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**Self and Shame: A Gestalt Approach**

## GORDON WHEELER, PhD.

Shame, both a universal human feeling and also one of the most poten­ tially disorganizing of all affect experiences, has been relatively neglected in dinkal writing until recent years and even today remains in unclear focus in much of our dominant clinical tradition and thinking about self­ models. Both this neglect and this lack of focus are much clarified by a Gestalt model of self-experience and se)f-proc.ess a perspective whjch raises paradigmatic questions for our thinking about hum.an nature and relational proce-ss. Drawing on the tradition of affect theory and Goodman's radical revision of traditional self-theory, this article ex11mines the terms of the underlying assumptions about self and relationship that have informed our h'aditional clinical models and offers a new model of shame, support, and their dynamic interplay in self-process and self-inte­ gration. Shame then emerges as a key sig.nal affect in a field model of self, much as anxiety stood jn this role fo an older, individualist model. Impli­ cations for cllnicaJ practice are then considered, with an examination of fjve thematic dusters of possible therapeutic interventions, aimed at bringing shame issues to light in the therapeutic relationship itself, and. offeril'ig the promise of transforming self-inhibition and disorganization into new self-development and growth.

HAT 1s SHAME, and why do we consider an understanding of

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shame dynamics to be essential in workingwith individuaJ and relational p.rocess?l What does this understanding add to the

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process picture of human experience and bebavior we develop using other lenses and perspectives; what might we miss without it? Why is it that the experience of shame and its dynamic relationship to other emotions have been relatively neglected in both psychodynamic and Gestalt literature until recent years, and what does this neglect ten us about our underlying concept of human nature and human experience and development?

In this article I will be arguing that the role of shame in organizing and modulating experience in general cannot be seen and understood dearly from the older, fundamentally individualistic point of view that has characterized much psychodynamic and early Gestalt writing, because of the inherent limitations of that view of human nature and process. Rather, this dynamic role and its implications only come to light when we take up a more relational and more phenomeno!ogically based view of self and self-process, one that can accommodate the crucial dimension of support (and its absence) in experience and development. The Gestalt model of self, outlined briefly by Paul Goodman and his coUaborators (Perls, Hefferline and Goodman, 1951) provides a richer basis for this new understanding of shame feelings and shame dynamics, while at the same time a consideration of the interactive dynamic of shame and support in sell-process helps us to fill out the picture and the self model sketched so radically and suggestively by Goodman some 50 years ago.

But first some words of definition. *Shame* is a broad term, and one often used fluidly or fuzzily to refer to (1) an emotion (in the sense of a complex experiential schema including c,ognition/interpretation as well as sensation or feeling); (2) an experience, which is close to the first sense as long as we understand the term emotion as including cognition and (social) construction; (3) an "affect" (in'fornki.ns's sense of a more basic or innate body sense, ''before" the operation of interpretation and social construction, though certainly that ''before" is ver\_y much under chal­ lenge nowadays; see, e.g., Tomkins (1963]; also Kuehlwein (1996] for an example of current constructivist challenges to a "pure affect" point of view); (4) an interpersonal transaction, as in the verb "to shame," and/or an internal "state," a kind of personality or self-disorganization (see, e.g., Bradshaw [1994] or any of a number of other writers in the self-help and recovery movements); and (5) several other senses, including an unhappy event ("what a shame"), a characterization or imputation ("shame on you!"), a blot on honor or decency (a "crying shame," "shameless"), and so on. Moreover, it is common to see al] these uses in

and Adolescent Conference, Cambridge family l.nstih.llc, and numerous other workshop and conference settings. To be sure, Robert Lee himself would express and has expressed some of these ideas differently and is not responsible for incompletions or unclaritics here (see, e.g., Lee, 1995).

an immense range of intensities, from the mildest social embarassement ("I'm ashamed to say ... ") to an acute level which we associate clinically with strong risk of suicide or other violence. All of these uses have valid­ ity, if not always clear boundaries, and we will useandexamine the term in all these senses here-hopefully with clarity about which sense we are taking up when. [n addition, a crucial part of this presentation will be to introduce yet another sense. of this deeply familiar, often poorly distin­ guished cluster of meanings. This will be our understanding of shame as a *social fold perception or condition,* contrasted with support, which we will offer as the indispensable missing link between the social behavior of shaming (which we link to withdrawal of support), the apprehensive feelings of anticipatory shame (which is close to Kaufman's [1980] term "internalized shame" ), and the subjective or phenomenological experi­ ence of shame, in interaction always with other thoughts and feelings. This is where a redefinition of self is crucial, in our view, to clarifying the confusing and sometimes contradictory clinical discussion of shame in current literature. Likewise thisis where the Gestalt model, we submit, is essential to that new and more experience-near definition of self.

The Experience of Shame: Shame as Affect and Feeling

To begin with, when we speak of shame we are talking about a *feeling,* in a broad duster or continuum of affect that ranges all the way from mild everyday embarrassment and chagrin to the acute states of panic and paralysis that most or all of us haveexperienced at one time or another in our lives-and more than a few of us experience chronically, or organize our personal field and styles of contact to avoid experiencing, often in debilitating ways. Here the experience of shame is above all a sense of *personal inadequacy* of some kind, the sinking apprehension that I am *not going to measure up* to something or somebody, that I will be shown up as deficient (or possibly too much) in some important way. At their most extreme, shame experiences are among the most intensely negative and debilitating, even life-threatening feelings that we can have. This is because the experience of shame in extreme forms has a way of cutting to the bone of our sense of *basic warth and capacity to survive and c<rpe,* a kind of background feeling that underlies other feelings and experiences and may be subjectively felt as unchangeable-and therefore hopeless at a given painful moment. That is, if shame seems to have to do with my "being," and not just my "doing," then there may also seem to be ''nothing I can do about it," which in turn is why states of extreme shame are recognized clinically as states of great vulnerability and reactivity for self- and other-destructiveness (see discussion in Lee 1995; also Wheeler and Jones, 1996). ln the related feeling we call guilt, I may feel that *l* have "done a bad thing," or even am "a bad person"; still, there is the possi-

bility of reparation (guilt derives from the old German *gelt,* a payment or compensation), some sense of strength and agency, which could be turned from bad to good. In extreme shame, by contrast, I am powerless, unable to "face'' people or life fromsuch a position of weakness: thus the close connection between shame and sudden explosions of disorganizing rage, turnedag.ainst theself or the world.

Here is the description of extreme shame states offered by Gershen Kaufman (1980), perhaps the foremost of the affect theorists writing today about shame and how deeply feelings of shame can cut into the core of our basic schemas of viability and self-esteem:

Shame itself is an *entrance* to the self. It is the affect of indignity, of defeat, of transgression, of inferiority, and of alienation. No other affect is closer to the experienced self. None is more central for a source of identity. Shame is felt as an inner torment, as a sickness of the soul. It is the most poignant experience of the self by the self ... a wound felt from the inside, dividing us both from ourselves and from one another.

Shame is the affect which is the source of many complex and disturbing inner states: depression, alienation, self-doubt, isolating loneliness, paranoid and schizoid phenonema, compulsive disor­ ders, splitting of the self, perfectionism, a deep sense of inferiority, inadequacy or failure, the so-called borderline conditions and disordem of narcissism. These a.re the phenomena which are rooted in shame. . . . Each is rooted in *significant interpersonal failure.*... (italics added).

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 Thexcruciating observation

of the self which results, this torment of self-consciousness, becomes so acute as to create a binding, almost paralyzing effect upon the self [p. vii].

Plainly Kaufman has been there, as have we all to one degree or another. And small wonder then if shame feelings are also among the most *denied* of all the affects, to the self as well as to others-with the result that the more time we spend studying and thinking and talking about shame; the more we come to recognize or hypothesize it clinically by the defensive reactions and compensatory strategies which are often its hallmarks: denial of feeling, anger, rage, criticalness and other coun­ tershaming moves, self-righteousness, character attacks, deep anxiety

and self-medication in all its forms including addiction, and finally violence large and small, toward others and/or toward the self. In exn-eme forms, feelings this acute and this isolating simply cannot be borne and stayed with for long-or at least not without the unusual levels of relational support that can be fotmd, at times, in deep friend­ ship, intimate loving contact, certain group and spiritual experiences, or psychotherapy, all at their best.

At the same time, *if* a given feeling is so wtacceptable ot so unbearable as often to be denied, even to the self, then how are we to recognize it at all? How do we know, personally or clinically, when anger, say, or depression is usefully thought of as in pa.rt a reaction to or defense against shame, and when this is more our suggestion than the client's own reality? This is of course a question that comes up in any clinical dialogue, about any feeling states and experiences. As clinicians, even if we reject an older authoritian or rigidly interpretive stance, we still know

that our own attention is directed somewhere, that that direction is partly determined by our own theory and clinical experience, and that in this way our theoretical biases can have a powerful influence on what the client attends to and how he or she makes meaning of her/his ownexpe­ rience. The answer here, developed below, will be not to argue right and wrong dincial answers, but rather to ask where our dinica.1 conversation will be supported to go, what weand theclient together will attend more to, if we assume as *we* do that hidden shame may often be playing a much greater role in experience than we have often realized in the past. Specifically, the introduction of the shame topic will serve to refocus our attention on the much neglected issue of support, in the context of the revised model of self which we claim the Gestalt model offers. That model, its implications for issues of support and shame, and some of the clinical implications and applications of it will all be developed below, after considering some of the ways shame has been understood by other models in the past.

Affect **Theoiy: Shame as** an **Affect Modulator**

Up to this point we have been talking about shame as a feeling, much like other feelings-anger, say, or sadness, excitement, fear, and so on-only perhaps even more aversive than other negative feelings, at times anyway, because of the isolation and impotence which Kaufman speaks of, which are so often associated with extreme feelings of shame.

