Abstract. The Gestalt model inherently incorporates an understanding of shame dynamics in its analysis of contact processes. Shame is a field variable, a ground condition modulating the contact boundary, a natural process of retroflection enlisted at times of perceived insufficient support. The shame-support polarity, when functioning optimally, allows the person to be at the edge and to venture beyond old organizations of the field—i.e. to grow. Conversely, with severe or persistent lack of support (e.g., severe or sustained abuse, neglect, or loss), shame becomes internalized and integrated into basic beliefs about the 'self' and the possibilities of contact with others. These fixed gestalts (Perls' introjects) which have been learned in a particular field then become blueprints with which to interpret experience and guide behaviour in general, restricting flexibility. Restoring flexibility means facing the shame that holds the fixed gestalts in place. This can only happen in the context of a relationship. One of the chief processes of therapy then becomes supporting awareness of shame in the present field, between therapist and client.

Key words: gestalt, Gestalt Therapy, Field theory, shame, support, contact processes, self processes, shame bind, introject, figure and ground.

About seven years ago I discovered the work of Tomkins (e.g. 1963) and of Kaufman (e.g. 1980, 1989) on the phenomenon of shame. I was taken with the similarity between what I read and what I had been noticing in my clients. As a result, I became extremely interested in the phenomenon of shame. At that time I did not conceptualize shame as being related to Gestalt theory or therapy. I don't remember exactly when my thinking changed, but as part of the transition, I remember attending a day-long seminar in Boston given by Kaufman five or six years ago. In the first half of the day, Kaufman presented and discussed theory connected with the phenomenon of shame, and in the second half, he conducted an experiential demonstration
on the treatment of shame. During the first half of the day, I had the sense of starting to master a new discipline. However, my experience in the second half was completely different. As Kaufman proceeded with his demonstration, I quickly found myself in old, familiar territory. Much of what Kaufman illustrated was very similar to what I was trained to do at the Gestalt Institute of Cleveland and to what I had been doing as a Gestalt therapist for many years. With time I noticed more and more that significant portions of Gestalt theory and therapy concerned the phenomenon of shame without mentioning shame by name. Correspondingly, as I became aware of Gestalt theory's inherent incorporation of shame dynamics in its treatment of contact processes, I gained a fuller understanding of the nature of shame.

Introjects and Shame Binds

To begin with, I noticed (Lee, 1994) that what Gestalt theorists refer to as an introject (conceived of by Perls, 1947, and refined by others, e.g., Polster and Polster, 1973) is what Tomkins (1963) and Kaufman (1989) call a shame-bind. From a Gestalt perspective, this is significant because Perls' idea of 'resistance to contact,' which is central to his conception of neurosis, is centered around his construct of 'introjects.' All of Perls' basic resistances to contact (introjection, projection, and retroflection) are organized around an introject at their core.

Introjects are 'standards, attitudes, ways of acting and thinking, which are not truly ours' (Perls, 1973, p. 35) yet organize our functioning. Thus, introjects are cognitive, affective, and kinesthetic information from the environment that has been 'swallowed whole,' according to Perls, rather than assimilated (i.e. reorganized to be in harmony with one's needs and one's internal and external resources). In order to live in accordance with introjects, one must disown aspects of one's functioning. The cognitive part of introjects are beliefs (for example, 'shoulds' and 'oughts') that hold within them the piece of the self that has been disowned. For example, the cognitive part of an introject may take the form of 'I shouldn't be angry' or 'I shouldn't need help when I'm hurt.' In these cases what is disowned, respectively, is one's anger or one's need for nurturance or assistance when hurt. Perls maintains that introjects form because of over control by the environment, i.e., the person is not allowed to act in accordance with his or her own needs.
and sense of self.

This is very similar to how Tomkins (1963) and Kaufman (1989) describe shame binds. Shame binds form when a person's feelings, needs, or sense of purpose (i.e., the building blocks of ways of being in the world) are seriously unsupported by the environment, through abuse, neglect, or loss. When the experience of shame is severe enough or chronic enough a linkage forms between shame and the feeling, need, or sense of purpose that is unsupported. Thereafter, whenever the person experiences the given feeling, need, or sense of purpose, he or she will automatically also experience shame. And, in more severe cases, with greater unavailability of support, the person will lose awareness of the feeling, need, or sense of purpose and only experience the shame. This is similar to the consequences of an introject in which the need, etc. is disowned.

