Qualitative Research with Participants Suffering From Ostracism: A Practical Guide For the Novice Researcher

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Abstract
Being ostracized can be painful for most people, but for those who experience this persistently it can lead to severe levels of psychological distress. At present, there is a scarcity of qualitative research which focuses on this group of vulnerable individuals. This paper acts as a guide for the novice researcher who plans to research this population.

Keywords
Ostracism, Social Rejection, Qualitative Research Methodology, Guidance

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Qualitative Research with Participants Suffering from Ostracism: A Practical Guide for the Novice Researcher

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Being ostracized can be painful for most people, but for those who experience this persistently it can lead to severe levels of psychological distress. At present, there is a scarcity of qualitative research which focuses on this group of vulnerable individuals. This paper acts as a guide for the novice researcher who plans to research this population. Keywords: Ostracism, Social Rejection, Qualitative Research Methodology

Ostracism (being ignored or excluded) is a painful event and can lead to psychological distress (Riva, Wesselmann, Wirth, Carter-Sowell, & Williams, 2014; Williams, 2001; Williams, 2009). According to the Temporal-Need Threat Model of Ostracism (TNTM; Williams, 2009) humans have evolved a pain detection mechanism to highlight sources of ostracism (e.g., someone avoiding eye contact; exclusion from a conversation) to allow us to react and prevent permanent exclusion. Indeed, in humans ancestral past, to be excluded within hunter-gatherer societies was akin to a death sentence due to risk of predation and lack of shared resources (Williams, 2007). Research has demonstrated that, when ostracized, people physically experience pain as well as increased psychological distress as measured by lower levels of belonging, self-esteem, control and meaningful existence (Eisenberger, Lieberman, & Williams, 2003; Riva, Wirth, & Williams, 2011). Such a mechanism is referred to as a reflexive response (Williams, 2009). Following such pain, the individual is proposed to then reflect (reflective stage) on their ostracism (Williams, 2001; Williams, 2009). During this stage, individuals attempt to attribute the cause of their ostracism and try and understand the meaning and relevance of the event. For example, was it my fault? Did I do something wrong? They are just being horrible. If an individual attributes internally (i.e., blames themselves), this is associated with reductions in self-esteem (Williams, 2001). Moreover, if the ostracism persists and an individual is unable to redeem their lost psychological needs (i.e., belonging, self-esteem, control, meaningful existence) by either resolving the potential conflict, moving on from the experience psychologically, or establishing new rewarding relationships, then the individual may eventually become depressed, alienated and feel helpless (Williams, 2009; Zadro, 2004). They enter the resignation stage.

The resignation stage is the focus of the present paper as there is a scarcity of qualitative research that examines those who suffer the most from ostracism. Experimental research has suggested that when an individual believes that they will live a life alone, that they lose the motivation to self-regulate (i.e., they no longer care about themselves or their future) and this can lead to feelings of helplessness (e.g., Baumeister, DeWall, Ciarocco, & Twenge, 2005; Bernstein & Claypool, 2012; Stillman et al., 2009). Moreover, those who are in the resignation (i.e., long-term) stage of ostracism are more likely to isolate themselves and thus increase the risk of an endless spiral of perceived ostracism (i.e., everyone is ignoring me). Ultimately, if unresolved, high levels of social isolation can increase the risk of suicide attempts to escape from such unbearable pain (Tsai, Lucas, & Kawachi, 2015).
The Need for Qualitative Inquiries

