. He offered a practice proposition that reflected the essential meaning of the structure of the lived experience of grieving. He believes that through this knowledge the nurse practicing from the human becoming
lived experience of grieving. He believes that through this knowledge the nurse practicing from the human becoming perspective might better understand the meaning of grieving for persons and families.

Daly (1995), in a study on the lived experience of suffering, found that participants speak about suffering as a lonely experience and about feeling lonely even though they are helped by the love and caring of others. One participant describes suffering as a "lonely experience even if you are with supportive others" (Daly, 1995, 251).

Each of the nine participants speaks about being with and apart from others in suffering. Participants also speak about the ambiguity of wanting to be with and be alone all-at-once. Entanglements of engaging-disengaging, one of the three core concepts that emerge in the essences of Daly's study, reflect the paradoxical experience of aloneness and feeling alone while with others. When abstracted through the process of structural integration, this concept becomes "enmeshed in . . . intimacy-solitude", (Daly, 1995, p. 255) while the conceptual interpretation is connecting-separating. The structural and conceptual integration of intimacy-solitude and connecting-separating are consistent with the structural and conceptual integrations that emerge in Cody's (1995) study on grieving.

Other Parse scholars like Davis and Cannava (1995) and Pilkington (1993) surface rhythms in their research that can
descriptions about the patterns of relating of eight retired artists living communally. These descriptions surface the theme of "Communion-solitude enlivens in the diversity of everydayness" (Davis & Cannava, 1995, p. 12). The experience of feeling alone while with others surfaces in participants' descriptions about feelings of remoteness and diminishing opportunities for communicating that sparked a search for new ways of relating with others; in wanting closeness and privacy simultaneously; and in describing an unwillingness to share personal intimacies while partaking in kindred interests with others. The paradox of communion-solitude reflected this aloneness-togetherness.

In Pilkington's study on grieving the loss of an important other with mothers who miscarried, feeling alone while with others arises when participants speak about the loneliness that hurts, and

times of solitude mingled with times of communion as participants talk about being with and distancing themselves from the lost child and other people while paradoxically drawing closer, in living the grieving experience. (Pilkington, 1993, p. 133)

Pilkington moves the core concept of "consoling movements away from and together with the lost one and others" up levels of abstraction to "engaging-disengaging with the absent presence and others" (Pilkington, 1993, p. 133 &
Pilkington (1993) and Davis and Cannava (1995) discuss feeling alone and lonely in terms of communion-solitude; alone-yet-not-alone; and communion-aloneness. At the higher level of abstraction, these concepts are connecting-separating from Parse's second principle.

The review of the theoretical and research literature in the simultaneity paradigm touched on the notion of feeling alone while with others as a lived experience. Feeling alone while with others surfaced as one side of a paradoxical rhythm in themes that emerged from studies conducted using the Parse research methodology. In these studies, the conceptual integration of the paradoxical rhythm as connecting-separating is consistent.

**Summary**

The theoretical and research literature in psychology and the totality paradigm of nursing represent the natural science tradition. Feeling alone while with others surfaces only as a variation of feeling alone, a psychopathology, or a social, psychological or emotional isolation. The experience of feeling alone while with others is discussed in terms of cause and effect relationships, linear relationships, coping, prescriptive interventions, adaptation, and the human being as a divisible entity. The perspective of the natural science tradition is not congruent with the researcher's perspective.

The assumptions underpinning the beliefs of the
existential authors are different from those of the natural science tradition, thus their works provide a vision of human experiences that is not accessible through the works of natural scientists. Aloneness is a fundamental human condition. Feeling alone while with others surfaces as a type of aloneness. For the existentialists, freedom, choice, intentionality, and responsibility, are recurrent themes that also underpin the assumptions of the human becoming theory.

Parse's human becoming theory of nursing, originating within the simultaneity paradigm, is congruent with the researcher's perspective. Although not identified as the phenomenon for study, feeling alone while with others surfaced as one side of a rhythmical paradox related to aloneness in several studies conducted with the human becoming theory and research methodology. The conceptual integration of the paradoxical rhythm as connecting-separating is consistent in these studies. Thus, theoretical and research literature in the simultaneity paradigm supports the researcher's use of Parse's theory of nursing and research methodology in conducting this study. A detailed discussion of Parse's research methodology is presented in Chapter III.
CHAPTER III
PARSE'S RESEARCH METHODOLOGY

Parse's (1987, 1992, 1994, 1995b) research methodology was chosen for the study of feeling alone while with others for two reasons: (a) it is congruent with the perspective of the researcher; and (b) it is the method of choice to answer the research question. A description of the background of the method and the processes of the method are presented in this chapter. Issues related to rigor and credibility are also discussed.

Background of the Method

Prior to the development of the human becoming research methodology, nursing research related to the theory was conducted using a variety of borrowed research methodologies. These methodologies included phenomenology, ethnography, and descriptive exploratory methods (Parse, Coyne, & Smith, 1985). Parse's (1987) distinct research methodology, specific to nursing and congruent with the ontological base of the discipline, was developed to investigate universal lived experiences. Distinct methods of inquiry congruent with ontological bases of the discipline are characteristic of a mature discipline. Research that
refines or adds to those methods of inquiry should be conducted. This research made a contribution to nursing science using the human becoming research methodology.

The human becoming theory of nursing is grounded in the human sciences. The methodology is "generically phenomenological in that the entities for study are experiences as described by people who have lived them" (Parse, 1995b, p. 153). Parse concurs with the beliefs of Heideggerian phenomenologists about bracketing. They believe that bracketing, setting aside one's beliefs, is not possible or desirable as a way of coming to know the world. Rather, it is one's being-in-the-world, one's history and one's relationships with others that make an understanding of the world possible (Barrett, 1958; Heidegger, 1927/1972; Kaufmann, 1975; Parse, 1981). The methodology is a hermeneutic method in that inquiry from the human becoming perspective focuses on uncovering the meaning of the lived experience of health through its central processes of interpretation and understanding (Parse. 1995b).

**Description of the Method**

Parse (1987) followed the principles of methodological construction that she derived from Kaplan and Sondheim, (as cited in Parse, 1987) and considered the essentials of the basic assumptions and principles of the theory of human becoming in constructing the research methodology. The principles of methodological construction insured that:
The basic assumptions underlying Parse's (1992) research method are:

1. Humans are open beings in mutual process with the universe.
2. Human becoming is uniquely lived by individuals. People make reflective and prereflective choices in connection with others and the universe which incarnate their health.
3. Descriptions of lived experiences enhance knowledge of human becoming. Individuals and families can describe their own experiences in ways that shed light on the meaning of health.
4. Researcher-participant dialogical engagement uncovers the meaning of phenomena as humanly lived. The researcher in true presence with the participant can elicit authentic information about the lived experiences.
5. The researcher, through inventing, abiding with logic, and adhering to semantic consistency during
the extraction-synthesis and heuristic interpretation processes, creates structures of lived experiences and weaves the structure with the theory in ways that enhance the knowledge of nursing. (Parse, 1992, p. 41)

The research methodology emerging from these assumptions is one that clearly values the cocreated personal meaning given to situations by human beings. The descriptions of lived experiences from the perspectives of the individuals and families shed light on the meaning of health. The researcher being in true presence with participants as a way of eliciting the descriptions is congruent with the perspective that the researcher does not intervene, or act as expert while with the participants. The assumptions of the method are reflected in the unique heuristic interpretation that connects the structure of the lived experience under study to the theory to enhance nursing knowledge.

**Purpose of the Method**

The purpose of the Parse research method is to "uncover the structure of lived experiences with persons or groups who can articulate the meaning of an experience" (Parse, 1992, p. 41). This study uncovered the structure of the lived experience of feeling alone while with others for persons living the phenomenon.
Processes of the Method

The processes of the human becoming research method occurred simultaneously as the study emerged. Each process is discussed separately to assist in the understanding of the research. The processes are: (a) participant selection; (b) dialogical engagement; (c) extraction-synthesis; and (d) heuristic interpretation (Parse, 1987, 1992, 1994, 1995b).

Participant Selection

Participant selection is the process of inviting persons to participate who can give an authentic account or description of the lived experience of feeling alone while with others. Those descriptions could take the form of words, drawings, symbols, metaphors, and the like (Parse, 1987, 1995b).

Parse (1987; Daly, 1995) considers two to ten persons an adequate sample size as such a sample size will probably achieve redundancy. Ten adult volunteers who had experienced the loss of a significant other participated in this study. There was no time requirement related to when the loss of the significant other occurred. Participants had experienced the loss of their significant others as recently as one year ago and as long as 14 years ago. Participants were free to discuss any life situation where they experienced feeling alone while with others.

The three men and seven women who participated ranged
in age from 24 to 70. All participants were able to understand, read, and speak English. They spent 10 to 57 minutes with the researcher, depending on how long they wanted to speak. All agreed to have their conversations tape recorded. Participants were identified through hospital personnel, widow and widower support groups, and direct contact with the researcher who practiced in a hospital setting. Each dialogical engagement was conducted in a private area mutually agreed upon by the participant and the researcher. Settings included private meeting rooms in the local library and hospital, a cafeteria, and two participants' homes.

Human Subjects' Protection

Approval was received from Loyola University's Institutional Review Board (LUIRB) before undertaking the research. Participation was voluntary. The researcher made nine of the initial contacts with participants via phone and one in person. The researcher provided an explanation of the study and what was required of persons as participants during the initial contact. The time and location for audiotaping the dialogical engagement were agreed upon. At the time of the meeting a letter explaining the study was given to all participants (Appendix D).

All participants signed a consent form (Appendix E) prior to participating in the study. The consent form included the purpose of the research, the process of data
gathering through dialogical engagements, the rights of the participants to have all questions or concerns about the research answered, and the freedom of the participants to withdraw from the research study at any time without consequence.

Anonymity and confidentiality were guaranteed during conversations with potential participants and in the consent form. To ensure confidentiality and anonymity, names were changed in the transcriptions. Transcripts and audiotapes were identified by numbers assigned to the participants. The transcripts and audiotapes were kept in a locked file cabinet and erased after completion of the study.

Dialogical Engagement

Dialogical engagement is another process in the human becoming research methodology. Dialogical engagement is a researcher-participant true presence. The intent of being in true presence in research is to uncover the structure of universal lived experiences to add to the knowledge base of nursing. Prior to being with the participant, the researcher dwelled with the meaning of the lived experience and created some "dialogue directional ideas" (Parse, 1987, p. 176), which were not questions. The dialogue directional ideas are "a sense of the ideas to be shared in centering the discussion on the entity as lived by the participants" (Parse, 1987, p. 176). Each participant is asked to describe to the researcher an experience of the phenomenon being
studied. The only guiding to be done by the researcher is to keep the participant focused on the experience. Dialogues are audiotaped and transcribed to printed copy (Parse, 1987, 1992, 1995b).

The researcher in this study began the dialogical engagement by asking participants to "talk with me about feeling alone while with others." Only statements like "can you tell me how that relates to feeling alone while with others?" or "can you tell me what that was like for you?" were used to gain clarity from the participant. This was consistent with the process of dialogical engagement as described by Parse (1987, 1992, 1995b).