But shame as we see it is something more than "just a feeling," parallel to and constructed like other feelings in our experiential process. This something more is already re.fleeted in the language of affect theory, which addresses the particular relationship of shame feelings not just to

the world a.round and the people in that world, but to other feelings and motivational clusters *as* well. Both Tomkins (1987) and Kaufman (1963), as well *as* other writers on affect theory, speak of the role of shame as a "modulator affect," one whose function is to govern or modulate the intensity of other affects, ultimately to protect the self-particularly the affects Tomkins calls "interest-excitement," which are of course all those feelings that push or puJl us out into the worJd, toward some desired object or state or position. That is, when I am moved to extend myself out into the social field-and to that extent am exposed to adverse reaction or even danger-then I'm immediately in need of some other cognitive/ affective feedback loop, something that can take ongoing information about my sense of ''how I'm doing," and feed it back in a way that will regulate or modulate this "going out" energy. Without this kindof corrective process structure, not just my quality of social living but my actual survival will likely be compromised. Shame, then, is something I am "prewired" to feel (and all the affects are basically "prewired," in this view), as a sort of safety regulator when the social ground doesn't fee] firm enough to support my extending myself any further. (Of course, there are many other considerations and feelings that may make us pull back from a given overture, before or after the fact, mostly having to do with estimation of bad practical or emotional outcome. Shame is particular, in the affect theory view and in our view, in that it actually acts to dampen the positive fee1ings or desires themselves, which is not so much the case with other feelings that may come up, or with practical outcome assessments.)

To put this affect theory discussion in more everyday personal terms, we may say that a state of need or desire is always, at least potentially, a *state of vulnerability.* When I need something, I am to that extent depen­ dent on thefield around me; and dependency as an experience is always evocative of issues of exposure, risk, power, and control. Shame is the flashing red light warning me to pull back from a risky exposure, some overture which *is* not gojng to be well received in the social field. This pullback may be situational and momentary, as in unexpected embar­ rassment or humiliation after the exposure, or it may be more anticipa­ tory, protecting me from the public exposure itself (but at times still extremely aversive privately, which I may well struggle to conceal). If these experiences of public or anticipatory shame are severe enough and chronic enough, then the dynamic interaction of shame and desire or need may of course become earlier and earlier, until eventually we lose all awareness of our own desire and feelings in a given kind of situation and experience only the sinking or deadening feeling that that stimulus comes to evoke. This is then what Kaufman calls "intemalized shame" (1980), which he regards, as we do in slightly different language, as a

problematic interruption in personal process, a kind of distortion of the original, functional/protective operation of the shame dynamic.

All this is highly contextual, fundamentally constructivist, and deeply phenomenological,in the "experience-near" sense-which is to say, very much in tune with current thinking in developmental theory and cogni­ tive/affective models (and with the fundamental precepts of Gestalt psychology) (see, e.g., Lewin, 1935; also Astington, Harris, and Olson, 1988). But it is not at all close to our dominant receivec:t clinical models of self theory and therapeutic intervention. Rather, those dominant models, in particular the older psychodynamic and behaviorist models, are based on an entirely different self-model, which yields a quite different under­ standing of shame-to the extent that they support any useful clinical discourse and dialogue about shame experience at all (see, e.g., Master­ son, 1976; also Bijou and. Baer, 1961, for a behavioraJ approach to devel­ opmental theory). To see just how different-and how limited-that inherited view is,, we need to tum briefly to the background of psychoan­ alytic self theory itself. This background is the *individualist paradigm of human nature,* a model and a heritage, we believe, which is most usefully deconstructed and recontextuali.zed by a Gestalt field model of self.

# The Psychodynamic Model in the Context of Individualism

Traditionally in the West, our understanding ,of self and relationship has come out of, and been deeply colored by, the *dominant paradigm of individualism* as an undedying worldview and model of human nature and process. This model has roots that reach at least as far back as the Greeks, and then forward and on down to us in a consistent stream, through the Judeo-Christian tradition, Renaissance humanism, Enlight­ enment and 19th-century scientism, and on into our own century, where psychology has attempted to break with its own tradition as a branch of speculative philosophy and ground itself in empirical process. Funda­ mentally, individualism presupposes (and it is the nature of a paradig­ matic view, as Kuhn [1970J has usefully pointed out to presuppose, more often than to state openly) that something in the essence of each individ­ ual person *preexists relationship and ccnte::d,* and exists meaningfully apart from the social environment. Thus the individual is in some impor­ tant sense more real than relationship or community, which are not themselves part of our basic makeup but are more in the nature of prag­ matic arrangements to accommodate individual needs.

This view is sometimes called the "monadic" self-model, after the Enlightenment philosopher Leibniz, who posited that the basic building blocks of reality were "windowless monads," individual soul/selves set in motion by the will of God, and then spinning and bouncing off each

other endlessly, all according to Nature's laws. 1rus view-minus God, of course-reaches its apogeein psychology in the work of Freud, whose complex system. aims to show how, without God and without any assumption of basic benevolence, people could nevertheless form bonds, live in society, and possibly reach some uneasy truce with their own savage biological nature. People do form attachments in the clas.sical Freudian system, but the bonds they form are by definition secondary and instrumental in nature, a fragile compromise between kill and be killed, ever at the p0int of reverting to an outbreak natural aggressive­ ness and rapacity. The highest value of the system, as befits an imperial­ ist age, is *mastery,* including importantJy self-mastery, which in this model is coextensive with mastery of nature. Any "social instinct" is just a soothing fiction, much like religion or the "spiritualism" that was popular in the times (altruism itself is one of the defenses added by Anna Freud to the "classic nine" defense mechanisms she gleans from her father's writings; see A. Freud, 1936).

And if separateness is our basic nature (and mastery *our* necessary

survival goal), then maximUUl self-development, the highest realization of that nature, will be found in the developmental ideal of *maximum autonomy, maximum emotional independence from other people.*The child, by nature and by necessity, is dependent; the mature adult, by contrast, is *independent of the social field,* self-driven and self-judging by an internal standard, and in a real sense cut off from conrtections with others (for discussion and critique of this self-ideal from a contemporary fem..i.nist perspective, see any of the valuable works of Gilligan [e.g., 1982} or the writers of the Stone Center and their Wellesley associates [e.g., Miller, 1976; Belenky et al 1986).

But how to get from infantile dependency to mature autonomy and field independence? The answer is the centerpiece of classical Freudian developmentaJ theory and bring... us back to oa:r discussion of shame and shame theory here. The developmental solution lies of cou.r.;e in the oedipal crisis, the crescendo of inevitable conflict between the napacious animal nature of the growing child (presumably male) and the demands of a possessive and presumably equally predatory male parent. Through identification with theaggressor (again, see discussion in A Freud, 1936), the father's dominance is internalized as the superego of the growing boy/child, and thus the standards and demands of society, which keep animal aggression and libido in check,are internalized and carried on.

With resolution of this crisis, *guilt replaces shame, as a social (or socially*

*derived) tnDdulator on impulse, appetite, and behavior* (S.Freud,1933). To the extent that the individual remains subject to shame feelings, he or she is by definition immature. The ''he or she" is important here because another implication of this system, and one much critiqued by feminist and other writers, is that women by definition never achieve this full

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autonomy from the social field o.r a full transformation from *social control through shame* to *self-control through guilt* **(remembering** here that we are talking about classical psychodynamic discourse, not the many modem revisions, away from drive theory and toward "object relations" and related newer schools). This gender difference follows necessarily from the fact that women are never subject to the full castration threat of oedi­ pal rivalry and thus never identify fully with the aggressor, never completely internalize the superego-and so remain, by definition, in a condition of more or less arrested development more field-dependent, less abstract in moral judgments (on this subject see Gilligan's (1982] critique of Kohlberg), and *more subject toshame.*

Thus shame is the infantile fonn of guilt-the affect of children, women, "primitive" cultures, and immature, mother-dependent men­ but not felt at alls, upposedly, by thehealthy, mature male individual, in fully evolved (i.e., individualist) Western societies. In other words, *shame itself* is *shameful,* a sign of weakness, pathology, and immaturity. Small wonder then if the classical model did not and could not serve as a supportive theoretical ground for discussion of this complex and troubling (and sociable) affect, the most "field-related" of all the affects (even including love and desire, which are related to the field in this model only in an "object" or discharge mode; altruism, remember, is not a basic impulse but a secondary defense *against* basic impulses).

And thus we find little attention paid to shame in psychoanalytic writing, at least until about a generation ago, and even then, many clini­ cal writers continued to be **marked** by the "self-in-isolation" flavor of classical drive theory and thus seem ill at ease with the way attention to shame tends to take us toward a focus on some *relational disconnect,* past or present (a failure of empathic mirroring, in the language of self psychology), and struggled to find a way to contain the shame discussion within the framework of the isolated Freudian self (see, for example, Morrison's [1987] dissent from Nathanson's [1987] social-context view of shame for an example of this struggle within the psychoanalytic tradi­ tion; affect theorists, from Darwin [1872) to Kaufman [1980] and Lee [1995], tending as they do to view the self in a social context, have not had this difficulty. See also Wheeler, 1995).

In our view, this struggle to contain clinical discourse about shame within the bounds of the separate Freudian self and to have a meaningful discussion of shame in purely or heavily intemal terms (much like the Freudian discussion of, say, anxiety) cannot succeed. The reason for this has to do with the contradiction between our experience of shame, so eloquently rendered by Kaufman above, with its felt themes of being seen, shrinking, and wishing to disappear from view, on the one hand, and the terms of the individualist self model, which has to assert that feelings like this are not universal and deeply self-organizing, but

exceptional, pathological, and developmentally infantile *(and feminine)*

(see discussion in Wheeler and Jones, 1996).