Since the turn of the millennium there has been an explosion of research using qualitative methodology. Unfortunately, there is still a tendency for certain journals to favor quantitative papers over qualitative as they are sometimes considered “low priority” (e.g., Greenhalgh et al., 2016). The majority of research on the subject of ostracism tend to focus on experimental (e.g., Bernstein & Claypool, 2012; Wesselmann, Ren, Swim, & Williams, 2013; Wesselmann, Wirth, Mroczek, & Williams, 2012; Zadro, Williams, & Richardson, 2004) and survey designs (e.g., Wu, Yim, Kwan, & Zhang, 2012; Wu, Liu, Kwan, & Lee, 2016). Indeed, Cyberball (a virtual ball toss game) is the most common method adopted to examine the impact of ostracism. Typically, participants are either placed in an exclusion condition (i.e., they are tossed the ball twice, and then no longer) or an inclusion condition (i.e., they are passed the ball 33% of the time with two other “online” participants). Participants are led to believe they are playing against real people across the internet, but in reality are playing against a computer program. Research has consistently demonstrated that being ostracized in Cyberball can lead to reports of lower self-esteem and increased levels of psychological distress (e.g., Bernstein & Claypool, 2012; Eisenberger et al., 2003; Zadro et al., 2004).

However, there is a scarcity of qualitative research which focuses exclusively on experiences of ostracism, which is surprising considering the enduring pain and distress it can cause individuals (Williams et al., 2009; Riva et al., 2014; Riva, 2016; Riva, Montali, Wirth, Curioni, & Williams, 2016). Qualitative research is of critical importance to the development of our current understanding of ostracism. Indeed, Williams (2001, 2009) used qualitative data (e.g., diaries, letters, interviews) to help develop the structure of the TNTM. Also, other research has been conducted to examine aspects related to ostracism such as workplace rejection (Strandmark & Hallberg, 2007), parental alienation (Baker, 2005), and the role of social support in recovery from mental illness (Windell & Norman, 2012). At present, there is only one qualitative study which has focused upon experiences of ostracism whilst also addressing the TNTM (Waldeck, Tyndall, & Chmiel, 2015), however, this study did not examine those who suffer chronically from ostracism. It would appear, therefore, that there is a need for further qualitative research in this field.

Indeed, there are often individual differences observed within experimental research which appear to moderate the distress associated with ostracism such as social anxiety (e.g., Zadro et al., 2006), but typically no follow-up (e.g., qualitative inquiry) is conducted with the participants to examine and validate these findings further. This is not to say that qualitative research focused on ostracized participants is easy. Far from it. To collect a sample who feel as though they are being ignored all the time, and to have enough of a sample to reach saturation (see Morse, 1995), will be very challenging as those in the resignation stage are likely to be (or feel) alienated from society (Williams, 2009). However, a recent experimental study was able to successfully recruit 82 people who had experienced chronic levels of ostracism within the last three months through advertising in local newspapers (Riva et al., 2016). One suggestion could be, in the case of validating quantitative results, including a follow-up with the same sample used in an experiment alongside a qualitative design. For example, if a researcher was interested in examining the effects of ostracism on the socially anxious (e.g., Zadro et al., 2004), then the participants could be interviewed after a time delay to explore not only how they perceived the ostracism within the experimental manipulation, but also ostracism events outside of the laboratory. Alternatively, an event contingent diary could be used by participants to record their thoughts and feelings each time they feel ostracized over a two week period (e.g., Nezlek, Wesselmann, Wheeler, & Williams, 2012).
Please note that the purpose of this article is to provide a guide for novice researchers who may be interested in researching those who suffer from ostracism. For guidance on how to conduct qualitative research generally see Chenail (2011a, 2011b) and Willig (2013). Further, if you are interested in using thematic analysis (the most commonly used qualitative method in psychology) then I would recommend Braun and Clarke (2006). The contents of this article do not cover all potential qualitative methods and analyses in depth, as these are for you to decide depending on the nature of the research question. My stance is on using the phenomenological approach with thematic analysis. However, I would strongly recommend a variety of different approaches to help examine this key phenomenon which causes so much pain and distress for individuals.

