Annotated interview transcripts

**1) Extract Thematic Coding**

The following extracts come from a study on technological change in everyday life I did sometime ago.

|  |
| --- |
| **Contextual comment:** These excerpts come from an episodic interview about technological change in everyday life. They are parts of the narrative in response to the question “What was the first encounter with technology you remember? Can you tell me about that situation?” The interviewee is part of the subsample of information engineers in the study and these narratives (as in this case) lead into the outlining of why the interviewee selected this professional area. We see here a topic running through the two excerpts and other areas of the interview: Gender and technology, gender and this professional area. |
| **Interview excerpt**  | **Open thematic coding** | **Comment** |
| 1. I was a girl and I was however always interested in 2. technologies, and I of course got puppets as a 3. present. But then at some point, my big dream, a 4. railway set, and I have wound up it and have 5. put it on my sister’s back head, and then the 6. little wheels have turned into the hairs all 7. the hair was entangled in the train and then 8. it was over with the technology, because my 9. sister had to go to the hairdresser, all had to be 10. disentangled, all was very complicated, she had 11. no more hair on her head, all were saying ‘oh no, 12. how nasty!’ and I cried because my railway had 13. been put to pieces and that was already the end 14. of technology ….20. Later I found out that I am very interested in 21. technical things, which was not very prominent in 22. our family. My father was not very gifted in technical 23. things, to say at least. This was not promoted at our 24. home. And we were three girls at home, that was not 25. really in the foreground. But when something broke, 26. somewhere, that was very interesting for me, and I 27. tried to find out why, to repair it and so on … | **Code:** Gender positioning; interest in technology vs. gender stereotypes (puppets for girls); Dream becomes fulfilled but gender issues come back (sister, hurting her) and make dreams fail. Again the opposition stereotypes and wishes**Code:** juxtaposition of female gender and technologyInterest in technology continues**Code:** Distinction interviewee – family;Emancipation from family through technology interest**Code:** Technology as an individual way out of family restrictions | These short narratives are responses to the question about the first encounter with technology the interviewee remembers. She starts by developing a tension between (her) gender and technology and her family and tells an episode, in which this materializes in hurting her sister with her new technology (railway set). This also becomes an example for the resistance of her surroundings against her interest (that was already the end of technologyIn the second excerpt she unfolds this dynamic family vs. technology and vs. her interest in technology and describes her way into technical practices (find out and repair) and this continuous narrative turns in later sequences into her decision to study information science and become an information engineer |

**2) Example of Line-by-Line Coding**

The following interview extract and coding come from a Kathy Charmaz (2003, p. 96-8), the comments are mine.

