

Newsletter September 2017

Our last event was on the 8 September 2017. Amanda Phillips spoke to us on *The Many Faces of Shame*. Here is a summary of the evening prepared by Frank Kelley.

Amanda is a relational-centred Integrative Psychotherapist with 15 years experience of working with individuals, families and young people.

She discussed how shame is experienced, the process of internalisation, and the impact of this on our development and considered the therapeutic interventions open to us. She did so in an exposition of clarity and depth. She also encouraged open discussion while gently holding on to the focus of the evening.

We began with a brainstorm. Our consensus was that we feel guilt about what we do and shame about who we are. Shame comes with a visceral sense of disgust, and a sense that we are not good enough. Shame can be toxic. We have a deeply felt sense of being looked at, looked into and exposed. This experience of being worthless, of being unloved, of being unequal often remains hidden which increases the toxicity.

Being therapists we tend to think of shame as a problem. However this is a healthy part of belonging to society. Shame tells us that others will see that what we are doing or thinking is wrong and harmful. Shame protects us, and the people around us, from us being our worst self.

Shame is built into the practice of therapy and counselling. Our clients are exposed to our gaze, to the scrutiny of a powerful person. Shame is already there in the counselling relationship before a word is spoken.

After this brainstorm Amanda gave her clear view of the nature of shame. Our sense of shame develops in childhood in relation to the powerful people in our life and where our core sense of self is not accepted. Non-acceptance leaves us with a deep feeling of isolation and excruciating aloneness.

In Transactional Analysis terms when we experience shame we are losing our Adult. We panic and cannot think. Shame is often misdiagnosed as anxiety or social phobia.

What we see in our clients who suffer from toxic shame is a looking down and aversion of gaze, restlessness or frozenness, blushing and various kinds of hiding. What we hear is silence, controlled speech, constant talking, blaming, yes buting, projections and apologizing.

Our therapy sessions will contain self blame and rage, self deprecating humour, a reduced link between thinking and feeling and distrust, including the client's lifelong distrust of their feelings. Hence our clients will often have features of borderline or narcissistic personalities with idealization, merger or unhealthy independence. Shame brings embarrassment, self consciousness, worthlessness and a sense that there is something fundamentally wrong with us.

Addictions are shame based. We cannot turn to other people so we turn to our addictions, often in a cycle of attraction, shame and guilt and avoidance again. Anorexia is a projection of shame onto food. In fantasy where there is no food there is no shame.

Amanda asked to think about ourselves. To identify situations where we felt shame, how we experienced shame, how we defended against those feelings and how we supported ourselves through those difficult experiences.

From a TA perspective shame means parents are parenting the next generation from the Child position. Hence we get the intergenerational transmission of shame. This involves a moralising punishment from the Superego and leads to a repressed shadow self. We try fighting this Superego but this only makes it stronger.

Amanda introduced us To the Gestalt therapist Kenneth R Evans who wrote about *Healing Shame* in the April 1994 Transactional Analysis Journal. For Evans shame is viewed as a defence against an abuse of power in the original infant-caretaker relationship. A baby naturally has insufficient boundaries and exists in a state of confluence with the caregiver. With an overly critical mother the infant is overwhelmed and withdraws behind a false self where there is no other to be differentiated from.

Hence we have retroreflection, where the infant's anger with mother is directed on to a split off part of the self. Retroreflection operates simultaneously with projection where looking inwards is experienced as looking outward. As there is no other then relationally there is no attachment.

**Thank you Amanda Phillips**