Comparing their similarity further, both shame binds and introjects are formed in the context of relationships where people rely on others, e.g., parent-child, teacher-student, husband-wife, employer-employee, etc. As Kaufman (1980) says, it is when people care that they are vulnerable to shame. It is in this context, when people have needs that must be met for survival or growth, that they are vulnerable to the threat of abandonment which in turn triggers shame. Expressed in Gestalt terms, Tomkins' and Kaufman's understanding of shame is transformed into the following: shame is a regulator of the boundary between 'self' and the social field. (I will discuss this further later.)

Under these conditions, when there is an aspect of one's functioning that is disapproved of by significant others, one may experience a threat of abandonment and over time, disown the disapproved aspect of one's functioning through shame, thus 'swallowing' an introject. This allows the person to continue to belong in the needed relationship and to continue to have hope of satisfying those needs that he or she perceives as important for survival or growth.

The connection between shame binds and introjects continues as we look further at Perls' theory. Perls et al. often refer to habitual resistances to contact as neurotic mechanisms. They state: 'every neurotic mechanism is an interruption of some kind of excitement--a prevention of its further development' (Perls, Hefferline, & Goodman, 1951, p. 145). But according to Tomkins (1963), it is shame that regulates excitement. Shame's function is to help the organism
pull back from interest-excitement or enjoyment-joy that is perceived to be inappropriate or dangerous. Thus, theoretically, shame is associated with Perls' neurotic mechanisms which in turn have introjects as their basis.

As a test of whether or not a relationship exists in fact between introjects and shame, I examined transcripts of Perls' sessions with clients. If it is true that Perls' introjects are shame binds, we would expect that as Perls works with client's neurotic mechanisms in sessions, verbal expressions and other signs of shame would appear. These would be associated with client's underlying introjects or with attempts to avoid their associated shame. A reading of the transcripts of Perls' (1973) sessions reveals many such instances. For example, a client who is talking to himself, in the process of re-owning his projection (the projection being that he believes that Perls wants him to 'stretch') states to himself: 'Don, you're not good enough the way you are so you've got to stretch' (p. 122) (italics added). 'You've got to stretch' is the introject, and 'you're not good enough' is the accompanying shame. Another client says: 'I try to hide my fear' (p. 130) (italics added). The introject here is 'I should not be afraid,' and hiding is an expression of the shame.

Another client, in re-owning her power associated with being tall, says to the audience (when Perls suggests that she talk as if she is a giant): 'you might think that's a silly idea. You might laugh at me' (p. 171) (italics added). The introject here is something like 'I should not be powerful.' And imagining that others would think that she was silly and laugh at her, she projects her shame onto others. In another instance, Perls chides a couple for falling into the 'blaming game' (p. 140) (italics added). This is an example of the use of blame (a form of shaming another) to avoid one's own shame. (Lansky, 1980, talks at length about couple's shame cycles that involve blame.)

In almost all of the transcripts, Perls presents himself working with a client, and facilitating the impasse', and in each case direct or indirect signs appear that indicate that the client is experiencing shame. While there is much of Perls' theory and practice as a therapist with which I do not agree, some of which I will discuss shortly, this is supportive evidence, both theoretical and practical, that introjects are shame binds.
Introjects in the Light of Shame Theory

My recognition that introjects are shame binds brought with it a new understanding of the nature of introjects as well as support for the view that Wheeler (1991), among others, has espoused that there are some serious flaws in Perls' theory. For example, when Perls talks about introjects or socially conditioned rules for living, he seems principally to have in mind the kind of explicit injunctions (or 'shoulds' in Perls' terminology) which we associate with authoritarian child rearing. But these are not the only unexamined rules that guide our actions that come from these and other situations. And in the end, they may not be the most difficult to revise or reconstruct.

