



“Why can’t I say people’s names?” Alexinomia as a widespread psychological phenomenon

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ABSTRACT

Psychological research has recently proposed alexinomia, characterised by an inhibited behaviour in saying names, as a distinct psychosocial phenomenon. Alexinomia is associated with anxiety and avoidance behaviours with regards to saying names and thus severely impacts every day social interactions and relationships. This study aimed to explore the prevalence of this newly established and poorly understood psychological phenomenon and to further determine its impact on everyday life. For this purpose, online advice and discussion forums were systematically searched for threads on and mentions of problems with saying names. We analysed a broad dataset from English-language comments discussing alexinomia-related experiences and behaviours, inclusive of varied demographics and geographical regions. The findings based on the qualitative analysis of 257 unique sources show that alexinomia is a widespread phenomenon. Moreover, the analysed online materials showed affected individual’s use of a variety of effective and ineffective coping strategies and experience varying degrees of severity, which can potentially diminish with training. The study’s results therefore highlight alexinomia as a relevant, yet highly under researched, field of study, and add to our knowledge on the experience of alexinomia in everyday life and its potential origins, especially relating to social anxiety and early-life familial dynamic.

1. Introduction

Every day, we call people by their names, but for some, saying names can cause fear, anxiety, and stress, leading to a range of repercussions for social situations and personal relationships. This phenomenon, recently established under the term *alexinomia* (Ditye et al., 2023), in nascent research on the topic, is a psychosocial name saying problematic first highlighted by Welleschik (2019). The main characteristic of alexinomia is inhibited name saying behaviour in everyday social interactions due to anxiety and it mainly affects personal (i.e., first, given) names.

The meaning laden history of names serves as a framework for their societal importance, making the inability to use names problematic. There is a wide range of socio-onomastic research highlighting the importance of personal names for the sense and the formation of personal identity. In western societies, given names are assigned at birth and primarily express personal (individual) identity, while surnames are ascribed from a parent or caregiver, most commonly the paternal name, signifying social identity by the belonging to a family (Aldrin, 2016).

Referring to a person by name helps us identify someone by differentiating them from others, with a semantic label. A name represents a person and therefore provides an important sign in a semiotic context (Leibring, 2016; Watzlawik, 2016). Naming, both historically and nowadays, is deeply culturally rooted and embedded in societal constructs (Alford, 1987; Lawson, 2016). The cultural dimension of names and naming has been researched extensively in anthroponomastics, looking at naming systems around the world and across many languages (see Bremwell, 2016, for a summary on this line of research) and at the effects of social background on the choice of first names (Elchardus, 2010).

Against the background of names acting as a key identifier and their intricate link to our external, internal, and intrapersonal identity, it has recently been demonstrated that “being unable to address others by name has severe consequences for personal and professional life” (Ditye et al., 2023, p. 2). For those experiencing alexinomia using names triggers feelings of anxiety, self-doubt, and shame, leading to avoidance behaviours. Instead of saying a name affected individuals rely on

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physical touch, presence or eye contact when initiating a conversation, or completely avoid situations requiring the use of names, with negative repercussions for many types of social interactions. This can lead to psychological strain given the propensity for self-doubt, feelings of awkwardness and inferiority. In relationships alexinomia can lead to misunderstandings and conflict, as it may be misinterpreted by others as a lack of caring, when conversely it infers the inverse.

There are at least three lines of existing research looking at phenomena specifically characterised by the deliberate omission of a known name in direct verbal communication. These phenomena are distinct from but relevant to our understanding of alexinomia. The first line of research comes from anthropology, where the study of *name avoidance* has a long tradition. Name avoidance refers to the common practice of not calling people by their names and can be found in many African and Asian cultures. While in most English-based Western cultures using other people's personal names is usually appreciated as a sign of respect and politeness, cultures practicing name avoidance consider certain naming behaviours (e.g. calling someone more senior or superior by their first name) disrespectful (Anchimbe, 2011). Name avoidance occurs by social convention and, in more extreme cases, can take the form of a taboo, for example, when using the name of god, the king's name, etc. (Fleming, 2011). Along these lines, the second line of research that, to our knowledge, consists of only a single article is looking at first name naming practices in organisations (Morand, 2005). Referring to people by their first name is increasingly common in English speaking countries, not just among peers, but also across seniority and authority. First name use is generally encouraged as a means of promoting inclusivity and avoiding unnecessary hierarchies in a corporate setting (Bargiela et al., 2002; Glickman, 2011). Morand (2005) found that first names of superiors are used less frequently by full time employees in a large company as the distance in hierarchy between the name bearer and the name user increases. The third line of research includes psychological studies on the relationship of name and self-esteem, showing that someone's evaluation of their own name is related to how they view themselves (Aldrin, 2016). The more someone likes themselves, the more they also like their own name and vice versa (Joubert, 1993), resulting in a more frequent or less frequent use of one's own name. Research on chosen name use in gender dysphoria, the "distress or discomfort that may occur when a person's biological sex and gender identity do not align" (Atkinson & Russell, 2015, p. 792), shows that choosing a name different from one's own name and thus omitting the original name from daily use can have positive effects on mental health in transgender youth (Russell et al., 2018).

Aside from these studies, discourse on alexinomia, the *inability* to say names, has been added only recently to state-of-the-art psychological literature (Ditye et al., 2023). In alexinomia, a person knows someone else's name and would very much like to use the name, but they cannot. In the study by Ditye et al. (2023), individuals affected by this fear of using names were summarised under four main factors, which can be generalised to describe alexinomia: The *Subjective Experience* of being unable to use names is characterised by the frequent occurrence of feelings of anxiety and shame, a negative self-concept and worries about the negative consequences of not saying a name. By omitting names from conversation people affected avoid intimacy and closeness. Using or not using names to regulate closeness in a relationship is not per se problematic, however, in alexinomia avoiding names is not a deliberate choice. *General Characteristics* indicate that alexinomia can affect all relationships and all types of communication. Using alternatives such as nicknames can be a viable option in certain circumstances and with certain people. Symptoms usually occur frequently, with the onset in childhood and, if untreated, a persistence of the disorder across lifetime. An individual's relationship to their own name might be a modulating factor of alexinomia. *Effects and Coping Strategies*: Alexinomia has severe consequences for affected relationships. Not saying a name might be perceived, such as having the potential to offend and create barriers that would not otherwise be present. In turn, affected individuals develop

strategies to cope with the disorder, such as tactics used to avoid saying names making the inability less obvious to others, presumably as a direct consequence of perceiving it to be offensive or creating unnecessary barriers. Professional intervention and treatment for their condition has been shown to increase individuals' well-being. Finally, *Vulnerability Factors* focused on potential biographical causes of alexinomia include childhood experiences such as trauma, sociability, or problems at school, such as bullying. Family dynamics, for instance unstable family situations, divorce or a history of mental illness in the family seem to contribute to experiencing alexinomia, as do interpersonal relationships showing more general difficulties with emotional openness, such as expressing feelings of love and intimacy.