**Extraction-Synthesis**

Extraction-synthesis as described by Parse (1987, 1992, 1995b) is the process of moving the descriptions from the concrete level of the participant's language to the abstract level of science. The researcher immersed self in the transcribed dialogical engagements while listening to the tapes simultaneously. Five major processes occurred simultaneously in extraction-synthesis. Essences were identified and expressed clearly and succinctly in the participant's language. These essences were conceptualized and articulated in the researchers's language at a more abstract level. Propositions were created from the essences of each participant's dialogue. Core concepts were identified through dwelling with the propositions from all
participants. A structure that answered the research question was generated from the core concepts.

**Heuristic Interpretation**

Heuristic interpretation (Parse, 1987, 1992, 1995b) for this study on feeling alone while with others intertwined the structure with the theory and beyond. The structure of this lived experience was connected to the theory of human becoming through interpretation at higher levels of abstraction. Through structural integration the researcher moved the structure of the lived experience to the next level of abstraction. Through conceptual interpretation the researcher connected the structure of the lived experience with the concepts from the principles of the human becoming theory, forming a specific theoretical structure. The processes of structural integration and conceptual interpretation created new possibles for research and practice.

**Rigor and Credibility**

Burns (1989) describes five standards to ensure scientific rigor. The five standards are: (a) descriptive vividness; (b) methodological congruence; (c) analytic preciseness; (d) theoretical connectedness; and (e) heuristic relevance.

Descriptive vividness requires a clear, context specific description of the research that gives the reader a
picture of the whole of the research study, "a sense of personally experiencing the event" (Burns, 1989, p. 48). The researcher ensured descriptive vividness by using language that was as close to the participants' words as possible when stating the essences that emerged from the process of extraction-synthesis. The process was facilitated through dwelling with the audiotapes and transcriptions of each dialogical engagement.

Methodological congruence describes a congruence between metatheory and the research methodology. This congruence can occur only when the reviewer has knowledge of the methodology and theory used to conduct the research (Burns, 1989). The researcher in this study provided information about Parse's human becoming theory and research methodology as part of the study content. Also, a dissertation committee was formed to guide and review all the processes of the study, the study findings, and the content of the written report describing those processes and findings. The committee consisted of the nurse theorist who developed the human becoming theory and research methodology, and two experts who had worked with families who experienced the loss of a significant other. All were experienced in qualitative research, manuscript writing, and editing.

Burns (1989) discusses four dimensions within methodological congruence. Rigor in documentation, the first
dimension, requires the researcher to document all the elements of the research. The elements of the research include the following:

phenomenon, purpose, research question, justification of the significance of the phenomenon, identification of assumptions, identification of metatheories, researcher credentials, the context, role of the researcher, ethical implication sampling and subjects, data-gathering strategies, data analysis strategies, theoretical development, conclusions, implications and suggestions for further study and practice and a literature review. (Burns, 1989, p. 48)

The written report of this research addressed each of these issues.

The second dimension in methodological rigor is procedural rigor (Burns, 1989). To ensure procedural rigor, the researcher was careful to follow the processes of the human becoming research methodology. To ensure the accurate recording of all information the researcher personally transcribed all audiotapes verbatim. The audiotapes were compared to the transcribed text for accuracy. That process also ensured that the reported data accurately reflected the research data in its entirety.

Ethical rigor, the third dimension, was addressed in several ways. A detailed discussion of this is provided in
the discussion of the processes of the method related to "Human Subjects' Protection".

Auditability is the fourth dimension of methodological rigor. Auditability requires that a "researcher must report all of the decisions involved in the transformation of data to the theoretical schema", (Burns, 1989, p. 49). Documentation has to be thorough enough so a reviewer or other researcher can reach the same conclusions using the original data and the written decision trail. Auditability in this research study was supported in two ways: (a) through detailed methodological notes kept by the researcher, and (b) the nurse scientist who developed the theory and research methodology guided the study with other experienced researchers.

Rodgers and Cowles (1993) echo Burns (1989) standard of analytic preciseness in all phases of analysis. Rodgers and Cowles believe that all "analysis sessions and their outcomes ... regardless of how trivial or even completely unrelated it may seem at the time, should be immediately and comprehensively recorded to insure a rigorous analysis" (Rodgers & Cowles, 1993, p. 222). Analytical preciseness was insured in this research through: (a) thorough recording of thoughts, insights, and questions occurring throughout the process of extraction-synthesis; (b) being careful to reflect the meaning shared by participants while moving the ideas across levels of abstraction; and (c) the review of
the extraction-synthesis process by the three-member dissertation committee.

The fourth standard discussed by Burns (1989), that of theoretical connectedness, was ensured in this study by the detailed review of the three-member dissertation committee. The committee insured that the connection with Parse's human becoming theory developed from the study was expressed clearly, in a manner that was "logically consistent, reflective of the data, and compatible with the knowledge base of nursing" (Burns, 1989, p. 50).

Heuristic relevance is the fifth standard described by Burns (1989). For a study to have heuristic relevance, the reader has to be able to identify: (a) the phenomenon described in the study; (b) the theoretical significance; (c) the applicability to nursing practice situations; and (d) its influence in research activities. Intuitive recognition, relationship to existing body of nursing knowledge and applicability are the three dimensions of heuristic relevance. Intuitive recognition was satisfied in this study when the committee members could identify the phenomenon and its theoretical perspective. The researcher assisted in intuitive recognition by clearly defining and describing the experience of feeling alone while with others and its connection to the human becoming theory and research methodology. Findings were discussed in relation to the extant theoretical and research literature on the
phenomenon. New understandings of the experience, the study findings, were related to nursing in the areas of theory development and research. This satisfied the criterion of applicability.

Summary

Parse's theory of human becoming, a unique human science theory with a congruent research methodology, is consistent with the researcher's perspective. Feeling alone while with others is viewed as a universal lived experience, an entity appropriate for study with Parse's methodology. The research conducted to uncover the structure of this lived experience, using a research methodology unique to nursing, enhanced nursing science by adding to the knowledge base of the human becoming theory and research methodology.
CHAPTER IV
PRESENTATION OF FINDINGS

The findings of the study, using the Parse research method, are presented in this chapter. The findings surfaced from the dialogical engagements with the three men and seven women who volunteered to speak with the researcher about feeling alone while with others.

Through the process of extraction-synthesis, essences from the dialogical engagements were expressed clearly and succinctly in the participants' language. These essences are the central ideas found in each person's description related to the experience of feeling alone while with others. The meaning of each extracted essence was conceptualized and articulated at a more abstract level in the researcher's language. Propositions that joined the central ideas about feeling alone while with others in the language of science were created from the essences of each participant's dialogue. The essences and propositions for all ten participants are presented first followed by the core concepts. The core concepts are identified through dwelling with the propositions from all participants. These are the central ideas of the propositions. The structure of the experience of feeling alone while with others, the answer to
the research question, was generated from joining the core concepts.

The heuristic interpretation of the findings is presented in the final section of this chapter. This includes structural integration and conceptual interpretation which link the structure with the language and concepts of the human becoming theory.
Participant One

Essences: The Participant’s Language

1. For the participant, feeling alone while with others is like an anxiety attack mixed with feelings of sadness, anger, and uselessness, that washes over her from head to toe. Even around people who care, she doesn’t know who will help her and what will happen; sounds become muted, all things become in the distance, and she cannot hear, as if all has faded out, and although she can still do things she is different inside and she knows that nobody else knows.

2. The participant says it is nearly unbearable when others do not acknowledge her, when she is with persons she does not want to be with, and when she is with persons or in places that remind her of her deceased husband, so she makes herself known, or escapes to a place of safety to separate herself from uncomfortable feelings.

Essences: The Researcher’s Language

1. Enveloping angst erupts with a misty remoteness with unsure options as recognition of diversity arises amidst an inaccessible facade.

2. Insufferable engagements of disregard with recollections of the cherished surface a flight for solace.

Proposition

Feeling alone while with others is enveloping angst erupting with a misty remoteness with unsure options, as recognition of diversity arises amidst an inaccessible facade, while insufferable engagements of disregard with recollections of the cherished surface a flight for solace.
Participant Two

Essences: The Participant’s Language

1. The participant is frightened knowing she looks at the world in a different way and she believes that no one else understands her experience, and that no close other is there to help her through difficult times, even with the most intimate relationships, yet she relies on a close other to be present during difficult times and has to build bridges so she is not so alone.

2. The participant says she struggles between risking telling of her personal life, which those who matter do not want to hear, and escaping with shame, yet the struggle gives her hope to become fully integrated with important others as she seeks validation in different ways.

3. The participant says that its real hard and energy-draining for her with new situations and new others as she feels awfully tangled up, awkward, and embarrassed, and is jealous of the people who do not seem to be going through the same bumbling.

Essences: The Researcher’s Language

1. A daunting recognition of companionless diversity arises with the confident promise of engaging-disengaging.

2. The ambivalence of disclosing-not disclosing arises with fleeing-not fleeing with dishonor while anticipating new possibilities.

3. Exhausting turmoil surfaces with the unaccustomed amidst a coveted apparent calm.

Proposition

Feeling alone while with others is a daunting recognition of companionless diversity arising with the confident promise of engaging-disengaging, as the ambivalence of disclosing-not disclosing while fleeing-not fleeing with dishonor emerges with the anticipation of new possibilities, as an exhausting turmoil surfaces with the unaccustomed amidst a coveted apparent calm.
Participant Three

Essences: The Participant's Language

1. Feeling alone while with others occurred with the struggle of major life transition as the participant realized he was in a different spot and cognizant of different things, and even close others could not fully understand. It was as if he was in a dream distanced from others by smoke; he had a sense of void as he was able to mask his emotions so that all others saw him as in sync with them.

2. For the participant feeling alone while with others is a frightening vulnerability with a desire to run away even while knowing he needs to find close others to reconnect with and to move on from his current situation.

Essences: The Researchers's Language

1. Recognition of diversity arises with an enveloping hazy remoteness amidst the veiled desires of clashing possibilities.

2. Harrowing threat erupts with yearning for flight in the engaging-disengaging of shifting with the new.

Proposition

Feeling alone while with others is an enveloping hazy remoteness in the recognition of diversity amidst the veiled desires of clashing possibilities, as a harrowing threat erupts with a yearning for flight in the engaging-disengaging of shifting with the new.
Participant Four

Essences: The Participant's Language

1. The participant feels alone while with others, when she knows she is different from others and no one knows what is stewing inside her; when she does not get support or acknowledgement of herself and all that she has accomplished.

2. The participant says she becomes very angry and vulnerable as feeling alone while with others is very painful, frustrating and aggravating, like a black hole of abandonment inside her that she needs to fill.

3. With others, the participant knows she has to be self sufficient and seeks protection as she puts on a mask that shuts out others so all they see is that she is handling things well; she tries to decide what she can and cannot put up with while feeling like she's putting in too much and getting burned.