At a deeper level are the unexamined attitudes and beliefs which the cognitive theorists have taught us to attend to in therapy and which Mark McConville (in press) refers to as ground introjects. In many cases, the core of this deeper level material is composed of learned beliefs that a felt need or part of the self is not acceptable in the field. For example the introject 'I should not need support when I am hurt.' is part of a belief that my needing support when I am hurt is shameful. Perhaps this is experienced with self disgust as 'I am weak!' A belief of this type is not necessarily 'swallowed whole,' but is more likely to be inferred, which is to say, creatively constructed by the person. In addition, even an acquired associated rule or standard may not be 'swallowed whole,' may not be given to the organism by an outside authority. For example, 'I should not need support when I am hurt.' may have come from accumulated experiences in childhood of being with a primary nurturer who would pull away from the child when the child would cry (perhaps because the child's crying aroused unbearable memories of the nurturer's own childhood trauma.) In such instances, shame would be self activated in the child. It would help the child retreat from pursuing attempts at contact when there was no support. In time, or with sufficient severity of a particular incidence, a distress-shame bind would form. The formation of this shame bind represents a generalized inferred learning by the child: i.e. that his
or her distress is dangerous to the relationship.

When viewed in the above light it is not at all clear that Perls' labeling of this learning process as introjection is sufficiently inclusive. For Perls, what's important is that the introject (the learned linkage between shame and a need or a part of the self) is taken in by the organism unexamined or on authority. What is commonly unexamined in this learning process is how shame becomes linked to the given aspect of self, stemming from a particular situation or environmental condition, and then is generalized so that that aspect of self is assumed to be unacceptable in all other environments as well.

A companion problem with Perls' construct of introjection is his notion that introjection involves only negative material—positive material is assimilated into the body, according to Perls. Thus introjects are only negative in character. This runs counter to the universally held idea in psychology that introjection is one of the major human learning processes of any kind of material. With introjection we take in large blocks of information at once. It is the major way we learn to walk, talk, relate, and so on. Kaufman (1989) believes that an important step in the healing of shame is the client introjecting the therapist's more self nurturing ways of being in the world.

Perls is on target with his conception of introjection in one sense—material taken in which is not counter to one's sense of self does not become linked with shame, while material that does run counter to one's sense of self (Perls' introjects) does become linked with shame (shame binds).

Following further Perls' thinking about introjection, Perls (1947, p. 114; 1951, chap. IV) introduces an oral-dental metaphor for health and neurosis. Neurosis starts when a mother responds harshly to a baby's biting her nipple. The child may then repress his or her need for dental aggression. Perls says that for health, the organism must destructure what it takes in (psychologically as well as physically) by biting and chewing. This is the organism's way of making what it ingests its own. If it loses this ability, it will 'swallow whole' that which the environment provides (introjection). Thus, it will not be able to meet its unique needs and it will live by a set of rules and standards given to it by others. Wheeler (1991) suggests that this part of Perls' theory may be Perls' attempt to resolve, and in the process generalize, his own experience of abrupt weaning and lifelong struggle with feelings of rejection.

One therapeutic practice, among others, that emerges from this position is that
aggression is given a strong positive value. Change takes place when people re-own their oral-aggressive needs. Despite Perls' words on the interdependence of organism and environment, this position means a strong emphasis on self-reliance. It also means that what Perls would often 'see' in clients was hidden, disowned aggression. Thus, clients should be provoked by therapists so that they will come to stand up for themselves and not to continue to ask for support from the environment. This view does not take into account the dynamics of a mutually supportive, nourishing, interactive relationship, or the risks of re-shaming the client when the therapist adopts this kind of combative approach.

Returning to the examples presented (from the case transcripts) which link shame with introjects, it appears that Perls notices (to some extent) the utterances that I call signs of shame, but he thinks, in accordance with his theory, that they are manifestations of hidden aggression or hostility only. For example, Perls says to a woman who has been talking to her husband in a low voice: 'By the way, this low voice is always a symptom of hidden cruelty' (p. 135) (italics added).

