Chapter 26 Interpreting Instances of Shame from an Evolutionary Perspective: The Pain Analogy



Jeff Elison

Abstract From a basic emotions perspective, shame can be viewed as a family of emotions (e.g., embarrassment, humiliation, guilt), which share a common antecedent—devaluation. As an evolutionary adaptation, shame can be either adaptive or maladaptive, depending on context and one's response. Findings on the affective neuroscience of social pain suggest the physical pain system was co-opted for adaptive social functions. Thus, physical pain is an appropriate analogy for understanding shame, the two sharing many features. Both are elicited by injury; with shame the injury is to a relationship or status. Both direct attention to the injury and make us care. Both motivate immediate and future behavior. We may lash out or cease what we are doing to end the pain, make attempts to repair reputational damage, or hide the source of shame. Both motivate attempts to avoid reoccurrence of the pain in the future. One may improve to avoid performance-based shame, or learn to avoid behaviors that elicit shame, just as one avoids cuts. Finally, both are communicated via physical expressions that often elicit empathy or forgiveness. Clients understand the functions of physical pain and how it protects us. Using the shame-pain analogy helps clients view shame in an adaptive light and helps them distinguish adaptive from maladaptive responses.

Keywords Shame \cdot Pain \cdot Evolution \cdot Coping \cdot Emotion regulation \cdot Shame-pain analogy

26.1 Shame: An Evolutionary Perspective

An evolutionary perspective means looking first for function. Evolutionary perspectives on shame, bolstered by findings from affective neuroscience, illuminate shame's functional value and guide therapeutic approaches. In brief, shame is a basic emotion, an evolutionary adaptation piggy-backed on the physical pain mechanism (i.e., an

J. Elison (⊠)

Psychology Department, Adams State University, 208 Edgemont Blvd, Alamosa CO 81101, CO, USA

e-mail: jeffelison@adams.edu

exaptation; Elison, 2005). Therefore, a very tight analogy exists between pain and shame in terms of antecedents, attentional effects, motivation, and coping. Like pain, shame serves valuable survival functions. Nevertheless, just as pain and efforts to cope with pain may be maladaptive, the same is true of shame.

An example comparing occurrences of pain and shame serves as an overview. Imagine two events: stubbing your toe and damaging a relationship. The first elicits physical pain, the second elicits social pain (shame). The antecedents in both cases are injuries: physical versus social/relational. Both activate a common brain structure (dACC; Eisenberger, 2011). Both direct our attention to the injury. Both motivate actions to address the injuries, such as repair. Finally, both motivate future avoidance: watch where you are walking; watch what you say.

Life without a functioning pain system is difficult and dangerous; so is life without the capacity to feel shame. Nevertheless, there are problems and pathologies associated with pain and shame.

26.2 Shame as an Evolutionary Adaptation

Shame is universal, an evolutionary adaptation (Elison, 2005; Tomkins, 1963). Emotions, as adaptations, are characterized by certain universal attributes: antecedents, expressions, feelings, attentional effects, action tendencies (motivational effects), and coping. Although a specific instance of any emotion may be maladaptive, emotions are thought to be adaptive overall.

26.2.1 Scope of Shame

As an emotion family, shame is viewed broadly to include embarrassment, humiliation, guilt, rejection, and "hurt feelings," even when so mild as to be unconscious (Cooley, 1922; Elison, 2005; Scheff, 1988; Tomkins, 1963).

26.2.2 Shame's Antecedents

Cooley (1922) cogently described shame's antecedents with the analogy of the Looking Glass Self. We see ourselves mirrored in the eyes of others and those mirrors convey judgements. Negative judgements elicit shame. Thus, the shame family represents social pain elicited by *devaluation*.

Basic emotions, just like physical pain, evolved in response to recurring challenges (e.g., injuries) to motivate adaptive responses (e.g., repair). Devaluation is a challenge because it threatens loss of status. Access to resources and mates depends on the quality of one's relationships and social status. Social exclusion, especially in our

ancestral past, is life threatening. Shame, as a response to devaluation, is an alarm system (like pain) to warn us and motivate us when our rank or relationships are threatened.

