

Shame

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Introduction

- Disturbance at the contact boundary
- Wheeler & Lee (1996), Bloom (2003) and others, frame shame as an interruption of authentic contact in response to social **disapproval or threat of rejection**.
- Wheeler (1997) continues to explain how, **“shame experiences are among the most intensely negative and debilitating”** (p. 223).
- In fact, Kaufman (1980) explains shame as **“inner torment, as a sickness of the soul.”** (p. 7).

Shame & ADHD

Elaine Camilleri

Understanding ADHD



- **Presentations of ADHD**

- Predominantly Hyperactive/Impulsive Presentation
- Predominantly Inattentive Presentation
- Combined Presentation

- **The executive function**

- ADHD is about the ability to regulate our to get things done, a skill called the **executive function**.
- This causes an effect on brain the **working memory**.

- **Dopamine dysregulation**

- ADHD looks for **fast dopamine** – instant gratification.
- Focus on **chasing ‘good’ dopamine**, rather than fast dopamine.

ADHD in Childhood

- Kaufman explains how shame can start as a *normal human emotion* - a sign that we have been exposed or disapproved of. But when this happens repeatedly, especially in childhood, **we internalise these experiences and start to believe the shaming messages ourselves.**
- Shame becomes part of your **self-identity**.





*“The binding effect of shame involves the **whole self**. Sustained eye contact with others becomes intolerable . . . speech is silenced. Exposure itself eradicates the words, thereby causing shame to be almost incommunicable to others..”*

(Kaufman, 1980, p. 7)



Effects of Shame in ADHD

Negative self-perception

Emotional dysregulation

Avoidance behaviours

Reduced motivation

*The experience of shame always leads to a feeling of **personal inadequacy** or “I am not good enough for something and someone/I am ashamed that I will prove to be too much for someone.”*

Bad ways to deal with shame

- Perfectionism
- People pleasing
- Hyper-independence



ADHD Definition

“ADHD” is a term that describes a way of being in the world. It is neither entirely a disorder nor entirely an asset. It is an array of traits specific to a unique kind of mind. It can become a distinct advantage or an abiding curse, depending on how a person manages it.”

(Hallowell & Ratey, 2021)





How to work with shame

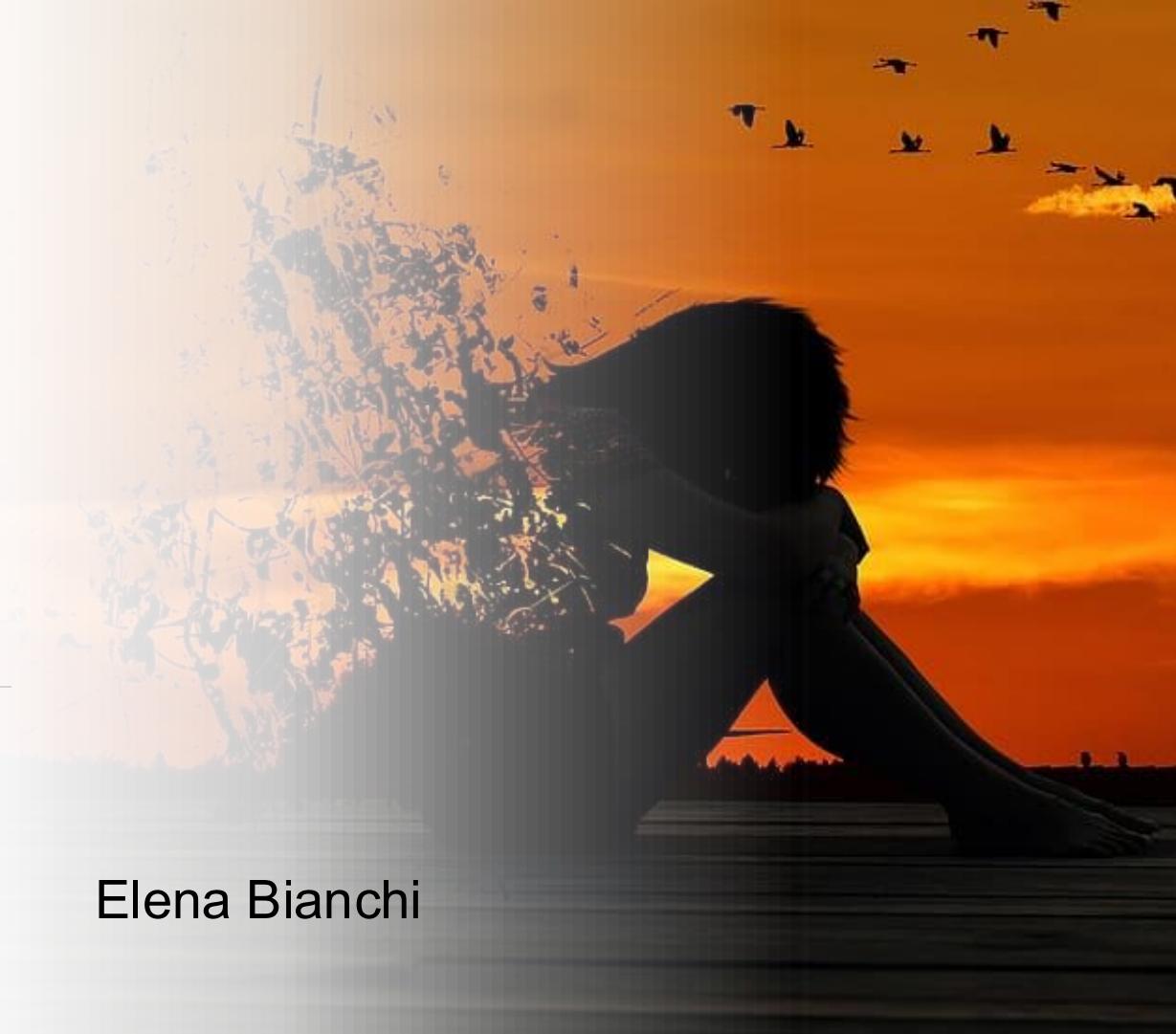
- Practice self-compassion
- Reframe negative beliefs
- Seek social connection
- Practice mindfulness
- Child-work