On the contrary, a low voice is often a sign of shame! The woman in this example has just said that she is aware of her inadequacy to express herself and is feeling unsure-- further indications that she is experiencing shame. With the experience of shame there is always the possibility of a shame spiral (alternatively referred to as a 'shame attack') in which the person will attempt to avoid his or her shame through rage, blame, control, perfectionism, withdrawal, etc. (Bradshaw, 1988; Fossum and Mason, 1986; Kaufman, 1980, 1989; Lansky, 1991; Nichols, 1991; Retzinger, 1987). Thus, Perls, because of his framework, misses the shame and only notices the defensive manoeuvres in the shame spiral.

In effect, Perls advocates dealing with shame by adopting one or more of the common strategies that people use to defend against shame -- rage, blame/counter-shaming, or control. He often says that guilt (a form of shame according to Tomkins, 1963, and to Kaufman, 1989; see also Nathanson, 1992) is just projected resentment. This strategy can be useful in helping a client to destructure a shame-linked fixed gestalt (an introject) and to identify a shame-linked need, a 'lost voice.' However, by itself it leaves out important steps in the process of healing of shame. To be sure Perls' support for a more aggressive or self-assertive stance may have some de-shaming effect for the client. However, it keeps shame in the client's mapping of the
field—the other becomes shameful as the price of relieving the client's shame. This may still leave the client with a sense of disconnection. A reorganization of the field without shame requires a different kind of experience—an experience in which the client's shame-linked need is received in conditions of felt support. Thus, while Perls' strategy may be useful at times or in part, it may only teach people to avoid their shame by projecting it on to others. Processes that heal shame start with the formation of a reciprocal relationship (Kaufman, 1989) - again, something that Perls tells us little about.

Recognizing that an introject is a shame bind provides a further understanding of why forming a reciprocal relationship is important in treatment. Again, a major consequence of an introject/shame-bind forming is that a part of the self is split off or shut down. Thus, the person loses a 'voice' for the part of his or her being that has become linked with shame. The loss of this voice develops in response to the perceived fact, or 'environmental condition' that there is \textit{no one to receive the voice}. With the loss of voice comes a sense of alienation and inferiority, a sense of feeling disconnected and worthless (Kaufman, 1989). This sense of alienation and inferiority is not only due to the person experiencing the voice as shameful and not worthy of being heard, but also from the fact that without the voice the person is in fact less capable. He or she is now less able to inform the world about who he or she is, in the event an empathic listener does come along. This is all part of the experience of shame, when it becomes linked with a part of one's being.

This tells us more about a person's readiness to confront the fixed gestalts that have come to limit his or her functioning in the world. I remember Sonia Nevis (personal communication, July, 1977) saying that a person will not undo a retroflection until he or she is ready to deal with the underlying introject. I imagine Nevis would have said the same about undoing \textit{any} unawares, fixed resistance to contact, since they all are organized around underlying introjects.

A knowledge of shame's role in this process allows us to take this one step further—\textit{a person will not be able to deal with the underlying introject until he or she can face, and start to heal the shame that helps to hold the introject in place}. Remember that the shame bind formed originally because there was not a 'listener' to 'hear' the 'voice' that was disowned. Thus, facing one's shame, in the process of re-owning (regaining access to) the underlying shame-linked need,
requires first being in an environment in which the need will be noticed and appreciated. This is a primary quality of a reciprocal relationship.

At this point, my observations of how Gestalt theory and practice have long dealt with the phenomenon of shame without naming it, begin to coalesce and become more unified. However, before we go further, it is important to introduce another dimension of shame. Till now we have mostly been talking about shame in its most pernicious, toxic form -- what Kaufman (1989) calls 'internalized shame.' However, shame has another side. Tomkins maintains that shame is one of nine innate affects, part of the survival kit with which everyone is endowed at birth. As mentioned earlier, shame's function, according to Tomkins (1963), is to regulate the affects which he calls interest-excitement and enjoyment-joy. 'The experience of shame is inevitable for any human being insofar as desire outruns fulfillment sufficiently to attenuate interest without destroying it.' (p. 185) Thus, shame in its simplest forms, e.g., shyness and embarrassment, is a natural process of retroflection, or holding back, that serves a protective function throughout life. It guards our privacies around such areas as friendship, love, spirituality, sex, birth, and death and provides a protective screen for the ongoing process of self-integration (Schneider, 1987).

