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Original Citation

Leeming, Dawn and Boyle, Mary (2013) Managing shame: An interpersonal perspective. *British Journal of Social Psychology*, 52 (1). pp. 140-160. ISSN 0144-6665

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Managing shame: An interpersonal perspective

Dawn Leeming & Mary Boyle

Abstract

Experiences of shame are often difficult to manage, not least because of their interpersonal implications. However, limited research attention has been paid to the management and repair of shame, and in particular to the role that social factors may play in this. We aimed to explore these issues by obtaining 50 written first-person accounts of experiences of managing difficult episodes of shame from a cross-section of students and employees at a British university. These participant-generated narrative accounts were supplemented by written answers to open-ended questions. Via a contextual constructionist thematic analysis three overarching themes were identified: *The centrality of others' evaluations of the self*; *Repositioning the self vis-à-vis others* and *Being disabled by shame*. Discussion focuses on the first two of these themes which together suggest that because the participants saw their shame as produced in interaction with others, effective management and repair of shame depended not just on a changed view of the self but on a repositioning of the self in relation to others. This analysis therefore suggests that repair of shame may often need to be mutually negotiated and as such provides support for theoretical approaches to shame which emphasise the centrality of others' actual or perceived judgements of the self.

Managing Shame: An Interpersonal Perspective

Although the management and repair of feelings of shame are relevant to a range of social processes, shame has often been viewed within the psychological literature as a clinical issue, in part because of the link between chronic shame and psychological difficulties (e.g. Gilbert & Irons, 2005; Goss & Allan, 2009). Less attention has been paid to shame by social psychologists. Alongside this, the clinical research literature has often, though not always, constructed problematic and enduring shame as a matter of individual psychopathology, conceptualised as either shame-proneness or internalised shame, rather than a response to particular circumstances (Andrews, 1998; Leeming & Boyle, 2004).

In line with this intrapsychic focus, several theorists have conceptualised shame as primarily a matter of global negative self-evaluation (e.g. Lewis, 1993; Tangney, Stuewig & Mashek, 2007; Tracy & Robins, 2004). However, other theorists emphasise the role of others in shame, seeing such experiences as responses to social rejection or social threat (e.g. Elison, 2005; Crozier, 1998; Scheff, 2000), or argue that our self-evaluations and perceptions of others' evaluations of us are often closely intertwined (Gilbert, 2003). From this perspective experiences of shame are understood as a sense of an inferior position in relation to a critical, powerful other, whether this relates to an actual experience of being shamed by another person or to a more general sense of an internalised critical other (Gilbert, Pehl & Allan, 1994; Lewis, 1971). This fits with social constructionist perspectives which emphasise how becoming emotional enables the enactment of social roles, such as being shamed before another (e.g. Averill, 1985), and that these roles may vary according to cultural discourses which construct their meaning and significance in particular social contexts (Parkinson, Fischer & Manstead, 2005). Emotions might therefore be understood as fuzzy categories of experience

(Averill, 1998), with individuals applying similar emotion labels to experiences which may share some features but not all and which may have differing meanings and social implications. This view has not been central within literature on shame where, despite some theorists' conceptualisation of a 'family' of shame-related emotions (e.g. Nathanson, 1997; Scheff, 2003), there has been a research emphasis on defining shame and distinguishing shame from other experiences which might be labelled as guilt or embarrassment (e.g. Keltner & Buswell, 1996; Tangney, Miller, Flicker & Barlow, 1996). Although we refer to 'shame' in this paper, we do not take this to be a universal, unvarying phenomenon that can necessarily be distinguished easily from other emotional experiences. Instead we see this as a useful label which, as indicated by previous research (e.g. Brown, 2006; Lindsay-Hartz, de Rivera & Mascolo, 1995), is attached within English-speaking cultures to experiences which seem connected by a painful sense of the self as judged to be of less worth in some way.

Alongside the clinical literature there is now a body of theoretical work and a growing research literature suggesting that a sense of a shamed and devalued self can pose challenges for social processes. Although some shame-related experiences could be seen as ultimately serving various social ends - alerting us to threats to our social status and relationships (Elison, 2005; Gilbert, 1997; Scheff, 2000), promoting the maintenance of personal and group values (Braithwaite, 1989; Lindsay-Hartz, de-Rivera & Mascolo, 1995; Scheff, 1988) or moderating distance from others through greater self awareness (Probyn, 2004) - feeling ashamed is likely to make it difficult to function socially. Some of the limited research focusing on actual experiences of shame has suggested that when ashamed we can feel paralysed, self-conscious or confused (Brown, 2006; Gilbert et al., 1994; Lewis, 1971; Lindsay-Hartz, 1984). As such, experiences related to shame may lead to social withdrawal, difficult interactions with

others (Brown, 2006; Scheff, 2003) and greater difficulty resisting abusive or oppressive shaming by others (Bartky, 1990; Gilbert & Procter, 2006; Seu, 2006).