Findings from affective neuroscience suggest shame is an exaptation that co-opted one of the brain regions associated with physical pain (dACC; Eisenberger, 2011). The dACC is responsible for pain's affective component, making us care. Evidence for the parallel roles of the dACC comes from fMRI studies showing activation during physical and social pain (i.e., social exclusion).

Cooley (1922) and Scheff (1988) maintain that the Looking Glass Self is always operational, even when alone. We automatically and unconsciously monitor our social environments.

26.2.3 Shame's Functions

The parallels between shame and physical pain make pain a useful analogy for understanding shame. Pain and shame are alarm systems to make us aware of "injuries," make us care about them, and motivate us to take reparative or preventative actions. Shame inhibits current behavior and makes us defer to the judgments of others. Thus, Scheff refers to shame as the "deference-emotion system" (1988).

26.2.3.1 Shame's Attentional Effects

Like any emotion, shame provides information. It directs attention to the relational problem ("someone thinks less of me") and self-consciousness ("what have I done?").

26.2.3.2 Shame's Feeling

The painful feeling of being small, weak, shrinking is inhibitory. We lose agency and stop what we are doing. Over longer periods, shame's pain motivates coping, described below. Shame keeps us aware of our social status and motivates its care. Just as a patient is more likely to remember to take medications when in pain and lapse when the pain is gone, we are more likely to follow norms when others are watching than when alone.

26.2.3.3 Shame's Behavioral Effects

Responses to shame are like those for any alarm. The immediate effect of shame is behavioral and cognitive inhibition. We are stopped mid-sentence when we see we have offended our listener. The cessation of immediate behavior is a form of deference. Attention turns self-conscious. A series of evaluations follows. Why the

alarm; why am I feeling shame? Who is judging me, for what? Is this a false alarm; do I care? Should I respond to the alarm: do I repair, cover up, or rationalize? Or do I ignore it, like pretending not to smell smoke?

Sometimes this series of evaluations is explicit and conscious. At other times, it is short-circuited by automatic, scripted behavior. These can be adaptive or maladaptive, ranging from reparation and personal improvement to hiding or violence.

Ultimately, shame motivates us to maintain our relationships and status, to avoid exclusion. Maintenance is achieved via change, conformity, reciprocity, and socialization. These mechanisms work both directions—others change and conform to our expectations, and reciprocate our favors.

The analogy with physical pain is clear, as both can be used to force others to conform or reciprocate. Socialization is often achieved through physical or social pain, but the desire to maintain positive relationships may be the best motivator for adopting others' norms.

26.2.3.4 Shame's Expression

The universal expression of shame (head-down, gaze-averted, shoulders slumped) provides potent non-verbal communication. It communicates deference: "I have perceived your negative evaluation," "I value your judgment, our relationship," "I feel bad." When appropriate, a clear display of shame is functional; others are more likely to forgive us or even feel empathetic. Empathy makes sense considering the pain analogy; shame and embarrassment are recognized as painful.

26.3 Shame in the Evolutionary Context

Shame is an adaptation, yet shame-coping responses complicate whether shame is adaptive or maladaptive in any given case. Nonetheless, the evolutionary perspective and the pain analogy have strong implications for working with shame in any context: intimate relationships, parenting, sports, work, legal, and therapy.

26.4 Applied Approaches to Dealing with Shame

The focus of this section is identifying shame (feelings, thoughts, and behaviors) and identifying common adaptive versus maladaptive responses. Most of an individual's responses to emotions are scripted to some degree, meaning automatic and largely unconscious. They are emotion habits involving perception, feeling, behavior, and coping. Changing problematic shame involves identifying these scripts so they may be raised to awareness, finding a more adaptive substitute reaction, and then practicing the new reaction until it becomes scripted.

Given the claims that shame is an alarm and emotions are information, it is adaptive to switch attention to the problem and evaluate one's immediate situation. The immediate situation is relational, the shamed reacting to one or more looking glasses. Elements to evaluate include: accuracy of perceptions, history between the shamed and the other, the "offending" behavior, and options for responding. Understanding these elements opens doors to alleviating maladaptive shame.