The Gestalt model helps us to understand this function of shame in a somewhat different light. In Gestalt the person is seen as negotiating, co-constructing, and exploring at the boundary of the inner and outer worlds. Shame in this view can serve as a signal, that the state of the connection at the boundary between me and my world is threatened or needs attention. Shame can make me hold back, as in the Tomkins model, or it can make me attend to the other person, and his or her need of me--possibly at the temporary cost of my own self-expressiveness. (Thus, Gestalt allows us to see the creative connection between shame and 'co-dependence.' As a 'co-dependent' my attention is forced almost entirely on the other person, shoring him or her up to receive me, with a consistent, habitual cost to my self-expressiveness.)

**Shame's Function in Contact Processes**

Thus in general, shame is a major regulator of the boundary between 'self' and 'other'.

Interestingly enough, this conclusion can be derived from the basic tenets of Gestalt theory.

Gestalt's holistic stance holds that people endeavour to unify or map their entire 'field' of experience, which includes their experience of themselves and their experience of their environment in relation to themselves (their whole context of perceived risks and resources), according to their own felt needs and goals (Goldstein, 1939; Koffka, 1935; Lewin, 1935). The organizer of this 'field' is the self. This organization or mapping of the 'field' is an on going process that occurs in the context of experience in the 'field,' which is known as contact (Perls et al, 1951). With any contact or meeting between self and the world, the whole 'field' is resolved anew with respect to one's relevant felt needs and goals (Lewin, 1935; See also discussion in Wheeler 1991, 1994a, 1994b).

With regards to one's Gestalt map, both 'self' and 'other' arise, phenomenologically, in the same experiential, interactive act of contact. It is in the experience of contact that the 'self boundary' is constructed and continually refined. People live and grow in the context of relationships (Perls et al, 1951; See also discussion in Wheeler, 1994a, 1994b). 'Self' and 'other' are always interdependent. In order for the organizational process (the continual mapping of 'self' and 'other') to progress and develop in healthy directions, people must find/receive enough support in the field, including enough support to know what it is they want or need. Finding/receiving enough support leads to fulfillment of needs and goals, a good fit between inner and outer worlds, growth, and a sense of satisfaction. To this point the presentation of the basic tenets of Gestalt is in line with the revisionist theory of Wheeler, 1991, 1994.

The opposite of finding/receiving enough support in the field is the experience of frustration. One result of frustration is shame (Tomkins, 1963). Shame is the experience that what is me is not acceptable, that this is not my world. As such, shame signifies a rupture (or threat of a rupture) between the individual's needs and goals on the one hand and environmental receptivity to those needs and goals, on the other. There is a breakdown or threat of breakdown in the self process, the process of organizing the field into 'self' and 'other.' Resolution of the field is accomplished through confusion of the self - other boundary: the need that is not received by the other is disowned and made 'not me.' Thus, the field is brought back into alignment through shaming and, in the process, disowning the unacceptable need (establishing a linkage
between shame and the need which is not supported by the other or by the environment.)

With low levels of frustration, the linkage between shame and the unacceptable need is temporary. The shame that is experienced may be in the form of embarrassment or shyness, pulling the person back from an unsupported endeavour (Tomkins, 1963). In such a case the person may simply find another way or form in which his or her need may be addressed by the environment; alternately, he or she may attend to needs of the environment or the other that must be addressed before he or she can proceed with pursuing his or her own need or goal.

However, in cases of more severe frustration and shame (stemming from sufficient abuse, neglect, or loss) the rupture in the self process is bridged but not healed, since the price of the bridging is an on-going connection being made between shame and the unacceptable need, with the consequent loss of access to the need. As a result the person 'loses a voice' for this and is left with a sense of worthlessness, inadequacy, and/or isolation. This is the price of the fit between 'self' and 'other,' when the needs of the self are felt to be wholly rejected by the other.