Indeed, a collective sense of shame can be one way in which groups of individuals are silenced and become further marginalised (Munt, 2008).

Paradoxically, shame may also lead to destructive and violent behaviour (Scheff, 1995a), as humiliated fury enables us to bypass, deny or resist a painful state of shameful disablement (e.g. Lewis, 1971; Nathanson, 1992, 1997). Research within sociology and criminology has provided empirical support for links between shame and bullying others (Ahmed & Braithwaite, 2004) and for the way in which perpetuating cycles of conflict might arise from reciprocal unacknowledged shaming, for example within family groups (Retzinger, 1991; Scheff, 1995b). Although the focus of the research reported here is on the immediate interpersonal context of shame, it is also worth noting that a collective sense of shame within a community has been linked to so-called 'honour' killings (Cohen, Vandello & Rantilla, 1998) and to cycles of conflict between nations (Scheff, 1994; Wyatt-Brown, 2004). Given the significance of shame to social relations and both the personal and interpersonal challenges that can arise from experiences of shame, it would seem useful to develop understanding of how such experiences might best be managed, both individually and interpersonally, and a sense of shame repaired. However, as others have also noted (e.g. Gilbert, 1997; Van Vliet, 2008), there has been surprisingly little research on the repair and management of shame.

Although there has been considerable discussion of how therapists might be able to help their clients overcome feelings of shame (e.g. Gilbert & Irons, 2005; Harper & Hoopes, 1990; Lee, Scragg & Turner, 2001; Nathanson, 1992), this has not been the focus of much research (though see Deblinger, Mannarino, Cohen & Steer, 2006; Rizvi

& Linehan, 2005; Gilbert & Procter, 2006). In particular there has been little empirical evaluation of therapeutic work with shame which is directed at interpersonal and systemic change. As shame may be as much about one's position in relation to others as a private emotional experience (Gilbert et al., 1994) relations with others may be crucial for managing and repairing shame. This assumption has been underscored by two recent interview-based qualitative investigations of 'natural' recovery from prior experiences of shame which have opened up research into this area (Brown, 2006; Van Vliet, 2008; 2009). These studies have suggested that repairing shame may be more complex and context dependent than some of the therapeutic approaches advocating intrapsychic change suggest. In particular, the researchers noted the importance of connecting or reconnecting with others in overcoming shame and the role of others in helping to normalise and contextualise shaming events, for example by recognising the societal construction of shared 'failures', so that reappraisal was possible. The importance of connection with others in repairing shame by subverting a shared supposedly shameful identity and asserting a collective sense of pride has also been noted by cultural theorists (e.g. Munt, 2008), for example in relation to Gay Pride.

Brown (2006) and Van Vliet's (2008, 2009) studies of recovery from prior experiences of shame focused on longer-term repair and were less concerned with the ways in which their participants managed shaming experiences and interactions at the time of their initial occurrence. Nathanson (1992; 1997), amongst others, has suggested that strategies for coping with immediate shaming situations may not necessarily be the same strategies that lead to the longer-term repair of shame. He proposes four defensive orientations to coping with shame: attack other, attack self, withdrawal from others, and avoidance of feelings of shame, all of which may offer some means of resolving an immediate situation but be problematic as long-term repair strategies. A few studies

have addressed the immediate management of shame. They offer some support to Nathanson's model, suggesting that both self and other blame are common responses to a range of potentially shaming situations (e.g. Ahmed & Braithwaite, 2004; Gilbert & Miles, 2000; Elison, Pulos & Lennon, 2006). However, research in this area is under-developed and has generally relied on responses to hypothetical scenarios to generate information about individual coping styles or dispositions. In what, to our knowledge, is the only study examining aspects of immediate coping in real-life shame experiences, Silfver (2007) found that individuals do sometimes deal with shame by ways other than Nathanson's four defensive orientations. She found that some participants managed their shame with reparative and pro-social responses. This is interesting data given that there are conflicting views within the literature about the possibility of reparative and pro-social responses to experiences of shame (compare Harris, Walgrave & Braithwaite, 2004; Tangney et al., 2007) and the likelihood that such responses would be more productive in some situations than others.

To conclude, although some theoretical accounts of shame focus on social processes, research to date seems to have taken limited account of these, focusing on measurement of the individual rather than on interpersonal processes and the social significance of shame. Therefore, we have as yet only limited understanding of the ways in which individuals negotiate shaming or potentially shaming encounters with others in various contexts and the role that others might play in recovery from shame.