26.4.1 Shame Is Useful

A place to start is with the big-picture perspective that life would be impossible without the capacity to feel shame. In this respect, shame is just like pain. Congenital analgesia (pain insensitivity) is dangerous. Those afflicted may fail to recognize illness or injury, reducing life expectancy. Similarly, those who feel no shame suffer socially and society suffers. They may fail to recognize their effects on others, at a cost to relationships or status. They may fail to conform or be socialized to the norms that make societies possible (e.g., psychopathy). Few of us are thankful for pain, but we should be thankful for the valuable alarm functions provided by physical and social pain. Being called shameless is not a compliment.

On the other hand, some people experience shame too intensely or too frequently, most likely due to being shame-prone or being in a shaming environment. Shame-prone refers to the tendency to experience maladaptive shame or inordinately intense shame (Tangney & Dearing, 2002), like experiencing pain in the absence of painful stimuli. People who are shame-prone or living in shaming environments often exhibit psychological symptoms and maladaptive behaviors.

26.4.2 Before the Looking Glass: Desired Images

Understanding Cooley's looking glass analogy and the dynamics of devaluation point to several elements of shame that may be problematic, providing targets for intervention. Devaluation occurs when the impression of one's self that one desires to see in the eyes of others falls short of the impression one perceives in the eyes of others (Elison, 2005). This definition involves three components—desired image, others' images of one's self, and the act of perception—discussed in the following sections.

An effective place to start self-change or therapeutic intervention is with desired images of self. Much has been written about a similar concept, the ideal self, and targeting its content. For example, perfectionism can result from an unattainable ideal self. All of that is relevant here—individuals can identify and re-evaluate the goals and standards that make up the ideal self. Are they realistic? Do they truly match their own desires, or have they internalized poorly fitting parental or societal standards?

Embracing the evolutionary perspective (Gilbert and Malik, in this book), a super-ordinate desired image of self arises: acceptance/inclusion. Death (or inability to reproduce) due to social exclusion is the extreme form of the selection pressure that led to the social pain adaptation. Humans fear exclusion and desire acceptance. Consistent with Cooley (1922) and Scheff (1988), evolutionary accounts include constant, automatic vigilance for social threats. Thus, the mere perception of disapproval triggers the alarm. Cognitive evaluations and coping follow. The classic analogy in evolution is the snake-stick scenario. Which is more costly: not reacting when you step on a snake or needlessly reacting when you step on a stick? Certain classes of false positives (jumping off the stick) are much less costly than their concomitant false negatives (failing to jump from the snake).

The study that revealed the neurobiological support for shared physical-social pain mechanisms illustrates our acute sensitivity to exclusion (Eisenberger, 2011). Participants where monitored by fMRI while playing ball-toss on a computer, believing they were playing with real people, when in fact the game was rigged to exclude them. Participants were distressed by exclusion in a kids' game, played on a computer, with "strangers," while lying in the noisy cramped scanner! The implications for human nature are striking: humans are exquisitely sensitive to exclusion. Sensitivity is hardwired, normal.

The simple message that sensitivity to exclusion is normal can be comforting, especially for those living in individualistic cultures where "needing others," "caring what others think," and conformity are often viewed as weaknesses.

26.4.3 What's in the Looking Glass? Accuracy of Perception

To perceive devaluation, one must first perceive or imagine a negative judgment. The act of perception is fallible, misreading what others think. Imagination opens the doors for misreading farther. If the appraisals involved in the looking glass self are unconscious and automatic (scripted), they can be difficult to change, but not impossible. By identifying maladaptive tendencies and raising them to consciousness, we can slow down the process and question the accuracy of impressions.

26.4.4 The Fun-House Looking Glass

The third component of devaluation is others' images of one's self. It is helpful to consider the identity of the other (stranger vs. parent) and the others' standards. Because we respond rapidly and automatically to others' facial expressions or words, it is impossible to simply "turn off" shame. Rather, we must respond to the feeling in the moments or hours that follow. Conscious assessment and reframing of shame may reduce its intensity or eliminate the feeling. A place to start the conscious process is to ask whether this is a person about whose evaluations you care.