In simpler., more experiential terms, we can say that we just aren't like that, and our Jiving experience isn't like that. Even among successful and privileged adult men-supposedly the group most completely impervi­ ous to shame in the psychodynamic/individualist model-it is com­ monplace, now that the subject is ''up," in the popular culture, to **hear** people say, ruefully, that significant parts of their lives and experience are at least partly organized around managing and avoiding shame, while the corporate business and professional culture of this society are manifestly deeply structured around dimensions of status, deference, and fiercely subtle gradations of hierarchy-a world., in the words of one of our management trainees, of "shame or be shamed."

Affect theory offers a picture closer to the world we know and live, of a self guided by affect (and the "meta-affect" of shame) in its negotiation of the social world. Yet such a picture,. with the social-field emphasis inherent in a tradition derived from evolutionary research and theory, neglects the dynamic "inner" world of personal history and self/social construction of meaning, which the psychodynamic model did at least address itself to (which is why, in our view, the psychodynamic model

has been dominant for so long, despite its many and often-cited d.iffic ties in reconciling theoretical constructs with empirical research and felt

subjective experience).

A comprehensive and radically n.ew approach to all these issues, we believe, is found in the terms of the Gestalt field model of self and "contact." It is to this new model that we tum our attention now, first in its theoJ."etical approach to these and related questions of self-process and self-experience and then to its clinical applications.

**The Gestalt Field Model of Self**

We've already said that down through Western tradition, "self'' has been taken as denoting something deeply private and internal-very close to our received tradition and discourse about "soul"-something that endures and defines the individual and marks his or her existence prior to and apart from (and poSSibly after) the social field of relationship and connectedness. The problem then, in seU theory as in. philosophy, has always been, how does this separate and private entity connect up with

· the world? Leibniz held, basically, that it doesn't (the monads or individ­ ual sou.I-kernels were "windowless.,'); connection is only in the mind of Goel. Descartes struggled with the question and posited a dual nature: body belongs to the world; soul or mind to another realm (which leaves us where we started-how does "soul" influence ''body"?) Spinoza tried

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to finesse Descattes's dualism, with a more subtle dualism of his own: *'"'body'* and umind" or "soul" were two "parallel aspects" of divinity-a bitof pantheism for which he was soon excommunicated fromhis Jewish community and roundly condemned by the 0,urch for good measure. In the 19th century, with the ascendance of a more atheisticmaterialism, the old "mind-body'' problem was said to have been resolved-in favor of biology, which became the new ground for self theory. And yet subjec­ tivity and self-experience remained, and :remained to be explained. The subjective, felt difference between an "inner realm" of private experience and self-organizing drive and affect, on the one hand, and an ''outer realm," of the social and physical environment on the other, was still the organizing difference underlying the experiences of awaren.ess and sense of self. Thus in this century the new philosophical movement of phenomenology, articulated by Husser} and others, attempted to address these ancient questions from a new point of view, one based on the terms and given structures of subjective experience itself.

The Gestalt writer and social critic Pau1 Goodman, deeply steeped in an earlier, more radicaJ Freud and also in the works of Kant and Husserl, drew on these and other sources to attempt a new and more social approach to the old ''human nature" problem and to articulate a new

approach to the old problems of self, self-experience, and self-process as a source or organizer of agency in the behavioral field. Basing his model on the then-new insights of the Gestalt movement in psychology, Goodman Oike Kohut and many others of his contemporaries) empha­ sized the *organizing, constructivist capacities* of the peison as the essential function and defining activity of the processes we call "self' (Perls et al., 1951). But what is it exactly that is being organized, and how does "self" or "self-process'' accomplish this essential activity, so that what we get is both the cohesive "self-experience" emphasized by Kohut (1977) and coherent action in a complex and intensely social world? Goodman's answer, which is enormously fruitful for constructing an *II* experience­ near" self model, was to *relocate* self, decentecing it from the "inner individual" to a supraordinate position in relati.on to the whole field, "outer" as well as 11inner" (or as he would say, "at the boundary").

We may reformulate a Goodman-based argument this way: first there is the fiel into which I am born. This field is everything that is, and thus everything that I have to draw on and be a part of, in the ongoing creative process of self-organization. Awareness is by definition the capacity to respond to the field; self-awareness is the awareness that I am doing that, while I'm doing it In other words, the most basic characteris­ tic of experience, for the self-aware subject, is a sense of difference or boundary in the field (as Goodman would put jt)-a felt; qualitative difference in experience between "inside" and "outside" or, in everyday terms, between "me" and "you." I must be aware of both these realms, to

live and grow; that is, f have to orient to both the inner world of desire (again, to take Goodman's term) and the outer world of people and things. Life consists, in fact, in relating the one realm to the other, int grating the world of needs and desires (and dislikes and fears) with the world of resources and opportunities (and frustrations and dangers}­ this is what living is, in experiential or phenomenologicalterms.

Self, in process terms, *is the activity of that integration;* thus self is "located," Goodman argues, not somewhere deep inside, in the secret recesses of the individual psyche, but *"at the boundary,"* in a position to act on and integrate the *whole* field of experience, "inner'' as well as 11outer," into coherent, usable wholes of understanding, meaning, and action in the field (or perhaps we should say "of the field," since self is

·not.a separate entity, apart from the field, but rather a sort of position, or metaposition, in or of .it; *self, we might say, is a "point of view"* and an activity in and of that field).

Now stripped of phenomenological jargon, this is a wholly "commonsensical" position about self and self-process-as Goodman would be the first to proclaim---and one that meets the test of being "experience-near," as a model that has the same "feel" as the living processes it is meant to represent. But the implications *of* it are quite radical, in some subtle and some not-so-subtle ways, for our under­ standing of human relationships in general, of shame experiences in self process, and of that special kind of relationship we call psychotherapy.

First of all, note that in *this* perspective it suddenly no longer makes sense, really, to speak of "self *and* other," in our familiar everyday way or in clinical discourse (much less of ;,self *versus* other," which was the

£1.avor at least of much clinical writing in the first century of psychology's existence as a self-conscious discipline). Rather, "self" is the organizing, field-resolving process that *yields* a sense of "me" in the first place *and (l sense of you, or "not me," at the same time.* You are a part of my field and thus a part of my self, which organizes that fie]d meaningfully for me. You are in a different place in my field from my own place, but we are not and cannot be separate in any ultimate sense. Thus the problem of explaining relationship, or relatedness,. which the new "self-in-relation­ ship" theories try to do by adding on relational needs to a psychody­ namically derived self-theory, doesn't really come up (see for example Miller, 1986). Rather, the field is wtdei:stood as *afield of rela.tedness,* which is itself the groWld of self-process, a constructivist act resolving that field into a coherent "point of view."

In the same way, the field of relationship and self-process is inherently an *intersul,jective* field. Your "inner" process, like mine, is a part of the whole field. Yours is a part of my field, and mine is a part of your field. Our experiential fields, in this sense, interpenetrate; and certainly my

ability to negotiate the field and reach some satisfying integration of

need and outcome is crucially dependent on my ability to know something, at least, about the inner worlds of other people. This kind of intersubjective knowing is developed and refined dialogically, through inquiry and active listening-as for that matter is my knowing of my own inner life, which is dependent, at least developmentally, on some intersubjective reception and inquiry from others, which let me begin to know something about how to structure that sensate world with language and meaning,

Plainly with this model and this approach we are in a quite different discourse and a different realm here from the 19th-centu-ry positivist world of classical Freudian metapsychology-a different world where self is understood not only .in process terms (as opposed to the older entity or "homunculus" model), but as an organizing dynamic that is coextensive with the whole field of experience and not just the "inner" part of that field. Plainly too, this in tum will have important implica­ tions for our notions of health, relationship, even palitics, as well as for clinical work in general-and shame theoryin particular.

# Understanding Shame from a Gestalt Fidd Perspective

As we have seen, if the pinnacle of healthy self-development involves *detachment from the social field,* and shame has to do in some way with our interpersonal reception, then by definition shame will be seen as the affect of weakness and failure, and developmentaJ arrest, and *will itself be shame-tinged am! taboo as a subject.* But in the contextual self model we have been outlining in the section above, there's no such thing as "detachment from the social field;"-or tather, it is that detachment itself that would be seen as problematic, even pathological (and indeed, the caricatured male developmental ideal in the classical psychodynamic system is something we might have a hard time distinguishing meaning­ fully from a schizoid structure, or possibly an endemic post-traumatic stress syndrome, as a character style; again, this is a point that has been raised, in somewhat different terms,by a number of feminist critics of the older drive theory model).

The issue, in a field model of self process, is not a simple bipolar one of attachment/detachment (with attachment understood as dependency, and dependency typed as weak and dangerous). Rather, the issue is what *kinds of integrated resolutions of inner and outer world are possible,* which paths to integration of the whole field (which is living itself) a.re open and which ones are closed, which are supported and which are unsupported, both developmentally for the individual person and as dynamic conditions in the current field. In personal terms, what parts of

myself, what urges and desires, what thoughts and feelings, can be *received and conn.eded with in my social environment* (immediate or symbolic)? What parts will meet with resonance and energetic response (including at times energetic opposition), and on the other hand which

parts will be met with a pulling away, a disconnect, often in an overtly belittling or punishing form that we think of as active shaming? That is, in this model we understand shame as *the affect of that disconnect in the field,* that sense of the field pulling away from me, not receiving me, with all the judgment and associated feeling that are carried by that field structure. Shame, that is, is the experienc\_e of an unwilling (to me) disconnect with my vital social field (not to be confused with opposition or limits, which may well be felt as a kind of engagement, and are not necessarily shaming).