Essences: The Researcher's Language

1. An undisclosed recognition of diversity arises amidst disregard.

2. Wrathful turmoil erupts with threat amidst a vacuous forsakenness compelling a desire for fulfillment.

3. Deliberate pursuit of refuge with a remote disguise of confidence arises with unclear ambivalence of options for engaging-disengaging.

Proposition

Feeling alone while with others is the undisclosed recognition of diversity amidst disregard as deliberate pursuit of refuge with a remote disguise of confidence arises with the unclear ambivalence of options for engaging-disengaging, while a wrathful turmoil of vacuous forsakenness compels a desire for fulfillment.
Participant Five

Essences: The Participant's Language

1. The participant feels alone while with others when she thinks about the death of a loved one and intimate times that no one else knows about nor understands and she wishes for understanding.

2. The participant would like to share with others and thinks she cannot because people might think she's an idiot while she finds sharing with close others makes a difference.

3. The participant says it is very difficult and she feels out of control and helpless, wishing she knew what to do while wanting to run away and she avoids persons and places that remind her of absent others and covers up by doing other things while basic faith gets her through.

Essences: The Researcher's Language

1. Recollections of the cherished surface amidst longing for a mutual recognition.

2. Options surface with the ambivalence of disclosing-not disclosing amidst potential disregard.

3. A burdensome floundering erupts with a yearning to flee the familiar amidst a facade of engaging-disengaging with sustaining conviction.

Proposition

Feeling alone while with others is a longing for mutual recognition as recollections of the cherished surface options with the ambivalence of disclosing-not disclosing amidst potential disregard, as a burdensome floundering with a yearning to flee the familiar in the facade of engaging-disengaging sustains conviction.
Participant Six

Essences: The Participant's Language

1. The participant feels a torrent of extreme anger, hurt, and fear and feels isolated from others; she withdraws rather than risking abandonment, yet knows that trusted others help and would not abandon her.

2. The participant goes on with her life while thinking about lost intimate relationships; she comes to understand what her unique personal experiences with lost others means, and that they are still a part of who she was and is, and they will always be with her.

3. For the participant feeling alone while with others is a frustrating struggle of wanting to share and choosing not to, yet being careful in confiding to others who care.

Essences: The Researcher's Language

1. An inundating turmoil with deliberate enveloping remoteness of retreat arises with the threat of forsakeness amidst the confident possible of engaging-disengaging.

2. Recollections of the cherished surface recognition of the uncommon with a lingering presence.


Proposition

Feeling alone while with others is an inundating turmoil with a deliberate enveloping remoteness of retreat that arises with the threat of forsakeness amidst the confident possible of engaging-disengaging, while the burdensome ambivalence of yearned for disclosing-not disclosing emerges with caution, as recollections of the cherished surface recognition of the uncommon with a lingering presence.
Participant Seven

Essences: The Participant’s Language

1. For the participant feeling alone while with others is very hard, stressful, and sad, and she feels like she is on a treadmill, yet it is normal and healthy and makes her a stronger person.

2. The participant says that feeling alone while with others is drifting away from the talk about things she is not a part of, while she says she withdraws less and realizes she can do whatever it takes to do what she wants.

3. The participant says that feeling alone while with others occurs during traumatic times, remembering her deceased mother, and knowing she and close others cannot know or share all they experience, while she says that what gets her through is being with others who understand that they do not know, yet can support her.

Essences: The Researcher’s Language

1. A tedious turmoil surfaces with familiar fortifying sustenance.

2. An insulating remoteness surfaces with deliberately retreating—not retreating in engaging–disengaging with the confident promise of perseverance.

3. Harrowing moments of private recollections of the cherished surface with recognition of diversity amidst the ambiguity of disclosing—not disclosing.

Proposition

Feeling alone while with others is an insulating remoteness that arises with deliberately retreating—not retreating in engaging–disengaging with the confident promise of perseverance, as a tedious turmoil surfaces with a familiar fortifying sustenance with the recognition of diversity, while the ambiguity of disclosing—not disclosing emerges with harrowing moments of private recollections of the cherished.
Participant Eight

Essences: The Participant’s Language

1. The participant says that feeling alone while with others is knowing she looks at things in a different way than everybody else and knows things that they don’t and she does not tell.

2. The participant says it is healthy and okay when she feels alone while with others when she is reflecting inward on actions and expectations she had for self and others while thinking about what she will change. She is uncomfortable and really does not like it when she doesn’t know if she has the same expectations for herself that others have, and drifts off into this place where nobody else is.

3. The participant said that feeling alone while with others was a hard, weighty, responsibility and a difficult struggle to make the right decisions. She said she was oblivious to what everybody else was saying or doing, yet some decisions were made with family.

Essences: The Researcher’s Language

1. Recognition of diversity surfaces with disclosing-not disclosing.

2. Contentment with insightful contemplation of the new arises with an insulating remoteness of deliberate retreat amidst the loathsome unease.

3. An exhausting burdening constraint erupts with engaging-disengaging in the turmoil of embracing unsure possibilities.

Proposition

Feeling alone while with others is contentment with insightful contemplation of the new that arises with the insulating remoteness of deliberate retreat with the disclosing-not disclosing of recognized diversity, as engaging-disengaging in the turmoil of embracing unsure possibilities surfaces with an exhausting burdening constraint amidst the loathsome unease.
Participant Nine

Essences: The Participant's Language

1. The participant says that he feels alone while with others when nobody understands, and when he is in situations or places with couples that accentuate the loss of his wife, reminding him that he is by himself, with nobody to love. He wonders why this is happening to him and turns inward, and to God, asking to be healed by having someone to be with. He does not want to socialize, and when in situations where he has to, he tries yet cannot force himself to talk and he runs away.

2. Feeling alone while with others occurs as the participant knows he looks at things differently than others do, knowing what he wants with his life, how he wants to accomplish it, and that it may not happen. He feels held back, miserable, unable to cope, envious of others, angry that he has no control over his situation, and it is very painful.

Essences: The Researcher's Language

1. Insulating recollections of the cherished emerge with insightful queries of solemn contemplation with disclosing-not disclosing in the flight of engaging-disengaging.

2. Recognition of diversity with the unsureness of prized anticipations of new ways of being surface amidst covetous ire-filled constraint.

Proposition

Feeling alone while with others is the recognition of diversity with insulating, covetous ire-filled constraint that arises in the flight of engaging-disengaging, as the unsureness of prized anticipations of new ways of being surface with the recollections of the cherished that emerge with disclosing-not disclosing in the quiet moments of solemn contemplation.
Participant Ten

Essences: The Participant's Language

1. The participant says that he feels alone while with others as he knows he looks at things from his own unique perspective when remembering deceased others and when with close others who do not understand his world, when he feels alienated from others and self, when he cannot tell others what he is thinking, and when no one wants to listen; yet the participant says that others' caring concern makes a difference and he would still be spinning his wheels if it were not for three intimate others who understand and God.

2. The participant says that when he was feeling alone while with others it was painful and feelings of anger and terrible frustration were rolling around inside him; yet sometimes it felt good to not be a part of the mayhem of the crowd.

Essences: The Researcher's Language

1. Recognition of diversity with an insulating remoteness of estrangement arises in disclosing-not disclosing with the unsure promise of engaging-disengaging.

2. An agonizing turmoil of vexing ire emerges with comfort-discomfort in moments of flight.

Proposition

Feeling alone while with others is the recognition of diversity with an insulating remoteness of estrangement that arises in disclosing-not disclosing with the unsure promise of engaging-disengaging, as comfort-discomfort in moments of flight emerges with an agonizing turmoil of vexing ire.
Propositions

1. Feeling alone while with others is enveloping angst erupting with a misty remoteness with unsure options, as recognition of diversity arises amidst an inaccessible facade, while insufferable engagements of disregard with recollections of the cherished surface a flight for solace.

2. Feeling alone while with others is a daunting recognition of companionless diversity arising with the confident promise of engaging-disengaging, as the ambivalence of disclosing-not disclosing while fleeing-not fleeing with dishonor emerges with the anticipation of new possibilities, as an exhausting turmoil surfaces with the unaccustomed amidst a coveted apparent calm.

3. Feeling alone while with others is an enveloping hazy remoteness in the recognition of diversity amidst the veiled desires of clashing possibilities, as a harrowing threat erupts with a yearning for flight in the engaging-disengaging of shifting with the new.

4. Feeling alone while with others is the undisclosed recognition of diversity amidst disregard as deliberate pursuit of refuge with a remote disguise of confidence arises with the unclear ambivalence of options for engaging-disengaging, while a wrathful turmoil of vacuous forsakenness compels a desire for fulfillment.

5. Feeling alone while with others is a longing for mutual recognition as recollections of the cherished surface options with the ambivalence of disclosing-not disclosing amidst potential disregard, as a burdensome floundering with a yearning to flee the familiar in the facade of engaging-disengaging sustains conviction.

6. Feeling alone while with others is an inundating turmoil with a deliberate enveloping remoteness of retreat that arises with the threat of forsakenness amidst the confident possible of engaging-disengaging, while the burdensome ambivalence of yearned for disclosing-not disclosing emerges with caution, as recollections of the cherished surface recognition of the uncommon with a lingering presence.

7. Feeling alone while with others is an insulating remoteness that arises with deliberately retreating-not retreating in engaging-disengaging with the confident promise of perseverance, as a tedious turmoil surfaces with a familiar fortifying sustenance with the
recognition of diversity, while the ambiguity of disclosing-not disclosing emerges with harrowing moments of private recollections of the cherished.

8. Feeling alone while with others is contentment with insightful contemplation of the new that arises with the insulating remoteness of deliberate retreat with the disclosing-not disclosing of recognized diversity, as engaging-disengaging in the turmoil of embracing unsure possibilities surfaces with an exhausting burdening constraint amidst the loathsome unease.

9. Feeling alone while with others is the recognition of diversity with insulating, covetous ire-filled constraint that arises in the flight of engaging-disengaging, as the unsureness of prized anticipations of new ways of being surface with the recollections of the cherished that emerge with disclosing-not disclosing in the quiet moments of solemn contemplation.

10. Feeling alone while with others is the recognition of diversity with an insulating remoteness of estrangement that arises in disclosing-not disclosing with the unsure promise of engaging-disengaging, as comfort-discomfort in moments of flight emerges with an agonizing turmoil of vexing ire.
Core Concepts

Three core concepts are evident in the ten propositions. The core concepts are: recognition of diversity amidst an exhausting turmoil, disclosing-not disclosing in flight for solace, and ambiguous possibilities in engaging-disengaging.