This previous knowledge on alexinomia, however, is based on select small number of cases. All participants in the initial study (Ditye et al., 2023) belonged to the group of German speaking, young adult, women. Given these constraints in the current knowledge on alexinomia, many questions remain regarding its prevalence, how it is distributed across gender, languages, and other demographics. To reliably address some of these open questions, a much larger set of data is warranted to extend the findings from previous research and potentially substantiate alexinomia as a widely distributed phenomenon.

For this purpose, the current study set out to analyse a broad set of data from publicly available online forums and discussion websites. This approach provided a means of gaining insight into the general prevalence of alexinomia, especially beyond the German-speaking context, by focusing on posts written in the English language. The study sample was drawn from data available in asynchronous forums (these included general topic forums such as Quora and Reddit and specific subject forums such as Social Anxiety Support), where participants contribute to discussions at their own convenience and discretion, and data from as far back as 2008 was included to assess the longevity of the phenomenon. The goal of this research was to enhance our understanding of the broader aspects of alexinomia by investigating the frequency and the contents of reports of alexinomia-related experiences in social and public media.

2. Materials and methods

2.1. Study design

Data for this study was collected using an extensive search of publicly available online forums and blogs written in English, aiming to obtain a comprehensive sample of texts pertaining to the inability to say names, taken from a diverse selection of sources (Holtz et al., 2012; Seale et al., 2010). The study collected a sample of posts from anonymous participants who self-reported experiencing symptoms of alexinomia. The anonymity of internet forums provided a conducive environment for open and honest discussions (Truss et al., 2022).

The inclusion criteria covered those with the inability to say names, noting circumstantial differences and taking account of whether the inability was relationship specific or not, but differentiated between these individuals and those who have come into contact with someone experiencing alexinomia. The ease of accessibility of these forums enabled data to be collected from geographically diverse populations, while the discreet nature of data collection reduced potential biases (Holtz et al., 2012; Seale et al., 2010). However, this method also presented some disadvantages. For instance, forum participants may not be representative of the general population (Holtz et al., 2012; Truss et al., 2022). Additionally, the quality of information shared on forums may be affected by factors such as self-selection, trolling, and misinformation (Seale et al., 2010; Truss et al., 2022). On the other hand, internet forums serve as an economic and efficient data source, allowing researchers to effectively gather insights into the experiences of individuals (Seale et al., 2010).

2.2. Identifying forums

To identify forums to collect data from, a list of search terms was formulated grounded on the main characteristic of alexinomia, established in previous research. The central keyword used was “name”, in combination with a list of pronouns (I/he/she/they/them/we). In addition, a list of 10 key words indicating a problematic were used, which included “anxious, avoid, blocked, cannot, does not, embarrassed, never, shame, strange and uncomfortable” to ensure the data fully reflected the most complete picture of those experiencing alexinomia. From this, a set of 45 iterations of search terms were generated. Examples include: *I can't say names*; *Why can't I say names?*; and *Why doesn't my partner say my name?*

This procedure resulted in an original list of 45 questions. In addition to these questions, the Google suggested search questions were also integrated based on relevance. There were 16 relevant suggestions made under the Google category “People also searched for”. Examples of these included “*he avoids saying my name*” and “*bf [boyfriend] never says my name*” (see Table A1 for a full list of search terms and questions). These were carefully examined to ensure the questions were directed towards alexinomia and not alternative problems with name saying, such as bullying (name calling), forgetting names or mispronunciation of names. The last category was closely assessed as mispronouncing names, or the fear of mispronouncing names could be included as a part of experiencing alexinomia.

Google was used as the main search engine in pursuit of the data as it has a 92.57 % market share as of June 2021 (Johnson, 2021) and this ensured broad access to the content needed. Comparing search results generated by Google to those generated by other popular search engines (i.e., Bing and Yahoo!) at multiple points of the data collection showed no noticeable systematic differences in the results that these various search engines provided. By inputting each question into Google, a clear overview of where discussions were most prolific, regarding the inability to say names, could be established. Using multiple questions involving key phrases such as “cannot say names” allowed for focus on the same theme, which resulted in saturation, in which the resulting blogs and forum entries used for discussing the topic, occurred repeatedly under varying search criteria and thus produced no new information or sources. The term saturation is here defined as the point at which the categories were found to be robust, because no new properties had been found in these categories and the “established properties account[ed] for patterns in [the] data” (Charmaz, 2014, p. 213). While search engine algorithms are known to use information on the geographical location of a user for selection and ranking of results, which can lead to a potential bias in the presented data, the small overall number of mentions of the researched topic makes it unlikely that important sources of data were not presented altogether by the search engines or were entirely overlooked by the researchers.

2.3. Data collection and sample

In accordance with the search procedure and broad criteria to include all concepts relating to alexinomia, a total of 257 sources were initially identified. These 257 sources consisted of one news article regarding what alexinomia might be and suggesting ways to overcome the problem and 256 posts on 18 different online platforms. These platforms (see Table A2 for a full list of all platforms) consisted of advice and discussion forums, including forums within platforms such as Reddit and Quora where users could post open questions for the public.