The aim of the present study was to extend the emerging literature on managing and repairing shame by exploring first-person accounts of managing difficult episodes of shame. We aimed to explore the participants' perspectives on both their immediate management of a situation they found shameful and also on their subsequent repair (or non-repair) of feelings of shame. While exploring their understanding of more general

factors which impacted on the repair of shame, we paid particular attention to the meaning and relevance of relations with others for this. By recruiting participants outside of a context where shame might be expected to be problematic (e.g. therapeutic setting), we also aimed to obtain accounts which varied with regard to the extent to which the feelings of shame had been resolved, thereby enabling us to investigate the sense that participants made of factors which facilitated or obstructed the processes of managing and repairing shame across a range of contexts.

Method

Qualitative data were collected from 50 students and staff at a British university in the form of written first-person narratives of experiences of shame.

Written Narratives

A methodological challenge was posed by the need to collect in-depth but sensitive information where participants may wish to remain anonymous. Previous research had suggested that although some people will disclose painful episodes of shame, they generally find it more difficult to disclose shame than other emotions and some participants may not be keen to do so (Macdonald, 1998; Lindsay-Hartz, 1984). Therefore we chose to collect anonymised written narratives. Using written data rather than interview transcripts also made it possible to collect data from a larger number of participants about a wider variety of experiences. This was important given the paucity of research in this area and the assumption that repair of shame would vary depending on the context and related meanings. However, as written accounts do not enable the researcher to probe the participants' experiences (Gough & Madill, 2007), we added supplementary questions to the request for an open-ended narrative, in order to prompt

further disclosure related to the aims of the research. This was important given that shame is often associated with hiding, avoidance and limited disclosure (Tangney, 1995; Macdonald & Morley, 2001). These questions were broad enough to be applicable to a range of shaming situations.

The questionnaire began by asking for demographic data and then asked for a written narrative with the following prompt:

The remainder of the questionnaire is about experiences of shame which have taken place in front of one or more other people. Please describe the most recent situation you can clearly recall where you felt particularly shamed in front of other people, whether or not you think it was sensible to feel like this.

When telling the story of what happened, please provide as much detail as you can about the specific moment (if there was one) when you felt most shamed and the events before, during and after this.

The request to focus on a situation with others present enabled a clear focus on the interpersonal management of shaming episodes. This was added following a pilot study with 19 participants that had included a more general request for an account of an experience of shame. It was notable that relations with others featured in all of the responses to the pilot study, though the exact role of others was not always made sufficiently clear to address the aims of the research. Therefore we decided to focus only on situations with others present and include more questions on interactions with others, in order to explore the interpersonal negotiation of shaming episodes in more depth.

The 38 supplementary questions on the final questionnaire asked about events prior to and immediately following the situation described, those present and their relationship with the participant, what the participant and others did or said, attempts to

reduce feelings of shame and the value of these, other emotions and physical sensations, whether and how shame was disclosed to others, helpful and unhelpful responses from others immediately and in the longer term, events and feelings following the episode, factors affecting any change in feelings of shame, views about what might have made things better or worse and what might lead to repair of shame, and also the meaning of the experience for the participant. Although this second part of the data collection was necessarily more researcher-structured than is typical for qualitative investigations, participants were encouraged to recount their experiences as freely as possible by use of open-ended questions and the provision of two blank pages for the initial unstructured participant-generated narrative accountsⁱ.

Participants and procedure

Following appropriate ethical approval, 50 participants were recruited from a British university by means of an e-mail request for participation in a study of experiences of shame to approximately 1200 academic, administrative and support staff and postgraduates and a similar appeal to 350 undergraduate students at the end of introductory psychology lectures. Questionnaires were distributed either by email or at the end of a lecture and were completed and returned anonymously by 96 participants. However, 25 of these questionnaires were removed from the current sample either because they seemed to be written in a jocular manner about an inconsequential situation or because they did not provide an account of a specific episode of shame with others present. Given the intention to conduct as in-depth an analysis as possible, 50 of the remaining 71 questionnaires, representing as broad a range of demographic groups as possible, were then chosen for detailed analysisⁱⁱ.

In the final sample there were 29 women and 21 men with 37 of the participants identifying themselves as middle class and 13 as working class. Thirty-one were undergraduates between 18 and 22 years, 11 were mature students (undergraduate or postgraduate) and 8 were university employees. Four were over 40 years of age, with the oldest being in the 50-59 age-range. The sample was predominantly white, with nine describing their ethnic origin as African, Afro-Caribbean, Asian or mixed race. None of the students was classed as overseas. Twenty-one indicated a religious affiliation including Islam, Hinduism and Judaism, though with Christianity cited most frequently. The sample therefore reflected a variety of understandings of shame relating to various cultural, religious, age-related and class based perspectives. However, the largest group of participants was white, middle class, young adults.