It may be more important to consider why we are being judged. Because people hold opposing standards (eating meat is immoral vs. natural), we can never be free of negative judgments. If I care about doing a good job at work *and* want to keep my job *and* my boss thinks my work has fallen short, then it makes sense to answer shame's alarm. However, I just don't care what strangers think about my old car. Perhaps a facile example, but there will always be someone with a different view of religion, politics, diet, sex, etc.

"Fun-house" mirrors distort images to make people look squat, wavy, or otherwise unreal. People often do the same, distorting images of others. Rock climbers use "climber fat" as slang, capturing the experience of being thin and fit by normal standards, but feeling overweight in comparison to climbers. Ballet dancers, gymnasts, and endurance athletes experience something similar. Children, partners, and employees of perfectionists may as well. The "fun-house" mirror analogy is valuable as it makes light of others' distorted standards and illustrates Cooley's looking glass.

26.4.5 What Consequences?

Evolution operates according to relative probabilities and consequences. An example is the snake-stick dilemma. The probability that the thin, vibrating object underfoot is a snake is small, the probability that it is dangerous is smaller. Yet, we react with fear and jump. Here, human nature is usually wrong; we needlessly feel fear, shift attention, and waste energy. The key to understanding this paradox is the relative consequences of false positives versus false negatives. The false positive (stick for snake) resulting in a little bit of fear and wasted energy presents a small cost in comparison to the risk from the false negative (snake for stick). Thus, human nature is to jump.

Similar calculations apply to devaluation. The existence of shame as an adaptation points to the importance of true positives—devaluation can be as threatening as the poisonous snake. Nevertheless, we often experience false positives due to misperception. Perhaps more commonly, we correctly perceive the devaluation, but like the non-poisonous snake, the consequences are negligible. Negative judgments of strangers generally fall in this category. Counter-intuitively, our mistakes and short-comings may not have serious consequences among friends and loved ones. True loved ones accept us. In these cases, shame should be "let go" to the extent possible.

Understanding the biological/organic nature of shame and the frequency of false positives suggests that we should not dwell on shame's pain without evaluation. Focusing on the feeling makes us weak and powerless, activating memories of past shame. Far from denial, reframing shame as a mistaken alarm (like a smoke detector with low batteries) *can be* the adaptive response.

26.4.6 Shame Is Adaptive: Do the Right Thing(s)

26.4.6.1 Reducing Devaluation

An adaptive response is to pay attention to shame, rather than to ignore the alarm. If, after evaluating the factors above, the devaluation is real and important, then it makes sense to consider what can be done to reduce the devaluation and improve others' images of us. If the reasons for devaluation are unclear, asking for clarification may be appropriate. If the reasons are clear, can they be addressed to reduce the devaluation and repair one's injured status?

Apologies may be in order and may alleviate the devaluation. An explanation may help, if an action or statement has been misunderstood, as when a joke is taken seriously. A discussion may help, if our norms or values conflict with those of the other. Taking responsibility and actions to address shame are often respected, especially in contrast to the resentment and further devaluation that follow when the issue is ignored, denied, or hidden.

26.4.6.2 The Value of Showing Shame

Part of the nonverbal shame display is to break eye contact. The display also communicates awareness of the shame issue, deference to the other, and pain. Shame's nonverbal display most likely evolved from the submissive behaviors associated with threats of aggression. The displays show similarities: physical, contextual, and functional. The context is threatened status or rank—via aggression versus opinion. The function is appearement—to reduce or stop the aggression versus devaluation. The displays are adaptive.

The submissive display of shame affects others. Just as the display of a submissive dog controls the dominant dog, making attack less likely, the shame display reduces devaluation. Others are more likely to accept apologies or explanations that are accompanied by a shame display because they interpret them as sincere. Because the shame display conveys pain, the other may even feel empathy.

When ashamed, we are tempted to hide from others, so we are also tempted to hide our displays of shame. They seem to broadcast our flaws. Understanding the adaptive value of shame and its display implies that we should not be afraid to let our shame show.