Three posts originated from someone who stated their problem was with forgetting names but showed no other indication of a problematic with saying names. The authors of 3 other posts commented that not saying names is something common in their culture for reasons of social convention. 23 posts were answer comments by not directly affected users stating opinions and giving advice. These 29 posts were classified as irrelevant and were excluded. The remaining 227 posts included 184

posts of individuals primarily affected by alexinomia and 43 posts of individuals secondarily affected by alexinomia (i.e., 35 posts that originated from a romantic partner of someone with alexinomia, rather than someone suffering themselves, 4 posts from a relative of someone with alexinomia and 4 by friends or colleagues of a person with alexinomia). The aim of this study was to analyse the firsthand experiences of primarily affected persons, hence the resulting 184 posts were used for further analysis. The 184 posts were written by 173 individual users. Eight users posted twice and one user posted 4 times.

2.4. Qualitative content analysis

Text content of all posts was analysed using qualitative content analysis by Mayring (2000). Mayring's method is widely recognised in the field of qualitative research and is particularly valued for its systematic and rule-guided approach to analysing textual data (Schreier, 2012). The method allows for both inductive and deductive category formation, ensuring well-structured data and a strong understanding of the nuanced experiences and sentiments expressed by users. Analysing online posts necessitates a structured approach and Mayring's method provides a clear framework for data reduction, ensuring that essential information is captured without being overwhelmed by the volume of data. The method's emphasis on intercoder reliability ensures consistency and validity in interpretations, making it a useful and reliable way of extracting meaningful insights from user-generated content.

The data was collected into a spreadsheet detailing the source of the post, the URL link to the source, the date the post was written if given, the authors given online name (most commonly a self-chosen pseudonym), the location if given, the author gender (based on user profiles and personal pronouns) if given. Data were then pseudonymized and stored separately from the original files to prevent the identification of a natural person with the help of identifiers. Next, it was recorded as to whether the post was a starter post or an answer to the original post, for example, a discussion forum that started with the question “why can't I say my boyfriend's name?” was classified as a “Starter post”, while any further discussion to that topic was termed an “Answer post”. The post was then transcribed in full and categorised as a post of someone with alexinomia or the partner, friend or relative of someone with alexinomia. Any information that might be relevant, but was not consistently given, such as educational background or previously diagnosed psychiatric illnesses was also stored as well as which of the 45 initial questions was entered into Google search to produce the resulting blog or forum detail.

Next, collected data was transcribed verbatim and line numbers were ascribed to each post. The content was paraphrased, removing text that was seen to be superfluous and meaning was extracted (Mayring, 2010). Following this, each unit of information relevant to the description of alexinomia was categorised into main categories and subcategories based on content. This was done based on a categorisation system that was established previously using the same method of content analysis (Ditye et al., 2023). Therefore, in this study the methods of “subsumption” was applied in which concepts are recognised within the data that align with given categories and subcategories and new categories are added if needed (Mayring, 2010, p. Section 5.5). The four main categories identified in previous research were (A) Subjective Experience of alexinomia, (B) General Characteristics of alexinomia, (C) Effects and Coping Strategies, and (D) Vulnerability Factors (see Introduction for a description of categories and Table A3 for the entire category system including all main and subcategories). All information was categorised (i.e., coded) into a main first, and second level subcategory per individual code. For example, the statement “My husband recently asked me, why I never said his name” would be classified as belonging to the main category C Effects and Coping Strategies, subcategory C2 Effects on Affected Relationships and individual code C21 Noticed by Others.

Where the information was new or did not align within an existing category, the data was once again analysed and either a new category

was created, or an existing category was expanded. The criteria of a new category aligned with the research question in the aim of exploring problematic name saying behaviour and was therefore broad in its inclusion, capturing any meaningful statement that related directly to the personal experience of alexinomia. When no matching category was available new categories were formed to reflect the additional factor.

All procedures were approved by the Sigmund Freud University ethics committee.

3. Results

3.1. Sociodemographic data

Alexinomia was discussed by both male and female genders of both groups of primarily and secondarily affected individuals (Table 1). This indicates that alexinomia occurs across gender, affecting both male and female. Results included 44 men with alexinomia, this included posts by male authors with alexinomia. Equally there were 60 females with alexinomia, which included posts by female authors with the inability. However, please note that most posts were made anonymously or made reference to a person with alexinomia without specifying gender (80 posts) and were therefore categorised as unspecified.

The geographical locations that were made openly available in 25 of the posts showed that the authors were from 8 different countries, with the greatest number occurring in the USA. There were 16 posts from the USA, with the posts stemming from 13 different states, 2 posts were from the UK, two from Germany, one from India, one from Australia, one from Canada, one from Finland and one from Spain. Although the data collected shows only a fraction of the locations of the overall posts, the distribution across different continents, indicates that alexinomia is widespread. This finding is highly relevant as it shows that alexinomia is not a feature reserved for the initial sample of German speakers and is widely distributed across the English-speaking world, and might occur also in other countries and languages which to this date have not been studied.

3.2. Quantitative data

Within the sample of 184 individual posts, there was a total of 1227 occurrences (i.e. mentions of alexinomia or an aspect of it), referring to all categories identified by previous research. Categories from previous research included categories (A) *Subjective experience*, (B) *General characteristics*, (C) *Effects and coping strategies*, and (D) *Vulnerability factors* with a total of 19 subcategories including 148 individual codes (see Table A3). The term “code” refers here to an individual entry in the classification system according to which the online data of this study was coded. In this process, 107 codes of the original classification system were confirmed by occurrences in the collected data, or 72.3 %, indicating strong replication. Additionally, 32 new individual codes were established, and 2 subcategories were expanded in Category A only,

Table 1
Frequencies of posts split by gender of both post authors and the affected person.

Post type	Individual	Total
Post author gender male	63	
Post author gender female	99	
Post author gender unspecified	95	257
Alexinomia gender male	44	
Alexinomia gender female	60	
Alexinomia gender unspecified	80	184*
Partner (female author/alexinomia indicated male)	28	
Partner (male author/alexinomia indicated female)	5	
Partner (unspecified author/alexinomia indicated male)	2	
Relative (male author/alexinomia indicated female)		
Relative (female author/alexinomia indicated female)	2	

Note: *This number excludes the posts that do not relate directly to alexinomia.

resulting in a new total number of 182 individual codes.