Analytic Approach

We were interested in both what the accounts revealed of prior lived experience of repairing and managing shame and also what they said about the construction of possibilities for managing and resisting shame in relation to wider cultural discourses. These twin interests implied differing epistemological assumptions about the data (Willig, 2008) and, although it is possible to combine research aims arising from such differing epistemologies (see Frost et al., 2010 for discussion), it seemed that, with the present data, greater coherence, clarity and depth of analysis could be achieved by conducting two separate analyses. A discursive analysis of the data is reported elsewhere (Leeming, 2007). The present analysis is broadly in line with the contextual constructionist epistemology articulated by Madhill, Jordan and Shirley (2000). This treats first person accounts as to some extent representative of current and prior lived

experience, rather than treating them as a means of managing stake and accountability (e.g. Potter & Wetherell, 1987), whilst acknowledging that knowledge is partial and contingent on interpretative processes. By focusing on this one epistemological position we hoped to engage as fully as possible with the perspectives of our participants and draw tentative conclusions about their prior and ongoing experiences.

To this end we carried out an inductive thematic analysis as this seemed suited to our aim of theorising aspects of experience across 50 individuals rather than conducting in-depth phenomenological analysis of a small number of individual experiences. As Braun and Clarke (2006) note, there are numerous precedents for using thematic analysis within a contextual constructionist framework. The analysis was carried out following procedures similar to those described by Braun and Clarke and by Hayes (2000), but was also informed by methodologies that incorporate analysis of themes as a central tool (e.g. Henwood & Pidgeon, 2006; Smith & Osborn, 2003). Following several close readings of the questionnaires, all text relevant to the aims of the research was coded using Nvivo software, with codes being developed and revised through engagement with the data. As many participants wrote quite succinctly, codes were applied to short phrases as well as to longer paragraphs. The interpretative aspect of the analysis was facilitated by use of focused coding, memo writing and constant comparison (Charmaz, 2008; Henwood & Pidgeon, 2006), so that themes and further overarching themes were developed, able to capture theoretically significant aspects of the data. This involved repeated reviewing of themes as we moved back and forth between coded data extracts, the broader data set and the developing themes. Although codes were developed inductively, rather than predetermined, two queries were used to guide the analysis:

- a) from their own perspective, how did participants manage / cope with / negotiate / repair experiences of shame and what did this process mean to them?
- b) what role did they see other people as having in their management and repair of shame?

In addressing these concerns we analysed the questionnaires holistically, rather than analysing each of the 38 questions in turn, so that development of themes was not guided by the structure of the questionnaire.

Data and results of Analyses

Nature of the data obtained

The completed questionnaires described events that had taken place between several hours and 25 years previously, with 36 of the participants describing an event within the past 2 years. The scenarios included causing distress to others (e.g. being aggressive, lying or stealing), poor performance (e.g. in sports or exams), presenting an unacceptable image (e.g. being seen as prejudiced or overweight), rejection or humiliation (e.g. being mocked, attacked or avoided), exposure of a private aspect of the self (e.g. sexual revelations, public emotion) and connection to others who were thought to have behaved shamefully (e.g. family members becoming drunk). The initial narratives ranged between 23 and 369 words (mean length = 142 words) and the combined number of words provided in response to both the narrative and additional questions varied between 160 and 802 words (mean total participant words = 354). Some questions were left blank though most participants answered most questions.

Thematic analysis

Three primary overarching themes were identified as illuminating some of the processes involved in managing and repairing shame and some of the barriers to this: *The centrality of others' evaluations of the self*; *Repositioning the self vis-à-vis others* and *Being disabled by shame*. The themes appeared strongly linked, and together suggested that because the participants' shame was produced in interaction with others, effective management and repair of shame depended not just on a changed view of the self but on a repositioning of the self in the social world. However, this was difficult to achieve. Not only did participants have to rely on the co-operation of others, many also felt to some extent disabled by their shame – feeling physically shaken, damaged, inferior and in a relatively powerless position. As issues closely related to the third theme (*Being disabled by shame*) have been explored several times in the research literature to date (e.g. Brown, 2006; Gilbert et al., 1994; Lindsay-Hartz, 1984), yet social processes relating to the first two themes have not been investigated so thoroughly, this discussion will focus primarily on the first two themes and their implications for repairing shame.