But-and here is whe.re the difference in self models makes an enor­ mous difference in how we conceive our clients' (and our own) experi­ enc the "field" we are talking about, in this perspective, is not just my "environment,'' not just "object'' or "other" to me, not just *limy* environment," in the sense of something "outside myself," The field in this sense (and in our lived experience, we would argue) is an *essential and integral part of my self,* as essential a realm of experience and connect· edness as my own inner world. The field, that is, is " y world," in the same sense that my inner world is "mine;" and a break in identification, in this sense of ownership and self-identity on the "outer'' level is actu­ ally as disturbing and potentially damaging as we know a break in that kind of self-identity is when it is felt in relation to the "inner self" (see

discussion in Kohut, 1977). Of course, it goes without saying that such a sense of break or alienation (literally, "otherness") in identification with the"outer'' world is one of the hallmarks of modem Western culture and identity. Under this field model of the self, this is seen not as the "existential truth" of the human condition, but as the clinical pathology of our times.

A break in the field, as we understand it, is always at least potentially *a break ir, self-process and cohesive self-integration,* which is to say, a break in the self. In the context of development, the growing (and field-depen­ dent) child, as we know, is highly sensitive to breaks and threats of **break** of this kind-places where a part of the inner self or of self-experience. (a behavior, a feeling, a. meaning, a voice) cannot be received and, as Kohut would say, "mirrored" :in the outer field. If these gaps, these experiences of nonresonance or shame, are too central and too chronic, the \_result is the dampening and ultimately the atrophy of those parts of the

inner field (the "self," in everyday, individualist language) that were unreceived.

Up to this point we are still in substantial agreement with many of the revisionist, post-Freudian psychodynamic schools in general and with

their way of regarding the self in development. The growing child is extremely sensitive to the empathic break, which is felt as shame and which may become deeply structuring, in limiting or distorting ways, for the developing self-process and self-structure. Where we may differ from some of these mode1s is in *our* view of the continuing importance of the social field to the mature person (a point Kohut **[e.g.,** 1977] has tried to express, in individualist language, with his notion of the lifelong im.pol'­ tance of "internalized self-objects"}. We do not "outgrow" our field­ orientation, our sensitivity to *our* reception or response in the field; rather, our field-sensitivity and field-interdependence is lifelong and is one of the two defining poles of self-experience.

Where we do grow, to be sure, is in *our* ability to organize needed and relevant support from one part of the field (external as well as internal), to compensate for a lack of connection or an experience of direct sham­ ing,in or from another part. We are no longer so reactive and dependent, as a young child must be, to the immediate social surround (though we do feel that response or lack of it), but can "hold" other referential supports. This is quite a different statement from the individualist ideol­ ogy, which holds that in maturity we "rise above" infantile field orienta­ tion. Moreover, these parts of the field do not fall out neatly along "inner/outer" lines, as the older individualist model would suggest (where "self-supports" are expected to replace "field-dependency," meaning the outer field; see for example the work of Lewis [1987) or for that matter Perls [19691).

Rather, we would emphasize that a disconnect, and threatened or felt shaming, in one part of the field can *only* be supported and managed in a healthy way (a way that leaves me well enough supported to be open to further growth and development) by appeal to *another* social reference group (often a reference group not immediately present), to provide the requisite validation and self-resonance: this is the essential social field orientation that is part of our basic makeup, not something we "transcend" on the way to mature autonomy. Something like this is the case, we would argue, in cases of "solitary heroism," one person standing against !the crowd for the sake of a principle. 1n nearly all cases of heroes of conscience, we find in their writing and speaking that they seek support and social validation by making explicit reference to some other valued group, in their own lives or in history, with whom they identify themselves in their stand, thus knitting up the rupture offered by their immediate social context.

In other cases, we may make appeal to outer support to man.age and reframe an "inner" shaming voice. The rejected lover may talk obses­ sively to friends or therapist, or even relative strangers, about how badly he/she was treated: we would view this need to talk as the attempt to *repair the shame,* by seeking an empathic connection that restores the

wholeness of the self. The obsessive quality suggests that the attempt is not working-in ourview often because the real shame feelings are being talked around and avoided (perhaps with countershaming and blame), not named and supported, and thus not reaching a new integration that would enable the person to move on. The listener may fee] entrapped, as if she/he has either to agree ("yes, what a jerk") or else risk further shaming of the distressed person ("get over it," or "well I think the picture was a littJe more complicated-you had your contribution there *too''}---or* else just keep silent, perhaps avoiding the suffering friend alto­ gether for a ti.me (the fate of many people in an acute state of shame). The simpler and more empathic r ponse, whether from friend or therapist, might be something more like, "You must just feel terrible about your­ self, to be treated like that," *or* even, if it fits, 11When I'm rejected like that, l *feel* humiliation and shame." If shame is the affect of an unwanted disconnect, then it is *to that place of felt rupture itself that we need to go,* to make a healing intervention-as a friend, as a couple or family member, or as a psychotherapist.

To recap, both the inner and outer worlds are integral parts of self­ experience, the two dynamic poles whose integration is the self in action, and the process of living self-definition and resolution. *A* rupture in reception of the inner pole of self in the outer field is always a potentially disorganizing experience, a rupture in self-process itself, and must be met with some new organizing, connective move-reactivity (anger and blame, even violence), reconnection with another part of the field., pEaca­ tion and "self-abnegatfon," self-dulling (chemically OY otherwise) and self-distraction (the behavioral addictions)-or *new outreach and support coming from some significant person or group in the field* (such as the listen­ ingof a friend, the extraordinary holding we extend to people in states of sudden Joss, or the relational process of psychotherapy).

The felt experience of this kind of disconnect is the affect cluster we call shame, ranging from mild discomfiture and embarrassment through deep humiliation, all the way to states of blind rage and decompensation,

These feelings, we submit, are not exceptional or immature but are

always at issue when there is a loss of field connection-even if they a.re often shown by their compensations and avoidances, as much as by direct experience of shame itself. This is not to say we always *ufeel* shame" when we have a loss or are otherwise not received; much less is it to say that we don't have a whole range of other feelings, besides shame and/oraccompanying shame. Rather, we are saying that shame is an experiential, dynamic counterpart and cowtterpole to connection and support: when those are disturbed, shame dynamics, shame issues, and possibly direct shame feelings are always "up."

Implications for Practice

What does all this mean for our work with people and our work in psychotherapy in particular? To begin at least to round out this more theoretical discussion# the following are some of the areas of clinicall focus where we believe a field model of self and shame makes a differ-­ ence in practice and offers better support *for* interventions that balance attention to .internal, dynamic concerns, with attention to social context factors *and to the crucial dynamic interpltty between and among these domains,* which is often accessed experientially through attention to feelings of shame:

1. *A reframing of support issues:* First of all, a field/constructivist

perspective such as that offered by the Gestalt model means a shift of angle of vision, from a primary emphasis on "self" or "internal" supports ("self-talk," self-soothing,self-object use and constancy, and so on-all of them of course using "self" in the traditional sense of "internal self"), in the favor of a wider Jens, one that directs our view toward *conditions of support and reception in the outer field,* as much as toward "inner resources." This lens can be turned on the conditions of the client's or patient's life in general, or directly on the process dynamics with.in thel'-­ apy itself.

What we are particularly interested in here is not just problem.solving

.in the outer field, but the *felt conditions of connection, reception, and support* or disconnection, lack of resonance and understanding,andshame, in the person's relevant social world. If we take a field model seriously, then we have to regard whatever is, whatever happens, as a phenomenon of the whole field-meaning that what is, is what is supported in the field in some way (including of course the "internal" fields of the person and of other people). Th.is does not mean that we forgo our more usual focus, in dynamic therapy, on "internal" dynamics and processes: history and the construction of meaning, cognitive framing, affect and affect manage­ ment, self-constancy (including, in our model, "other-constancy," which after all is an aspect of self as we see it), attachment and loss, expression and voice, "resistance" and energy, body experience and so on. Rathet, it means that we take up a more complex lens, so as to see all these things *as well as* the conditions of the "outer" field, the "inner" and "outer" woclds as contex,ts and grounds for each other, and the dynamic inter­ play between them. To take an example of what we mean, a marital separation, for instance, which may be felt as a deeply shaming experi­ ence by one or both partners, has entirely different dynamic conse­ quences depending on both past history of loss and shaming *and* current conditions of support and affirming resonance (or lack of it) in the

present social field (including of course psychotherapy). It is this last, the external supports, that are most likely to be neglected or incompletely seen if we work from a moreindividualisticframe.

Of course, such a shift is a shift of focus for the client as well as for the therapist. lf we inquire, "do you feel shame about the break-up?" or "Where are you feeling shame in your current life otherwise?" or even, ''Where are you not enough supported?" we may well draw a blank stare or a series of energetic protests and deflections, even mocking and shaming from our interlocutor, all of which are signs of insufficient support for the contact figure we mean to be offering. But if we move closer to felt experience and familiar vocabulary and inquire, ''\'\Tho affirms you right now, around you, *as you are,* the way you really want to be held and seen and affinned?" we *may* draw a more articulated answer, or tears, or unlock an wtderlying despair bom of years and years of low-grade, avoided, or habituated shame. Or "Who doesn't? who do you wish would support youin th'.is way, right now? who ever did? how do you carry that now-is *it* here, present for you as a resource? have you thanked them? what does it feel like, in your body, in your presence and self-presentation? what can you do differently in the world, now, if you think of yourself as grounded (ornot) in that affirming place?"

