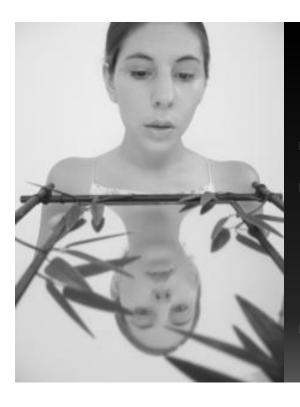


Part 1Shame and self-criticism

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Let's look in the mirror

- Shame affects us all.
- What aspects of yourself do you keep hidden? What past events are you afraid to talk about because of what people might think?
- Let's do a brief exercise

Shame and self-criticism are typically central to the struggles of our most chronic, interpersonally difficult, and stuck clients

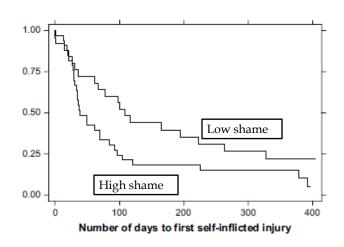
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Why aren't we better equipped to respond to shame?



Shame predicts time to first suicide attempt /self-injury (Brown et al., 2009)

77 women diagnosed with borderline personality disorder, enrolled in a clinical trial







Distinguishing guilt from shame

■ In general, theorists argue that people experience guilt when they have a negative evaluation of their behavior or actions, whereas shame involves a negative evaluation of the self (Barrett, 1995; Tangney, Stuewig, & Mashek, 2006).

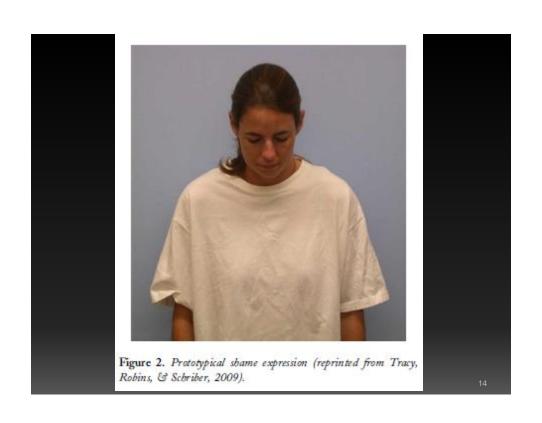
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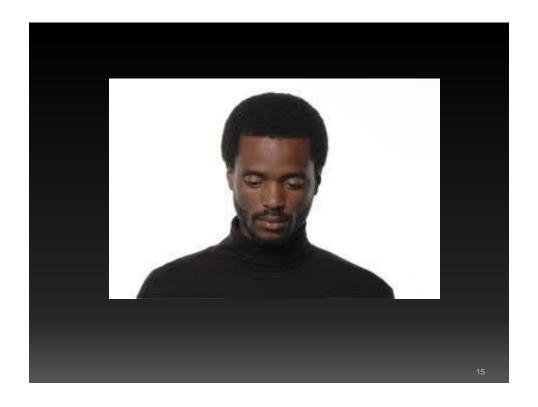
Focus of attention in shame vs guilt

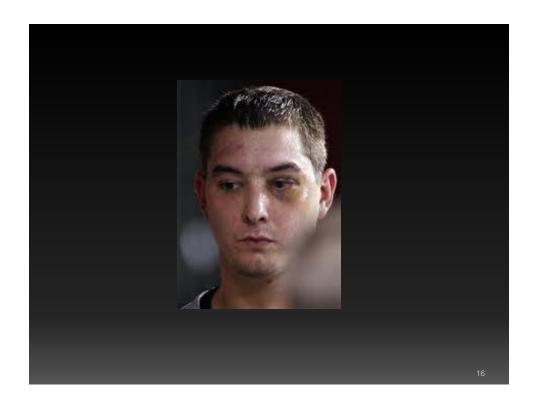
In shame, the focus of attention is on the "bad" self

In guilt, the focus of attention is on the "bad" behavior or damage to a relationship









Nonverbal indicators of shame

- Hunched shoulders
- Facial touching
- Blushing
- Gaze and head movements downward
- Decreased levels of expressive behaviors
- Avoidance of contact with others (e.g., eye contact)

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Action Tendencies in Shame

- Attempt to repair self-image
- Hide, withdraw, disappear

If repair of self-image does not occur, then we see:

- Obsessive rumination the bad qualities of the self and self-hatred/contempt
- Overfocus on bad self and lack of empathy for others
- Withdrawal and social isolation in order to hide the "bad" self
- Attempts to reduce the painful emotion itself (e.g., numbing, drug use)

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What direction should we take in dealing with shame?