Theme One: The Centrality of Others' Evaluations of the Self

This first theme captures the way in which participants did not arrive at a sense of themselves as shameful autonomously but derived this to a large extent from how they thought they appeared to others. Although this theme was therefore not primarily about the repair and management of shame, it was developed within the analysis because it helps to explain why relations with others became crucial for repairing shame. All but two of the 50 participants explicitly related their shame to others' negative or potentially negative views of them and the remaining two were sufficiently

concerned with others' views to say they had tried to find out what these were. Although we had asked the participants to write about an experience of shame that took place 'in front of' other people, it was still possible for the participants to write about their own negative evaluation of themselves. While many did so, the extent to which others' evaluations dominated the accounts, and often seemed crucial to the experience of shame, was noticeable. Some of the literature has conceptualised shame primarily as a matter of one's own negative evaluation of the global self. However, the data for the vast majority of the participants instead supported Crozier's (1998) suggestion that many experiences of shame involve a shift to an outsider perspective on the self so that the individual views him or herself as they think others would, sometimes internalising this perspective as their own. This outsider perspective was particularly evident where shame was described as becoming more intense when the participant knew that others knew of their shameful behaviour. For example, one of the younger undergraduatesⁱⁱⁱ gave an account of her friend discovering that she, the participant, had lied about the reasons for not attending the friend's baby's christening as godparent, having been to a concert instead. She concluded the account by suggesting that her shame intensified in the knowledge that her parents were aware of her shameful behaviour:

Narr:^{iv} My mum later told me that my friend sounded very upset and angry that I'd let her down^v

I felt most ashamed when I knew that my parents knew what I'd done to my friend

Other participants indicated that their sense of shame came from being observed, including one of the younger undergraduate women:

Why did you judge this aspect to be shameful?

The family was asked to leave in front of people that stood to watch [following cousin's angry outburst in hotel]^{vi}

In several of the participants' accounts others' judgements of their behaviour or selves took precedence over the participants' own judgements. This was more apparent for participants whose shame was about poor performance, image, reputation or being mocked and rejected. Accounts of shame relating to perceived moral failings were more likely to note the participant's own disapproval of his or herself alongside concern about others' disapproval. However, in four of the accounts of perceived moral failings participants appeared also to be so strongly orientated to others' judgements of them that they described feeling ashamed in front of others even though they felt they had done nothing wrong. This was in the context of relationships they appeared to value, and three of them felt shame in front of someone who was also perceived to be in a position of moral authority (teacher or parent). For example one Muslim participant, who had felt shame as a teenager four years previously after being caught lying to her parents about her whereabouts when she went to a forbidden party, indicated that she saw her behaviour as quite reasonable at the time, but then added:

Narr: I personally did not feel shame until my parents told me how ashamed they were of me, and I was going to go to hell. My mum still brings it up and when she mentions it I feel ashamed and try to change the subject.

An older participant similarly described feeling ashamed whilst thinking that her behaviour had in fact been acceptable and well-intentioned, when her friend's partner

interpreted her reported comment about him as malicious and became angry towards her:

Narr: I saw this [newspaper] article [about the friend's terminally ill partner giving up smoking] & happened to say to her [friend] jokingly & genuinely in a fond manner "the old hypocrite!"... later that evening I had a phone call from him and he went absolutely berserk at me calling me all sorts of names, ... I felt totally ashamed of myself although I knew how I had felt when I said these words.

She felt misjudged as her intentions had been misunderstood:

What was distressing about the situation, if anything?

Partly that I had upset him and partly that my friend did not support me in explaining that I had meant no malice.

Her concern was with what her behaviour was taken to imply about her as a person - that she was malicious. Drawing on Sabini and Silver (1997), Crozier (1998) suggests that the key focus of shame is not on behaviour but on what the behaviour is taken to reveal to others about the self. Therefore shame can become dependent on others' potential and actual judgements rather than our own. As such, concluding that others' negative judgements are unjustified does not necessarily dispel both a sense of shame and the desire to distance oneself from an unwanted identity.