The greatest number of occurrences were found in Category B *General Characteristics*, with 507 occurrences across 59 individual codes (see Table 2 for detail), followed closely by Category A *Subjective Experience* with 456 occurrences (50 codes). Category C *Effects and Coping Strategies* had 190 occurrences (25 codes), while category D *Vulnerability Factors* had the least occurrences, with 77 (25 codes). The highest number of occurrences was therefore concentrated in Categories A (37 %) and B (41 %), which suggested that the data available online focused heavily on the general characteristics of problematic name saying behaviour and the subjective experience, rather than providing background information regarding family, childhood experience and effects on social interactions. The new category system extended by the findings from this study is shown in Table A3.

3.3. Qualitative data

3.3.1. Subjective experience of alexinomia

Qualitative content analysis of posts pertaining to Category A *Subjective Experience* pointed to multiple emotional and social responses tied to the inability to say names. One of the most striking findings was the prevalence of negative self-perception. A significant number of respondents reported feeling “strange”, “weird”, or “odd” due to their challenges with saying names as with the individual in post A184, Lines 1022–1024, “I can’t call people by their names. If I’m talking about someone to somebody else I can say their name but I can’t say something like “Hi John, how are you?” or get some ones attention “John, could you look at this please?” I get this weird feeling of super awkwardness or embarrassment”.

This reflects a possible diminished self-esteem and underscores the societal pressure and expectations of interpersonal communication norms. These feelings may be accentuated in social situations where naming is a common form of address or recognition. The term “awkward” frequently emerged in the data, suggesting that many individuals find themselves in socially uncomfortable situations because of their inability to say names, for instance in post A49, lines 304–305: “I just have a really hard time saying their names, like it’s too intimate as you say, I almost stumble over the name and feel awkward”. This discomfort often overlapped with feelings of shame, uneasiness, and perceptions of being socially inappropriate such as in post A14, Line 88–89: “Sometimes it feels really weird to say someone’s name, confused, I know it’s strange but I can’t explain it.”. The repeated occurrences of this sentiment hint at a deeper emotional unease, potentially rooted in societal norms and expectations.

Several occurrences indicated a fear among participants of mispronunciation of a (generally not difficult to pronounce) name or even of saying the wrong name, as in post A154, lines 902–903: “I’m always scared I’m going to say the person’s name wrong!” even with close friends, indicating high levels of social stress in the attempt of correctly addressing someone.

As shown above, the data suggests that the act of saying a name goes beyond mere identification; it has social implications and can significantly impact interpersonal dynamics. Interestingly, the data showed the symbolic power of names. Names were seen not just as identifiers but also as a way of showing respect and acknowledgement of one’s identity. This aligns with the theoretical assertion that names carry significant weight, encompassing respect, recognition, and power (Glickman, 2011).

Conversely, the results also produced instances where not using names was perceived as ‘normal’ or ‘non-problematic.’ For instance, within intimate relationships or familial settings, omitting names was seen as a sign of closeness or familiarity in these cases (e.g., post A1, line 8: “I think this is pretty common among close couples. It’s a good thing”). This finding is well in line with results from previous research showing that – just as omitting a name – also using a name can be perceived as impersonal and distant by some. This points to a cultural or situational nuance where name usage can be contingent on the specific relationship

Table 2

Number of occurrences across previously established and new subcategories of the category system describing alexinomia.

	Posts	Occurrences	Previously established subcategories confirmed by the study	New subcategories added to the category system
Subjective experience	147	456	47	3
General characteristics	148	507	43	16
Effects and coping strategies	61	190	22	3
Vulnerability factors	23	77	15	10
Total	379	1227	127	32

Note: quantity is above the number of posts as some posts included reference to multiple people e.g. *My wife and I do not use each other's names*. Posts refers to individual entries in online discussion forums. All posts were screened for mentions of alexinomia or topics related to it (i.e., occurrences).

dynamic.

Physiological responses, such as blushing (such as in post A28, line 142–143 *“When I do use a persons name, I can usually feel myself blushing”*), were also observed when individuals attempted to say names. This is noteworthy as it indicates that the inability to say names is not just a cognitive or linguistic challenge, but also one that triggers bodily reactions. Blushing, i.e.; erythrophobia, is associated with feelings of embarrassment and shame and is a core symptom of social phobia.

3.3.2. General symptoms of alexinomia

Online data suggested that the inability to say names can be a long-standing problem for those experiencing it, without a recognisable beginning point. This was indicated by a number of occurrences, such as post A30, Lines 149–150: *“I experience this problem and have ever since I can remember.”* And post A47, lines 274–275: *“Ever since I could remember, I was, in a way, scared to call people by their name.”*. Where a remembered starting point was noted, (e.g., in post A184, line 251: *“I definitely had it when I was a kid”* or post A3, Line 34 *“But now that I’m 21, I realize I’ve been doing the whole “Hey... you” thing for essentially 11 years”*, where the person has recalled not being able to say names since the age of 10) alexinomia occurred in or prior to adolescence, suggesting an early onset.

The results further showed that those with problematic name saying behaviour experienced this broadly across social relationships, rather than being confined to specific relationships. This finding provides an important extension to our understanding of alexinomia as previous research suggested that the problematic might occur most prominently in romantic relationships. Cases reporting the experience of alexinomia with mothers, for instance in post A114, lines 861–2 *“I even find it hard to say “hello mum” or any other family members names”*, stepmothers, and children underscores a potentially deeper familial or even hereditary link to the condition and a possible generalisation of the behaviour to social categorisations.

In addition to relationship dynamics, findings highlighted specific situational challenges linked to alexinomia. Individuals often found it particularly difficult to say names when attempting to get someone’s attention as noted in post A171, line 968: *“I can’t just say their name to get their attention. It’s like I feel unworthy”*. This situational specificity indicates that alexinomia might not be limited to interpersonal relationships but can manifest more intensely in certain communicative scenarios. This pattern hints at the possibility that external factors or stressors could exacerbate the symptoms of alexinomia.