**Selecting Suitable Samples – The Role of Perceived Ostracism**

When designing a qualitative study to explore the experiences of those who suffer from ostracism, it is important that the researchers critically consider the sample they are going to recruit. According to the literature there are several mental health conditions (e.g., schizophrenia, social anxiety, depression, border-line personality disorder) which makes one more likely to prolong the negative effects of ostracism (Gratz, Dixon-Gordon, Breetz, & Tull, 2013; Kumar et al., 2017; Perry, Henry, Sethi, & Grisham, 2011; Zadro, Boland, & Richardson, 2006). For example, Perry et al. (2011) found that individuals with a diagnosis of schizophrenia typically maintain depleted levels of self-esteem over time after being ostracized in a computer game. Similarly, Wright, Gronfein, and Owens (2000) reported that following discharge from institutional settings (i.e., hospitals), individuals with severe mental illness (e.g., schizophrenia) reported feeling lower levels of self-esteem and control due to “social rejection [being] a persistent source of social stress” (p. 68). Indeed, Peterson (2000) stated that “the phenomenon of ostracism in schizophrenia is considered to be the cause of the greatest pain and sadness for these individuals” (p. 203). Moreover, such populations are likely to be ostracized, as research suggests that people tend to avoid those who are suspected to have schizophrenia (e.g., Angermeyer, Matschinger, & Corrigan, 2004; Link, Phelan, Bresnahan, Stueve, & Pescosolido, 1999), typically due to stigma that those with mental illness will act out violently against them. Therefore, when considering recruiting a sample for a qualitative study on ostracism, it may appear that a sample of individuals with a diagnosis of schizophrenia would be suitable (i.e., a group that may actually be ostracized by society, and are the most affected by their ostracism).

During the first year of my doctoral research, this also was my assumption. The literature pointed to those having a diagnosis of schizophrenia being a vulnerable group who suffer ostracism. Therefore, those with such a diagnosis (particularly those who may be actually isolated from society through being cared-for in an in-patient unit) would likely have a great depth of experiences to share about their feelings of being ignored by others, or excluded from society. However, as I discovered, this was not necessarily the case. After toiling to obtain the clearance required (i.e., 8 months of correspondence and ethics board meetings) to access such a sample, I then arranged to have interviews with participants in an in-patient unit. The response I received was universal. All of my participants stated that they DID NOT feel ignored or excluded at all. Furthermore, the participants stated that they did not experience any event of ostracism recently or within the last few weeks or months. This suggested, therefore, that it would probably have been better to ask for what I wanted (i.e., patients who felt ostracized) from the outset. Naturally the thought which came to mind at the time was “Oh dear, it looks as though I got this completely wrong.” Clearly, it is positive that these individuals I interviewed were not currently suffering from ostracism.
Indeed, such a pain can lead to prolonged feelings of helplessness and depression (Williams, 2009). Unfortunately, the universal response suggested that the time constructing a rationale focusing on such a sample may have been better spent elsewhere. Indeed, the literature pointed towards the sample being vulnerable to ostracism. Also, my previous experiences working in mental health care suggested that service users can sometimes be ignored by other care providers (e.g., GPs, psychiatrists) whereby questions are asked to me (the keyworker) opposed to the service user during care review meetings. This may suggest that the research question may have been too specific (i.e., how do people with a diagnosis of schizophrenia process experiences of ostracism?). Instead, a more general question may have been more appropriate, such as “do these individuals actually experience or feel ostracism?” and are such events processed in a similar way to other individuals?

Following such a finding it was important to understand what potential explanations were for the lack of experience of ostracism. One explanation may have been due to the positive symptoms of schizophrenia (e.g., hallucinations, delusions) which could lead to a lack of attention to cues of ostracism (e.g., being ignored by someone in a corridor) as focus is directed towards internal cues (e.g., hearing voices). However, this is not likely as the participants were screened using standard psychiatric tools (e.g., Health of the Nation Outcome Scale; Wing et al., 1998) and were carefully selected by the staff in the hospital to ensure that such ‘active symptoms’ would not be prevalent. Another explanation could be the choice of setting. Indeed, as Wright et al. (2000) suggested, being in the community may be the most likely source of ostracism for such individuals. In contrast, there may be little incidence of ostracism within an in-patient unit considering the focus is on recovery, and the individuals are likely to be the most likely source of ostracism for such individuals. In contrast, there may be little incidence of ostracism within an in-patient unit considering the focus is on recovery, and the individuals are likely to be approached rather than avoided frequently on a daily basis. Therefore, future researchers may consider interviewing participants in community settings (e.g., supported living accommodation, day centers). Another explanation may be that the individuals did not fully psychologically process encounters with ostracism. For example, Gradin et al. (2012) found that individuals with schizophrenia appear to have a blunted response to pain following ostracism in a computer game (i.e., they exhibited no medial prefrontal cortex response after increased exclusion). There was, however, an increase in positive symptoms (e.g., hallucinations, delusions) following increased exclusion (Gradin et al., 2012). This may suggest that the stress from ostracism could be transferred out of cognitive awareness and represented in the form of increased voices and delusions. Further research is required to elucidate whether such psychological processes are indeed involved in relation to feelings of ostracism for those who suffer from schizophrenia.