Although this first theme is not explicitly about managing and repairing shame, the implications for overcoming shame are clear. Shame for almost all the participants meant a concern with being judged negatively, and this seemed particularly pertinent in the context of valued relationships. Shame was then a felt shift in social position vis-à-vis others such that, as suggested by Gilbert et al. (1994), the participant's relationship to the critical other was an integral part of the experience. As such, a key aspect of the

repair of shame might be expected to be a corrective shift in this position, or a perception that one has repositioned oneself in some way and is no longer judged so negatively. In fact, when asked “*What would make the feeling go away completely?*”, although many participants were doubtful that this was possible, some, such as the following young woman undergraduate, answered as if the crucial change would be an absence of others’ judgement:

If my friend forgot about it [caught reading friend’s private letter]

Theme Two: Repositioning the Self in the Social world

Although many participants expressed pessimism about being able to repair their shame completely, 37 wrote about their feelings of shame having become less pronounced at least to some extent, or about factors that enabled them to cope a little better. For all the participants who indicated that they were able to achieve some improvement in their feeling of shame, this involved, to some extent, repositioning themselves in relation to others, particularly with regard to those who were critical of them. As discussed below, this was either by (i) changing their own understanding of the situation to arrive at a different conclusion regarding their position vis-à-vis others or (ii) enacting a particular role vis-à-vis others, either at the time of the shaming incident or subsequently.

Subtheme (i): Reinterpreting the situation to arrive at a different understanding of one’s position vis-à-vis others. Several of the participants achieved this repositioning by redefining their position within the relationship in which they had been shamed. For example, several of the participants readjusted their understanding of a shaming situation so that they now played a different role, by adopting an alternative

framework of moral or other values. Instead of seeing themselves as the wrongdoer they were now the victim of another's unjustified critical attack. One of the younger undergraduates described a lessening of her feeling of shame about having shouted abuse at a teacher, when she shifted from analysing the situation through the lens of a moral code about respect for teachers to using a different one which was concerned with the problem of abusive behaviour by authority figures:

Narr: I said something to a teacher who had been particularly abusive ...towards me over the past year. I said something that I knew would upset her.... I was taken to the reception where a number of teachers had 'a go' at me and even though I do not regret what I did at that moment in time I felt ashamed. None of the teachers ever believed me and I felt pretty bad. In retrospect I shouldn't have felt ashamed because of what the teacher had been like towards me but normally I would never had said anything like that to a teacher so I felt shame.

How do you generally feel when you think about the incident now?

I feel I did the right thing although I don't think I should have felt shame.

She now no longer allowed the teachers to occupy the position of judge in relation to her and no longer felt the need to submit to their shaming criticism. An alternative way in which some participants resisted shame by redefining relationships was by devaluing their relationship with someone to whom they had caused distress. For example, the younger participant discussed above who lied about her reasons for missing a christening explained in the questionnaire that the incident had led to the end of the friendship. She wrote in response to the question "*Why do you think the feeling of shame has / hasn't changed?*" that the feeling of shame had lessened because "I don't miss the friendship as much and don't think about it as much".

Other ways in which the participants reinterpreted their position in relation to others included repositioning themselves against a perceived societal norm by recontextualising their behaviour as in fact similar to that of many others and not, after all, deviant. For example, a mature student who had initially felt ashamed after making a negative comment about Muslims, “without thinking”, to Muslim friends explained in her narrative that “Having grown up in India – in almost an all-Hindu environment this comment would have been ignored”.

An alternative way in which some of the participants repositioned themselves was by distancing their current self from the self who had behaved shamefully. As such they no longer occupied the shameful role or position that they had played during the episode recounted and their previous behaviour no longer had any impact on their positioning in relation to others. To achieve this several participants interpreted their old shameful self as belonging to an earlier period of their life. For example, although one participant had experienced an episode many years ago when he had been caught in the bath with his wife’s friend and had found this deeply shaming (particularly when his mother heard about it), he wrote:

How do you generally feel when you think about the incident now?

I am amused by it. Sort of an anecdote. I am a different person as a result of the whole experience (divorce changes people).

This participant (and others) seemed able to reflect on the shame of an earlier self, in much the same way that he might have recounted a story about another person’s shame. He was no longer relating to others as if he was that previous shameful self, and therefore no longer needed to submit to a shamed position in relation to others’ judgements about how the previous self had behaved.

Some form of reappraisal has often been considered an important part of managing and repairing shame (e.g. Lee, Scragg & Turner, 2001; Tangney & Dearing, 2002; Van Vliet, 2009). What this sub-theme from the present data suggests is that this may often be a reappraisal, not just of personal qualities, but of one's position in the social world. In line with Gilbert's (Gilbert et al., 1994; Gilbert, 2003; 1997) view of shame and symbolic interactionist perspectives on emotion (e.g. Denzin, 1985), it seemed that the participants needed to adjust their perception not only of how they existed *for* others but how they existed *in relation to* others. However, as the next sub-theme indicates, this was usually determined not by the participant autonomously but in negotiation with others.