The relationship to one’s own name was repeatedly alluded to in the online data, as seen in post A108, lines 655–656: *“I even have more trouble introducing myself and saying my own name.”* and helps to expand our understanding of how this aspect of name saying occurs within alexinomia. Occurrences suggested that individuals experiencing alexinomia often also experience problems with their own name, whether in context of speaking it or hearing it. Individuals showed distinct behaviours related to their names, with some expressing aversion to their names, as expressed in post A183, line 1014: *“I absolutely hate saying my own name.”* and others preferring nicknames. On these grounds a new individual code (see Table 3 for the list of all new codes) on the dislikes/hates/avoids of saying one’s own name was established that suggests a

Table 3

New individual codes or codes that have been expanded to include new terms which were added to the category system describing alexinomia.

Category	New or expanded	Code	Individual code
A2	Expanded	A22	Inadequate/inappropriate/awkward
A3	Expanded	A316	Might mispronounce name/may say the wrong name
A31	New	A3181	Has power
A4	New	A46	Is normal or not unusual
A5	New	A513	Blushing
B1	New	B115	Mother/stepmother
B1	New	B117	With children
B1	New	B141	Women/girls
B2	New	B27	When calling for attention
B4	New	B48	Dislikes/hates/avoids saying own name
B4	New	B49	Prefers to be called by nickname
B4	New	B491	Ok to be called by name for attention
B5	New	B58	Since childhood
B5	New	B59	Improved with time/practice
B6	New	B611	With liked names
B6	New	B612	With easy or familiar names
B6	New	B613	Fictional characters
B6	New	B614	When online
B6	New	B661	Family
B7	New	B74	When calling for attention
C3	New	C312	Using physical presence
C3	New	C313	Use of description
C4	New	C47	Forced use
D1	New	D115	Parents are divorced
D1	New	D116	Parents do not say names
D1	New	D117	Moved frequently (e.g. home and or school)
D2	New	D291	Fear of/problems with intimacy and attachment
D2	New	D292	Neither partner says names
D3	New	D321	Difficulty expressing affection physically
D3	New	D36	Difficulty making eye contact
D4	New	D41	Diagnosed or suspected social phobia (social anxiety)
D4	New	D42	Diagnosed or suspected autism spectrum disorder (ASD) including Asperger’s
D4	New	D43	Is an introvert or sensitive

complex relationship between one’s self-perception and alexinomia.

Finally, there were occurrences within the posts which indicated improvement in the ability to say names, with time or practice, suggesting that affected individuals can experience the possible extinguishing or lessening of the problematic. One example is noted in post A119, lines 710–711 *“I’m a bit better at it now, at least with people I’m not close to, since I started work a few months ago.”* Other posts compared an ability to use fictional character names in contrast to an inability to use the names of individuals known to them, remarking *“I am perfectly comfortable using character names to discuss the fictional characters”* (post A36, line 208). The inability to say names was even differentiated between data showing that saying the names of fictional characters could sometimes be said even where the underlying actors name could not, suggesting a divide between the imaginary and real characteristics of a person.

3.3.3. Effects and coping strategies

From the category of effects and coping strategies three aspects emerged as new: “Using physical presence” included instances where individuals might approach someone directly rather than using a name to get attention. This was evident in posts such as, “*I’ll usually just walk up to them and chalk it up to ‘eh I don’t really like to shout’*” (post A60, line 386). Another form of compensation was found and coded as “Use of description”, wherein individuals utilised descriptions of individuals as a way to avoid naming them directly. An illustrative example is, “*friend: so ingrid, who did you see at dinner? me: you know, that girl with the frizzy hair*” (post A116, line 685–686). It was further observed that gestures, albeit less frequently recorded, served as another form of compensation, suggesting many innovative ways of avoiding name saying. The code “Forced use” was introduced to represent situations where individuals were compelled to use names, typically due to job requirements. An illustrative post from someone who had worked in customer-facing roles revealed, “*I worked in restaurants/coffee shops and had to routinely address people by name...with no time to internally struggle with the prospect of using someone’s name*” (post A91, line 568). Such professional scenarios sometimes led to reported improvements in the ability to vocalise names, underscoring the potential therapeutic value of exposure or repetitive usage in specific contexts.

The frequent reports of these and other deliberate coping strategies suggest an inherent drive among those who face challenges in name saying to actively confront and manage their difficulties.

3.3.4. Vulnerability factors in alexinomia

Results regarding the vulnerability factors of alexinomia revealed a significant relationship between alexinomia and social phobia as indicated by frequent reports of being diagnosed with social phobia/anxiety in people experiencing alexinomia. Interestingly, occurrences indicating current relationships that were categorised as good, happy and trusting arose multiple times, suggesting that alexinomia may not necessarily be associated with negative interpersonal dynamics but is experienced often in very close relationships: “*We have been married for a number of years and I love him*” (post A50, line 312).

3.3.4.1. Indications of social anxiety and insecure attachment. Social anxiety, often referred to as social phobia, is characterised by an intense fear of being judged or scrutinised in social situations. This condition can significantly inhibit everyday interactions and overall quality of life. Insecure attachment, on the other hand, arises from inconsistent caregiving in early life and manifests as difficulties in forming stable and trusting relationships in adulthood. Both constructs, with their inherent implications for interpersonal relationships and self-perception, are relevant to the ongoing discussion of alexinomia and its associated vulnerabilities.

Posts about changing family situations or challenges during early childhood are indications of early-life factors associated with insecure attachment. Life circumstances such as “parental divorce”, “frequently moving locations” and other disruptions in early social connections compound feelings of insecurity and social anxiety. One post to this effect read “*I can’t help but wonder if this is a psychological byproduct of their split up/divorce*” (post A3, line 34). The data also detailed relationships where neither partner used names, suggesting mutual evasive behaviours, potentially stemming from attachment insecurities.

Further, many posts pointed towards issues of intimacy and attachment on a more generalised level such as in post A126, Line 759 “*I felt totally repulsed by group hugs/positivity/group praise or clapping*”, suggesting problems with expressing emotions such as love and pointing to a wider condition, of which the inability to say names is one symptom. There were indications of specific challenges in expressing affection, both verbally and physically. The latter, presents instances where individuals find physical gestures like hugging challenging. Additionally, the struggle to maintain eye contact, for example in post A47, line 278 “*I*

couldn’t even look at people”, a fundamental aspect of human interaction, implies deeper social challenges beyond alexinomia and is found in many other psychological disorders such as social anxiety (Schneier et al., 2011). This lack of eye contact reflects social discomfort and diminishes an individual’s ability to offset or compensate for not using names.