Recognition of Diversity Amidst an Exhausting Turmoil

Participant:
1. enveloping angst ... with recognition of diversity
2. daunting recognition of diversity ... exhausting turmoil
3. recognition of diversity ... harrowing threat
4. recognition of diversity ... wrathful turmoil ...
5. mutual recognition ... burdensome floundering
6. inundating turmoil ... recognition of the uncommon
7. tedious turmoil ... a familiar fortifying sustenance ... recognition of diversity ... harrowing moments
8. recognition of diversity ... turmoil ... an exhausting burdening constraint
9. recognition of diversity ... ire-filled constraint
10. recognition of diversity ... agonizing turmoil of vexing ire
Disclosing-Not Disclosing in Flight for Solace

Participant:
1. misty remoteness ... inaccessible facade ...
flight for solace
2. disclosing-not disclosing ... fleeing-not fleeing
3. enveloping hazy remoteness ... the veiled ...
yearning for flight
4. the undisclosed ... deliberate pursuit of refuge ... in a remote disguise
5. disclosing-not disclosing ... yearning to flee ...
... the facade
6. with the deliberate enveloping remoteness of retreat ... disclosing-not disclosing ...
7. insulating remoteness while deliberately retreating-not retreating ... disclosing-not disclosing
8. insulating remoteness of deliberate retreat ...
with the disclosing-not disclosing
9. insulating ... arising in the flight ...
disclosing-not disclosing
10. insulating remoteness ... the disclosing-not disclosing ... in moments of flight

Ambiguous Possibilities in Engaging-Disengaging

Participant:
1. ... unsure options ... insufferable engagements of disregard
2. confident promise of engaging-disengaging ...
ambivalence ... anticipation of new possibilities ...
the unaccustomed ... apparent calm
3. desires of clashing possibilities ... engaging-
disengaging of shifting with the new
4. amidst disregard ... with unclear ambivalence of
options for engaging-disengaging ... vacuous
forsakeness compels a desire for fulfillment
5. longing for ... options ... ambivalence ...
potential disregard ... engaging-disengaging sustains
conviction
6. threat of forsakenness ... confident possible of
engaging-disengaging ... ambivalence ... with caution
... the uncommon
7. engaging-disengaging with the confident promise ...
fortifying sustenance ... ambiguity
8. contemplation of the new ... engaging-disengaging
... unsure possibilities ... loathsome unease
9. engaging-disengaging ... unsureness of prized
anticipations of new ways of being
10. estrangement ... with the unsure promise of
engaging-disengaging ... comfort-discomfort
Structure of the Lived Experience

Feeling alone while with others is the recognition of diversity amidst an exhausting turmoil, as the disclosing-not disclosing in flight for solace arises with the ambiguous possibilities in engaging-disengaging.

Heuristic Interpretation

<table>
<thead>
<tr>
<th>Core Concepts</th>
<th>Structural Integration</th>
<th>Conceptual Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognition of diversity amidst an exhausting turmoil</td>
<td>Discerning distinctiveness in the arduous tumult</td>
<td>Imaging Powering</td>
</tr>
<tr>
<td>Disclosing-not disclosing in flight for solace</td>
<td>Divulging-not divulging in the quest for sanctuary</td>
<td>Revealing-Concealing</td>
</tr>
<tr>
<td>Ambiguous possibilities in engaging-disengaging</td>
<td>Certainty-uncertainty in communion-solitude</td>
<td>Originating in Connecting-Separating</td>
</tr>
</tbody>
</table>

Structural Integration

Feeling alone while with others is a discerning distinctiveness in the arduous tumult of divulging-not divulging in the quest for sanctuary surfacing with certainty-uncertainty in communion-solitude.

Conceptual Interpretation

Feeling alone while with others is imaging powering in revealing-concealing the originating in connecting-separating.
CHAPTER V

DISCUSSION OF FINDINGS

The phenomenon of interest in this study was the universal lived experience of feeling alone while with others. The research question was "What is the structure of the lived experience of feeling alone while with others?" Guided by Parse's theory of human becoming, the researcher explored the lived experience with ten persons between the ages of 24 and 70. The structure of the phenomenon that emerged from the dialogical engagements answered the research question. The structure was: feeling alone while with others is the recognition of diversity amidst an exhausting turmoil, as the disclosing-not disclosing in flight for solace arises with the ambiguous possibilities in engaging-disengaging.

Findings of the research are discussed in relation to the significance of the study for advancing nursing science which includes contributions to: (a) nursing knowledge by enhancing the human becoming theory and research methodology; (b) the general understanding of the lived experience of feeling alone while with others; and (c) nursing practice for nurses who strive to be in true presence with persons in situations where they feel alone.
while with others. Core concepts of the structure are discussed in relation to the principles of the human becoming theory (Parse, 1981, 1992, 1995a) and the theoretical and research literature. Methodological considerations are also discussed.

The Core Concepts and The Human Becoming Theory

The three core concepts identified following the extraction-synthesis process for each of the dialogical engagements will be discussed individually. The core concepts are: recognition of diversity amidst an exhausting turmoil, disclosing-not disclosing in flight for solace, and ambiguous possibilities in engaging-disengaging.

In addition to the core concepts, there were other recurring themes not found in all descriptions. These included the themes of potential disregard, and recollections of the cherished which were found in half of the participants' descriptions. These themes needed to be present in all the dialogues to be identified as core concepts.

Recognition of Diversity Amidst an Exhausting Turmoil

The first core concept, recognition of diversity amidst an exhausting turmoil, surfaced in all of the participants' descriptions when they spoke about recognizing that they were "different inside", and that they knew things others did not, or had a different worldview than others, while in
the midst of overwhelming anxiety or burdensome, uncomfortable, feeling. One participant said "it’s almost like an anxiety attack that washes over me ... and I could still function and I could still do things, but I was inside different" and nobody else knew.

Another participant stated that she knew that "no one else has that experience, they can relate to similar experiences in their lives perhaps, and they can say they understand, but I know they didn’t have that experience and I’m alone with that". She discussed "knowing early on that there was something very different about me and that I was looking at the world in a different way than other people". The participant described feeling that even in the most intimate of relationships, the other person did not "know what I am talking about". She stated "I get very nervous, very afraid ... it feels like an internal war raging inside me". She also said "I feel little kid-like ... bumbling ... feeling like a nincompoop ... it’s real energy draining for me ... I feel emotionally all tangled up and it’s very awkward".

One participant talked about recognition of diversity amidst a harrowing threat, even with close others, when he said that even those who knew his struggle really did not know on many occasions, as he was "in a different spot than where the group was" ... "there was no one there who knew what I was going through" ... "no one there would understand
... and I felt a great vulnerability ... and it was frightening ... it was a very wretching experience ... and sad". He also described family members who were "not cognizant" of who he was.

Another participant spoke about knowing "I was different ... I didn’t fit in", and "I can recall ... being different from everybody else". She said even when surrounded by close friends she knew they "don’t know how I feel ... and that’s very aggravating and very painful ... it’s frustrating and it makes me angry ... it’s a terrible feeling". One other participant talked about others who "have no idea what’s going on ... they didn’t know what I was experiencing ... we each experienced it in different ways". The participant described the tedious turmoil she experienced as feeling "like I’m on a treadmill ... going crazy". She stated "it was hard ... it was sad and depressing ... it’s when you are going through really bad times ... traumatic things". One participant spoke about "being different from everybody else ... because I looked at things differently than everybody else did". She described her experience as "a lot of responsibility ... a lot of weight on my shoulders ... knowing how the end would be and not everybody else knowing that". She spoke about the hard, difficult struggle to make right decisions in describing the experience of recognizing diversity amidst an exhausting turmoil.
In the human becoming theory (Parse, 1981, 1987, 1992, 1995a) the core concept, recognition of diversity amidst an exhausting turmoil was interpreted conceptually as imaging powering. Imaging refers to explicit-tacit knowing found in the first principle of human becoming theory. Powering refers to the pushing-resisting rhythm found in the third principle. It describes the process of moving beyond the now. Imaging powering is the explicit-tacit knowledge each participant had of being unique while living the pushing-resisting rhythms of powering in the struggle to move beyond the now to the not-yet in experiencing feeling alone while with others. Imaging powering is the recognition of diversity which reflects the sense of being without close others or close relationships while existing in close proximity and believing that close others cannot understand the situation. The exhausting turmoil is the tension of living the diversity that is "the struggling between pushing and resisting while contending with others, issues, ideas, desires and hopes all-at-once" (Parse, 1981, p. 58).

Disclosing-Not Disclosing in Flight for Solace

All participants described the concept of disclosing-not disclosing in flight for solace. This second concept evolved from the participants' descriptions of the paradoxical rhythm of wanting to share while simultaneously wanting to conceal some or all of their ideas, values, and beliefs from others and self and escape to a place of
safety. The paradox of disclosing—not disclosing in flight for solace surfaced when the participants spoke about wanting to talk with others while choosing not to, or being unable to, and when describing feelings of being distanced from others even when surrounded by people. Many participants spoke about "putting on a mask" or "covering up", concealing themselves behind a facade or disguise. All participants spoke about escaping or running away as a way of feeling safe or comfortable.

One participant said "everything becomes in a distance and muted sounds ... faded out". She added "I could ... and ... I did ... shut out everything [and everyone] ... pretending he was back". She also spoke about being more inclined to "speak up" and "make myself known" after a while as others "saw the same person on the outside, but it really wasn’t". The participant also described choosing not to speak when certain people were present and said that she "comes back home to escape". She described many situations where she felt a desire to escape saying, "I don’t want to stay here anymore ... I just want to get out of there ... it’s a feeling like I have to escape ... I have to get away because if I don’t I’ll just, I won’t be able to breathe here". Yet she said she "told the nurses about feeling alone, feeling left out".

Another participant spoke about the struggle she experienced in choosing to share personal information with
close others, or to run away without sharing when she knew they would not want to hear the information. She said "I’ve tried to share my personal self and life with them ... and I’ve not run away"; yet she stated that "it makes me want to run away ... to go hide under the sheets ... to opt for escape, which I have". She described how she tried "to act cool and all of that and uh, everything is so smooth".

One woman described the concept as she talked about being able to share with somebody as "making all the difference in the world", yet she believed she could not approach others and share with them. She said "there’d be people all around and I’d think ... I want to run" and she did. The participant also said she "covers up a lot". One man stated "all they saw was that I was in sync with them, so I was able to mask my emotions pretty well". He felt a desire to run away "to remove myself from there". He described his deliberate choice not to share his feelings about the loss of his father with his family, yet said he did share them with his wife.

One participant said "I put on the public Jane [pseudonym] ... put on that mask ... and that’s how I’ve protected myself ... even though when you put on the mask you’re putting something in between you and those people". Another participant spoke about the loss of her mother saying "the fact that she was gone at this moment was just too much for me to be able to tell and share". She described
"not being able to ... or not choosing to share those experiences with others" and choosing to withdraw. She also stated that "I really wanted other people to share it with me ". The participant spoke about not being able to share self with others while at the same time she "has friends I can trust ... and I have shared things with them ... very intimate things ... that meant so much to me".