In addition, this manner of resolving the tensions of the field requires continual maintenance. The shame-linked need does not disappear (although awareness of it might). Any time that it emerges (awares or unawares) the person experiences shame in order to continue the perception of the need as 'not me' and in order to live in harmony with an environment perceived as not supporting or accepting the need. Thus, such resolution of the 'self' - 'other' field carries with it a continual vulnerability to 'shame attacks,' in which the individual's chief focus is attempting to abate, escape, or avoid the experience of shame and, in the process to pull back from pursuing the unacceptable need.

Thus, as stated from a Gestalt perspective, *shame is a major regulator of the boundary between 'self' and 'other'.* It is a field variable, a ground condition that is the opposite of *support.* And *together with support, shame is an integral aspect of all contact processes, continually informing the 'self' of the possibilities of contact in the field.*

The shame-support polarity, when functioning optimally, allows the person to be at the edge and to venture beyond old organizations of the field--i.e. to grow. Together, shame and support have the potential of enabling contact. Support allows the person to take risks, and shame (perhaps in the form of embarrassment, shyness, or mild disappointment) allows the
person to pull back when there is no immediate support. Shame in this form (Kaufman's, 1980, 'shame as affect') is continually useful to us in our everyday lives. For example, it helps guide us through every conversation in our quest to secure meaningful contact with others. It is shame that tells us when our interest is not being received, and that allows us to reframe our interest so that it might be better received, or to stop and attend to the other person, or even to abandon our interest in a given situation.

On the other hand, when the lack of support is severe and/or consistent enough shame-binds are formed, as discussed above, and shame becomes internalized and integrated into basic beliefs about the 'self' and the possibilities of contact with others. These fixed gestalts (Perls' introjects) which have been learned in a particular field then become blueprints with which to interpret experience and guide behaviour in general, restricting flexibility. Restoring flexibility means facing the shame that holds the fixed gestalts in place. This can only happen in an atmosphere of support.

**Implications for Therapy**

The foregoing provides further theoretical support for what many Gestalt therapists have long been doing. First, Gestalt theory emphasizes contact in the present between therapist and client as the principal mode of therapy. Remember in Gestalt theory the client is seen as continually resolving the field into 'self' and 'other.' 'Self' and 'other' arise out of the same phenomenological experience. Thus a mutual relationship offers the best opportunity for forming new conceptualizations of 'self' and 'other.' Hence Gestalt theory encourages therapists to be available for engagement (contact) with their clients.

A knowledge of shame's role in contact processes supports and further clarifies this position. The linkages between shame and felt parts of self (introjects) that interfere with present contact were learned in the context of a relationship and can only be deconstructed and constructed differently within a relationship. This is because shame, as we have learned, is a relational variable, a field variable. It informs us of the possibility of insufficient support for our urges or desires. The shame linkages were formed to protect the client in a significant past
relationship from exposing or expressing a part of self that was perceived to endanger the relationship. And the shame linkages continue to serve that same function - needed or not - in present relationships. This mapping of 'self' and 'other' cannot be changed without a new experience in the field, a new sense of 'self' and 'other' in a relationship. Thus, as previously stated, re-owning (regaining access to) the shame-linked need requires first being in an environment in which the need will be noticed and appreciated. In individual therapy the relationship that is available is the relationship between client and therapist. In couples and family therapy, the therapist not only has the relationships between himself or herself and each family member, but in addition he or she has more direct access to the significant relationships in each person's life and can help the couple or family explore directly if there is support for alternative ways of being in the world within these relationships.

However, as a person gets close to the experience of the need, he or she inevitably will experience shame. This, after all, is the function of the shame linkage--to pull the person back from a kind of contact that is believed to be taboo. Thus again, re-owning the shame-linked need also requires facing the shame that holds the organization of the need as 'not me' in place. The relationship between therapist and client holds the potential for both the noticing and appreciating of a client's shame-linked need and for gaining support for tolerating the shame that will be experienced in the re-owning process. For this potential to be realized therapists not only need to be available for genuine contact with clients, but in addition, their contact must be organized in a supportive fashion. An important corollary is that therapists need to be aware of how their style may inadvertently shame clients (Geib & Simon, in press; Jacobs, in press; See also discussions in Balcom, Lee, & Tager, 1995; Jordan, 1989; Lansky, 1991; Scheff, 1987).