Many of the occurrences categorised under *Vulnerability Factors* highlight the potential causative aspects behind alexinomia, hinting at possible comorbidity. The data suggests instances of pre-diagnosed or suspected mental health conditions, such as forms of social anxiety (illustrated by post A60, line 394 “*I think both your problem and mine is just social anxiety*”) and references to inherent traits or characteristics like introversion (post A34, line 181: “*I’m an introvert*”), and sensitivity. There are also occurrences highlighting possible Autism Spectrum Disorder. These findings enhance the scope for understanding alexinomia’s potential etiological bases.

4. Discussion

The results of this study based on the analysis of online material supported the notion that alexinomia is a serious psychological problem for those affected. It is linked with social and physiological facets, reflecting the complex nature of human communication and the weight of societal norms and expectations in the usage of personal names. The frequent occurrence of mentions of alexinomia-related symptoms across many internet platforms and from a variety of geographical regions indicates that alexinomia is wide-spread and occurs regularly at least in German and English speakers.

The analysis revealed several new aspects of the phenomenon that were not described before. These included a link of alexinomia with erythophobia and autism spectrum disorder, extending our knowledge on its links to related psychological disorders such as social anxiety, which have been highlighted before. The new data also show that many affected individuals are struggling with saying their own name based on negative attitudes towards their name. The experience of disliking one’s own name has been studied in the context of gender dysphoria and the beneficial effects of name change or the usage of a chosen name different from the original name on mental health and well-being (Russell et al., 2018). Furthermore, the current findings extend previous research by showing that alexinomia is a common characteristic of affected relationships in a way that often neither partner is using names. Just as importantly, we found evidence that alexinomia can diminish in its severity through training.

Behaviour characterised by deliberately omitting names from direct verbal communication has been studied in the context of anthropological research on name avoidance. The practice of name avoidance occurs in many Asian and African cultures where using other people’s names is considered disrespectful (Anchimbe, 2011; Fleming, 2011). While not saying a name is the preferred style of conversation and thus a deliberate choice by the speaker in name avoidance, people affected by alexinomia have the desire to use names but fail to do so, suggesting an important difference between these phenomena. On the other hand, the social convention on which name avoidance is based (i.e., regarding the use of other people’s names disrespectful) may play a role also in at least some cases alexinomia as suggested by accounts of alexinomia that occur in interactions across social hierarchies. Research on alexinomia highlighted that the symptoms are frequent in unequal professional and romantic relationships (Ditye et al., 2023), which is well in line with a study showing that first name use in organisations becomes less frequent as a function of the hierarchical distance between employees (Morand, 2005). Morand (2005) explains this effect with politeness strategies in employees when communicating with their superiors. Although alexinomia occurs also in the context of relationships that are evaluated as equal it is likely that relationship dynamics based on power and hierarchy play a crucial role in the emergence of the behaviour.

The findings underscore the importance of understanding and

addressing the emotional and psychological foundations of alexinomia, i.e., its relationship to social anxiety, insecure attachment, and early-life factors, such as changing familial dynamics, as potential background for alexinomia.

Our study was conducted in English and only online materials in English were collected. This allowed for a thorough observation of the presence of alexinomia in the English speakers of different parts of the world. However, besides English and German it is unknown to what degree alexinomia is common also in other countries and languages. Other limitations include our reliance on frameworks of social anxiety and attachment theory whereas other models and theories might explain other aspects of the phenomenon. Neurobiological models could explore the brain structures and neural pathways underlying the emotional processing deficits observed in alexinomia, while an affective neuroscience approach may reveal physiological aspects of emotion regulation that could be relevant. These considerations would need further research to determine. Additionally, the predominant data source for alexinomia was largely self-reported. While self-reports provide invaluable subjective perspectives, they may sometimes depart from objective observer accounts (Connelly & Ones, 2010).

5. Conclusions

Being unable to use names despite having the desire to do so affects individuals in a multitude of ways, as indicated by the reports of frequent experiences of distress and anxiety in many social situations and the resulting negative repercussions on professional and personal relationships, that were studied here. Our findings show that alexinomia is widespread, at least across the German and English languages and the different parts of the world where these languages are spoken. It occurs predominantly in the context of social anxiety, attachment-related anxiety, and potentially autism. As the topic is still highly under-

researched, future studies will benefit from integrating observer perspectives to provide a more holistic understanding of the phenomenon. To this date there is no experimental research on alexinomia and on the neural mechanisms that may underly it. Looking at alexinomia from a clinical-psychological perspective through the definition of diagnostic criteria will offer deeper insights into the causes and origins, potential co-morbidities and overlapping psychological conditions.

CRedit authorship contribution statement

Alexis Bergert: Writing – review & editing, Writing – original draft, Methodology, Formal analysis, Data curation, Conceptualization. **Lisa Welleschik:** Writing – review & editing, Conceptualization. **Thomas Ditye:** Writing – review & editing, Writing – original draft, Validation, Supervision, Resources, Conceptualization.

Declaration of competing interest

None.

Data availability

Data will be made available on request.

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Appendix A

A.1. Table A1 Search questions and words

No.	Search questions for search engines	Relevant descriptive words or verbs	People also searched for:
1	I can't say the name	Anxious	Not addressing someone by their name
2	Do other people have problems saying names	Avoid	My boyfriend won't call me by my name
3	He never says my name	Blocked	Boyfriend never calls me x
4	I can't call my partner by her name	Cannot	Boyfriend won't call me by my name
5	I can't call my partner by his name	Does not	Not calling spouse by name
6	I can't say her name	Embarrassed	He avoids saying my name
7	I can't say his name	Never	My crush never says my name
8	I can't say my best friends name	Shame	She never says my name
9	I can't say my boyfriend's name	Strange	He never called me by my name
10	I can't say my crushes name	Uncomfortable	My husband never says my name
11	I can't say my girlfriends name		Not addressing someone by their name
12	I can't say my husband's name		Not calling spouse by name
13	I can't say my partners name		Why can't I say my boyfriend's name
14	I can't say my wife's name		bf never says my name
15	I can't say names		Psychology of not calling someone by their name
16	I can't say the names of people close to me		Friend never says my name
17	I feel awkward saying names		
18	I find saying names a problem/problematic		
19	I get anxiety when I say names		
20	I have anxiety saying someone's name		
21	I have never been able to say names		
22	I just noticed I can't say names*		
23	I use nicknames to avoiding calling people by their name		
24	It feels uncomfortable calling someone by name		
25	My husband never says my name		
26	My partner never says my name		
27	My wife never says my name		
28	She never says my name		
29	They never say names		
30	Why can't he say my name?		