One man discussed not wanting to socialize or talk with others, while he simultaneously felt having someone to share with would heal his pain. He described several situations where he "didn’t want to socialize ... I left". In a setting where he felt forced to be with others, he "wanted to run and I did". He found that "you tend to turn inward". Yet another participant identified the concept of disclosing-not disclosing in flight for solace when he spoke about "not finding anyone who would really listen" and not being able to tell people how he felt even if they would listen. At the same time he said that he’d still be "spinning my wheels" if it wasn’t for the three people he could share with and God. He spoke about not being able to "admit inside", to himself, his situation. He described moments of solace when he spoke about feeling good to be removed from the usual "mayhem of the crowd". Another participant described how she would be with friends talking about things that she would never experience and she would "kind of drift away ... those were hard times ... not being able and not wanting to talk about
what I was going through and wanting to". She added "it was hard to listen and they didn’t know what I was going through" yet she says a "couple close people knew".

The concept of disclosing-not disclosing in flight for solace was conceptually linked to the second principle of the human becoming theory as the paradoxical rhythm of revealing-concealing. Revealing-concealing refers to the process of choosing to divulge and not divulge to self and others all there is to know about oneself and one’s situation (Parse, 1981, 1987, 1992, 1995a). For the participants in this research study, revealing-concealing surfaced as a way of incarnating the chosen meaning of the experience of feeling alone while with others as individuals sought refuge through choosing to mask their thoughts and feelings from those in close proximity while at the same time seeking refuge through divulging fears, hopes, ideas, and values to those same or other persons, and self.

Ambiguous Possibilities in Engaging-Disengaging

Ambiguous possibilities in engaging-disengaging is the third core concept emerging from the research findings. It was described by the participants in relation to the day to day uncertainty of interrelationships and possibilities that unfolded with the changes in connecting with others while simultaneously separating from others. Participants described the uncertain outcomes of the not-yet, lived while moving with and away from others, activities, and places.
One participant said "I think the feeling of being alone while with others is because you are made to feel so detached" and not knowing "what was gonna happen ... I didn’t know who would help me". This participant added "I remember asking questions that I knew the answer to just to get attention", possible recognition, and assistance. She described several examples of connecting with some persons while separating from others in the face of uncertain outcomes and changing relationships after the loss of her husband. She spoke about the uncertainty of establishing relationships with new others and activities and finding that she was not sure she wanted to be with new or old friends in familiar places. She was unsure about how she would be regarded by these others or how she would regard them. She described one situation by saying "I wanted ... for him to not be there ... this feeling of detachment ... I’m not with the person I want to be so I guess I separate myself". She added "I have a new bridge club cause we had a poker club and I stopped going to those outings ... and ... I do a lot of things now with the Widow’s Club that I belong to ... I established all those relationships" after her husband died. She spoke about engaging-disengaging with family and friends as she was not sure how she would feel when with them and said "I had to change my church ... I stopped going to family graduations and birthdays" yet she says "I’ll go to one or two a year". She described being
surrounded by others yet feeling like "nobody's there".

Another participant spoke about having "hope that we can continue to grow as a family" yet being unsure of the outcomes of attempts to communicate with her family. She said "I'm reaching for some sense of groupness ... feel like some sort of bridge has been built and I am not ... on that island anymore" so she could feel that she was engaged with her family, yet she stated that she felt isolated from the same persons. She spoke about feeling uncertain about how to interact with others in new situations and new places, feeling "unprepared". She said she "didn't know, I just didn't know". One participant spoke about feeling "helpless", wondering "what am I going to do?". She said she was "hanging in there ... with basic faith". She wondered if she engaged another in conversation would she feel better? She did not approach others because she thought she might cry and then be viewed as an idiot and others would not want to be with her. In one situation, she described knowing that her mother-in-law was trying to be supportive, yet she wanted to be away from her and with others like her husband or her own mother even though she did not know if they would be supportive in the way that she needed.

One participant spoke about the uncertain outcomes she struggled with in her relationships. She wondered what if "they don't accept me for who I am?" and "maybe I'll destroy my friendships by asking too much of others" when
she sought them out. The participant also described being separated from others, "isolated from them" as if "there was a gulf between them and myself", while she tried to find ways to connect with others. She "needed them very much to be with me". She described how she "almost withdrew from everyone ... even the friends that I knew ... would have been there for me ... it was better to be on my own". Another participant said that she "hemmed and hawed" about difficult decisions "hoping" she "had made the right decision" by herself. The same participant wondered "what should I do differently ... what kinds of expectations ... should I have that I don’t have now? ... how can we do this better?". At the same time, she spoke about being "oblivious to what everyone else was saying or doing" while needing to be with them and make decisions together. She spoke about her discomfort and uncertain outcomes when she was engaging new others, saying "you don’t know ... you don’t want to say the wrong thing and that’s an uncomfortable feeling".

One man described the uncertainty of "knowing what I wanted for myself, and I think I knew how I wanted to accomplish it" yet he did not know when it would happen, if at all. He knew he "wanted somebody to love" and to have a good time with, yet he spoke about feeling "very out of control" in social situations, and he had to force himself to socialize with others. He spoke about expecting to be "healed by having someone to be with" while he chose to stay
apart from others in situations where he could have engaged them.

Yet another participant spoke about the uncertain future of being involved in desired activities with close others while saying she thought she "can do whatever it takes" to do what she wanted. She said that even though she wanted to withdraw she sought others out, and "forces" herself to keep occupied and "be with friends, be with people" even if she did not know how it would make her feel or if they would acknowledge what she was experiencing. This participant said "what got me through was going to friends' homes, being close with them and just sitting there" while she said she would sometimes "withdraw" from the same persons. One participant spoke about uncertain outcomes in trying to decide how to be with her family as she said she didn't know what "I can and cannot put up with", wondering if it would be worth her pain and effort. She felt like her entire direct family avoided her and abandoned her, while she talked about her aunt and uncle, her godparents, and her partner with whom she had strong relationships. She spoke about the struggle she had to try and reconnect with her family. At the same time she wanted to be away from them, she kept returning to family gatherings in case relationships could change.

One participant spoke about the uncertainty he felt around his decision to make a major life transition,
embracing new others while leaving behind people he loved. Because of his uncertainty about the outcome of his decision it "took several years to finally act on [it]". He described how he "had to move on" from the group he was with yet he also "had a need to go find ... people to again reconnect". He spoke about feeling like he was in a dream with people "you feel like they're on one side and you're on another side ... and felt some real distance from the group ... feeling almost in a void". Another man spoke about the ambiguity of outcomes if "you risk telling your story" yet he didn't "know where you'd be" without others. He spoke about feeling "alienated from my past", self, and friends, "feeling that isolation, that separation" yet there were people with whom he did not feel alienated. He also spoke about others' "gentleness, their respect, their way to me of human being, their touch" which helped him feel less "alienated or separated from life or others". He described his uncertainty in connecting with others when he said "in one sense I started off very alienated and alone in this crowd of people" and unsure of the relationships, "the tenderness, the respect, ... the caring concern" of others made him feel less separated from others and more confident in establishing relationships.

This concept was integrated conceptually with the third principle of human becoming theory as originating in connecting-separating. Originating is "choosing a particular
way of self-emergence through inventing unique ways of living" (Parse, 1981, p. 60). It refers to a level of ambiguity that is lived by all persons. Connecting-separating is the paradoxical rhythmical process of moving with one phenomenon while simultaneously moving away from other phenomena as one travels through life. The originating of connecting-separating is living the sureness-unsureness of opportunities and their outcomes that arise from the choices made to be with and away from others. Participants in this study made decisions about engaging or not engaging with others though they were often uncertain about the outcomes. Participants also made choices about how they were uniquely living with the ambiguity that existed as they experienced the struggle of choosing new ways of becoming while severing some and continuing other relationships with persons, places, or activities. The participants lived the ambiguity in knowing what outcomes they wanted while being uncertain about realizing those outcomes. Participants invented new ways of becoming through living the patterns of originating in connecting-separating in situation.

Related Literature

There is very little literature on the phenomenon of feeling alone while with others except as one aspect of feeling alone or loneliness. Therefore, the core concepts that emerged from this study are compared and contrasted with the literature about feeling alone and loneliness in
psychology, the totality paradigm in nursing, existential philosophy, and the simultaneity paradigm in nursing. The literature from psychology and the totality paradigm of nursing will be discussed together since these bodies of literature reflect similar views.

In the theoretical and research literature from psychology and the totality paradigm of nursing, references to the three core concepts, recognition of diversity amidst an exhausting turmoil, disclosing-not disclosing in flight for solace, and ambiguous possibilities in engaging-disengaging, do not reflect the rhythmical patterns of relating found in this study. Concepts are presented as cause-effect, linear relationships, as precursors or outcomes of the experience of feeling alone or lonely rather than essentials of the experience, and as parts of a divisible experience lived by divisible beings. They are not presented as paradoxical rhythms as described by Parse (1981, 1987; Mitchell, 1993). Rather, the concepts are discussed as opposites, separate and distinct phenomena, or intermingled with each other. Research findings reflect a mechanistic, cause-effect, sum of parts worldview of the concepts with interventions provided. Nowhere are the concepts in the structure of feeling alone while with others that surfaced in this study presented as chosen ways of being with the universal experience that is lived all-at-once by persons.
The core concept, recognition of diversity amidst an exhausting turmoil, is not discussed as it emerged in this study. Rather, the notion is inferred as a cause-effect relationship with recognition of diversity viewed as causing exhausting turmoil in the form of undesirable physiological, psychological, or behavioral responses (Acorn & Bampton, 1992; Adler, 1993; Astrom et al., 1993; Barron et al., 1994; Davis et al., 1992; Deegan, 1993; Haines et al., 1993; Hegge, 1991; Keele-Card et al., 1993; Jerome, 1991; Mahon et al., 1993, 1994; Proffitt & Byrne, 1993; Shear et al., 1993; Westra, 1991). Such a view posits recognition of diversity and exhausting turmoil as two separate and distinct phenomena rather than the unitary phenomenon that emerged in this study. The idea of recognition of diversity without the notion of exhausting turmoil is inferred in discussions about psychiatric patients and other patients who believe they are different from others because of illness, socioeconomic condition, or any situation where they recognize self as unique (Adler, 1993; Adler & Buie, 1979; Alston et al., 1992; Anderson & Riger, 1991; Astrom et al., 1993; Bergman, 1992; Cohen, 1991; Cook et al., 1992; Davidhizar, 1992; Deegan, 1993; Knowles, 1993; Nisenbaum, 1983/1984; O’Brien & Pheifer, 1993; Porter, 1994; Ricci, 1991; Richman, 1986; Richman & Sokolove, 1992; Samter, 1992; Zack, 1991).

Nisenbaum’s (1983/1984) work exemplifies the view of
recognition of diversity as a separate and distinct concept from exhausting turmoil. Recognition of diversity is inferred in Nisenbaum’s structure three, which is any situation where one realizes that no one else shares the same difficult choice of conduct. Other incongruencies between the psychology and totality nursing literature and the findings in this study include the view of the concept in the literature as a non-universal phenomenon, and a measurable symptom of the phenomenon of feeling alone while with others (Alston et al., 1992; Ami, 1990; Kristensen, 1992; Oshagan & Allen, 1992). In the findings of this study, the concept is woven into the structure of feeling alone while with others.