Second, Gestalt has long advocated following 'interruptions in contact' in the present field as a crucial dimension of the therapeutic process. Setting aside for a moment the problem that 'interruptions in contact' might just be elements of a particular 'contact style' (Wheeler, 1991), every interruption in contact or every instance of a consistent avoidance of a particular kind of contact is bound to be accompanied by an experience of shame in some form. Thus, following possible signs of shame in the client(s) as well as the therapist monitoring his or her own experiences of shame, become paradigmatic for doing therapy.
This is not necessarily a simple process because it involves the therapist seeing, hearing, and noticing the client; and it is the act of being noticed that carries the potential of being shamed for the client. Shame is triggered when one believes he or she has been observed doing something that is considered inappropriate. Thus therapist observation of even the client's most camouflaged expression of a shame linked need, is a trigger for shame. What is longed for by the client, to find a listener for a 'lost voice,' will necessarily be shaming, particularly in the beginning of therapy. Therefore, during activities that involve exploration of the self, a common occurrence in therapy, the therapist must pay particular attention to possible signs of the experience of shame in both client and therapist and to the felt quality of the relationship that such an experience of shame might imply. Again, this is what many Gestalt therapists have been long doing without naming it as such.

Case Example

During a joint session, about six months into therapy, George and Linda were talking about what happened between them the previous weekend. Very early Saturday morning of the previous weekend, George had awakened and wanted to make love. He tried several times to wake Linda; however Linda was deep in sleep and could not be aroused. George was hurt, shamed. For the rest of Saturday and most of Sunday he would not let Linda close to him and was irritable and short with her. However, Linda continually pursued him. George finally allowed Linda close to him late Sunday afternoon and they subsequently made love.

In the session, George matter-of-factly mentioned that Linda had pursued him during that process. As he did so, he made a slurping noise with his mouth, as if he was pulling saliva back into his mouth. I had noticed earlier in therapy that George would at times make this slurping noise with his mouth. This seemed out of context to me and when it happened I would ask him what he was experiencing. There would always be a slight irritation in his manner, voice, and words when he replied, chiding me for asking, but at the same time he would say that he wanted me to notice him. I took his accumulated behavior in such instances as possible signs of shame, signs of something hidden, possibly even from him, possibly a lost voice. Since the first
task with signs of shame is to receive the possible shame in a supportive fashion, I let him know that I would not notice him if he didn't want me to, and I thought it was possibly an indication of something important happening in him that I did not understand. Usually he had little or no sense that there might be something connected to his slurping. But often at these times we would discover that there was something happening in the session that he enjoyed and of which he wanted more, but he did not feel right about exposing his desire. He had always given indications at these times that he felt uncomfortable about exploring his experience of shame further, which I assumed meant that he did not yet feel enough support in our relationship to take such a risk.

For the first time, in this session, he noticed aloud the slurping saying, 'I did it again. I wonder why I did that.' I took this as a sign that he had moved to a new level in tolerating the sense of shame which he experienced in connection with this activity. And from the relational character of shame, this meant that he had developed enough trust in me (and Linda) that he was willing to risk facing his shame in our presence; he felt the possibility of support rather than shame from me and Linda in going further. I believe that it was no accident that at that moment we got to the meaning behind the slurping. He was ready for the next level of exposure. The meaning that came was that slurping meant that he was salivating. Salivating often means that someone has an acute desire. After all if George did not pull the saliva back into his mouth, he would be drooling. And in fact George always made the slurping noise when something was happening that he was secretly enjoying. Remember that it is shame that pulls us back from interest and enjoyment that we believe to be inappropriate.