1. *The11UlSks of shame:* We've already said that feelings of nonsupport and disconnection, which are themselves denied as needs or even glori­ fied as maturity in our culture, may clearly tend to get masked and overlaid with other, more acceptable feelings or behaviors, even ones that don't seem so acceptable or desirable at first glance. The fact is, for many people, perhaps especially some men in this culture, the social and self-reproach of being a violent abuser or a drunk may be less than the felt shame of being seen, or seeing oneself, as *dependent,* "too needy," or weak. When we are dealing with any abusive pattern in therapy-from addiction to physical menace to hypercriticalness, character assassination and other emotional abuse-we need to put a boundary on the behavior *and* pay attention to the issue of underlying shame feelings, and how to rec-eive and support them in the therapeutic relationship. Just doing the

former without the latter cannot work, in ow view, because without strong additional interpersonal support, people *will m<nJe toward the path of lesser shame.* They have to, again because of the terms of our nature as we understand it in this model: we *cannot simply bear* a severe felt rupture or disconnection in the most relevant social field (which is not necessar­ ily to say, again, the most immediately present) without the support of other resonance and reaffirmation (we do bear it, of course, but not simply: without that other support, we necessarily have recourse to countershaming, numbing, schizoid or hyperautonomy, dissociation, or someother strategy to take the edge off the unbearable). If that rupture is there, and without strong additional support to reconnect elsewhere in

the field, people will do whatever it takes (up to and including suicide) to escape those unbearable feelings.

Less extremely, we look at criticism, denial, hyperautonomy, chronic anger and blame, as well as grief, depression, self-doubt, "codependent'' patterns, and less drastic behavioral addictions, with an eye to surfacing the hidden ground of felt support and felt rupture/shame, under the figure of these uppermost feelings and actions. Shame will most often present as an accompaniment to other feelings, and partly or wholly masked by them. We are not interested in telling people what they "must be feelin '; we are interested in *naming feelings that go unnamed,* inquir­ ing, sharing our own shame feelings, and signalling the receptivity that often makes voice itself come to life in the intimate social field of thera­ peutic relationship.

1. *Listening for the longing:* This is a phrase 1 take from Robert Lee's writings (e.g., 1995), which follows, again., from the terms of the model

we're presenting. The issue of shame arises, remember, when the person is feeling desire or need-the affects Tomkins calls interest and excite­ ment. If anger and blaming and depression may all often be signs of hidden shame, shame is always a sign of an underlying desire or need­ often hidden, because *the chronically unmet need is almost a field definiti.on of shame.* This may be a simple matter, when the client is saying to his/her partner, "You never listen; you always think of yourself/' and so forth, of responding with the inquiry: "How do you long to be listened to, held, received? Tell her/him about that." Or the longing may be more embedded, under a proclamation of self-sufficiency, for instance, or a barrage of other criticism. To frame a desire in terms of a reproach-one of the most frequent and troubling of problematic patterns in couples-has to be, we submit, a sign of shame, of an inner conviction of insufficient personal "weight'' when it comes to vulnerable needs and feelings in the social field. Such a conviction always goes beyond the

botmdaries of the couple and is rooted more widely and deeply in the person's sense of self-in-th world. *To transform that conviction from a lonely belief which is used defensively against the partner, into a shared challenge held intimately by both partners,* is *one of the great healing gifts couples therapy has to offer, we believe, to both members of the relationship.*

1. *Naming and owning shame:* Again, we are not interested in telling

people what they are feeling or are not feeling or ought to be feel.ing (if only they were more "in touch"). These moves are themselves potentially shaming, in our view, and thus not likely to lead to articulation of new self-experience, new understandings of one's dynamic interaction with and in the whole field. At the same time, if we imagine that we do not carry any preconceptions into the encounter with another person, or that we ourselves could possibly be "just receptive," and not always subtly support focusing attention in one direction over another, then in our

view we risk falling into a dangerous clinical fiction of ''objectivity" (dangerous because it makes it impossible for the other person to have an easy dialogue with us about what those preconceptions are, which we are necessarily carrying, but which then remain denied and thus closed to influence). This mythic objectivity also completely violates the constructivistassumptions of the Gestalt model itself.

Our answer to this kind of dilemma-how to give the client the bene­ fit of ow point of view wi.thout violating or denying her/his experi­ enc is tocome right out with it. We may say, for example, "That kind of feeling you're talking about, of being ignored and completely discounted or dismissed, is a feeling [ (or a lot of people) think of as shame. What happens for you if you put that word on it, or think of it that way?" lf the client then chooses another word for the feelings-­ denigrated, or not seen, or impotent, or not taken seriously-then we listen and accept that word. But we don't want to court the risk that a stronger wo:rd like shame is going unspoken, because of being itself felt as shameful to feel and to own. (Remember, feeling shame means being susceptible to the field, able to be influenced by the field, which itself is often typed as weak and immature and, to repeat, *feminine.* Note here how shame and gender are inextricably bound up together in our society; indeed, gender as a social schema can be read as a *differential code of shame).*

Or we may approach the topic by owning shame ourselves, as in "When I'm treated like that, I'm aware sometimes of an involuntary, irrational feeling of shame. They're being abusive, and I'm feeling the shame instead of them!" Or again, we might offer a shame feeling that we're having ourselves at the moment, as in, *uFor* instance, tight now I'm feeling impotent to help you, which always gives me a certain urge to "be helpful/' in the sense of offering solutions, advice, and so on. *H* l resist that urge--especially if I don't state it openly like this-then I'm aware of a certain discomfort that could begin to feel like shame, like I'm not good enough at my job, there's something wrong with me " Of course, self-statements like this depend on our assessment that the rela­ tional field we've built with the client can support that much of a spot­ light on the therapist's world and feelings, by which we mean that the client can make use of the model and the information and get back to his/her own focus. In the best case, a model for self-tracking and *self­* acceptance of this kind can have a strong field impact in the therapeutic

relationship in a supportive and freeing way for the client.

1. *Naming and owning shaming:* He.re perhaps more than anywhere, the example of the therapist is crucial. When a client hesitates to speak, "loses voice," becomes critical or defensive (often self-critical), perhaps even feels shame directly, then in all these cases we have intervention choices. We can concentrate wholly or principally on issues and sources

and relational failures from the past, or at least outside the immediate field of therapy, *and/or we can open a dialogue about our own shaming of the client, in the here and now.* Again, this can be done natu.ralistically, in the ongoing dialogue, as when a client says he/she is not ready to talk about something, and we might respond, "That's good, I want to support your paying close attention to that feeling, and honoring it. If anything, try to stay with the reluctance, the side that wants to be more sure before

opening this up. Meantime, can I ask you about what r am doing right

now, or not doing, that would make it harder, that would make your comfort level go down?" 1f that doesn't connect, then ''What might I do that could make this easier or harder?" To the client who says it has nothing to do with us, *we* might (or might not) persist, "Well, I think it should! I think you need to be thinking about what kind of support is avail.able and what kind of reaction you may get, and how you may feel afterwards, before you start opening something up to another pemon. I want to offer support for paying a lot more attention to that, right here, especially if that's not something you're l1Sed to thinking about. I don't want to see you exposed unnecessarily, to anybody-and it sounds like you may need the practice, in thinking about this kind of thing."

Th.is kind of intervention (like any intervention) is an experiment and needs to be presented in the knowledge that *offers of support in and of themselves may provoke feelings of shame,* at times quite strong feelings. In that case, our best connective *move* may be to share our own dilemma, our helplessness, possibly our own shame (e.g., "Now I'm in a bind, because I feel like I'm kind of stuck between sitting here and letting you

feel worse or trying to offer support with the risk that that too may make you feel worse! And I sort of feel like I ought to be able to find a creative way out of that dilemma, but right now [ can't find one, other than to tell you about it like this.")

The general principle here is that *we cannot en.terdeeply into an intimate field of the client's profound longings, losses and fears without both provoking and feeling shame.* This fact, which we be1ieve follows from the kind of experience-near model we are outlining here, leaves us with only two broad kinds of choices: to deny the feeling, in the way of the individualist self-model (rising "manfully'' above it), or to *bring it to awareness and make it part of tlze intimate discourse and dialogue of therapy.*

1. *Refocusing again and again on supports:*A theoretical focus on a.field model of self-and/or a clinical focus on the subjective experience of shame-leads our attention back again and again to *felt conditions of support* (internal *and* external) in the experiential field. To make a change, *we must change the conditions of support-again,* internaJ and external. Often in psychotherapy, as in the culture, we concentrate heavily or exclusively on the internal domain. *U* I only understand bettet, frame it differently, learn new strategies (thought-stopping, self-soothing,

meditation, self-talk, etc.), and above all *try harder,* then 1 can "make" a change. We agree emphatically with the importance of "self-supports" and for that matter "trying" and "making": all these things are essential to change, as they are to satisfying living. But they are not the whole picture. What is often neglected is the different focus we have if we think about "allowing'' and "supporting" a change. And most often, this means changing and seeking new and different supports in the *outer field* as well, which is to say, *from and with other people.* In this culture, to the simple question "Who can help you with this (desired change, new project, shift of goal, etc)?" we may be often met again-at first-with a blank look (in fact, we've grown used to blank looks when we first bring up almost anything that contradicts the prevailing autonomy ideology of our individualist culture). In AA, to take a familiar example, much espoused value *is* placed on self-responsibility and support from a "higher power" (however one may regard or experience that). But the reality of AA recovery is broader than this. Not only is the program

group-based to start with, but many people report that the single most important factor in their recovery (and also at times the single hardest "pill to swallow") was their relationship with their sponsor, whom they could, and often did, ring up anytime, 24 hours a day.

Why is support of this kind shame-tinged and a "bitter piU," a felt additional failure? *Because of our individualist ideology,* which supports the pretense that any of us functions in a healthy way., or can function in a healthy way, in the ideally autonomous mode the culture holds up as the highest level of "self-development.'' Again we see the pervasiveness­ we believe pervasive destructiven.ess-of the exaggerated individualist self-model in our culture, the need for a new model such as the one we are working toward here, and the crucial experiential link between support and shame.