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No.	Search questions for search engines	Relevant descriptive words or verbs	People also searched for:
31	Why can't I call my father dad/papa etc		
32	Why can't I call my mother mom/mama etc		
33	Why can't I say her name		
34	Why can't I say his name		
35	Why can't I say my best friends name		
36	Why can't I say my husband's name		
37	Why can't I say my parents name		
38	Why can't I say my wife's name		
39	Why can't I say names		
40	Why can't I say their names		
41	Why can't she say my name		
42	Why can't they say names		
43	Why do I have problems saying names		
44	Why is it so hard for me to say names		
45	Not addressing someone by their name		

A.2. Table A2 Source description and number of posts

Source	Forum description	No. of total posts	No. of posts referring to the experience of alexinomia
<i>Chicago Tribune</i>	A daily newspaper based in Chicago, Illinois, United States, founded in 1847 and owned by Tribune Publishing.	1	0
<i>Dear Cupid</i>	Agony Aunt relationship help and advice forum, hosting 244,225 questions and 1,082,057 answers.	5	0
<i>ENotAlone</i>	An online advice forum covering all aspects of relationships.	2	1
<i>GameFAQs</i>	A website that hosts FAQs and walkthroughs for video games.	3	3
<i>GirlsaskGuys</i>	Is your social community where girls and guys ask questions and share their opinions to help better understand each other and find answers.	4	1
<i>Is It Normal?</i>	Is a website and forum in which questions can be asked in order to establish how others may perceive that situation	6	5
<i>Love and Life Toolbox</i>	Is "your emotional health and relationships fix," full of articles, tools, courses and other resources by therapy pro, Lisa Brookes Kift, MFT and others.	2	0
<i>LoveShack.org</i>	An interpersonal relationship advice and assistance community that confronts personal conflicts, promotes participation in self-discovery and responsibility, and is a place to share dating tips, love advice, and relationship resources.	1	0
<i>Meh.com (the classic daily deal site)</i>	Meh is a Classic Daily Deal Site. There are also forums where people can discuss topics of choice anonymously.	3	1
<i>MoneySavingExpert Forums</i>	Offers a community of MoneySavers sharing experiences and tips. General discussions in forums.	5	1
<i>Mumsnet</i>	Mumsnet is a UK based website offering News, Advice, and forums on becoming and being a parent.	21	14
<i>Psychforums.com</i>	A Psychology and Mental health forum with over 100,000 members. Contains both blogs and forums.	25	24
<i>Quora</i>	Is a social question-and-answer website, founded in 2009. Users can collaborate by editing questions and commenting on answers.	32	9
<i>Reddit</i>	A network of communities where people can discuss multiple topics in discussion forums.	48	41
<i>Social Anxiety Support SAS</i>	A forum community dedicated to people with social anxiety	69	64
<i>Social Phobia World</i>	Is a forum about social phobia or social anxiety disorder and offers group discussions.	26	20
<i>Talk About Marriage</i>	A forum community dedicated to married life between you and your spouse.	2	0
<i>YahooAnswers</i>	A community-driven question-and-answer website Started in 2005. It was shut down in May 2021	2	0
Total: 18		257	184

A.3. Table A3 Updated category system

Main category	First level subcategory	Second level subcategory	Third level subcategory
A Subjective experience	A1 Negative emotions	A11 Anxiety/panic A12 Shame/embarrassment A13 Nervousness/restlessness A14 Discomfort A15 Regret/frustration A16 Perplexity/confusion/lack of understanding A17 Stress/restriction A18 Pressure/pressure to perform A19 Anger A110 Rumination A111 Failure/overload/inability A112 Effort	-
	A2 Negative self-concept	A21 Impolite A22 Inadequate/inappropriate/awkward A23 Strange/odd/funny/not normal A24 Crazy A25 Socially insecure	

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Main category	First level subcategory	Second level subcategory	Third level subcategory
		A26 Not worth it A27 Quiet A28 The only one	
	A3 Expectations and perceived functions of saying names	A31 Expected effect on others/what names stand for	A311 Seems forced/stupid/funny A312 Creates the feeling of being the center of attention A313 Triggers a negative reaction in the other person A314 Creates the feeling of being caught out A315 Feeling of being caught red-handed A316 Pronunciation could be wrong/one could make a mistake/may say the wrong name A317 Creates seriousness/strictness A318 Stands for respect A3181 Has power A319 Stands for the whole person A3110 Has a magical quality A3111 Stands for identity/uniqueeness A3112 Is invasive A3113 One is seen A3114 Could feel distant, formal, unemotional A3115 One shows oneself/makes oneself vulnerable A3116 Is personal/intimate A3117 Is beautiful A3118 It might disturb/distract the person A3119 It feels trivial/not special A3120 It could sound very emotional A321 Creates (too much) closeness/connection A322 Creates the feeling of being at the mercy of others A323 Dissolves closeness (when I say your name, I am someone other than you; dissolves symbiosis) A324 Establishes a boundary
		A32 Social functions	
	A4 Possible benefits of not (!) saying names	A41 Preserves something of one's own A42 Protects from being hurt A43 Preserves a boundary/creates distance A44 Serves to express aggression A45 Serves to express repressed anger A46 Is normal or not unusual	
	A5 How it feels to try to address someone by their name	A51 As if you were holding your breath A52 Blockage/inhibition/overcoming A53 Pausing A54 A little shock A55 Crossing a border A56 Feeling physically bad A57 Nausea A58 Chest area contracts A59 Feelings need to be turned off A510 Like looking someone in the eyes A511 Like physical contact A512 An inside-verbalization that cannot come out A513 Blushing	
B General characteristics	B1 Affected relationships	B11 Romantic relationships B12 Father/stepfather B13 People with funny names (e.g., names that are difficult to pronounce) B14 Men B141 Women/girls B15 In (almost) all relationships B16 Parents B17 Strangers B18 People with beautiful names B19 Colleagues in education B110 Adults/older people B111 Teachers/lecturers B112 Close/people known for quite some time/friends/important persons B113 Persons of authority B114 Very specific people B115 Mother/Stepmother B117 With children	
	B2 Affected forms of communication	B21 Personal contact B22 When saying first names B23 In serious situations B24 In conversation with third parties B25 In writing	