|  |
| --- |
| **Contextual comment:** This excerpt comes from a study in which Kathy Charmaz collected and analysed illness narratives of her interviewees. This interviewee suffers from lupus, which is an autoimmune disease, mainly occurring with women. The body’s immune system falsely attacks cell structure of the body, which may lead to a vast combination of ailments. This story excerpt comes from an early part of the interview, when the interviewee was asked to describe her illness. The codes resulting from focused coding are about the social coping with the disease and the dilemmas becoming visible in the interviewee’s story about this point. |
| **Interview excerpt**  | **Line-by-line coding** | **Comment**  |
| 1 If you have lupus, I mean one day it’s my liver; one day 2 it’s my joints; one day it’s my head, and it’s like people 3 really think you’re a hypochondriac if you keep com-4 plaining about different ailments …. It’s like you don’t 5 want to say anything be-cause people are going to start 6 thinking, you know, ‘God, don’t go near her, all she is’ – 7 is complaining about this.’ And I think that’s why I never 8 say anything because I feel like everything I have is 9 related one way or another to the lupus but most of the 10 people don’t know I have lupus, and even those that do 11 are not going to believe that ten different ailments are the 12 same thing. And I don’t want anybody saying, you know, 13 [that] they don’t want to come around me because I 14 complain.  | Shifting symptoms, having inconsistent daysInterpreting images of self given by othersAvoiding disclosurePredicting rejectionKeeping others unawareSeeing symptoms as  connectedHaving others unawareAnticipating disbeliefControlling others’ viewsAvoiding stigmaAssessing potential losses and risks of disclosing | In this step, Charmaz works through the excerpt line-by-line and codes everything that is mentioned by the interviewee. Her first three lines are descriptions of this disease (lupus) and its features (e.g. shifting symptoms). Lines 3 to 6 describe the interviewee’s anticipation of others’ reactions and evaluationsLines 7 to 12 cover the interviewee’s reaction to the disease and her anticipation of evaluations, thus the codes ‘Controlling others’ views’ and ‘avoiding stigma’. In line 12 to 14, the interviewee balances positive and negative outcomes of disclosing. In this step the codes are very close to the original wordings but they lift the analyst’s wording on a first level of abstraction (e.g. ‘disclosure’ and ‘stigma’) |
| **Interview excerpt**  | **Focused coding** | **Comment**  |
| 1 If you have lupus, I mean one day it’s my liver; one day 2 it’s my joints; one day it’s my head, and it’s like people 3 really think you’re a hypochondriac if you keep com-4 plaining about different ailments …. It’s like you don’t 5 want to say anything be-cause people are going to start 6 thinking, you know, ‘God, don’t go near her, all she is’ – 7 is complaining about this.’ And I think that’s why I never 8 say anything be-cause I feel like everything I have is 9 related one way or another to the lupus but most of the 10 people don’t know I have lupus, and even those that do 11 are not going to believe that ten different ailments are the 12 same thing. And I don’t want anybody saying, you know, 13 [that] they don’t want to come around me because I 14 complain. | **Avoiding disclosure****Assessing potential losses and risks of disclosing** | In the second step of coding the same excerpt is analysed. Here a selection of codes is pursued, which are summarizing or highlighting the process the interviewee is describing and reflecting. The focus here is on the coping with the disease and in particular with the anticipated social consequences – the reactions of friends and family to disclosing the details of the disease. This is materialized in a kind of protection (avoiding disclosure) and the checks and balances of being open and talking and remaining disclosed and alone with the disease. |

**3. Extract grounded theory coding**

The following interview extract and coding come from a research I did some time ago with students.

|  |
| --- |
| **Contextual comment:** This excerpt comes from a study on health concepts. This answer came after the question: What is health for you? What do you link to the word? It was fairly exceptional as most interviewees talked about feeling well, having no complaints and so on. Thus the analysts were rather puzzled and wanted to find out about why this interviewee reacted like this and what he referred to in detail. Therefore the segmentation of the answer into its smallest parts. |
| **Interview excerpt**  | **Line-by-line coding** | **Codes and comment**  |
| 1. Well-11/link2/personally3/to health4/: 2. the complete functionality5/3. of the human organism6/all7/4. the biochemical processes8 5. of the organism9/6. included in this10/all cycles11/7. but also12/the mental state13/8. of my person14/9. and of Man in general15/. | 01 Starting shot, introduction.02 Making connections.03 Interviewee emphasizes the reference to himself, delimiting from others, local commonplace. He does not need to search first.**04 See 2, taking up the question.**05 Technical, learned, textbook expression, model of the machine, norm orientation, thinking in norms, normative claim (someone who does not fully function is ill).06 Distancing, general, contradiction to the introduction (announcement of a personal idea), textbook, reference to Man, but as a machine.07 Associations to ‘all’: referring to a complete, comprehensive, maximal understanding of health; …; however, “all” does not include much differentiation.08 Prison, closed system, there is something outside, passive, other directed, possibly an own dynamic of the included.09 See 06.10 Textbook category.11 Comprehensive; model of the machine, circle of rules, procedure according to rules, opposite to chaos.12 Complement, new aspect opposite to what was said before, two (or more) different things belonging to the concept of health.13 Static (“what is his state?”); mechanistic concept of human being (“state”), ….14 Mentions something personal, produces a distance again immediately, talks very neutrally about what concerns him, defense against too much proximity to the female interviewer and to himself.15 General, abstract image of Man, norm orientedness, singularity easier to overlook. | This statement is the response to the question: What is health for you, what do you link to the word ‘health’?The coding in the middle column refers to the numbers attached to words (Well-11/link2), the following codes were developed:**Comment:** to the statement in the course of the interview**Codes:** functionality, normative claim**Code:** mechanistic image of Man**Code:** mechanistic–somatic idea of health**Code:** multidimensionality**Code:** wavering between personal and general level**Code:** distanceThese codes highlight the difference of this statements to other interviewees’ statements about what health is for them  |