Sub-theme (ii): Enacting a different position vis-à-vis others. All but one of the 37 participants who had experienced some lessening of their feelings of shame wrote about the role that their interactions with other people and their management of these had played in overcoming their shame. For a few, this was a case of hiding or fleeing from others. For example, one participant in his thirties who wrote an account of slapping his ex-wife across the face some years ago during an argument in front of passers-by finished the narrative by stating:

I felt instantly shamed by both the reactions of those around me, but mostly by the way in which I had behaved. It was deeply humiliating and I literally ran away.

However, many wrote about remaining within the situation and attempting to bring about a change in their position relative to others (even though they might also have felt a desire to hide).

Five of the participants attempted to manage the initial shaming episode by outwardly ignoring the potential for shame and continuing to relate to others as if they

had nothing to be ashamed of. For example, a woman in her twenties wrote that she felt ashamed when she became tearful telling a work colleague that her relationship had ended, adding that “failure of relationship can feel like personal failure” and that “exposing emotions in public” was shameful. However, she recalled using humour to restore more comfortable interaction:

What did you do or say when you began to feel shamed?

Smiled at my colleague. Then made a joke.

Did you try to do anything to avoid feeling shamed or reduce the strength of any feelings of shame?

Joke-making & smiling (as before). Changed the subject quickly.

When asked “*How successful was this?*”, she answered “quite successful”. As Goffman has argued (1959, 1967), others need to support the performance of an absence of shame in order for it to achieve any effects and this was not the case for other participants. For example, one of the younger undergraduates wrote about her distress when acquaintances covertly mocked her dancing and described the difficulty of trying to deal with this by pretending it was not happening:

(Narr) ... my dance rhythm was all wrong. I didn't know this until I saw the expression on their faces. I felt like running away and never coming back...I felt hot, I couldn't move, even walking was a problem. So I just stood in a corner by myself and engaged in some 'deep' thoughts

What did you do or say when you began to feel shamed?

I said that I didn't feel like dancing anymore

However, this attempt to ignore what she saw as shameful was not supported by the others, about whom she wrote, “they all looked at me, with this mocking smile which actually showed in their eyes that they were laughing inside.” When asked how

successful this strategy had been in lessening her feelings of shame, she wrote “not at all”.

Rather than acting as if the shaming incident had not happened, more participants managed their shame by either publicly challenging the validity of others’ shaming interpretations of a situation or alternatively by later disclosing their feeling of shame to someone who offered some form of acceptance and validation. This was more likely where the source of shame was public and difficult to deny. Challenges to others’ shaming appraisals were based on either reinterpretation of the situation by citing mitigating circumstances, denial of the reality of the situation or reattribution of blame elsewhere. However, many of these public reappraisals were seen by the participants as of limited veracity and as such not particularly helpful. For example, one of the younger undergraduates wrote:

Narr: My mum caught me with it [money the participant had stolen from her brother] yet I insisted on lying on to her and felt very bad that I didn’t tell the truth. When my brother found out and asked if I had taken the money I still lied, knowing that it was wrong. I felt very ashamed that I was such a liar.

Similarly, the participant, mentioned above, who was caught reading a friend’s private letter wrote:

Did you try to do anything to avoid feeling shamed or reduce the strength of any feelings of shame?

Yes passed...the blame onto my friend

How successful was this?

Made me feel worse

As argued previously (e.g. Scheff, 1995a, 1995b; Stuewig et al., 2010; Tangney & Dearing, 2002) externalisation of blame can be a problematic response to shame

because of the link with aggressive behaviour and the negative impact on relationships. However, it also seems important to consider the context in which this takes place and whether or not the reappraisal necessary to resist blame is internalised as a *valid* reappraisal. In the two extracts above it seems that it was not and, as such, publicly resisting criticism did not appear to contribute to the repair of shame. However, as the previous subtheme suggested, a shift in attribution of blame *can* be experienced as highly useful where this is then internalised as a valid means of resisting what comes to be seen as inappropriate blame, for example where others are perceived as abusing their authority to pass shaming judgement.

Although repositioning oneself by public resistance to shaming criticism seemed of value sometimes, many participants found it more useful for long-term repair to disclose feelings of shame in a situation where this might lead to acceptance and validation of an alternative and non-shaming view of their behaviour. For example, the participant who had made a derogatory comment about a teacher whom she felt had been abusive to her wrote:

Afterwards:

I was escorted out of the school and couldn't see my friends which was hard as they always supported me, but when I had spoken to them later I felt I had done the right thing.

For many participants, support from others was crucial for solidifying and internalising a less shaming interpretation of their behaviour. Support could also include validation of the participant's more general character, as described by the participant discussed above who had angered her friend's partner by referring to him as "the old hypocrite!":

Did you try to do anything to avoid feeling shamed or reduce the strength of any feelings of shame?