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Main category	First level subcategory	Second level subcategory	Third level subcategory
		B26 In direct conversation	
		B27 When calling for attention	
	B3 Using nicknames	B31 Nicknames are not used in affected relationships	–
		B32 Nicknames are used in non-affected relationships	
		B33 Nicknames are used in affected relationships	
	B4 Relation to one's own name	B41 No identification with own name	–
		B42 Negative attitude towards own name	
		B43 Pleasant when others say own name	
		B44 Unpleasant when others say own name	
		B45 One's own name stands for punishment/annoyance	
		B46 Being called by one's own name creates distance	
		B47 Being addressed by one's own name creates an inferior position	
		B48 Dislikes/hates/avoids saying own name	
		B49 Prefers to be called by nickname	
		B491 Ok to be called by name for attention	
	B5 Frequency (first occurrence, occurrences, duration, etc.)	B51 The difficulty always occurs in the affected relationships	–
		B52 The difficulty occurs over the entire duration of an affected relationship (e.g., throughout marriage)	
		B53 The difficulty occurs consistently since the first romantic relationship	
		B54 As early as kindergarten	
		B55 In adolescence	
		B56 Always	
		B57 It is the normal state	
		B58 Since childhood	
		B59 Improved with time/practice	
	B6 Non-affected relationships/situations	B61 Interactions with women	–
		B611 With liked names	
		B612 With easy or familiar names	
		B613 Fictional characters	
		B614 When online	
		B62 With friends/colleagues/acquaintances (male and female)	
		B63 Animals	
		B64 Siblings	
		B65 Formal relationships	
		B66 Parents	
		B661 Family	
		B67 With new acquaintances	
		B68 At sports	
		B69 With particularly good friends	
		B70 With children	
	B7 Non-affected forms of communication	B71 In Conversation with Third Parties	–
		B72 In writing	
		B73 In playful situations	
		B74 When calling for attention	
C Effects and coping strategies	C1 Effects on making contact	C11 Is difficult	–
		C12 Long waiting times until contact is made/conversation begins	
		C13 None (because coping strategy works so well)	
		C14 No contact	
		C15 Attempt to attract attention "telepathically"	
	C2 Effects on affected relationships	C21 Noticed by others	–
		C22 Unnoticed by others	
		C23 Perceived as impersonal/cold/distant	
		C24 Offends/hurts/makes people sad	
		C25 Not understood	
		C26 Creates a barrier/distance	
		C27 Some things remain unsaid	
		C28 Mistrust arises	
		C29 No significant influences	
	C3 Coping strategies	C31 Starting a conversation without address	–
		C32 Establishing contact through eye contact	
		C33 Use of impersonal forms of address (hey, etc.)	
		C34 Making contact by touching (e.g. tapping on the shoulder)	
		C35 Masking/avoidance	
		C36 Attempt to say names (unsuccessful)	
		C37 Use of nicknames	
		C38 Use of surnames	
		C39 Use of text messages instead of face-to-face conversation	
		C310 Saying names in a funny way/with dialect/as a	

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Main category	First level subcategory	Second level subcategory	Third level subcategory
		joke	
		C311 Joking about it	
		C312 Using physical presence	
		C313 Use of description	
	C4 Intervention/therapy	C41 Talking about it (with affected people)	–
		C42 Psychotherapy	
		C43 Trying to break through the problem	
		C44 Exercise/dry training	
		C45 Fear of therapy	
		C46 Researching the topic	
		C47 Forced use	
D Vulnerability factors	D1 Childhood and family	D11 Early signs of social anxiety (e.g., shyness, frequent blushing, etc.)	–
		D12 Trauma/neglect/parental abuse/violence	
		D13 Mental disorders in the family (e.g., depression, addiction, narcissism, etc.)	
		D14 Absent parent (e.g., early death of a parent, absent father, etc.)	
		D15 Unstable family relationships (e.g., separation, divorce, strongly changing caregivers)	
		D16 Hardly any or no contact with family members	
		D17 Conflict avoidance in childhood/birth family	
		D18 Little communication/openness in the family	
		D19 Distant relationship with family	
		D110 Psychological problems in childhood	
		D111 Good family relationships in childhood	
		D112 Few friendships/bullying	
		D113 Dispute in the family	
		D114 Pressure to perform	
		D115 Parents are divorced	
		D116 Parents do not say names	
		D117 Moved frequently (e.g. Home and school)	
	D2 Current relationship patterns	D21 Conflict avoidance	–
		D22 Difficulty perceiving and communicating one's own boundaries	
		D23 Dependent relationships	
		D24 Symbiotic relationships, desire to merge	
		D25 Difficulty trusting/relating/jealousy	
		D26 Few/no positive relationships	
		D27 Few male friends	
		D28 Good/happy/trusting current relationship	
		D29 Low self-worth	
		D291 Fear of/problems with intimacy and attachment	
		D292 Neither partner says names	
	D3 Difficulty in the expression of emotions	D31 Difficulty expressing feelings verbally (general)	–
		D32 Difficulty expressing affection verbally	
		D321 Difficulty expressing affection physically	
		D33 Difficulty expressing gratitude verbally	
		D34 Difficulty expressing aggression	
		D35 Difficulty expressing needs	
		D36 Difficulty making eye contact	
	D4 Underlying traits, personal characteristics, or disorders.	D41 Diagnosed or suspected Social Phobia (Social Anxiety)	
		D42 Diagnosed or suspected Autism Spectrum Disorder (ASD) including Aspergers's	
		D43 Is an introvert	

Note: categories with occurrences present in the data of the present study are highlighted in bold.

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