It is also possible that as this was my first attempt interviewing a clinical sample, that my lack of research experience may have prevented a full disclosure or exploration of the insight of my participants (e.g., asking about their experiences with ostracism too quickly without easing the participant into a flowing conversation). All participants were given the option to have hospital staff be in the interview with them if they wished, so simply being uncomfortable may not have been a major limitation. However, there was an incentive of £50 for each participant which took part in the study. It is, therefore, possible, that the participants I obtained were interested in obtaining a reward and not on the subject of the research. Future researchers may need to carefully consider who they will be interviewing in such studies. In clinical settings there is likely to be a limited number of participants. If incentives are to be used then I would suggest using some form of screening beforehand (if possible) to assess the level of perceived ostracism (e.g., using a questionnaire such as the Ostracism Experiences Scale; Carter-Sowell, 2010). Alternatively, the researcher may include the experience within the advertising of the study. For example, a poster or leaflet could detail a scenario of someone feeling ignored and ask for participants who have experienced similar events. It is important, however, that the researchers choose the words carefully due
to the sensitive topic area and the probable negative impact such material may have on patients. Thus, potentially evocative terms should be avoided where possible (e.g., depressed, suicidal, worthless) when describing the scenario. Instead, the researcher could state the following: “This person felt upset after feeling ignored.” Furthermore, if lack of experience is a potential concern, then perhaps consider collaborating with one of the staff that works in the settings where you will be researching. Alternatively, you may consider collaborating with a clinical psychologist who may help tease out the key experiences more slowly during the interview process. Otherwise, if collaboration is not an option, I would suggest focusing the first five or ten minutes on the individual and attempting to ‘break the ice’. On reflection, it may have been useful for me to tackle the lack of experiences with ostracism differently. For example, when presented with the response “I don’t feel ignored at all,” the researcher could then present a series of scenarios where a character is ostracized, and then ask what that character may be feeling.

Although this research study could be considered a failure (i.e., there were no accounts of ostracism), it was actually very important in the context of my doctoral thesis that this occurred. It highlighted that my focus was far too narrow (i.e., samples with schizophrenia) and that my assumption was skewed (i.e., just because people are ostracized they are also the most affected by such experiences). I came to realize that it is the perception of ostracism, and not whether someone is or is likely to be ostracized that matters. Indeed, within laboratory studies of ostracism (Cyberball), researchers typically confirm that people who are being excluded also perceive they are ostracized, by asking them to estimate how often they were tossed a ball (Williams, Cheung, & Choi, 2000; Zadro et al., 2006). Consider the following examples: Dave has a diagnosis of schizophrenia, and when he walks into town he tends to be avoided by others when he is arguing with his internal voices. However, Dave does not feel ostracized as he is preoccupied with hearing voices. Thus, as a consequence, Dave may not feel ostracized in spite of actually being ostracized. In contrast, Susan has no psychiatric diagnosis and is a well-respected colleague working in a busy office. Susan interacts with others on a daily basis. However, she is occasionally missed off the memo list for important meetings. As a consequence, Susan becomes very upset and feels as though she is being ignored and is not as ‘important’ as others. The key difference between the two examples is that, regardless of any so-called predisposing psychological vulnerability, it is the perception of ostracism which ultimately leads to psychological distress. Therefore, I would suggest that researchers focus exclusively on the perception of ostracism when selecting appropriate samples.