Part 2 An Acceptance and Commitment Therapy approach to shame and self-criticism

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"Self compassion is the special sauce, the secret ingredient for mindfulness in all traditions, including science-based mindfulness...I don't know the technical explanation. All I can say is, all this stuff [acceptance, defusion, etc.] is easier to do if you are kind to yourself the way you would be to a friend, a child, a pet, etc. (your choice)."

--Randy Burgess, posting on the ACT for the Public Listsery

Self-compassion

- Fundamentally about a self-to-self relationship of caring, kindness, warmth, and caring
- Essentially, we are talking about responding to our own behavior in the same manner in which you would wish to respond to a beloved friend, relative, pet, etc.

Applying ACT to shame

Pick a client who is highly self-critical and answer the following questions:

- What kinds of behavior do this person engage in to avoid shame in session?
- How can you tell they are experiencing shame?
- What do they feel shame around? (do you know?)
- What do you think the function of their selfcriticism is?
- How does being organized around shame get in the way of their lives?

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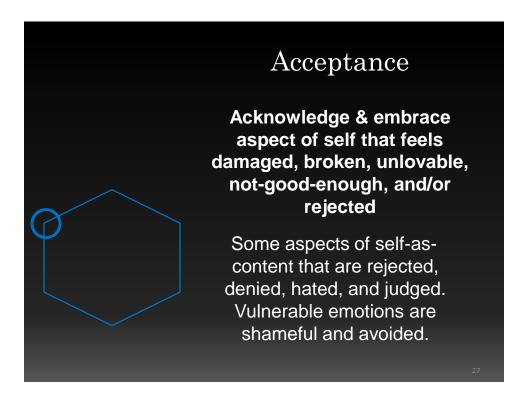
Understanding the experience of high self-critics

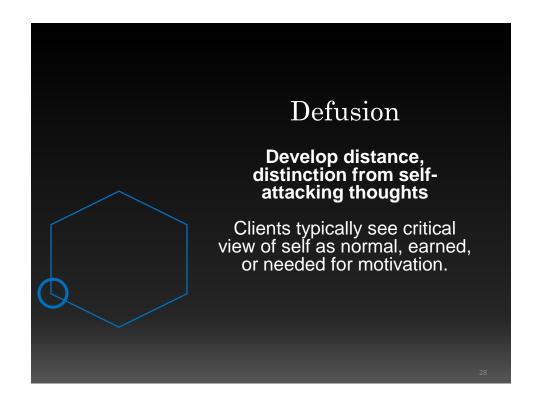
Compassion and warmth-focused imagery and exercises will often evoke fear, not affilliative emotions

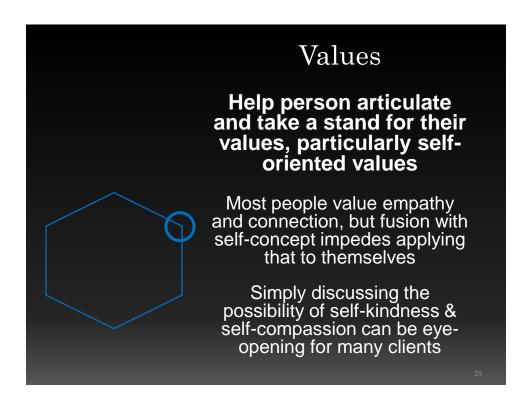
Compassion and kindness expressed by the therapist is often *not* soothing, but fearful and avoided

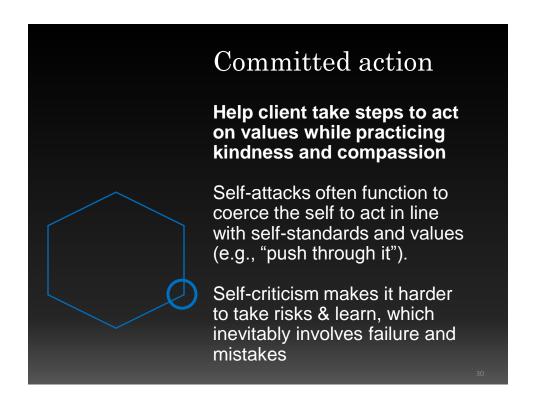
Intimacy with therapist is often not reinforcing, but fearful and avoided

More self-doubting clients tend to respond quicker to compassion-focused interventions than self-hating clients











Measures to consider

I always give:

- Forms of Self-Criticism and Reassuring Scale (FSCRS) last week version
- Internalized Shame Scale (ISS) last week version
- Self-Compassion Scale (SCS-short form)