26.4.6.3 Avoidance: A Lesson to Be Learned?

The best response to shame is often future avoidance. Pain dramatically shapes our behavior, narrowing or expanding it to avoid more pain. We quickly narrow behavior and avoid pain when we learn not to touch hot stoves. We expand behavior and avoid pain when we learn to store knives safely. The shame-pain analogy holds with respect to avoidance.

An adaptive response to valid shame is to look for the lesson to be learned, which is often avoidance. We learn to avoid mistakes, certain topics of conversation, and specific people. We learn to take the precautions necessary to avoid a shame-inducing scene. We act to avoid shame before even leaving the house: shower, shampoo, apply deodorant, brush teeth, dress. Many of these behaviors benefit us directly, but they all reduce devaluation.

26.4.7 Maladaptive Responses: The Compass of Shame

Having discussed adaptive responses, examining maladaptive responses illuminates the contrast between the two and aids in identifying problematic scripts. Because shame is an alarm, ignoring it can be dangerous, like ignoring the fire alarm. Similarly, morphing shame into a more palatable emotion, like anger, can be counterproductive. We also pay a price when we make too much of shame. Perseverating on a minor embarrassment is like deploying the fire extinguisher when the alarm clock rings. One model that encompasses a broad range of these potentially maladaptive responses is Nathanson's (1992) Compass of Shame (Wang & Sang and Larsson, in this book). Nathanson grouped shame-coping into four categories (Withdrawal, Attack Self, Attack Other, Avoidance) and located them at the points of the compass (Fig. 26.1). Webb suggested modifying Nathanson's diagram by adding the emotions used to mask shame in the four quadrants and the clarifying labels *Hide from Self/Other* (T. Webb, personal communication, December 16, 2017). Shame, broadly defined, lies at the center.

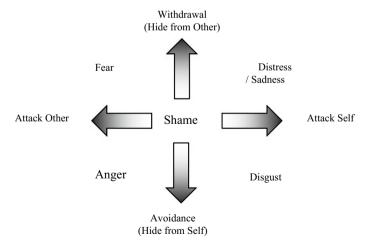


Fig. 26.1 The compass of shame. Adapted from Nathanson, 1992; modifications by Webb

The four shame-coping styles encompass families of scripts; each style manifests in many ways. The styles are viewed as relatively stable personality traits, and thus there are individual differences in their use. Nathanson (1992) devotes chapters to each of these categories, described briefly here. Nathanson's model provides a useful visual, and readily recognizable categories, that can anchor therapeutic discussions.

26.4.7.1 Withdrawal: Hiding from Others

As an adaptation, shame produces a display and behaviors associated with inhibition and submission. Withdrawal may be the primary behavioral response—escape painful gaze and devaluation. People describe wanting to disappear or wishing they were invisible. Withdrawal as a conscious behavior varies from cessation of conversation or actions to fleeing from important environments (e.g., quitting school).

Withdrawal can be adaptive: from toxic environments; when it appeases others; when others might aggress. Nevertheless, withdrawal can be maladaptive when an opportunity to reduce devaluation (e.g., apology) would have been effective. As much as we might want to disappear, leaving school or a job is almost always an overreaction, with serious costs.

Research demonstrates that Withdrawal has serious consequences for psychological health, being correlated with: depression, low-self-esteem, anxiety, and interpersonal sensitivity (Elison, Lennon, & Pulos, 2006). Among the four styles, it shows the highest correlations with social anxiety/phobia, which makes sense given the self-chosen isolation. Among the four styles, Withdrawal and Attack Self are the most highly correlated pair. Both are internalizing responses. When the two are paired, they result in social isolation and rumination, a damaging combination.

Addressing Withdrawal, or any of Nathanson's shame-coping styles, involves recognizing them and replacing them with more adaptive responses. Flexibility is a sign of psychological health. Over-deployment of any shame response is likely to be problematic. Clients should be encouraged to fight the urge to run, and to instead evaluate the validity and consequences of the shaming event, only withdrawing when deemed effective. The motivation to change can be encouraged by discussing Withdrawal's costs to psychological health, happiness, and relationships.