**Methodologies and Approaches**

According to Merriam (2009) qualitative researchers are focused upon “understanding how people interpret their experiences, how they construct their world and what meaning they attribute to their experiences” (p. 5). As discussed, perceiving an event of ostracism is open to interpretation and for one individual may be attributed severely (i.e., they are affected by the experience) whereas others may not be affected at all. The qualitative inquiry together with the chosen methodology should attempt to understand such interpretations and how the individual constructs their world (following such experiences of ostracism). Therefore, the choice of approach may be of critical importance depending on what the researcher is aiming to understand from their data. The five most common qualitative approaches are briefly listed below:
Phenomenology

The phenomenological approach aims to “understand several individual’s common or shared experiences of a phenomenon” (Creswell, 2007, p. 60). Therefore, to enable a “deep understanding of the phenomenon” (Creswell, 2007, p. 62) the researcher focuses on the internal cognitive processes of the individual and less on the external environment. As ostracism is a common experience to humans, the phenomenological approach would appear to suit an examination of the phenomenon.

Grounded Theory

This approach aims to generate data to develop a theory about the world (Birks & Mills, 2015). Therefore, there should be no theoretical structure which guides the researcher in answering their key research questions. To this end, the researcher may attempt to forget all you have read so far about the TNTM in this article if you are considering grounded theory. If, however, this is not possible, then it may be best for a colleague to analyze the data collected on ostracism experiences. Researchers using grounded theory are likely to start by just collecting data, reviewing the data, and then refining the questions for subsequent interviews based on emerging concepts. For an insightful review of how to apply grounded theory to research, see Dunn, Margaritis, and Anderson (2017).

Case Studies

This approach aims to focus exclusively on a single case (e.g., one unique participant) or cases using different sources of data collection (e.g., observation, interviews). Using a case study approach may be beneficial to explore in-depth why a certain person (s) reacts the way they do to ostracism (e.g., resilient or highly vulnerable). This may also be the most cost-effective method as the focus is exclusively on one case. However, the researcher should consider the demand on the participant as multiple sources of data collection may cause them to feel overburdened, particularly as they may be feeling low in mood and resigned (Williams, 2009). Researchers may consider reading Baxter and Jack (2008) for a review of case study methodology.

Ethnography

This approach aims to understand the experience of cultures, networks or groups by exclusively studying situations in real time as they occur in their natural setting (Higginbottom, Pillay, & Boadu, 2013; Sangasubana, 2011). Such an approach may be beneficial when examining groups at risk of ostracism (e.g., those discharged from a mental health institution, those who are homeless) and collecting data relating to subsequent ostracism experiences.

Narrative

This inquiry combines the ‘life stories’ from individuals or groups with those of the researcher into a collaborative account of the experience (e.g., perceived ostracism) to develop theory (Creswell, 2013). Such an approach may be of benefit to researchers who have had experiences of rejection or exclusion in the past and through working in collaboration with participants could reveal a closer picture of the phenomena of ostracism.
The choice of qualitative inquiry (or approach) will be largely dictated by your research question. Willig (2013) suggested that the qualitative research consider three key questions when choosing their approach:

1. What kind of knowledge does the methodology aim to produce?
2. What kind of assumptions does the methodology make about the world?
3. How does the methodology conceptualize the role of the researcher in the process?

When these questions are answered, this may lead you to choosing the right methodology for your project.

