



WSPS: Analyst's Coding Cheat Sheet

Study: Washington State Periphenomenal Survey | **Version:** 2.0 (Consolidated)

1. Primary Typology Codes (**class_code**)

*Assign the event to ONE primary category based on the **phenomenology** (what happened), not just the user's label.*

Code	Category	Key Indicators (The "Signature")
TYPE_A	The Night Assault	Physiological. Sleep paralysis, inability to move, pressure on chest, sense of presence while in bed. (Old Hag).
TYPE_B	Techno-Mysticism	Digital/Structural. Visuals resembling pixels, buffering, texture-pop-in, or "reality breaking." Glitch-in-Matrix.
TYPE_C	Traditional Haunting	Place-Bound. Footsteps, knocking, cold spots, transparent figures. Fits classic ghost story tropes.
TYPE_D	Psi / Crisis	Informational. Telepathy, premonitions, shared dreams, sensing danger at a distance. No physical entity seen.
TYPE_E	Cryptid / UAP	Biological/Mechanical. Seeing a physical creature (Bigfoot) or craft. Distinct from ghosts (which are spiritual).

2. Engagement & Field Codes (The "Gatekeeper")

Use these to interpret the provenance of the data.

Engagement Status (`engagement_status`)

- **1 = Web / Dead End:** Spontaneous web entry. No follow-up possible. Field columns are empty.
- **2 = Web / Remote:** Spontaneous web entry. Researcher contacted subject remotely.
- **3 = Field / Intercept:** Researcher was present. **Field columns MUST be filled.**

Field Observation Codes (Columns 30–41)

- `setting_type`: RES (Residential), LIM (Liminal), COM (Commercial), NAT (Natural).
- `env_weather`: OZ (Unnatural Silence/Stillness).
- `obs_demeanor`: INTENSE ("True Believer"), SKEPTICAL (Reluctant).
- `obs_delivery`: REHEARSED (Scripted?), FRAGMENTED (Traumatic recall?).

3. Somatic Markers (Physiological Screen)

Binary Flags (0=No / 1=Yes).

Variable	Description	Folklore Context
<code>soma_paralysis</code>	Subject could not move voluntary muscles.	Strong indicator of Sleep Paralysis (Type A).
<code>soma_vibe</code>	Felt electric buzz, static, or internal vibration.	Associated with OBEs and Sleep Paralysis.
<code>soma_pressure</code>	Felt weight on chest or body.	The "Old Hag" or "Incubus" motif.
<code>tech_effect</code>	Device battery drain, static, malfunction.	"Ghost in the Machine" / Interference.

4. Narrative Consistency Scale (narr_consist)

- **1 (Fluid):** Contradictory; subject seems confused or making it up.
- **2 (Low):** Vague details; heavy reliance on "it's hard to explain."
- **3 (Average):** Clear sequence, but some fuzziness on time/duration.
- **4 (High):** Very detailed; consistent timeline; specific sensory descriptions.
- **5 (Fixed):** Story feels "scripted." Subject uses specific jargon perfectly (Potential Internet Creepypasta retelling).

Researcher Triage Logic (Decision Matrix)

Scenario 1: The "Ghost" in the Bed

- *Subject says:* "A ghost held me down."
- *Data:* soma_paralysis=1, loc_type=BED.
- *Decision:* Code as **TYPE_A (Night Assault)**.
- *Reason:* Physiologically, this is Sleep Paralysis. The "Ghost" is the *Interpretation*.

Scenario 2: The "Glitch"

- *Subject says:* "The world lagged."
- *Data:* med_digital=1, vis_type=GLITCH.
- *Decision:* Code as **TYPE_B (Techno-Mysticism)**.
- *Reason:* The language used ("lag," "render") is derived from digital culture.

Scenario 3: The Shared Fear

- *Subject says:* "We both saw the light."
- *Data:* social_ctx=SHARED.
- *Decision:* **Flag for High Reliability**.
- *Reason:* Shared memories challenge the "hallucination" hypothesis.

Scenario 4: The Naive Tech User

- *Subject says:* "I saw a weird pixely block."
- *Data:* med_digital=0 (User is 65+ years old, no internet).
- *Decision:* **CRITICAL DATA POINT.**
- *Reason:* A non-digital native describing a digital anomaly suggests the phenomenology is evolving independently of culture.