The second concept, disclosing-not disclosing in flight for solace, a unitary phenomenon is not discussed in the literature as it emerged in this study. However, some literature refers to the concept within the context of engaging and disengaging as persons do not share with others as they consciously or unconsciously choose to not share by not engaging. Disclosing and not disclosing are discussed as opposites, separate and distinct phenomena, not as a rhythmical paradox. In the psychology and totality literature the notion of disclosing and not disclosing in flight for solace is both that of a coping mechanism that provides protection and one aspect of the experience of feeling alone. It occurs in the presence of engaging and
disengaging as part of a linear sequence of events that manipulates self or environment for protection (Adler, 1993; Adler & Buie, 1979; Bergman, 1992; Cook et al, 1992; Coward & Lewis, 1993; Mahon et al., 1994; Samter, 1992). For example, disclosing and not disclosing in manipulating the environment for protection is found in discussions about individuals with psychopathologies or socially undesirable illnesses who do not divulge information to others because they are afraid, yet they seek or accept sharing with healthcare professionals for comfort and support (Brown, 1976, 1984; Helgadottir, 1990; Hinds, 1992; Knowles, 1993; Lunt, 1991).

Disclosing and not disclosing are at times presented as separate concepts from flight for solace, or the sense of flight for solace is completely absent (Bond, 1990/1991; Coward & Lewis, 1993; Koenig et al., 1994; Kristensen, 1992; Nisenbaum, 1983/1984). For example, disclosing and not disclosing are inferred as a subconcept of the notion of engaging and disengaging in Kristensen's (1992) research findings on the experience of childhood loneliness. The notion of disclosing and not disclosing is inferred in three of the themes, circle of boredom, social isolation, and emotional isolation, as children do not share or interact with others. These themes also allude to lack of connection with others, thereby merging engaging and disengaging with disclosing and not disclosing from the totality view.
Lack of congruence is found in Barrell's (1983) work as disclosing-not disclosing in flight for solace is reflected in the barrier theme where persons experience a block or obstacle to sharing with others. Barrell (1988) states that the theme is associated with a feeling of frustration but he does not identify a desire to escape as found in the current study. His findings seem to confuse the concepts of engaging-disengaging and disclosing-not disclosing as he discusses the barrier theme as both a way of maintaining separateness from others and a way of not revealing self to others.

Nisenbaum's (1983/1984) work on the structures of aloneness describes disclosing and not disclosing as opposites. These opposites occur without the sense of flight for solace. For example, structure two is: one realizes that closeness is warranted with others, but that closeness would make one vulnerable and exposed to rejection therefore, one conceals the real self. Structure two also reflects the sense of ambiguous possibilities as a precursor to loneliness as individuals feel lonely when they experience unsureness about the outcomes of disclosing self to others. Nisenbaum (1983/1984) relates this structure to schizoid personalities and shy individuals.

The concept of ambiguous possibilities in engaging-disengaging that emerged from the findings of this study is not discussed in the psychology and nursing totality
literature as a universal unitary phenomenon. The sense of the concept is inferred in discussions about three separate and distinct phenomena that may be related. The phenomena are engaging with others, disengaging with others, and uncertain outcomes. When a relationship among these phenomena is described, it is a cause-effect relationship in that the ambiguity of uncertain outcomes in engaging others, places, and activities leads one to choose not to engage some while engaging others (Chen, 1994; Coward & Lewis, 1993; Kristensen, 1992; Nisenbaum, 1983/1984). The sense of ambiguous possibilities from this view can be positive or negative. One may experience the positive possibilities of support, nurturing, enhanced self-esteem, and recovery from illness. However, in engaging another person, place, or activity, one risks the negative outcome of rejection, diminished self-esteem, or continued ill-health as defined by the medical model (Adler, 1993; Andersson, 1986; Chen, 1994; Chinner & Dalziel, 1991; Coward & Lewis, 1993; Davidhizar & Shearer, 1994; Foxall et al., 1994; Larson, 1990; Nisenbaum, 1983/1984; Richman & Sokolove, 1992; Yerushalmi, 1992).

Examples of the notion of engaging and disengaging as opposite phenomena rather than a paradoxical rhythm, and as linear relationships are found in much of the psychology and nursing totality literature (Barrell, 1983; Coward & Lewis, 1993; Kristensen, 1992; Nisenbaum, 1983/1984). The notion of
persons engaging or disengaging with other persons, places, and things are found in discussions of social isolation and psychopathologies where persons withdraw from others (Auger, 1986; Barron, et al., 1994; Chen, 1994; Haines et al., 1993; Proffitt & Byrne, 1993). Brown (1976, 1984), Tedrow (1991), and Servonsky and Piedrow (1991) discuss the notion of engaging or disengaging as they describe loneliness which occurs as a result of unresolved separation anxiety. The authors (Brown, 1976, 1984; Servonsky & Piedrow, 1991; Tedrow, 1991) note a linear relationship between health, aloneness, and loneliness, with aloneness as positive and healthy and loneliness associated with illness. Coward and Lewis (1993) identify the dichotomy of isolation-connectedness, which describes their study participants' sense of isolation in the presence of others as a cause-effect, linear relationship rather than a paradoxical rhythm.

Kristensen's (1992) study on childhood loneliness identifies the universal essence of childhood loneliness as unhappily disconnected, which represents disengaging as a separate and distinct phenomenon from engaging and makes no reference to a sense of ambiguity. Unlike the findings in this study, Kristensen's (1992) findings compartmentalize concepts into social and psychological aspects with linear relationships and non-unitary, non-universal phenomena. Examples of the absence of discussion of the sense of the
rhythmicity and the universal unitary conceptualization of ambiguous possibilities in engaging-disengaging are found in discussions of ambiguous possibilities as a distinct phenomenon experienced by persons like borderline personalities, young children, college students, and frail elderly who are afraid of the outcomes of interactions with others (Adler, 1993; Anderson & Riger, 1991; Barrell, 1988; Barron, et al., 1994; Bergman-Evans, 1994, Deegan, 1993; Henwood & Solano, 1994; Rotenberg & Morrison, 1993).

Nisenbaum's (1983/1984) structures of aloneness exemplify the view of the concept of ambiguous possibilities in engaging-disengaging found in the psychology and nursing totality literature. The structures he developed: (a) occur as opposites rather than paradoxical rhythms; (b) represent separate and distinct parts of a phenomenon which may or may not be experienced by all persons; (c) identify cause-effect relationships; and (d) reflect the natural science, medical model view of the human as divisible. For example, several structures have situational aspects that reflect engaging and disengaging as paradoxical opposites not paradoxical rhythms without including ambiguous possibilities. The structures and corresponding situational aspects are: (a) structure one, where one realizes one lacks connectedness with any important others; (b) structure five, where one feels stranded and knows that one ought to be in a familiar setting or with people that make one feel secure;
(c) structure six, where one is without the presence of a special other person and feels the need for that person in close physical proximity; (d) structure eight, where one feels comfort, serenity, and equanimity in one's privacy; and (e) structure nine, where one feels the absence of human presence where another or others should be. In structure five, lack of connectedness is described as an extreme feeling of not being engaged with others, experienced only by psychiatric patients. The opposite of this structure is found in structure six where individuals describe a craving for closeness and connectedness with special others. The structure of absent presences reflects lack of engaging with others that leads to a feeling of incompleteness (Nisenbaum, 1983/1984). Clearly the concept of ambiguous possibilities in engaging-disengaging as paradoxical rhythms that surfaced in this study is not congruent with Nisenbaum's view.

In summary, the discussion of the three core concepts in the psychology literature and nursing totality literature are not congruent with the findings of this study. Discussions reflect the notions of the concepts as specified by a mechanistic worldview as cause-effect, linear relationships, as observable symptoms of the experience, and as separate and distinct parts of a bio-psycho-socio-spiritual experience lived by some, not all, bio-psycho-socio-spiritual beings. Concepts are viewed as non-unitary, separate and distinct opposites rather than paradoxical
rhythms. The concepts that emerged from this study are not discussed in the psychology and nursing totality literature.

The existential literature does not discuss the concepts of feeling alone while with others per se. However, some congruence with the concepts in the structure of feeling alone while with others can be found in this literature. Recognition of diversity amidst an exhausting turmoil can be inferred from the existentialists belief that all humans recognize and live their diversity in proximity with others. Feeling alone is discussed as a painful experience, yet it is also productive and creative. The sense of engaging-disengaging surfaces in discussions about everyone being alone in the sense that they are separate and distinct individuals even though they come together with others (Batchelor, 1983; Bond, 1990/1991; Buber, 1923/1958; Heidegger, 1927/1972; Sartre, 1957; Tillich, 1952, 1963, 1967). The sense of ambiguous possibilities surface in discussions about the uncertainty of existence while disclosing-not disclosing in flight for solace surfaces in discussions about interrelating with others, universe, and for some, with God (Batchelor, 1983; Bond, 1990/1991; Buber, 1923/1958; Frankl, 1946/1963; Heidegger, 1927/1972; MacQuarrie, 1972; McGraw, 1992; Sartre, 1957; Tillich, 1952, 1963, 1967). None of the concepts that surfaced in this study are discussed as unitary phenomena or rhythmical paradoxes.
Although feeling alone while with others has not been studied per se as a unique phenomenon with the human becoming theory, this phenomenon emerges in various ways in descriptions of ways people are with others in studies focusing on other phenomena such as grieving, (Cody, 1991, 1995; Pilkington, 1993) suffering, (Daly, 1995) and retirement (Davis & Cannava, 1995). In these studies feeling alone while with others is not the phenomenon under study. However the idea of togetherness-aloneness, while described in different ways, moves to the theoretical level as connecting-separating. Cody’s (1991, 1995) study on grieving surfaced the core concept, "bearing witness to aloneness with togetherness" (Cody, 1995, p. 218), while in Daly’s (1995) study a core concept was entanglements of engaging-disengaging which reflects the ambiguity of the participants in wanting to be with and be alone all-at-once. Participants in the Davis and Cannava (1995) study described feelings of remoteness and diminishing opportunities for communicating that sparked a search for new ways of relating with others; in wanting closeness and privacy simultaneously; and in describing an unwillingness to share personal intimacies while partaking in kindred interests with others. In Pilkington’s (1993) study, feeling alone while with others arose when participants spoke about "distancing themselves from the lost child and other people while paradoxically drawing closer" (1993, p. 133).
The findings of the current study are consistent with the notion of paradoxical rhythms and unitary universal phenomenon that are described in the studies by Cody, (1992, 1995) Davis and Cannava, (1995) Daly, (1995) and Pilkington (1993). However, the current study offers enhanced understanding and clarity of the phenomenon of feeling alone while with others.

Previous theoretical and research literature about feeling alone, aloneness, and loneliness provided little information about the phenomenon and its core concepts. The natural science perspective of psychology and the totality paradigm of nursing do not provide information consistent with the findings of this study. Literature in the simultaneity paradigm touches on the notion of feeling alone while with others as a variety of lived experiences have essences that lead to connecting-separating at the level of the theory. The findings of this study provide an original description of the structure of feeling alone while with others. This is new knowledge, a new avenue for study, and supports the use of the human becoming theory and research methodology in exploring lived experiences.