When selecting the method for your qualitative inquiry you may choose to do interviews, focus groups, observations, use diaries, letters, email etc. For a guide in how to conduct clinical interviews and focus groups (see Miles & Gilbert, 2005; Turner, 2010). In regards to diaries and letters, Williams (2001, 2009) developed the TNTM extensively based upon qualitative data from a range of sources (e.g., interviews, letters, faxes, and emails). If the researcher is hoping to gain a rich source of data from the population, then this would possibly be the best strategy as it would be inclusive for all individuals. For example, some may prefer to share their experiences face-to-face, whereas others may prefer to send just one story via email and stop there. If the researcher is considering observation as a method, it is important to remember the role of perception. Therefore, someone may actually be ostracized, but may not interpret or be affected by such experiences. In such cases it may be beneficial to include a third-party (e.g., close friend, relative) of the participant who may validate the experience (i.e., they may observe that the person is more angry than usual). Also, Chenail (2011c) suggests that blogs or commentary on websites can be a valuable source of qualitative data. Indeed, there are websites such as www.reddit.com/r/rejectionhelp which has a rich source of stories from individuals seeking help from their experience of chronic rejection (ostracism). Alternatively, a novel method of collecting qualitative data may be to collate historical data from texts, pictures, and also from graphic novels (e.g., in’t Veld, 2015).

Finally, before any research takes place, it is important to do a piloting check. It is important to practice your questions with another person to ensure that they are not invasive, and are not ambiguous (Chenail, 2011d). Furthermore, it is important to try and recognize whether you as a researcher have any biases to the research process (Chenail, 2011d). Indeed, Chenail (2011d) suggested that you have another person interview you with the same set of questions you would use. This process may help you to acknowledge any personal connection you have with the subject matter, appreciate the vulnerability of your participants, and learn the value of patience during such interviews.

Ethical Issues

When researching a sample which may be experiencing high levels of rejection or is still suffering from rejection from the past, it is important for researchers to be sensitive to the needs of the participant. As recommended by the British Psychological Society Code of Ethics and Conduct (2009) it is important to highlight from the start of the project that all data will be kept confidential, ensuring they have informed consent to take part, and that the participants have the right to withdraw, even after the study has finished if they wish (and the

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1 Researchers should follow the ethics guidelines on conduct with their respective national society. Nevertheless, the same principles of confidentiality, data protection, right to withdraw, protection from psychological harm etc. are common across such guidelines.
researcher should give a time frame for this withdrawal process to occur). Therefore, the participant should not feel compelled to reveal information which may cause them distress. Indeed, if a participant opens up about their past experience of rejection and appears to be visibly upset, the researcher may consider reiterating that the participant has the right to withdraw. It is natural to wish to probe deeper into the phenomenon as a researcher in order to uncover the key mechanisms or factors which influence coping from such experiences. However, unless this is included in your ethical clearance and you are trained to help others manage psychological distress (e.g., clinical psychologist, psychiatrist) then to safeguard the participant, and also yourself as a researcher, it would be best to allow the participant time to decide if they would like to continue with the same subject, move on to another, or to leave the study. Similarly, it is important to include information within the information sheet and the debrief form as to appropriate sources for support after the study (e.g., health care contacts; suggestions to speak to mental health professional).

It is also important to be clear from the outset of the project as what constitutes data. Indeed, here is a caveat from my early experiences as a researcher. My ethical application was approved on the basis that interviews were conducted. However, soon after I advertised the study via email, I received a response from a potential participant who expressed their story (of ostracism), unprompted. Naturally as a researcher I was excited as this was my first participant and had a desire to probe this experience, particularly as this participant said that they wanted to take part in the study but could not physically attend (thus they sent an email). Therefore, I contacted the ethics committee of my university who confirmed that it was acceptable to continue this email conversation, as long as the information sheet was sent and an electronic version of consent was provided. This was done. Unfortunately, the longer the email conversation went on the participant appeared to be a little unsettled as to why I was probing the story. This would suggest that in fact, despite stating that they had read the information sheet and consented to the study, they had not actually understood the premise of the research and what I (as a researcher) would be doing when “interviewing.” This would suggest that reminders as to the nature of the research and of the right to withdraw may have been needed more often. In the emails, however, I was polite and making statements such as: “I’m sorry to hear you suffered this pain. If I might ask, please could you tell me what you were thinking at the moment of this rejection?” In hindsight, it would have been much better for both parties to either have a phone (or Skype) interview. Alternatively, the parameters could have been set so that, similar to Williams (2001), the email would constitute a story in letter form and be left there. The difficulty with email interviewing is, when do you know to cut the conversation? If someone is expressing an interesting story in an email and you are attempting to uncover the thoughts that they were experiencing at the time, how do you do this? Importantly, I had included the contact details for the ethics committee should the participant wish to make a complaint. I would, therefore, recommend avoiding having conversations by email to collect data where possible, as information may easily be misconstrued and you may not achieve full informed consent without constant prompting and reiteration as to the aims of the study.

