The Stimulated Recall Interview Coding System
SRI-CS

Manual 1.0

Jarl Wahlström – Virpi-Liisa Kykyri

August 2021

Contents

The Stimulated Recall Interview

The Stimulated Recall Interview (SRI) was developed as a process research method affording information on subjective emotional experiences and private thoughts of participants during psychotherapy. Later research has revealed that the responses to SRIs in addition to remembrances of occurrences of the recorded session include other elements, such as new emotional reactions, new insights into actions, intentions and meanings of self and others, and reflections on the therapeutic process.

This manual for coding SRIs is based on data obtained from SRIs collected in the Relational Mind research project on interaction in couple therapy. Each participant (the spouses and two therapists, one female and one male) from three therapy cases was individually, within one day following the therapy session, shown four video extracts from episodes in the session, selected based on pre-established criteria, and asked about their thoughts, feelings, and bodily sensations during each episode. The criteria for selection were 1) visible, intensive emotion (looking sad, weeping, showing irritation or open hostility etc.), 2) notable changes in interaction (e.g., vivid dialogue after long section of monologues), 3) changes in ANS responses (respiration or skin conductance, e.g., strong response of one participant, or changes that indicate synchronization of two or more participants) or 4) a combination of the above-mentioned criteria. The decision to show only four clips of the session was mainly based on feasibility of the research design.

The following instruction was given to the interviewees at the beginning of the SRI:

> *This interview is designed to get information for our research. It is not a therapy setting. The interview is confidential, and all the data is only for the researchers. You may find it useful to discuss later about the video episodes or your thoughts inspired by this interview with your therapists. This is both allowed and encouraged, should you see it important.*
>
> *We will look at some episodes from yesterday's therapy session and talk about the thoughts and feelings and bodily sensations you had then. I have selected four moments.*
>
> *Every time you want to comment on what you see and hear on the video, feel free to just start talking and sharing your thoughts. When that happens, you can press the space bar to stop the video. It is important to share your thoughts immediately since we don't want them to get lost. Watching the video is so interesting that this could easily happen. If you don't remember to stop the video, you can just start to talk, and I'll stop the video.*
>
> *It is also possible that I stop the video and ask you to tell me about the thoughts and feelings and bodily sensations that you had during that moment. Do you have any questions, or can we start?*

The Stimulated Recall Interview Coding System

The Stimulated Recall Interview Coding System (SRI-CS) was developed by Jarl Wahlström and Virpi-Liisa Kykyri and was presented for the first time at the 5th Joint European & UK SPR Chapters Conference in Krakow, Poland in September 2019. It was originally based on a data driven analysis of a data corpus consisting of twelve SRIs from three different cases of couple therapy. In the analysis both authors initially read the interview transcript making notes concerning both the object and the content of interviewees' responses. This open reading was followed by a joint review of the observations. Next, the first author made a grouping of the commenting notes, as a preliminary suggestion for a category system. The categories were

distinguished from each other based on the object of the utterance – whether it was recalling an instance from the session or a comment on the events in the session – and the content, i.e., recalling a thought or an emotion or commenting on the therapeutic work or on one's own behavior. The first author coded all units of analysis, this coding was reviewed by the second author and subjected to refinement in a consensus meeting. Later the transcripts of twelve interviews from three other cases were coded. No need to change the category system appeared when coding this second half of the data.

This manual presents how the units of analysis are defined in the system and the criteria for identifying the content categories of the interviewees' responses.

Units of Analysis

The primary unit of analysis is defined as a complete speech turn by the interviewee that is only interjected by the interviewer's minimal responses, such as "yeah", "mm" or "right". A question or comment proper by the interviewer marks the end of the unit. Usually, such speech turns include more than one utterance carrying a certain meaning given by the interviewee. These utterances are the secondary or actual units of analysis which are given their distinct codes according to the criteria of the system.

Types of Interview Questions

Three types of questions put by the interviewer can be distinguished: 1) Questions following the basic protocol of the SRI, prompting the interviewee to continue the basic task. 2) Questions aiming to ascertain whether the response is a recall or a comment. Responses to these specifying questions are not considered to be units of analysis. 3) Questions or comments asking the interviewee to expand on his/her response or to clarify some aspect of it. Responses to these follow-up questions are considered as units of analysis and the interviewer's question should be included in the data.

A data extract

The following data extract shows how units of analysis can be identified:

> Interviewer: (stops the video) *ok this was the clip did any thought or feeling or sensation in your body come to your mind from this last part* [question according to the interview protocol]
> The primary unit of analysis starts:
> Client: *ermh* [the first actual unit of analysis to be coded starts]: *that thought that I should save something makes me smile and even laugh 'cause it is somehow true but that kind of thought is so utopistic* [first actual unit ends, second actual unit starts]: *and it feels actually quite easy or natural to say that it is somehow amusing that this is what people expect of me when you think about different values*
> The primary unit of analysis ends.
> Interviewer: *mm you said natural to say do you mean that it felt natural there or now here* [a specifying question]
> Client: *yes it felt natural there* [an utterance not to be coded]
> Interviewer: *yes and you remember that you were amused that there was such a thought* [specifying question]
> Client: *yes I remember that moment* [an utterance not to be coded]

The SRI-CS Categories and Codes

The category system includes two recalling categories (Recalling Thoughts; Recalling Emotions and Sensations) and five commenting categories (Commenting on the Therapeutic Process; Commenting from a Distanced Perspective; Reflecting on Self; Reflecting on the Therapeutic Process; Commenting on the Interview Process).