26.4.7.2 Attack Self: Inward-Directed Anger

Just as we may be angry with ourselves when we cause our pain (e.g., stubbed toe), it is natural to be angry with ourselves when we cause ourselves shame. Attack Self involves inward-directed anger, self-blame, self-loathing, and rumination. Tomkins (1963) wrote of scripts that magnify emotions; in everyday language we refer to "blowing things out of proportion," apt descriptions of Attack Self. People who favor Attack Self, tend to do the opposite of adaptive evaluations; they misinterpret neutral reactions as devaluation, they overestimate the seriousness of their mistakes or inadequacies, and they place too much blame on themselves. They may say they

hate themselves, they are worthless, or they will never be successful. Attack Self is part of maladaptive perfectionism.

Deployed strategically it is effective in reducing devaluation. Being the first to call attention to our mistake may impress others, diminish their power to shame us, allow us to joke about it, and even garner empathy. Self-deprecating humor can be endearing.

Due to the internalization, rumination, and magnification that make up Attack Self, it shows the highest correlations with a wide range of psychological symptoms: depression, low self-esteem, anxiety, perfectionism, and fear of failure (Elison et al., 2006).

Addressing Attack Self involves reality testing, revealing the clients' tendencies to misread others and to respond introapunitively. Although habitual and therefore difficult to change, most clients are likely to be motivated to try, due to the high costs.

26.4.7.3 Attack Other: Outward-Directed Anger

Just as we may be angry with others when we blame them for pain (e.g., stepping on our toes), it is natural to be angry with others when we feel shame. Attack Other involves outward-directed anger and blaming others. Another ploy is to find someone to bolster our status via comparison: "I may have gotten a D, but he got an F." Responding with anger-aggression appears paradoxical—if a person is concerned with (de)valuation by others, why would they risk further damage by responding with hostility? The pain analogy provides an explanation. If social pain is an exaptation of physical pain, then the threat-defense responses (i.e., fight or flight) that evolved in response to physical pain are likely to be deployed in response to social pain (Elison, Garofalo, & Velotti, 2014; MacDonald & Leary, 2005). There is a biological basis for the fact that anger and aggression are common responses to shame.

An evolutionary connection does not necessarily imply that anger is an adaptive response. The benefits of the physical pain exaptation (i.e., the alarm and motivational components) could have outweighed the costs of the linked threat-defense responses (i.e., attention and flight may generally be adaptive, while fight may be generally maladaptive). Thus, anger-aggression may be adaptive or maladaptive, depending on context. They will often make the situation worse, in that others may think less of us. In other cases, such as being humiliated by a bully, standing one's ground could be adaptive.

Attack Other correlates with depression, hostility, distancing, and psychopathy (Campbell & Elison, 2005; Elison et al., 2006).

Addressing Attack Other involves reducing the clients' tendencies to externalize and discussing its counterproductive nature. Clients may appreciate learning that anger "came along for the ride" in our evolutionary history, yet it may be less adaptive in response to social pain. Aggression comes with a high cost, socially and legally. The externalization component makes Attack Other difficult to address.

26.4.7.4 Avoidance: Hide from Self

Avoidance involves denial, disavowal, and emotional distancing. The goal is to minimize conscious recognition of shortcomings and shame. We can deny caring: "She dumped me, but she's not that great." We can use disavowal when we adjust priorities to protect self-image: "Chemistry is silly; I'll switch to psychology." We can distance ourselves by joking about a failure or via addictions.

As always, context matters when evaluating whether avoidance is adaptive in a given instance. Avoidance via reframing, when a situation cannot be changed, could be adaptive. Dropping important goals or ignoring situations that could be improved are maladaptive. An interesting finding indicates that others can interpret our Avoidance as being passive-aggressive. Specifically, when someone offers constructive criticism and we dismiss it, they may feel ignored or worse.

Avoidance correlates with emotional minimization and psychopathy (Campbell & Elison, 2005; Elison et al., 2006).

Addressing Avoidance involves raising the clients' awareness of their defensiveness and increasing their tolerance for negative emotions and realistic self-assessment. The denial and distancing components make Avoidance difficult to address. Clients may not want to face the negative emotions or realistic self-images and derail the conversation or quit therapy.