Key learning

Working with shame can be challenging, however Gestalt therapy teaches us that each individual has an ***innate potential for growth***, which can be achieved through therapeutic interventions but most importantly, through **genuine presence** and **contact**.

THE DYNAMIC ROLE OF SHAME in the Experience of Domestic Violence (DV)

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DEFINITION OF INTIMATE PARTNER VIOLENCE (IPV)

- Intimate Partner Violence (IPV) describes physical, sexual or psychological harm by a current or former partner or spouse.

(American Psychiatric Association)

- Intimate partner violence refers to behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours (psychological, emotional, financial, social).

(World Health Organisation)

Malta's (DV) Landscape

IPV is not reported as a separate category in public data

- **75% are female victims.**
- Services are utilized mainly by female victims.



73% Psychological violence behaviour

41% Physical violence

14% coercive

Source: Malta National Statistics Office (2024)

Global Statistics

- **1 : 3 women experience DV**

(World Health Organisation)

IPV'S IMPACT – Mental, Emotional, Physical

- Depression (mood)
- Substance Use Disorders
- Alcohol Use
- Eating Disorders
- PTSD
- Suicidal thoughts - Obsessive behaviors.
- Dissociative Disorders –
- Chronic fatigue
- Low self-esteem
- Anxiety
- Emotional dysregulation
- Intense fear or hypervigilance
- Anger & irritability
- Self-blame & guilt

Bodily dissociation is a risk factor for developing Anxiety and Depression (Machorrinho et al., 2022)

Feelings of shame, guilt, and fear, tend to be more pronounced in individuals with a history of intimate partner violence (Lee & Scragg, 2001).

WHAT IS SHAME?

The most poignant experience of the self by the self (Kaufman, 1980).

- Shame encompasses a **range of complex emotions** such as embarrassment, humiliation, guilt, fear, sadness, anger, a sense of dishonour (Fraser, 2010).
- One of the most potentially disorganizing of all affect experiences (Wheeler, 1997).

How does Gestalt Understand Shame and Shame Dynamics?

- Shame is a relational rupture – arising from **ruptures in the relational field**.
- A break in the field is always a break in self-process and cohesive self-integration, which is to say, a break in the self.

SHAME EFFECTS ONE'S SENSE OF SELF

Shame binds – shame scripts

- DV survivors often internalize shame.
- Just as introjects are swallowed as whole beliefs (Perls et al., 1951,1972) that have not been assimilated, so can shame be seen as an unassimilated internalized experience.
- Lee (1995) links introjects to what Tomkins (1963) and Kaufman (1989) call a *shame-bind*. These fixed gestalts (introjects) become our guideline to how we experience and guide our behavior in general.
- Shame becomes internalized into basic beliefs about the ‘self’ and possibilities of contact with others hindering contact processes.

The influence of Cultural Constructs

Conflicting Introjects

- You should stand by your man.
- Till death do us part / Through thick and thin.
- Leaving means dishonouring the family



- You should leave if he is abusive.
- You should leave to protect the kids



CREATIVE ADJUSTMENT

In gestalt therapy shame is understood as a creative adjustment; a reorganising of the contact boundary because of a rupture or threat of rupture between self and some aspect of the wider field.

Some trauma clients experience unbearable levels of shame for the adjustments they have had to make and find it difficult to understand and honour their creativity.

(Taylor, 2014)

Embodied Shame

- The opposite of embodiment occurs in victims of IPV - Dissociation
- Dissociation perpetuates shame by maintaining fragmentation of the self and inhibiting the reestablishment of a coherent identity (Herman, 1992; Kalsched, 2013).
- The physical body has the unique ability to ground awareness of self and other and to integrate experience. The loss of connection with an embodied self is therefore disastrous (Taylor, 2014).
- Shame is deeply embedded in people's non- verbal processes: it is built into habitual body structure, held through body tension. (Mackewn, 1997)
- On the body level, shame is an experience of shrinking or disappearing (or wanting to disappear, wishing "the earth would swallow me up" (Wheeler, 1997).



SHAME DYNAMICS once DV is unsilenced.