Other useful measures:

- Functions of Self-Criticism/Attacking Scale
- Early Memories of Warmth Scale
- Rizvi's (2010) Shame Inventory
- Compass of Shame Scale

Other measures here:

http://www.compassionatemind.co.uk/resources/scales.htm



Develop connection a transcendent sense of self and flexibly take perspective on our stories

Shame/self-criticism is fundamentally about fusion with stories we tell about self and other

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Open up to and give voice to suppressed and avoided emotions/needs/values from the side of them that is being judged/rejected/suppressed or condemned by their internal critic. Examples might include:

- "What do you need from the critic?" [talking to experience chair] "Can you tell the critic what you need from him/her?"
- "What's it like inside to hear those criticisms? Those are very harsh words. How do they affect you?" [and explore felt reaction]
- "Can you tell your critic what it's like to have him/her say these thing to you?"
- "What are the costs of the things the critic says to you? What might you be able to do if you weren't so harshly judged or controlled by this critical side of you?"

- Construct a compassionate/kind/caring perspective toward self. Help client imagine a warm, caring, or compassionate perspective. Examples might include:
- "Imagine you were holding yourself, like you might hold a newborn baby, what did you wish for him/her?"
- "If your best friend was watching this interaction, what would they say? Would they be kind, gentle? Would they listen? Would they offer support, caring?" "How is that similar or different from the way you normally act? How would you want to be with yourself if you got to choose?"
- "If you were a therapist for a couple that acted this way, what would you think of them? What would you want for them? For each individual in the couple?"
- "If you were me and you heard what you are saying right now, what would you be feeling?" [often followed by therapist eventually disclosing their actual reactions]
- "Imagine your daughter were in that chair over there, feeling the way you are feeling now...how would you feel toward her?....what would you say to her?"

Change perspective change in time:

- "If you could time travel and visit yourself in 10 years in a similar situation, what would you want to see happen?"
- "Knowing that tomorrow, [client's name] is likely to be feeling pretty critical of himself, what could you do now that would make things better for him tomorrow? How could you take care of that guy?"
- "Tomorrow, remembering how you feel right now, what do you think you will be thinking?"
- "How long have you been struggling with this? How far back does it go?" [and then lead them through an exercise where they imagine interacting with a younger self struggling with the same problems]

- Contact perspective itself (observer self). Client physically moving to a different location in space to facilitate contacting a new perspective. While sitting in a third, distinct position, help them notice what's different from a shift in perspective. Examples might include:
- "When you look at this from another perspective, does it feel the same? Different? Do you see yourself the same way when you take this different perspective?"
- "Notice you are over here, and these two sides of yourself are over there. Notice that these are two experiences that you have, from time to time. Is it OK to be a person who has experiences?"
- "Notice that self-critical part of you over there. Are you solely that part? Or are you the one who notices it? Notice this other side of yourself. Are you solely that part? Or are you the one who notices it? Notice that these are both within you. You are like the container that holds both of them. You are not the same as them."

Role play

Enact self-critical perspective/repertoire

Elicit new perspective:

- Give voice to suppressed/judged perspective
- Construct a compassionate/kind/caring perspective
- Change perspective change in time
- Contact perspective itself (observer self)

These six processes can be organized into 3 core strategies:

- Stop feeding shame through defusing from selfcritical thinking that serves to maintain avoidance and sustain shame
- 2. Reduce dominance of shame in organizing behavior through exposure to shame in learning context
- Increase repertoires of self-related values (e.g., kindness and compassion)

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1. Stop feeding shame through defusing from self-critical thinking

Build awareness of self-criticism/self-attack (contact with the present moment and perspective taking)

Develop distance, distinction from self-attacking thoughts, observing self-critical thoughts as thoughts (defusion and perspective taking)

Anxiety is to fear as self-criticism is to shame

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2. Reduce dominance of shame in organizing behavior thru compassionate exposure

Use flexible perspective taking exercises to help clients compassionately enter shame-inducing situations while adding elements that allow learning (i.e., psychological flexibility) to occur

3. Increase repertoires involving prosocial values (e.g., kindness and compassion)

Develop and activate caretaking response on part of client

- Discuss and explore chosen values toward self
- Practice compassion-focused and loving-kindness meditations
- Writing compassionate letters to self
- Developing plans for how to respond to self-criticism and shame when taking committed action

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Modifying compassion-focused interventions for high self-critics

More self-doubting clients tend to respond quicker to compassion-focused interventions than self-hating clients

Compassion and warmth-focused imagery and exercises will often evoke fear, not affilliative emotions