Feeling Alone while with Others, Health, and Quality of Life

Parse's (1981, 1987, 1992) human becoming theory is rooted in the beliefs that health is the "process of becoming as experienced and described by the person" (Parse,
1992, p. 36) and persons, with the universe, cocreate health. Becoming is the "human’s pattern of relating value priorities" (Parse, 1992 p. 38). Thus, health is a process of living value priorities, cocreated within the human-universe process. Humans accept responsibility for their own health (Parse, 1990). Health is how the human being experiences the moment to moment everydayness in the human-universe process; the meaning one gives to that living. Mitchell (1995) posits that when meaning is made explicit, an individual becomes aware of his or her own personal commitment and can go on living that commitment or change it, which changes health (Mitchell, 1995; Parse, 1990). Parse (1990) further describes health as a "personal commitment that is lived through abiding with the struggles and joys of everydayness in a way that incarnates one’s quality of life" (1990, p. 138), that is, one’s lived experiences embody one’s quality of life, linking health and quality of life. Health and quality of life are unique for each person, thus, health and quality of life are defined by the person (Parse, 1981, 1987, 1990, 1992, 1995b).

Participants in this research on feeling alone while with others lived their health uniquely. The core concepts that emerged from the extraction-synthesis of the dialogical engagements are ways the participants lived their health. As the core concepts that emerged in this study were not identified in the literature in the same ways, new knowledge
about the ways of living health for persons feeling alone while with others was uncovered. Related to the core concept, recognition of diversity amidst an exhausting turmoil, participants lived their health as an understanding about their unique worldviews. Each participant amidst the rhythmical pushing-resisting tension of being different found an overwhelming discomfort and anxiety yet had hopes for the future all-at-once. Participants recognized their uniqueness and they believed that even close others could not understand the struggle amid their uncomfortableness. As a core concept, disclosing-not disclosing in flight for solace, also constituted new knowledge about how persons live their health. Participants in this research spoke about seeking a place of safety while simultaneously choosing to reveal to and conceal from self and others ideas, values, fears, and beliefs. Participants chose what had value to them in revealing some things and concealing others. Ambiguous possibilities in engaging-disengaging was the third core concept. Participants lived their health by living the ambiguity of opportunities and their outcomes that arose with choices to be with or away from other persons, places, or activities. Their choices reflected their value priorities. Participants invented new ways of becoming, new ways of living health, through living the sureness-unsureness of connecting-separating.

In the human becoming theory quality of life is
incarnated in one’s lived experiences, and is unique for each person. Quality of life from the person’s perspective is the goal of nursing. Participants in this study cocreated their own quality of life as they recognized their unique worldviews amidst the discomfort of pushing-resisting to move beyond the present, while seeking refuge by revealing-concealing values, beliefs, and ideas to self and others, as they lived the ambiguity of uncertain outcomes in choosing to move toward and away from other persons, places, and activities. As persons spoke about their experiences they languaged the meaning of their health and quality of life. In making meaning explicit, participants became aware of their personal commitments with opportunities and limitations in moving on.

**Methodological Considerations**

This study demonstrates basic research related to the human becoming theory. Parse (1995b) describes basic research as "research which may be on lived experiences, the findings of which expand the knowledge base of the science" (Parse, 1995b, p. 151). The qualitative, human becoming methodology was effective in answering the research question as it surfaced the structure of the lived experience of feeling alone while with others.

Using the human becoming research methodology posed many challenges for this novice researcher. The process of dialogical engagement was a difficult process for the
researcher to feel comfortable with initially. The challenge to avoid guiding the participant, or turning the dialogical engagement into an interview was everpresent. The participants were very much engaged in sharing their experiences and the researcher was sometimes hesitant to participate with a dialogical guide that may have kept the dialogue focused on the experience of feeling alone while with others rather than other experiences that were lived simultaneously. For example, one participant spoke about feeling alone while with others in the context of the experience of retirement. Opportunities existed for the researcher to refocus the dialogue on feeling alone while with others rather than the experience of retirement.

Being in true presence with the participants was an exhausting yet exhilarating experience. The experiences related by the participants were very moving. Scheduling dialogical engagements too close together was a tiring experience for the researcher and may have added to the challenge of being attuned to the appropriate use of dialogical directives. The researcher also had to travel up to 40 minutes between consecutive dialogical engagements. It was sometimes difficult to feel relaxed at the beginning of the dialogue. When conducting future research with the human becoming methodology, this researcher would not schedule dialogical engagements to follow each other if travel were required. The researcher would also allow a minimum of 60
minutes between dialogical engagements.

The processes of extraction-synthesis and heuristic interpretation were very rigorous processes, requiring uninterrupted time to dwell with the dialogues and transcripts. It proved to be a challenge to the researcher to arrange to have the uninterrupted time to immerse self in the dialogues. This uninterrupted time is crucial to the process of extraction-synthesis and heuristic interpretation. At the suggestion of the theorist, Dr. Rosemarie Rizzo Parse, the researcher had "extraction-synthesis parties" with other Parse scholars as a way to come to know the process of extraction-synthesis. The researcher found this to be an excellent way to develop comfort and experience with the processes of the methodology and it also proved to be a useful learning experience for others. Confidentiality of all participants was strictly maintained through this process.

While all the participants were individuals who had lost significant others, many dialogues surfaced feeling alone while with others in other contexts which, the researcher believes, supports the universality of the experience. The researcher learned to give more detailed information about the research process as the first participant requested more detailed information about the actual research process and how the findings would be shared with others. The researcher was initially unsure of how to
handle dialogue that surfaced after the tape recorder was turned off, but did so by asking the participant if the tape recorder could be turned back on as important dialogue emerged.

Locations were mutually agreed upon by participants and researcher. In two of the dialogues, conversation was interrupted while participants answered doorbells or phones. While that interruption did not appear to interfere with the dialogical engagement, the researcher would recommend selecting settings to avoid such interruptions. At the request of a participant, one dialogical engagement was held in a restaurant. The researcher would not recommend this setting as extraneous noise, while it did not interfere with the dialogue, did interfere with dwelling with the tape and transcribing the tape.

The researcher found her personal choice to shift her worldview from the totality paradigm to the simultaneity paradigm an additional challenge. Concentrated, uninterrupted time and frequent dialogue with the theorist were required, as well as immersion in other works representing the simultaneity paradigm. Interactions with others who share the same worldview was essential. The researcher kept extensive notes about the process and found dialogues with others knowledgeable in Parse’s theory invaluable. It was difficult not to jump ahead and envision the concept at the level of the theory while going through
the processes of extraction-syntheses. Great care needed to be exercised when moving up levels of abstraction to be cognizant of the participant’s language as it cannot be used at the higher levels. Frequent dwelling with the tapes and transcriptions was crucial to the process.
Conclusions

Feeling alone while with others is viewed as a universal lived experience linked to health and quality of life from the person’s perspective. The purpose of this research, to gain an understanding of the meaning of the phenomenon from persons who lived it, was accomplished.

Seven women and three men who had lost significant others volunteered to dialogue with the researcher about feeling alone while with others. Participants were invited to speak about any time or times where they felt alone while with others. Some chose to speak about times related to the loss of their significant others. Others chose to speak about times related to life transitions.

Parse’s (Parse, 1982, 1987, 1992, 1995a) theory of human becoming, a unique nursing theory from the simultaneity paradigm, guided this research. The human becoming research methodology was used to conduct the study. Core concepts emerged from extraction-synthesis of the dialogical engagements. The three core concepts are: recognition of diversity amidst an exhausting turmoil,
disclosing-not disclosing in flight for solace, and ambiguous possibilities in engaging-disengaging. The concepts were moved up levels of abstraction to the level of the theory. The conceptual interpretation is: feeling alone while with others is imaging powering in revealing-concealing the originating in connecting-separating.

Imaging relates to the explicit-tacit knowing that gives the unique meaning to the experiences lived by humans found in Parse's (1981, 1987, 1994, 1995a) first principle of human becoming theory. Powering describes the process of moving beyond the now through the pushing-resisting rhythm in cotranscending with the possibles. It is found in the third principle of human becoming. Revealing-concealing reflects the paradoxical rhythm of choosing to divulge some ideas, values, and beliefs about self and others to self and others, while simultaneously choosing not to divulge some ideas, values, and beliefs. Originating, like powering, relates to cotranscending with the possibles. Originating is living the paradox of the certainty-uncertainty with selected opportunities and their outcomes in choosing new ways of becoming in transforming self. Connecting-separating is the paradoxical, rhythmical process of moving with and simultaneously away from others, activities, and places.

The literature related to the phenomenon of interest is minimal, although there is a large body of literature about the closely related phenomena of feeling alone, aloneness,
and loneliness. Feeling alone while with others and the core concepts of its structure are not discussed in the psychology and totality paradigm nursing literature as they emerged in this study.

The literature from the simultaneity paradigm of nursing surfaces feeling alone while with others in core concepts emerging in several studies guided by human becoming theory. These concepts were linked with the theory through the concept of connecting-separating. There is congruency with the view of the phenomenon as a universal unitary experience with paradoxical rhythmicity.

There is new knowledge emerging from this study. This is the first study that investigated the structure of feeling alone while with others from any paradigmatic view, thus, shedding light on an important lived experience related to health and quality of life. At the theoretical level the concepts that emerged from this study were imaging powering, revealing-concealing, and originating in connecting-separating. The juxtaposition of these concepts at the theory level is the meaning of the lived experience derived from the descriptions of participants. All concepts from the three principles of the human becoming theory are lived simultaneously and, thus, are in some way present in all experiences but the conceptual integration focuses on those most prominent arising in the descriptions of study participants. At the level of the core concepts, recognition
of diversity amidst an exhausting turmoil, disclosing—not
disclosing in flight for solace, and ambiguous possibilities
in engaging-disengaging have never been discussed as
essences of feeling alone while with others. The three core
concepts are distinctly different essences of the
phenomenon. They offer new insights, thus, the meaning of
feeling alone while with others arising from this study
enhances understanding and clarifies a universal experience.
Clearly, from the perspective of the human becoming theory
of nursing, feeling alone while with others is more than a
combination of physiological and psychological responses
that represent one type of loneliness or feeling alone.
Feeling alone while with others is a chosen way of becoming
in the human-universe-health process, thus the study
presents new information about the way persons live their
health and define their quality of life.

This research enhances and adds to the science of
nursing as it contributes knowledge to the human becoming
theory of nursing and its research methodology. The research
also demonstrates that the theory and methodology are
effective in uncovering the meaning of the phenomenon under
study. The research findings add to the knowledge and
literature on feeling alone while with others.

Reconunendations

This research surfaced a structure of the experience of
feeling alone while with others for persons who had
experienced the loss of a loved one. Additional research about feeling alone while with others from the simultaneity paradigm will further enhance clarity and knowledge about the concept. Other populations of interest to the researcher that may be considered as participants for such a study include retired persons, persons who are chronically ill, significant others of ventilator-dependent persons, and health care workers who care for ventilator-dependent persons. Research on each of the core concepts will also enhance knowledge related to each concept as they have not previously been identified as unitary universal phenomenon.