Victims already feel:

- They may not measure up to the demands of autonomy and self-reliance.
- Socially acceptable being single mother/woman = MILF

SHAME LADEN QUESTIONS

- Describe what you were you wearing?
- Were you wearing underwear?
- Did you continue to have intercourse after the violence?

SHAME BIND

- Standing up to what is wrong is bound to shame.

INTROJECT

- I should have known better.
- I should have noticed.
- I should have stuck it out.



Gestalt's Paradigm and Interventions Can Account for Shame Dynamics and Internalized Shame

Facing the shame that holds the fixed Gestalt in place can only happen in an atmosphere of support (Lee, 1997).

- **CONTACT** - We have seen the role of shame in contact processes - Recognise the contact interruptions in the therapeutic relationship.
- **SELF AS PROCESS** – We have seen how shame is a rupture in the relational field - The self is always informing itself of the possibilities in the field.
- **PHENOMENOLOGICAL FIELD THEORY APPROACH** – Shame is a field variable brings - shame dynamics are brought to light in therapy.
- **THERAPIST'S PRESENCE and dialogical stance:**
- **THERAPEUTIC RELATIONSHIP** – Shame occurs in relationship. Shame heals in relationship.
- **NOTICING of shame responses** (also through Contact Functions/non-verbal).
- **EMBODIMENT** in female victims, is known to be of major importance for the recovery of the sense of self and, consequently, for overcoming the negative effects of violent relationships (Van der Kolk, 2015).
- **MOMENT TO MOMENT AWARENESS** - is important to acquire an accurate sense of self.
- **SELF-COMPASSION** - It is important to acknowledge that client did what they could do at the moment.

REFLECTIONS

Working with shame without understanding shame may miss a central emotional experience of DV survivors, limiting the effectiveness of support, healing and growth and risking to bring about further shaming experiences.

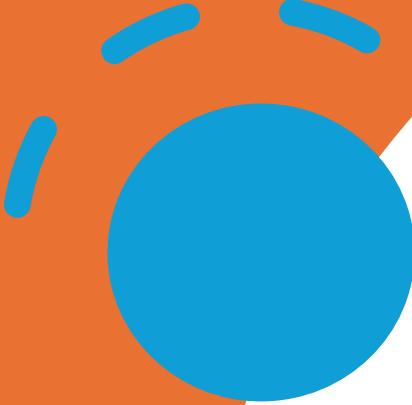
Shame related to relapse of heavy drug addiction

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Mark's Relapse

- 50 year resident in a reintegration program
- Incarcerated for the past 35 years
- Heavy drug user - Drug of choice is Cocaine
- Experience of relapsing linked to theoretical findings.





Not all drug use
becomes a disorder.

Reflective vs Impulsive Self

- Addiction = Dysregulation of impulsive self over reflective self
- Creating conflict between short term self and long term self.
- Impulsive self - Cravings and emotional states
- Reflective self - Plans, evaluation and self - control.

Ontological Addiction Theory

Addiction arises from attachment to a fixed, inherited 'self' that needs to be deconstructed to fight addiction.

Through work on the Self we can change Identity.

- Self-Concept --Where I belong within my world
- Self-Efficacy -- Capability to Change
- Self-Regulation -- Function of self-concept and self-control

Views of the self

Vulnerable:

Unstable, fragmented self,
resort to drugs



Maintain the Self:
Feel-good use, use for leisure

3 Stages of Relapse



Emotional

Negative emotions - anger, moodiness, anxiety, erratic eating and sleeping habits.

Mental

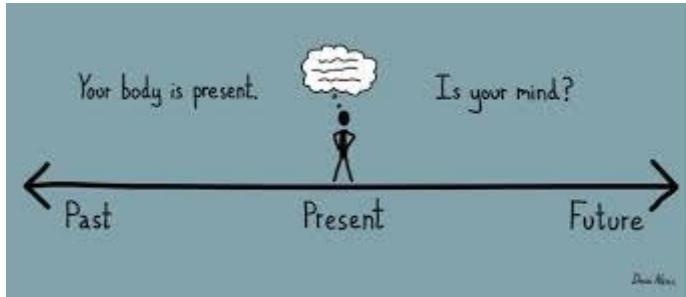
Internal struggle, direct, once they are decided it is only a matter of time. Very difficult to stop.

Physical

Progression to this stage is very short, this consists of the use of substance.

Shame & Mark

- Relapse after 5 years clean
- Seeking help from a younger female
- Trusting a person to the full
- Not strong enough to battle addiction - Ego
- Failure in other's eyes.
- Failure of not being able to live up to the standards for a good life that the person himself aspires to.



Working during & with Relapse.

- Being present
- Id function work
 - What he needs in the here and now.
- Nonjudgmental
- Empowering
- Staying with
- Reassurance and Validation.



Conclusion

- We hoped to show that shame can take many forms across different areas of life, yet its foundation remain the same.
- It is always about the self. It touches the very core of who we are: the Id, the Ego, and the Personality function.
- **Through contact, compassion, the reframing of introjects and undoing of retroflection, clients rediscover their capacity for self-acceptance and growth.**

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