26.4.7.5 Coping by Degrees

Another useful visual is to think of the Compass of Shame as a bullseye, as in darts. The bullseye represents adaptive coping—we acknowledge shame, evaluate the situation as outlined above, and address it if possible and appropriate. The four arrows of the compass represent our tendencies to respond defensively. The range of behaviors along each arrow can be arranged with distance representing intensity or severity. For example, brief thoughts of "I'm stupid" before addressing a minor mistake represents mild Attack Self. Extended rumination over inadequacies or suicidal ideation represent extreme Attack Self. Application with clients is discussed in Sect. 26.5.

26.5 Applied Methods and Applications

26.5.1 The Compass of Shame

The goal in using the Compass of Shame model in therapy or self-reflection is to identify problematic responses to shame (i.e., habitual scripts) and replace them with adaptive responses. The change process is enhanced when clients are partners in identifying how the compass model manifests in their own experiences. Descriptions of the four styles that include typical feelings, thoughts, and behaviors appear above

and elsewhere (Elison et al., 2006; Nathanson, 1992). But the possible manifestations are endless, so personalizing these experiences is necessary.

26.5.1.1 Assessment: The Compass of Shame Scale

The Compass of Shame Scale (CoSS; Elison et al., 2006) was developed to quantify use of Nathanson's four families of shame responses (Fig. 26.1). The CoSS is a self-report instrument comprised of 12 shame-inducing scenarios (stems), to which respondents rate their frequency of use of the four styles. A sample item is:

When an activity makes me feel like my strength or skill is inferior: (stem)

- 1. I don't let it bother me. (Avoidance)
- 2. I get mad at myself for not being good enough. (Attack Self)
- 3. I withdraw from the activity. (Withdrawal)
- 4. I get irritated with other people. (Attack Other)
- * Labels in parentheses are only provided here for clarity.

Respondents rate all four options for each scenario on a frequency scale: *Never* to *Almost Always*. Scores are calculated by adding all 12 responses for each family.

Data on many of the correlates described above come from studies employing the CoSS. However, the CoSS has also been used in therapy. Interpretation of scores is aided by norms (available from the author), but these are not necessary. Therapists and clients can use the scores, or even just clients' responses to individual scenarios, as a guide for discussions:

- Which of the 12 stems are most painful for you? (inferiority, rejection, guilt)
- Are there other situations that are especially painful?
- Which types of response do you use the most?
- How have these types of responses caused problems for you? (work, relationships, legal)
- How could you respond to a given situation in a better way?
- Does your response to a situation change over time? (discussed below)

Version 3 of the CoSS was published in Elison et al. (2006); however, Version 5 incorporates several improvements (contact: jeff_elison@msn.com) and has been translated to 13 languages.

26.5.1.2 Dynamic Shame-Regulation

Shame can last for minutes, hours, or days. Thus, shame-regulation strategies play out over time. Just as one's preference for Attack Self shows stability over time, so do sequences of shame-coping responses. For example, imagine snapping at a loved one when he offers constructive criticism, Attack Other. As the shame over the criticism subsides, it may be overshadowed by shame over the Attack Other response: "He didn't deserve that." Self-blame commonly follows: "I'm a bad person," Attack Self continuing the maladaptive trajectory. An adaptive response would be a heart-felt apology. Discussing and identifying these typical sequences add another level to therapeutic interventions.

Because other-directed anger and self-directed anger are correlated, they often appear in sequence (previous paragraph); however, the order can reverse. Those who automatically internalize will start with Attack Self, but given time, they may reframe the situation, realistically or not, and switch to Attack Other ("who are they to judge?").

Attack Self and Withdrawal are the most highly correlated of the CoSS responses. The evolutionary response to run away or hide comes immediately. Then, once safely away from judging eyes, one switches to Attack Self and rumination. Attack Other is correlated with Withdrawal, to a lesser degree, and may also follow, possibly appearing passive-aggressive.

Reframing is an often conscious cognitive process that takes time, and so, Avoidance or Adaptive responses may follow the others.

Beyond the obvious discussion points of why these sequences may be maladaptive, their presence begs the question: why not take a shortcut to an adaptive response. Indeed, instantly banishing maladaptive responses is an unrealistic goal. Lest clients Attack Self over their lapses toward an unrealistic goal (as with dieting), it is better to strive for progress, defined as using them less often or spending less time getting to an adaptive response. This point is especially important for those prone to internalization or perfectionism.