Finally, the focus of the present paper has been on conducting qualitative research with adult participants. However, if you are considering doing any research with young populations, then you will need to obtain all the necessary ethical clearance and access from all gatekeepers (e.g., schools, parents, etc.). This focus, however, is beyond the scope of this paper (see Greene & Hogan, 2005; Tinson, 2009 for further review). It is possible that some participants in your research may have a limited ability to express their emotions verbally (this could be at any age). Research has suggested that the use of drawings and color can be an effective method of communicating emotions in such situations (see Burkitt & Sheppard, 2014; Burkitt & Watling, 2016). Further, you may consider gaining support and supervision...
when conducting research with such populations from a clinical psychologist. Finally, if conducting research with adolescents, there is a useful screening tool which you may choose, the Ostracism Experiences Scale for Adolescents (OES-A; Gilman, Carter-Sowell, DeWall, Adams, & Carboni, 2013).

**Brief Guide for Interviewing**

As Willig (2013) suggests, with any qualitative interview, the researcher’s interview strategy will be guided largely by the choice of methodological approach. Therefore, if you are attempting to research this phenomenon completely from the beginning and you do not want to have any (or little) structure (e.g., grounded theory) then an unstructured interview may be the most appropriate. If, however, you are fully engaged in the theoretical structure of the TNTM and are looking to examine key psychological processes that are associated with this model, then a structured interview would be beneficial. In my research study (Waldeck et al., 2015), I chose a mixture of the two by adopting a semi-structured interview. Therefore, I had a key structure which would be guiding my questions which would relate to key components of the TNTM, but also allow the freedom to explore other areas which may not be accounted for within the structure of the TNTM. For example, in my interviews I asked people to explain their recent encounters with ostracism. To guide the participants I would provide a temporal order to the flow of the questions (e.g., what were you doing beforehand? What were you thinking before it happened? What do you remember thinking right at the moment you were rejected? Ok, so you said you went home afterwards, what were you thinking then?). However, this was not restricted to just cognitive aspects of the recalled experience. I also probed into other aspects of the experience such as the physiological sensations experienced (e.g., could you tell me what you felt in your body at that time). Following each experience, I would then go further and further back in time (e.g., within the last year to within their childhood). There was a clear structure which guided my questions which were focused on the key stages of the TNTM (i.e., reflex – initial cognitions, physiological sensations to ostracism, reflection – what the person thought afterwards, resignation – how long it took the person to cope [if at all] from the experience). Importantly, I needed to ensure there was freedom for participants to express additional experiences as there were, as predicted, some participants who appeared resilient to the effects of ostracism (i.e., do not feel ostracized at all), This appeared to largely be due to them being able to externalize (i.e., it is their fault not mine) and due to their personality characteristics (e.g., it just would not bother me). Thus, accounting for such individual characteristics was somewhat easier when using a semi-structured interview.

As previously discussed, it is possible that a participant could become upset when recalling previous incidences of ostracism. Indeed, being rejected can elicit reactions of anger and sadness (Wesselmann et al., 2013) which, when recalled, can still be extremely vivid, particularly for those who attempt to avoid remembering such events (Kashdan, Breen, Afram, & Terhar, 2010). If a participant would like to remain in the study but may be having difficulty expressing themselves due to the pain that the memory causes, then the researcher may consider an alternative strategy to collect data in such instances. The researcher may ask the participant to write down their experience, or to do so at a later time and to return it to the researcher. There is evidence to suggest that emotional disclosure through writing can be cathartic and reduce psychological distress for some individuals (e.g., Bernard, Jackson, & Jones, 2006; You et al., 2014).