Compassion and kindness expressed by the therapist is often *not* soothing, but fearful and avoided

Intimacy with therapy is often not reinforcing, but fearful and avoided

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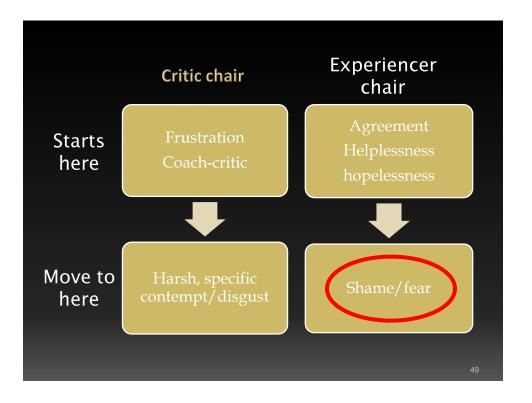
Part 3 Demonstration/practice

Building awareness and eliciting shame through chair work

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Chair work

- Identify the conflict you are starting with (criticizing part vs experiencing/feeling part)
- Enact harsh self-attack in the session so you can work with shame directly
- 3. Draw out and explore felt reaction to attack
- 4. Should be a dialogue between chairs, not a conversation with the therapist
- 5. Follow and reflect the client's experience closely, not your ideas of what should happen



Chair work guidelines

Once you have elicited the shame, that's where most of the work focuses...all the ACT processes could apply in relation to that perspective.

Processes to use during exposure to shame cues

Build awareness of the attack: Observing and detaching from self-attack (defusion, self as context)

Build ability to stay in contact with and elaborate the silenced/shamed/small/hurting self (acceptance, present moment, values)

Take perspective – add in a third perspective of an observer, or help the critic to build empathy/understanding (self as context)

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Role Play

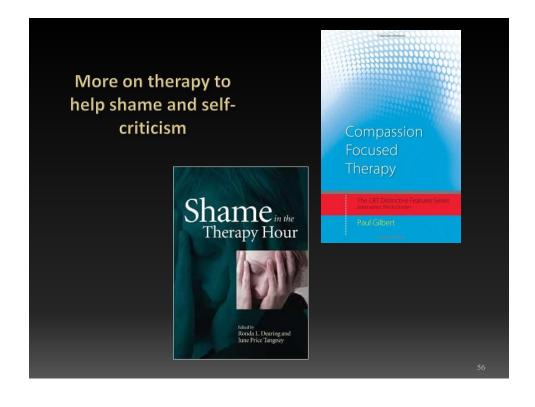
A thing worth doing....

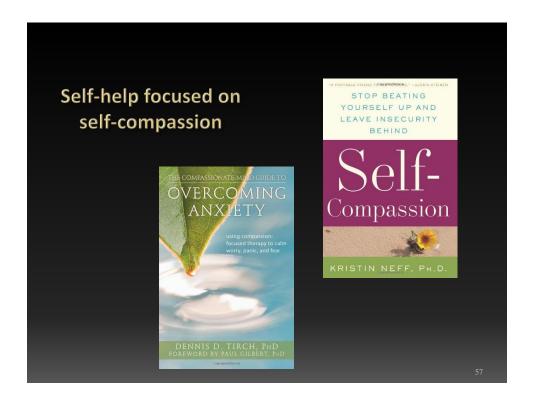
is worth doing poorly at first.

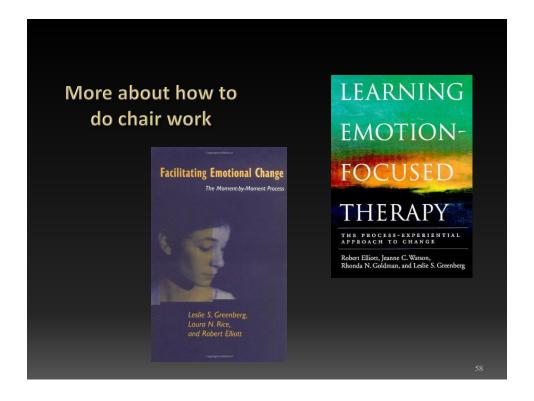
Exercise in pairs:

- 1. what will you take away from this workshop?
- 2. Committed action related to this workshop: make one commitment

Options for Further learning









I will hold myself gently.

I will hold myself in love.

Not love as something I earn.

Not love as a judgment, nor a conclusion.

Not a plan, a decision, or a hope.

Not love as a manipulation.

Nor wish.

Rather love as a choice.

As an assumption, a gift.

Love as an action, a foundation, an essence.

As an experienced reality.

I am here now.

And lovingly,

I care.