Applying this to what it appeared that George might be experiencing in the moment, I asked George what it would be like to say to Linda that he drooled over the way Linda pursued him. George's face turned red; he was obviously, instantly embarrassed. He said that in fact that was true but that he could never say that to Linda. 'What would she think of me? That is disgusting, (i.e., shameful).’ So we scaled down the experiment, following the level of shame that George could tolerate. I suggested to George that he ask Linda what she might think of someone who would drool over her pursuing him. The energy was quite high in the room. Even this was difficult for George. However, with some coaxing George did ask Linda and she
responded that she loved it. He could not believe her. He could not look at her when he asked the question and nor when she answered him. I took this as a sign that he was at the limit of shame that he could tolerate and would need additional support to go further. Thus I suggested playfully that he just 'sneak a peak' at her, after all looking at her directly might too much upset his belief of how he had to be in the world. It might be too hard to integrate into his sense of who he was in the world that someone could not just feel OK about his drooling over her but in fact love it.

At times such as these when the client is exploring a new sense of 'self' and 'other,' it is important to normalize the shame that he or she will inevitably experience. Here I did it playfully. At other times I have used compassion or tenderness to convey the same message. A pitfall for the therapist here is to become uncomfortable with the client's experience of shame and try to 'fix it,' saying something like, 'Oh no, you shouldn't be ashamed of that.' This just tells the client that his or her feeling is not valid, which adds more shame. A more supportive message to the client in such instances is that it is quite understandable that the client is experiencing shame (is embarrassed, shy, timid, experiencing self-contempt, etc.) as he or she is getting close to experiencing a sense of self that has been taboo to those around him or her in the past. The next step is to let clients know that if they wish to experiment further with this new sense of self, they need experiential information that this sense of self is valued in the present relationship. The shame they are experiencing is reminding them that in the past this sense of self was not received well. Thus to go further they must investigate the present relationship to see if in fact this is still true.

Returning to George and Linda, it took George continued experiences of asking and noticing over several months to believe that in fact Linda liked to pursue him and that she liked his drooling over her pursuing him. This was the start of George learning that his passion was not only not dangerous in his relationship with Linda (as it had been growing up in his family), but in fact was deeply valued by Linda. This enabled him to review and to experiment with his passion as an instrument of connection rather than disconnection in other areas of their relationship. (For a fuller discussion of this case see Lee, in press.)
Concluding Remarks

As we have seen, Gestalt theory's analysis of contact processes, the heart of the Gestalt model, inherently includes an appreciation of the phenomenon of shame without naming it as such. Explicitly identifying shame's role in these processes gives us new information about the nature of the Gestalt constructs associated with contact processes. In turn we also learn more about the nature of shame. And, as Gestalt would predict, the whole is greater than the sum of the parts.

We find that shame is a relational or field variable that is continually ready to inform us of the perceived possibility that our desires and urges are not supported by others who are important to us. In this way the experience of shame facilitates our pulling back from risks that are possibly unsupported. When working optimally, together with support, shame (in forms such as embarrassment, shyness, and mild disappointment) facilitates us in making contact, finding areas of common interest in every instance of contact that we seek. This allows us continually to enter into the contact we need and accordingly to form new images of 'self' and 'other.' On the other hand, instances of severe or persistent abuse or neglect of parts of the self in the field lead to the formation of shame binds and to the loss of a voice for accessing and satisfying those needs and feelings.

Viewing contact processes in the light of this understanding of shame then changes our picture of the self process in the field. As the regulating dynamic of the field, shame is now seen to be operating in all contact processes, sometimes pathologically and sometimes in growth promoting interaction with support. A therapy of contact processes, such as Gestalt therapy, is necessarily incomplete or even distorted without a central focus on the dynamics of shame, particularly in the moment to moment experience of the therapeutic relationship. We exist as part of a relational field and this theoretical perspective supports us to understand that our healing can likewise only take place within the context of a relationship.

Notes
1. Impasse was a favourite word of Perls, which he used to mean the heightening of the inner conflict between an introject, the fixed gestalt from the past that inhibits the client from making contact in the present, and the combination of the strength of the client's underlying need and the potential for contact that the client sees, again in the present.

2. Appreciation of the phenomenology of support, and integration of it into the Gestalt model, have been particularly emphasized by researchers at the Gestalt Institute of Cleveland. For a recent discussion of their contribution, with regards to support, see Zinker, 1994.

References