**Reflections**

Persons who are guided by Parse's (1981, 1987, 1992, 1994, 1995a) theory of human becoming recognize that health and quality of life are defined by the person. Feeling alone while with others is one way participants in this study lived their health, as health is a continuously changing process of creating patterns of relating, transcending with the possibles, unfolding toward greater complexity while living value priorities (Parse, 1981, 1987). For the participants in this research feeling alone while with others is the recognition of diversity amidst an exhausting turmoil, as the disclosing-not disclosing in flight for solace arises with the ambiguous possibilities in engaging-disengaging. Each participant lived feeling alone while with others as the awareness of a unique worldview.
This awareness surfaced while living through difficult trying times, struggling with sharing and not sharing with self and others in a search for escape, while anticipating hoped for, yet uncertain outcomes, in connecting with some persons, objects, places, and activities and separating from others.

By using a nursing framework and research methodology specific to nursing to uncover the structure of feeling alone while with others, knowledge has been generated that is unique to nursing. The knowledge base of persons who are with others who are experiencing the phenomenon as one way of living their health will be enhanced by this research. Enhanced understanding broadens perspectives and increases respect for the diversity found in others. In broadening perspectives, humans change how they think about others and thus, how they are with others.
APPENDIX A

UNIDIMENSIONAL LONELINESS MEASURES
### APPENDIX A

#### UNIDIMENSIONAL LONELINESS MEASURES

(Cited in Russell, 1982)

<table>
<thead>
<tr>
<th>Scale</th>
<th>Number of Items</th>
<th>Response Format</th>
<th>Reliability Data</th>
<th>Validity Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eddy, 1961</td>
<td>24</td>
<td>Q-sort</td>
<td>split-half = .82; Test-retest: r = .52</td>
<td>None reported</td>
</tr>
<tr>
<td>Sisenwein, 1964</td>
<td>75</td>
<td>4-point scale</td>
<td>Test-retest: r = .83 &amp; .85</td>
<td>Self-labeling questions: r = .72 &amp; .70</td>
</tr>
<tr>
<td>Bradley, 1969</td>
<td>38</td>
<td>6-point Likert</td>
<td>Split half = .95; coefficient alpha = .90; Test-retest r = .89; r = .83</td>
<td>Known groups; self-labeling questions: r = .45 to .80</td>
</tr>
<tr>
<td>Ellison &amp; Paloutzian 1979</td>
<td>7</td>
<td>4-point scale</td>
<td>Test-retest (1 week) r = .85; coefficient alpha = .67</td>
<td>Self-labeling questions: r = .61</td>
</tr>
<tr>
<td>Young, 1979</td>
<td>18</td>
<td>4 response options</td>
<td>Coefficient alpha = .78 to .84</td>
<td>Self-labeling questions: r = .47 to .55; .50 &amp; .66</td>
</tr>
<tr>
<td>Shaver &amp; Rubensteiin 1979</td>
<td>8</td>
<td>Different formats for each items</td>
<td>Coefficient alpha = .88 &amp; .99</td>
<td>None reported</td>
</tr>
</tbody>
</table>
APPENDIX B

MULTIDIMENSIONAL LONELINESS MEASURES
### APPENDIX B
**MULTIDIMENSIONAL LONELINESS MEASURES**
(Cited in Russell, 1982)

<table>
<thead>
<tr>
<th>Scale</th>
<th>Number of Items</th>
<th>Response Format</th>
<th>Dimensions</th>
<th>Reliability Data</th>
<th>Validity Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belcher 1973</td>
<td>60</td>
<td>6-point Likert scale</td>
<td>Global loneliness, alienation, and anomie</td>
<td>Coefficient alpha = .9</td>
<td>Known groups; self labeling questions r=.59</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Scale alienation, Test-retest r=.79</td>
<td>Test-retest r=.79 to .84</td>
<td></td>
</tr>
<tr>
<td>Schmidt 1976</td>
<td>60</td>
<td>True-False</td>
<td>Friendship, romantic-sexual, and community relationships</td>
<td>K-R 20 = .90 &amp; .92 for student versions</td>
<td>None Reported</td>
</tr>
<tr>
<td>de Jong-Gierveld 1978</td>
<td>38</td>
<td>6-point Likert</td>
<td>Types of missing relationships, adjustment and defense mechanisms, future time perspective and personal capabilities</td>
<td>Factors for the measure have coefficient alpha = .14 to .87</td>
<td>Self reported loneliness r=.49; other reported loneliness r=.40</td>
</tr>
</tbody>
</table>
APPENDIX C

SITUATIONAL ASPECTS OF STRUCTURES OF ALONENESS
APPENDIX C
SITUATIONAL ASPECTS OF STRUCTURES OF ALONENESS
(Nisenbaum, 1983/1984)

Structure 1: one realizes one lacks connectedness with any important others.

Structure 2: one realizes that closeness is warranted with these others, but that would make one vulnerable and exposed to rejection.

Structure 3: one realizes that no one else shares the same difficult choice of conduct.

Structure 4: one feels something is happening that calls for a particular other to be there.

Structure 5: one feels stranded and knows that one ought to be in a familiar setting or with people that make one feel secure.

Structure 6: one is without the presence of a special other person and feels the need for that person in close physical proximity.

Structure 7: one feels that an other does not acknowledge or confirm one and does not recognize one's neediness for the other.

Structure 8: one feels comfort, serenity, and equanimity in one's privacy.

Structure 9: one feels the absence of human presence where an other or others should be.
APPENDIX D

PARTICIPANT EXPLANATION LETTER
APPENDIX D

PARTICIPANT EXPLANATION LETTER

You are being asked to participate in a research project conducted by Carol A. Gouty, doctoral candidate, Marcella Niehoff School of Nursing, Loyola University Chicago. This research project focuses on investigating feeling alone while with others.

The research will consist of one tape recorded discussion between you and the researcher, Ms. Gouty. The focus of this discussion will be how you have felt alone while with others. This discussion will be scheduled at your convenience. The discussion will take place at a mutually agreed upon location and last approximately 30 to 60 minutes, depending on what you want to share.

The information you share will remain confidential. The audiotape and any transcripts of the tape will be destroyed after the research is completed. Your name will not appear in any written report of the research. You may stop the discussion at any point in time. You may withdraw from the research at any time, for any reason, without penalty.

There are no known risks to this research. You may find it helpful to discuss your experience of feeling alone while with others while at the same time you will be contributing to nursing science. You are free to talk with Ms. Gouty about any concerns, questions or discomfort you may experience regarding the research project at any time. You may reach Ms. Gouty at (708) 529-0125, or seek referral from Ms. Gouty for support services.

Thank you for considering participating in this project.
APPENDIX E
CONSENT FORM
APPENDIX E

CONSENT FORM

I, ___________________________, am 18 years of age or older and wish to participate in the research project being conducted by Carol A. Gouty, doctoral candidate, Niehoff School of Nursing, Loyola University of Chicago.

I acknowledge that Carol A. Gouty has fully explained to me the purpose of the research. I understand that I may withdraw at any time without penalty.

I understand that I will be talking with Ms. Gouty once for 30 to 60 minutes depending on what I want to share. I understand that the discussion will be audiotaped and all tapes and written materials will be kept in a locked cabinet in Ms. Gouty's home. I understand that my identity will be kept confidential, and after completion of the study all tapes and transcripts will be erased. My name will not appear on written transcripts, reports, or published papers.

I understand that I am free not to answer any question(s). If during the course of our discussion I become uncomfortable I may: stop and withdraw from the study; stop and reschedule or; stop, rest and then continue. I may also ask for referral to support services.

I have had the opportunity to ask questions and have had those questions answered to my satisfaction. I understand that there are no known risks or benefits in this study. I understand that I may call Ms. Gouty at (708) 529-0125 at any time prior to or after our discussion to talk about any concern or question regarding my participation.

I freely and voluntarily consent to my participation in this research project and will be given a copy of this consent form.

Signature of Participant ___________________________ Date __________

Signature of Investigator ___________________________ Date __________
REFERENCES


Astrom, G., Jansson, L., Norberg, A., & Hallberg, I. R.


disease: The home versus the nursing home care experience
(Doctoral dissertation, The University of Nebraska Medical
Center, 1992). Dissertation Abstracts International, 52,
2441A.

disorders: Loneliness, depression and social support of
spousal caregivers. Journal of Gerontological Nursing,
20(3), 6-16.

Jong-Giervald’s loneliness model with Australian
adolescents. Journal of Youth and Adolescence, 19(2),
133-147.

influences of object relations on the experience of being
Dissertation Abstracts International, 45, 361.

to hopelessness: A longitudinal analysis. The Journal of
Nervous and Mental Disease, 179, 29-32.

Booth, R. (1983). Toward an understanding of

Maturity, 11/12, 80.

doctoral dissertation, Washington State University,
Washington.


League for Nursing Press.


Davidhizar, R., & Shearer, R. (1994). It can never be the way it was: Helping elderly women adjust to change and loss. *Home Healthcare Nurse, 12*(1), 43-46.


Differences in social support and loneliness in adolescents according to developmental stage and gender. Public Health Nursing, 11, 361-368.


Pine, F. (1979). On the pathology of the separation-individuation process as manifested in later clinical work:


Rubino, A., Grasso, S., & Pezzarossa, B. (1990). Denial of separation anxiety as measured by a serial tachistoscopic


Shear, M., Cooper, A., Klernan, G., Bush F., & Shapiro,


The author, Carol Ann Leverich Gouty, was born in Danville, Illinois. Ms. Gouty received the Bachelor of Science in Nursing degree in May, 1974, from Illinois Wesleyan University, Brokaw Collegiate School of Nursing where she graduated Summa Cum Laude. Ms. Gouty was the recipient of the Caroline F. Rupert award for excellence in nursing while at Illinois Wesleyan University. She became a member of Sigma Theta Tau while enrolled at Illinois Wesleyan.

Ms. Gouty received the Master of Science in Nursing degree with a specialty in cardiovascular nursing from Loyola University of Chicago in 1976. In January 1991, Ms. Gouty entered the doctoral program at Loyola University of Chicago and completed the Doctor of Philosophy degree in the Marcella Niehoff School of Nursing in May, 1996.
The dissertation submitted by Carol Ann Leverich Gouty has been read and approved by the following committee:

Dr. Esther Matassarin-Jacobs, PhD, RN, OCN,
Director
Associate Dean, Director, Undergraduate Program
Associate Professor, Medical/Surgical Nursing
Loyola University Chicago

Dr. Rosemarie Rizzo Parse PhD, RN, FAAN
Niehoff Chair,
Professor, Community/Mental Health Administration
Loyola University Chicago

Dr. Mary Ann McDermott EdD, RN
Professor, Maternal/Child Health Nursing
Loyola University Chicago

The final copies have been examined by the director of the dissertation and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the dissertation is now given final approval by the Committee with reference to content and form.

The dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy in Nursing.

2/12/96
Date

Esther Matassarin-Jacobs
Director's Signature