# Conclusion

The goal in this article has been to present, theoretically and clinically, a new and quite different understanding and approach to the dynamic role of shame in human experience and therapeutic process. To do this, we have reviewed the background of treatment of this issue in other clinical and psychological models, pa.rticularly classical psychodynamic and affect theory, which derives from the work of Darwin, as elaborated in this century by Tomkins. Underlying the classical Freudian model in particular we find a deep and paradigmatic ideology of individualism, which has colored our clinical and cultural view of shame, tending to cast shame issues and experiences as developmental failures in contrast to an explicit ideal of individual autonomy and field independence as the hallmarks of maturity.

In the teens of the Gestalt field model of experience, particularly as articulated by Goodman (Peds et aJ., 1951), we find the basis for a new model of self-experience and self-process, one radically decentered from the older individualist models and closely based on a phenomenological approach, the study of the structure of lived experience. This model, which is inherently constructivist and intersubjective, opens up a new perspective on shame and its dynamic role in the construction of experi­ ence and the management of life goals and problems.Jn this view shame, rather than being a failure of mature autonomy and a sign of excessive field dependency, emerges as the crucial affective marker of *support mu/ nonsupport in the social field.* Using this lens, we are then in a position to reexamine shame experiences, both in personal development and in ther­ apeutic process. Keys to using this perspective in therapeutic relation­ ship include (1) refram.i.ng support issues in whole-field terms, so that lt becomes legitimate, not shaming, to consider support in the external social field as an essential part of any goaJ or change process; (2) looking for shame experiences beneath and behind their characteristic defensive hallmarks and compensations (to experience shame is itself shaming in the individualistic model; thus extra support is needed to stay with and explore these experiences); (3) in the same way, being attuned to the issue of hidden longings, which underlie the dynamics of shame; and (4) supporting the naming and owning of shame feelings---first and fore­ most in ourselves as therapists, both in our own development and in the therapeutic dialogue itself. Our clients will be supported to bear and explore shame feelings only to the extent that we ourselves can be open to these difficult and isolating experiences.

It is our belief and our contention that this theoretical and experiential refram.ing of the meaning and dynamic role of shame in regulating both interpersonal and intrapersonaJ experience can provide the basis for a deepening of therapeutic dialogue and process, and for new growth and healing for client and therapist alike. In the process, this stance and this reframing, informed and grounded by the Gestalt field model, lead directly to a deconstruction of our inherited paradigm of individualism as a self•model and a self..ideal. The result Is an opening to a more rela• tionaJ basis for both psychotherapy and living in general, one more in tune with the inherent intersubjecti:vity of our lives and our nature. Thus we find that consideration of shame issues leads us to a richer under­ standing of our deeply constructivist, fundamentally social, meaning­ making selves.

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Shame as a Normal and Sometimes Dysfunctional Experience

A Response to the Articles by Leslie S. Greenberg/Sandra C. Paivio

and Gordon Wheeler on Shame

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In this article, we first -reconstruct Greenberg and Paivio's and Wheeler's conceptualizations of shame. Possible additions and modifications to these authots' conceptualizations are then suggestec;l, focusing on the importance of values and clu1dhood experiences in generating shame. As *far* as Wheeler's position is concerned, we indicate some confusion and doubts about the utility of a radical c,;mstructivist view and a one-sided field approach to shame within the frame of a "new paradigm." At the end of the article, we indicate our own conceptualization of shame in theory and practice as a (sometimes necessary and functional) break of vaJue orders of different scope. Last we discu.ss the protective functions of shame in therapy and in everyday life.

Opening a Discussion Among Colleagues

HE INVITATION EXTRNDED TO us by Joseph Melnick, editor of *Gesta.lt Review,* to open a discussion on the articles by two of our respected colleagues and prominent writers may lead us right into

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the middle of the dynamics of shame itself, which .is the topic of our discussion. The authors of both articles have elaborated on their Wlder­ standing of shame within the context of the theory and practice of Gestalt therapy and, in doing this have exposed them.selves to a greater

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public. This itself is a daring step because any authot writing on something that is closely connected with his or her professionality and that is even close to his heart may know. With the topic of shame, this may even be more daring than usual because shame touches on deep feelings and aspects of one's self. At the same time, when an author explains what he or she believes to be right and wrong, when dealing with shame, he or she may unintentionally shame the readers, who might feel that they have not been careful or conscious enough in dealing with their clients' shame is.su.es and their own shame issues in contact with their clients. Moreover, writers like us, who are invited to comment and possibly criticize someof the statements and findings of the authors, may alternatively trigger shame feelings with the colleagues.

Can we avoid such dynamics? We believe that the discussants cannot avoid entanglement in some kindof shame dynamics with one another. This assumption already touches on a basic premise we would like to offer when dealing with shame: as self-reflexive beings *we* are prone to feel ashamed every now and then, particularly in public discussions and in learning situations. The same is true, as Leslie Greenberg and Sandra Paivio explain, for ontology: at some time in the development of the infant, the mental self awakens from the previous slumber and becomes conscious of himself or herself and is therefore prone to feel ashamed every now and then. We can, however, try to minimize the risk of sham­ ing our colleagues and of being shamed by them in their response, by being as clear as possible concerning our intentions and the functions we attribute to this discussion on shame.

As a first step in this direction, we would like to clarify our role in this undertaking. We could define ourselves as reviewers of the authors1 texts by explaining what we like and consider to be valuable contributions to the topic and by criticizing what we think to be deficient in some way and describing how they could do better. They, in tum, would be able to do the same thing with our comments in their responses. This kind of interaction has a long tradition in the scientific community and else­ where, and it seems to be unavoidable in many contexts (e.g. in the process of reviewing manuscripts for publication)1 bu\_t at the same time this proc.edure enhances the possibility of shaming one another.

Another possibility, the one we prefer here, is to start a discussion with our colleagues on equal terms. That is, we would like to show those areas where we believe we havea common ground with the authors and those areas where we deviate from their assumptions and opinions. Our intention, therefore, is to explain where our position is similar in some respects and different in others, but not better. In this way we-and one hopes the readers as well-will learn from each other with as little self­ opinionatednessas possible.

In order to find out where our assumptions on shame issues meet thoseof the authors and where we probably differ from them, we have to explore first where our discussion partners are. We will therefore try to reconstruct the main propositions and findings of each author and indi­ cate where we do not understand them clearly, by asking questions or by offering our interpretation of what they mean. In the next step, we will briefly sketch our position in agreement with or in contrast to the posi­ tions o:f our colleagues.

**Leslie Greenberg and Sandra Paivio: Adaptive and Maladaptive Shame**

Greenberg and Paivio characterize shame as an emotion that is closely related to our needs and concerns, and they maintain that different emotions have different functions in process-experiential therapies­ shame indicating a dis-ease that mostly needs transformation whenever it is maladaptive. Shame is strongly related to our self-worth and connectedness. Greenberg and Paivio distinguish guilt from shame; shame is about the whole self and is triggered when we fail to live up to an ego ideal or personal value. Guilt is about a moral transgression and involves internalized values, that is, how society holds that one should be.

Although Greenberg and Paivio's proposal that shame refers to the way we *are* and guilt to what we *do* is plausible, we are a little confused about the role of value systems in this distinction. It seems that with both shame and guilt, we havenot lived up to certain values. Are there differ-­ ent values involved in shame and guilt, or are the values applied in a different way-in thecase of shame in the way we are and in the case of guilt in the way we behave?

Greenberg and Paivio emphasize the interactional nature of shame, that it disconnects us from others in the service of protecting our connec­ tion with others, and they briefly discuss the generation of shame in a person's development, primarily in childhood. Although shame experi­ ences in a person's early life seem to have a great impact on further personality development, we might-according to the prior definition and meaning of shame-assume that, for example, "intense humiliation and powerlessness of emotional and physical abuse" can happen any time, in adult li:fe as in childhood, although maybe with varying impact on personality development.

Greenberg and Paivio distinguish three kinds of sham primary adaptive shame, maladaptive shame, and secondary shame--and elabo­ rate a treatment model for shame, which appears to be very consistent.

They state quite clearly that shame can have a ve.ry important protective function and can be a normal and r'healthy" reaction of the organism.

The strategy for treatment in six steps, which Greenbe.rg and Paivio have extracted from their work (consistent as it appears to us in itself) is not quite clear to us in the function it should have. fs it meant as a model that trainees or practitioners can apply when dealing with shame, or is it rather a model *£01;* reflection and analysis? A similar question arises for the diagnostics of shame: Do the authors suggest a diagnosis of the kind

of shame involved: first and then design a treatment? Or should a possi­ ble distinction be made., for example, in the supervisioh of therapeutic practice? Both functions could make sense, we believe, but they would have different implications for the therapeutic approach.

A second and final question we would like to ask is about the role of the therapist in Greenberg and Paivio's approach. It is one thing to define shame in interactional terms and another to deal with shame in a dialogical way in therapy. In the example the authors quote, the therapist appears to be very empathic and affirming at times and confrontative at other times, and it all appears to make sense and appeals to us. But the therapist as a person does not become visible, and therefore this piece of work looks more like a medical treatment than a therapeutic dialogue (which may partly be due to the fact that we have to infer the therapist's role from the written word only). Fat from criticizing this procedure, we would like the authors to be more explicit in terms of the therapist/client relationship when dealing with shame issues.

# Go-rdon Wheeler: Shame as a Lack of Field Support

In contrast to Greenberg and Paivio., who build their concept of shame on the interactional psychological tradition and research and expand it by integrating Gestalt principles, Gordon Wheeler pleads for a radical change of paradigm and argues that the old one is not appropriate for dealing with shame issues. We have, however, some difficulties in understanding this position. Wheeler pays mu.eh attention to the wider philosophical background of his concept of shame, yet we become lost in much of his argument, which may well be due to our own limitations. Therefore we can only try to explain where we became lost in Wheeler,.s general theoretical discussion and, consequently, in much of what he

says about the therapeutic aspects of shame as well.