26.5.1.3 The Bullseye

The Compass of Shame model is useful even without CoSS scores. An exercise employing a CoSS-bullseye diagram is to identify a response to a specific shame experience and then classify it in terms of which family it belongs to and how far out on the arrow it falls. Doing this repeatedly can reveal characteristic and problematic responses, as well as progress. The visual aid makes the categories easier to understand and remember, as well as providing a reminder that the goal is a bullseye of adaptive responding.

26.5.1.4 Walking the Compass

Clients can more fully explore their shame responses individually or in group settings by physically moving about a large diagram of the Compass of Shame laid out on the floor (T. Webb, personal communication, December 16, 2017). Webb suggests several steps that may be included in this exercise:

- 1. Place a paper marked "shame" in the center of the room.
- 2. Stand on shame, model its nonverbal display.
- 3. Ask how we typically respond to or defend against shame. Responses will usually fit the four Compass of Shame categories.
- 4. Label four sheets of paper with the Compass categories and lay them out in a compass configuration.
- 5. Model the categories and ask for participants' reactions. Discussion can include related emotions (anger, sadness) and correlates (isolation, depression, aggression).
- 6. Invite participants, one at a time (the model), to stand in the spot representing their most common response to shame. Ask the model what they notice about themselves and the reactions of others. Ask other participants what they notice about the model. Often, the model's expression will match the masking emotions in Fig. 26.1. Repeat these reflections as the participant moves to each of the points.

26.5.2 Visual Display and Empathy

Shame allows us to maintain positive relationships, but only when we address it. Others respond favorably to shame acknowledgment and nonverbal displays of shame, as opposed to avoidance or externalization. A variation of the Walking the Compass exercise is useful for illustrating empathic responses to shame (T. Webb, personal communication, December 16, 2017).

- With others watching carefully, ask a participant (model) to stand in a spot representing their most common response to shame and to describe what they do there. Avoid long stories by asking others what they notice. They will typically report feeling uncomfortable due to the unaddressed shame, possibly noticing that words are being used to hide shame.
- 2. Ask the model how far they are willing to walk toward the center. Encourage a small, slow approach.

- 3. Ask others what they notice. Often this will be a true shame display.
- 4. Ask the model what they are feeling. Again, avoid long descriptions by asking others what they notice. They will typically notice that the model's words interrupt his or her shame display.
- 5. Ask the model if they can stay with shame, moving closer to the center.
- 6. If the model displays shame again, ask others how they feel about the model's shame. Focus on any empathic responses.
- 7. Ask the model how they feel about the empathic responses. They will often describe relief, the weight of shame being lifted.
- 8. Include all in a discussion of how shame is functional, allowing repair of relationships, but only when acknowledged.

26.5.3 Shame-Pain Analogy

The shame-pain analogy was described extensively above, so how can discussions personalize it? Specifically, when does shame help clients? Specifically, does their alarm system malfunction, either failing to go off or creating false alarms.

26.5.4 The Looking Glass

Similarly, the Looking Glass analogy was described extensively above, so how can discussions personalize it? Specifically, when do clients have unrealistic desires for what they will see there ("I want to be the best")? Do they create false alarms by seeing negative judgements where none exist? Who in their lives represent fun-house mirrors ("I can never please him")?

26.6 Conclusion

Taking an evolutionary perspective on shame, including the pain and Looking Glass analogies, directs our focus on shame's adaptive functions. This perspective also focuses attention on distinguishing adaptive from maladaptive instances of shame and shame-coping. Finally, the shame-pain analogy suggests a number of strategies for interventions designed to reduce maladaptive shame, replacing it with adaptive responses.

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Jeff Elison (Ph.D.) is a professor of psychology at Adams State University in Colorado, USA. He has published dozens of articles and conference presentations on shame, guilt, humiliation, and shame-regulation. He also authored the Compass of Shame Scale (CoSS), a self-report instrument to assess shame-regulation styles. The CoSS has been translated to 13 languages.