The researcher will also need to consider how long the interviews should last. Typically, interviews for those who feel ostracized tend to last approximately for one hour (Baker, 2005; Strandmark & Hallberg, 2007). However, if the participant has not had much
experience with ostracism then this may be as short as 15 minutes (Waldeck et al., 2015). This is why screening participants prior to the study is important, unless, as in my case, your aim is to examine the mechanisms of resilience to ostracism.

Analyses

For the purposes of my research study I chose thematic analysis (Braun & Clarke, 2006) as it appeared the most flexible in terms of structuring the analysis to reflect the reality of the data. Such analysis requires the reader immerse themselves in the data by reading and re-reading the transcripts over and over again. Then the researcher notes down key ideas which lead to codes. Once a cycle of codes are established, then these are reviewed again (Saldaña, 2016) to help ensure reliability and consistency. Subsequently, themes and subthemes are extracted from the data, and key quotes used to illustrate these themes. This is not to suggest that my choice of analysis was the only option. Other researchers may consider alternative methods of analysis such as content analysis (White et al., 2016) or discourse analysis (Schiffrin, Tannen, & Hamilton, 2008) depending on what they aim to understand about their data. For example, if your aim is to deepen understanding about how ostracism is experienced by focusing on the way people use language, then discourse analysis would be the preferred option. For a review and guide for qualitative analyses in psychology see Willig (2013).

It is important, regardless of which analysis you choose, to help ensure trustworthiness of your data (Elliott, Fischer, & Rennie, 1999). In my case, I gave a select number of transcripts to a fellow researcher who then reviewed and coded the data independently. We subsequently had a meeting and then agreed upon the codes and themes. However, researchers may also consider enhancing the reliability of the research through triangulation (Willig, 2013). For example, you may consider asking your participants to read the transcripts to ensure that you have recorded what they have said accurately. Similarly, this would also give the participant a chance to add or veto any information said about them. Further, you may also consider giving the participants a copy of your results and discussion to determine if they would agree with your analysis.

Presenting Your Findings

The strategy you adopt to present your findings in article format will largely be dictated by your discipline and by the results from your study. For example, in my paper (Waldeck et al., 2015), I focused upon the thematic map (derived from the thematic analyses) which contained the themes of “reflex,” “reflection,” “regulation,” and “adjustment.” Each of these themes had their own subthemes. Also, all themes were encapsulated within a superordinate theme of “differential intensity” (i.e., all participants experience the event differently and at varying emotional levels). Subsequently, I did a breakdown of key quotes which were identified under each of the key subthemes. Other researchers may use alternative methods depending on their analyses (e.g., other thematic analyses may break down their results into tables, but only include the table in the appendices; Acharya & Gupta, 2016). Some researchers may do both, include a table with all themes and subthemes in a table within the text, and also provide selected quotes within the text (e.g., Haas, Hermanns, & Melin-Johansson, 2016). Whatever your study is focused upon, I would recommend reading articles that adopt the same methodology and following their reporting strategy. In addition, Chenail (1995) suggests certain ideas which may help the presentation of papers for the qualitative researcher, specifically: Openness, Data as Star, Juxtaposition, and Data Presentation.
Strategies. I would recommend all qualitative researchers to review Chenail (1995) prior to writing your papers.

**Conclusions**

In summary, I have presented a guide for the novice researcher who is considering conducting qualitative research with participants who suffer from ostracism. It is my hope that more research is conducted with qualitative methodology in this area as the richness and depth of such experiences may help to validate the effects already observed within experimental designs. As suggested, researchers may consider adopting triangulation by using qualitative methods to complement other methods (e.g., Cyberball, Life Alone; Williams, 2009). However, the key message from this paper is that when recruiting your participants, ensure that you do not assume that just because someone is ostracized, and appears to be a most likely candidate from the outset to be the most affected by ostracism, that they are going to perceive that they are ostracized.

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