Wheeler maintains that the role of shame cannot be seen and under­ stood dearly from the "old" paradigm but from the "new" one. But what does *paradigm* mean here? There are almost as many definitions or understandings of *paradigm* as there are paradigms themselves, and they all can somehow be based on Kuhn (1971) book (published in 1969 in

German). As far as we understand Wheeler, he seems to conceive *paradigm* in an encompassing sense, because he extends his discussion to such diverse and encompassing scientific traditions and worldviews as individualism, phenomenology, constructivism, objectivity, field theory, feminism, and relational thinking. But sometimes we aJso have the impression that Wheeler could mean *p01'adigm* to be a set of basic beliefs and convictions referring to the understanding of one's self and to one's world view-an ideology, so to speak. Wheeler characterizes the "old" paradigm as being "limited," "mythic" (in connection with objectivity, and even "pathological" in connection with !today's society in contrast to the new paradigm. Is this to say that the new paradigm should replace the old one?

As far as we understand the discussion on puadigms, a "new" paradigm in Thomas Kuhn's sense would always be more encompassing than the respective older one: it transcends and includes the older one (Wilber, 1985, pp. 274-275). If this is true, there would be no need to disparage the representatives of the older paradigm, namely, those *of* psychodynamk and behavioral models in general and old Freud in particular (even though we may well criticize them).

The new paradigm in Wheeler's sense is characteriT.ed by, among others, constructivism. A main assumption of constructivism, though, is that the living organism has no direct connection with reality outside, but rather enacts its own reality, and that the organism cannot be determined from outside by "instructive interaction" because it follows its internal structures only. It is operationally closed to the outside world (Varela, Thompson and Rosch, 1991), quite similar to Leibniz's windowless monads, which Wheeler, however, counts among the views of the old paradigm of individualism. According to constructivists like Maturana and Varela (1987), von Foerster (1993), or Portele (1989), we are autonomous through and through. Therefore, these scientists strongly recommend being conscious of this fact because a person's autonomy would be the basis of the respect and love of others and of dialogue instead of power plays and war.

But Wheeler !Strongly criticizes the concept of an autonomous self, which he relates to individualism, and he would like to see it replaced by a relational self. Does this mean that Wheeler would like to substitute the old egocentric (individualistic) view by an ecocentric view ("ego" instead of ''eco")? This would makesense (whether we agree with it or not), but it does not appear to be in tune with constructivism or self-organization theory, which we understood to be two pillars of Wheeler's understand­ ing of the new paradigm (see also Wilber's elaborate analysis of this issue, 1995, pp. 43()-454).

Although we can understand and agree to much of the *phenomenology*

of sham.e as descnbed by Wheeler, we cannot quite grasp the *meaning* he

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gives to this cluster of feelings in terms of a lack of support in the field. But, again, this may be due to our failure to understand his premises. If "ecological thinking" is to *replace* "egocentric thinking," it would indeed make sense to characterize shame by a Jack of support in the field, mainly or only. There is no clear distinction between field and self because "the field ... is an essential and integral part of my self," and therefore the self almost totally relies on the support in thefield in critical situations.

From this perspective it wouJd make sense to bring to awareness every issue of shame in the intimate discourse and dialogue of therapy as a way to heal the wounds of shame that have been inflicted on us. But perhaps we have not, grasped properly Wheeler's concept of shame and have therefore been unable to do justice to his position and we remain a little helpless and confused.

**Our Concept** of Shame

As indicated before, we would now like to set- our understanding of shame against what we learned and understood from Greenberg and Paivios's and Wheeler's concepts of shame. We will start with a defini­ tion of shame, explain the meaning we give to shame, and finally hint at a few aspects of our therapeutic practice in dealing with shame issues. In doing so, we refer to some of what we have written previously on this topic (Fuhr and Gremmler-Fuhr 1995a, b) with some amendments, revi­ sions, and additions that havebeen stimulated by the two articles. ·

*Defining Shame*

Much in agreement with both authors, we see shame as a cl\.lSter of sensations and emotions in combination with impulses to hide and to withdraw; that is, shame is a word for diverse painful and even shocking inner experiences. Shame means that we feel exposed to others in a way we do not want to be exposed. This can happen in social situations, as well as when we are by oarselves, while imagining how othezs would see us or might have seen us or how even we perceive ourselves from an outside perspective. These kinds of experiences accompany our lives every now and then from young childhood to old age.

Shame very often is connected with guilt feelings. We would like to distinguish shame from guilt *g,-osso modo* much as Greenberg and Paivio and Wheeler (and, e.g., Nichols, 1994) do by saying that shame refers to *how we are* and guilt to *what we do.*On second thought, however, we think it necessary to elaborate on what may be meant by "how we are" and 11what we *do.11* Periodically, we encounter clients who feel much ashamed and guilty for having been born and for being in this world

because, for example, they were unwanted or illegitimate children or children who greatly dishubed the lives of their mothers or parents. By being bom, they have not actually *done* anything, and yet they feel guilty. Often, clients feel ashamed for having *done* something unworthy (an issue Greenberg and Paivio also take up).

We suggest a modification of the distinction between guilt and shame: shame refers to ourselves, to ou:r very existence; guilt refers to the impact we have on our environment. The fact that I was born had an impact on my parents, and if I learned from them that I was not welcome and, that I disturbed or even destroyed their lives (in their views, which I may have introjected), I may feel guilty and shameful simultaneously. The differ­ ence *is* owed to the perspective from which I look at the experience, which produces a difference in *meaning* that again may have an impact on my feelings. The same event, therefore, be it an action or a behavior or a fact, may trigger shame or guilt or both. *As* with many other feelings, it is the *meaning* we give to the primary sensational and mental experience that makes the difference that makes a difference (to take up a famous dictum by Gregory Bateson).

To come back to shame proper: it is the price we have to pay for having left paradise and awakened from our biological slumber to the human mind, that is, for having become self-reflexive; we become aware of ourselves, which makes us vulnerable and prone to shame. In our German language, we actually use a reflexive verb for expressing the feeling of shame; *Ich schaeme mich.*

*The Meanjng of Shame*

Both guilt and shame refer to how we should be and what we should do (or refrain from doing). In the case of shame, we have not lived up to our wholeness and connection (as Greenberg and Paivio ex.plains); in the case of guilt, we have not lived up to the moral rules of others (which we may or may not have intemalized). ln both cases, *values* are implied, and, as said before, it is the perspective we take that makes us feel guilty or shameful. In many cases, we may at first feel guilty for something we have done and then feel ashamed for how we are because of having done this. So what we do is related to what we are and vice versa. At any rate, shame .refers in a self-reflexive way to our worth and value as human beings.

Since shame is always, we think, connected with our being exposed to (real or imagined) other beings and because the way we are is not in tune with the way we should be, shame (as much as guilt) can be considered to be a serious *break of confluence* with the environmental field (Robine, 1991), "confluence" here meaning to be identified with the value systems of the surrounding culture. This break of confluence, which is indicated

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by shame feelings, is unavoidable in many situations. Any major devel­ opmental process, for example, requires a major break of confluence with our environment field in some respect. Moreover, we often feel connected with and loyal to more than one social field (or subculture) simultaneously, each of them cherishing different, sometimes even opposing, value systems. In many crucial decisions in life; we have to take sides; that is, we cannot avoid violating one side to which we are loyal and to its hierarchy of values, and therefore we may feel ashamed in some respect. That is, shame cannot generally be avoided; it is part of our lives and goes along with our personal development and growth, or, in plain words, there is nothing sacred about shame feelings (as with any other feeling), although shame feelings need speciaJ attention owing to their existential quality of touching our very sense of dignity and worth as a person.

As much as shame is part of our human fate, there may be shame

feelings that are adequate in a given situation and others that are not. We therefore very much support Greenberg and Paivio's distinction between what they called "adaptive" and "maladaptive" shame and what we called "functional" and ''dysfunctional" shame. We also believe Green­ burg and Paivio's further distinction *of* dysfunctional shame into "pyimary maladaptive shame" and "secondary shame" as a consequence of more transient embarrassments to be helpful because they require a different approach i.n therapy.

Shame gains meaning in the .interactional perspective of Gestalt ther­

apy because it refers to different value systems prevailing in the organ­ ism/environment fields. We would, however, suggest applying the term *environmental field* not only to social orders, but to more encompassing orders as well. J may feel ashamed for not having lived up to the expecta­ tions of my dead ancestors, *or* I may become conscious of not having fully fulfilled my potential for living a creative, meaningful, and passion­ ate life, irrespective of whether my present or past social environment field would expect or support this or not. fn this case 1 look at myself in the face of universal orders-and may feel ashamed fur not having lived up to them.t

13ecause shame refers to our very existence as human beings in a self­ reflexive way, shame reactions also help to *protect* our worth and dignity. Here, too, we would like to join Greenberg and Paivio, who make it an explicit point- that shame has a protective function, in that it disconnects us from others in order to preserve our connection with our environment field and, we would add, to preserve om dignity. Wheeler also mentions

1This is a distinction Rollo May introduced for guilt: we may become guilty towards ourselves for not having lived up to our potential, But the same, we think,. may be true for shame.

the protective function of shame in passing but, as far as we have under­ stood his position, does not make this a strong point in his therapeutic practice. We would further argue that, as shame protects our self in rela­ tion to the environment field, guilt protects the integrity of the environ­ ment field. Therefore, we can become relieved of our (functional) guilt by reparative actions in the service of the environment field, which is quite different from shame: shame cannot be ta.ken from us by anybody else; we can only stand and overcome it by regaining our worth and dignity in the eyes of others and particularly in our own eyes. Shame in this protec­ tive function, thus undeniably, is a kind of self-support, even though it may be an inadequate one in a given situation.