Recalling Thoughts (RecT)

This category includes utterances where the interviewee mentions *a thought* that he/she recognizes as having occurred to him/her *during the episode*.

Examples:

> Client: here I remember that I don't understand why my husband apologized I thought it was odd that he disagreed and then he apologized for it

> Client: and then the thought that what if I cannot trust or if I cannot stay in this relationship

> Therapist: I remember that there I wondered that I wanted to understand better what the connection was between those two issues why she does not want to take side in the quarrels and how that connects to having been bullied in school

> Therapist: there was this instance where I had to deliberate whether to talk about the violence or not and I chose to do it

Recalling Emotions and Sensations (RecES)

This category includes utterances where the interviewee mentions an *emotion or bodily sensation* that he/she recognizes as having aroused to him/her *during the episode*.

Examples:

> Client: yeah this was somehow a very good idea I remember that I became somehow emotional then

> Client: here when speaking my turn the feelings connected to the violent episode came intensely to my mind

> Therapist: yes it [the silence] felt good it was not at all a distressing silence

> Therapist: I felt also compassion and sorrow and even anger that oh no she has had many other difficulties in her life but did it have to start that early

Commenting on the Therapeutic Process (ComTP)

This category includes utterances where the interviewee mentions an *observation* that he/she does *concerning the therapeutic action when watching* the episode.

Examples:

Client: it shows what kind of a connection we have found the whole bunch that I can be free on that level that I really can be so natural without trying anything

> Client: I feel that for he, kind of, the victim stage has been locked on

> Therapist: now I actually hear for the first time that there she sort of said that she does not like that she is being fed some idea somehow I didn't get that

> Therapist: now I even more notice that he speaks about his enterprise and the relationship issues go into the background

Commenting from a Distanced Perspective (ComDP)

This category includes utterances where the interviewee gives a *general comment in relation to the conversational content when watching* the episode.

Examples:

> Client: yes somehow I was in the wrong gang and when I did things otherwise than others then I was treated even more oddly or if someone was on my side I was still odd but was left alone

> Client: when he said that one could be more patient, then as my character is impatient, he surely hopes that I would be more patient

> Therapist: it's interesting how we professionals feed or try to feed ideas and how again in their relation you might have this issue of feeding ideas versus having some kind of autonomy

Reflecting on Self (RefS)

This category includes utterances where the interviewee mentions an *observation or evaluation* that he/she does *concerning his/her own behavior when watching* the episode.

Examples:

> Client: now when I look at myself I see that my style when expressing myself is much more aggressive than the thought is in my own mind

> Client: always when I hear this somebody saying that this was good work, I feel somehow embarrassed

> Therapist: I didn't like this my own comment but somehow I didn't find any other way of getting forward there

Therapist: it felt natural that my co-therapist always connects uprising issues to the couple relationship and I more to the side of the individual

Reflecting on the Therapeutic Process (RefTP)

This category includes utterances where the interviewee mentions an *evaluation of the therapeutic action* that he/she does *when watching* the episode.

Examples:

Therapist: I would have liked to somehow halt at those details that for instance the client brought up I didn't really like that we sort of started to suggest those words I would have liked to do it in the way that he would had pondered it himself and the came to some conclusion

Therapist: in this session it [giving room for emotions] worked very well when in the previous session I felt that there were instances where the client became emotional and I had the feeling that we moved forward too quickly but here it was not like that now when I watch this

Commenting on the Interview Process (ComIP)

This category includes utterances where the interviewee mentions a *thought, emotion or bodily sensation* that arouses to him/her *when watching* the episode.

Examples:

Client: yes something like that and it doesn't feel all too nice to see that

Client: yes one is the prison of one's past those issues would not need to eternally kick around one should just get free from them

Therapist: that was a really good and important spot and I notice that even now here I have this trembling sensation

Therapist: I remember that I noticed that I'm holding breath and now I had in my body somewhat the same feeling

New Insights

Sometimes the SRI-interviews include responses expressing the interviewee's new insights into actions, intentions and meanings of self and others. It is, however, difficult to appraise whether an utterance expresses a new insight, since the interviewees rarely explicitly articulate an observation as including an element of novelty, and the interview protocol has not so far contained any questions aiming at ascertaining this aspect. Because of this, New Insights has not been included in the coding system as a formal category. It is advisable, though, to make note of such instances.

Examples:

Client: now when I see how I talk it seems very rude even if that is not my intention at all but perhaps this way of expressing oneself is learnt from home it is somehow sharp and rough

Client: that was that kind of time you didn't think that way but now in hindsight you understand that it has been something quite big precisely if you think of the fear the fear was at that time present in so many ways all the time and it arises again in these kind of situations when you talk about it again

Therapist: is here two things in fact I hear also here I hear really for the first time that he in his own way said that he does not like to be fed some idea it somehow went me by