*Some Thoughts About Shame Issues in Therapeutic Practice*

More often than not, we are confronted both in therapy and in everyday life, not with shame proper but with shame avoidance. Because shame represents very intense and painful feelings, we quite naturally try to avoid it as much as possible. 1his is particularly the case if we are prone to be shamed when feeling ashamed in the actual environment field. There are some indicators for a person feeling ashamed (like blushing, looking away, and withdrawing bodily) without knowing or telling, but mostly we can only guess that our clients may feel ashamed at some moment, for example, when they suddenly become reactive or when they regurgitate very intimate information without warning (which possibly may mean that they jump over their anxiety of the hidden feelings of shame) or when they quickly deflect from intimate to more general topics or levels of abstraction. The same may also apply to the therapist and his or her shame issues. According to our experienc therefore, the hardest piece of work in connection with shame usually starts much before we can actually work with issues of shame them­ selves as exemplified by Greenberg and Paivio. For dealing with such avoidances of shame Wheeler has some very useful suggestions.

In working with shame issues proper, we fully agree with Wheeler that it is most important to give as much support to clients as possible and as is needed-as in any other situation when clients come into contact with very painful feelings. However, this kind of support may be as necessary for the clients as for the therapists; that is, the therapists, too, have to check what they are ready to bear when listening and accompanying the clients' sufferings from very intimate, humiliating and shameful experiences. And we believe the kind of support has to vary considerably according to the kind of shame involved (functional or dysfunctional, primary or secondary) and according to the phases in the contact processes. We would therefore like to elaborate on the issue of support a little further.

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Because we consider shame to have a very jmportant protective func­ tion, the respect of the personal boundary indicated by shame seems to be most important in therapy. It may be as helpful and supportive for the dialogue between therapist and client to stop the clients from talking about shame issues prematurely as it may be to animate them to talk about them freely. Therefore, we would also be a little hesitant in subscribing to Greenberg and Paivio's dictum that clients need to learn that, if they expose themselves to others they will not be shamed again. Unfortunately, our everyday experiences do not generally support this: it may be rathe:rdangerous at times as an adult toexposeoneself because it does happen that one is shamed by others. This is particularly true when our partners use one of the most frequent methods of avoiding shame, which consists of shaming others, .instead of feeling ashamed themselves. We would suggest a modification of Greenberg and Paivio's principle: Clients must learn to distinguish when it is appropriate and safe to expose themselves to others, and when they are in danger of being shamed again. In other words, we would suggest one respect the bound­ ary indicated by shame feelings as much as one would support theself­ exposure of shameful experiences in the case of a trusting and reliable relationship.

Because we do not believe shame to be explained sufficiently *by* a lack of field support (as we have the impression Wheeler does), we plead for dealing with shame in much the same way as with any other issue of existential importance-this is to say with an adequate mixture of empathic affirmation and confrontative support as in Greenburg and Paivio's example. We would add one precaution, however: it may be much more dangerous to unintentionally push or tempt a client toward a shame issue than in other cases, because shame touches on very existen­ tial issues, and this can be more than clients and therapists can bear to suffer in a specific situation. Yet shame is, as we said before, a very normal and often unavoidable human experience. (It would actually be pretty intolerable an imagination to have to live in a "shameless" world). A most important step then would be to accept the experience of shame and thus to free it from mythic associations. We would therefore not have to adaptively feel ashamed of our shame any longer, whenever it tumsup.

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**Reply to** Fuhr, **Gremmler-Fuhr,**

**and Resnick**

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s ERIK ERJKSON OBSERVED., as sex was to Freud a century ago now, so was aggression to him and his contemporaries (including eds) a half century or so later: namely, *the experience and behavior*

*thtzt could not be fully owned and talked about in the culture.* Robe.rt Lee and I,

together with a number of other writers and teachers, have come to feel that something like this is the case today with the experience of shame, which many of us are working to articulate in a new way in Gestalt, as in other models. The joining in on this conversation by Greenberg, Fuhr, Gremmler-Fuhr, and Resnick (long a prominent and influential teacher and mentot-clinician, from whom we do not hear enough in print) is welcome company indeed in this exploration, and clarifying to my own thinking in a number of ways.

Fuhr and Gremmler-Fuhr open the question, almost never addressed in exchanges of this kind, of the *present dynamic role of shame in this conver­ sation itself.* This is exactly the kind of exploratory spirit and perspective which I am trying to take up, mu.eh under Robert Lee's inspiration. If my perspectjve on self and shame is unclear to them, then how are all of us to hold that experience? In an individualist paradigm l am ''myself' *before* I join the relationship, and plainly in a world of such separate "selves" my practical goals have to center around self-e;tablishment, influence, and seJf-defense. To be questioned or not understood is then to be threatened with self-diminishment and shame, and likely my response will be (in best shame-based academic tradition) to *restate my positions in much the same wr:ry,* only more vehemently this time, with at least the suggestion that if there is any remaining failure of understanding (and therefore inadequacy), the problem must be on their side. This is the countershaming defense which is so often the first sign of *unacknowledged shame in the field.* All of us are familiar with acade.m.ic and clinical ''debates" of this flavor, where the manifest text is some theoretical point or othet'---but the subtext is shame. And as Perls suggested Jong ago, using his 'jtop--dog/underdog" metaphor: subtext rules.

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How do we break out of this potential shame-bind, which Lee and I are suggesting is built prepotently into our contact field by the *very* terms and assumptions of the individualist paradigm? First and crucially, as Fuhr and Gre:mmler-Fuhr suggest and exemplify, *by opening a dialogue about experience, not just a debate about points.* With the support of this dialogic contact, we then have the necessary ground for the interventions Resnick em.phasiz.es, of exploring and experimenting with the tenns, processes, and orgins of our own experience, our own meaningful construction of the field. Both these kinds of activities, which are the ground and the figure of new Gestalt formation, new wholes of understanding, are essential, I believe, and Resnick is probably right to observe that I have been emphasizing the former, as often neglected in practice, and not talking enough about the latter. To me, a fond fantasy experiment in this ongoing contact would be to ask Fuhr and Gremm.ler­ Fuhr to translate one of my shame articles or chapters into German,, as a way of continuing the exploration (and I would do the same of course for them). I think of this because in their 1993 translation of an earlier book of mine *(Gestalt Reconsidered),* they pushed me vigorously to clarify a number of confusing and unclear points in the text, with the result, I thought, that their German version was in many ways better and more clearly articulated than the English original.

Resnick is further concerned that in the process of raising questions

about unacknowledged or unarticulated shame, we will lead the patient or client, in a way that re.introduces the "expert perspective" of the clas­ sical psychodynamic/interpretive method, violating the phenomenologi­ cal spirit and prenuses of our Gestalt model. I have no doubt that this could happen. The issue hinges, *it* seems to me, on the question of "Gestalt interpretation." In the objectivist, right-wrong or expert paradigm, an interpretation is the *answer.* In our model, interpretation is rather the question-which is to say, in Gestalt an interpretation is held as a kindof experiment. Not "You're feeling shame {and by implication you won't admit it)" but rather, "What happens now if we think of this experience as an experience of shame and shaming?" Or perhaps, "where is the potential shame in the field right now, in what you are telling me (or in the contact between us)?" Certainly we influence the dialogue by raising these questions rather than some other ones; but this is not an error that can be avoided by sticking to the client's phenomenology. Rather, the meta-experiment of dialogue itself is the *only metlwd opm to us to explore that phenomenology,* that constructing of experience in the field. The Gestalt model insists, I believe, that there is no way for me to enter this dialogic contact "tabula rasa"-that is, without organizing it meaningfully in terms of my own beliefs, theories, biases, and so forth. This is part of the ground of any present figure, and as Resnick rightly insists, meaning lies in the *relationship-hopefully* dynamic and

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fluid-between new figure and held ground (in this case of both partner$ in the dialogue). If I tell myself that I can "bracket off" that ground so as to see new figure more freshly, will I not just succeed in burying my own assumptions, effectively removing them from the client's view and rendering the deconstructive process more difficult or impossible? Is it not more productive to put those assumptions right out--but put them out as *experiments infield organization-for* the client (and the therapist) to work and play with? This is the direction of my concerns, and I would very much like to hear more from Resnick on this, because of my impres­ sion that our concerns are very much complementary, with each of us taking up an aspect of the field which may be somewhat neglected by the other.

This brings me to the larger point, which is how we are to understand the role of shame in general, as·a dynamic element in the organization of experience. Let me just say here that in a whole--field model of self and development such as we are working to articulate, the issue of discon­ nection *(unwanted* disconnection, as Resnick rightly emphasizes) takes on an entirely different meaning, from what it had in an older self-paradigm, In an individualist model, *anxiety* emerged as the key affect in the organi­ zation of the self-because it is the signal and the sign that the self (meaning the self-drives, in the Freudian system) is in trouble in some way, as it moves and seeks to realize its natute ( the discharge of those drives, a.gain in the classical system). Jna similar way, shame emerges as the *key signal affect in self-orgartizatfrm under a whole-field model* because of the way it serves as information about the *ground conditions for contact,* the state of the subjective experiential field and thus about what figures of emotion, desire, and action can be formed and energized inexperience. In this way I am not persuaded that shame is best treated "in much the same way as any other issue of existential importance," as Fuhr and Gremmler-Fuhr suggest. How it is best treated is the question we are all engaged here in exploring. And the promise of this exploration, to me, is that it leads us straight to the creative potential of the Gestalt model to *deconstruct the individualist model of self artd community,* opening up new possibilities for experience and action in a world that is starved for meaningful connection.