I explained what had happened to my husband

How successful was this?

Very – he knew I would not intentionally have hurt anyone.

As Brown (2006) and Van Vliet (2008) found in their interview studies, others' validation seemed crucial for repairing shame, not only by contextualising the incident and supporting alternative non-shaming formulations, but also by reconnecting the participants with others. For many of the participants whose shame was about the negative effect of their behaviour on others, disclosure, reconnection and validation often took the form of apology and forgiveness. Reparation in the form of apology has been associated with guilt rather than shame (e.g. Tangney et al., 2007; Lewis 1971), the argument being that with guilt others are seen as relatively powerless victims rather than shaming critics. However, many of the accounts seemed to contain appraisals of others as both victims *and* critics. As Gilbert (1998) suggests, this casts doubt on the value of differentiating many real life emotional episodes as either guilt or shame. Certainly many of the present participants seemed to feel that their sense of shame had been repaired through apology to and forgiveness from those who were in some way victims of their 'shameful' behaviour, or represented victims, but were also critics. For example, one mature student had upset her elderly, recently disabled mother by arguing with her father at a family gathering and was criticised for this by her sister:

Narr: My mum ... cried out & said to stop it... said how awful she felt. My sister backed her up & said "poor mum" she's been through a lot & she can't join in. I felt hot & cold all at the same time & so ashamed that I had been so thoughtless in following my own agenda & not thinking of how she felt.

Afterwards:

I cried & cried [*sic*]. My sister was cross with me & said how I shouldn't have gone on & on. I blamed myself - I felt stupid & selfish & very sorry for my Mum...Eventually I felt forgiven by my family.

What did you do or say when you began to feel shamed?

Sorry & explained how wrong I was

She was aware of herself as devalued before critical others but also as someone who had wronged another. Therefore she apologised and was "eventually forgiven", which seems in some way to have resolved the situation. Similarly, another of the younger undergraduates whose shame was about having been caught stealing his mother's credit card and purse felt better about the situation only after he was forgiven:

Did you try to do anything to avoid feeling shamed or reduce the strength of any feelings of shame?

Yes for weeks I did as much as I could do in order to try to help my mother and make myself feel better.

How successful was this?

It only worked after my mother excepted [*sic*] my apology.

For both these participants, and for others, forgiveness as a route out of shame was a matter of repairing the relationship and reconnecting with the other person, rather than reappraising the shameful behaviour or self. The participant who upset her elderly mother wrote:

Why do you think the feeling of shame has / hasn't changed?

Has - time & very good relationship with my family

The route to repair of shame appeared for some of these participants to be, paradoxically, an *expression* of shame through apology. This enabled the person to

distance his or herself from the shameful behaviour and position him or herself alongside potential critics as someone who found the behaviour in question unacceptable, thus enabling repair of the relationship.

Therefore, from the perspective of the participants, disclosing shame offered a way of gaining acceptance from others so that the participant and the other person were now positioned in relation to each other as they had been previously. However this worked in different ways. Some participants were able to engage others in reinforcing a reappraisal of themselves as not at fault. Others acknowledged and communicated their sense of shame, aligning themselves with their potential critics, in order to demonstrate that they were worthy of forgiveness. What appeared to be the most important factor in repairing shame was acceptance and validation from others. Regardless of being rejected in one situation, the participant felt accepted as a valued group member elsewhere and it was often this that made the difference between managing and repairing their shame. From reviewing the entire data set it appeared that all of the participants who described some lessening of their shame in the period immediately following the shaming incident had experienced some sort of forgiveness or validation of their behaviour, intentions or self-worth from someone. In the longer term, all but two of the 14 participants who indicated that they now felt no significant shame about the incident explicitly referred to support or positive feedback from others. Although such validation was not always sufficient for repair of shame it certainly seemed extremely important for almost all experiences of repair.

Conclusions

Having approached the research aiming in part to explore the meaning and relevance of interpersonal factors in the management and repair of shame, we were still

struck by just how important they were for our participants. The present data suggest that the process of managing and repairing shame was as much a social one as an intrapsychic one. Rather than being a matter of repairing self-image or achieving *self*-acceptance, the meaning of overcoming shame for the participants seemed to be of repairing their sense of their position with regard to others and managing an unwanted identity (Ferguson, Eyre & Ashbaker, 2000) which needed to be mutually renegotiated. Therefore, although self-evaluation and re-appraisal were important parts of repair, this was re-evaluation of an inter-related, rather than autonomous self and, in line with symbolic interactionist accounts of emotional experience (e.g. Denzin, 1985; 1990), the meanings that the participants ascribed to their experiences arose in interaction with others. As such, participants were sometimes able to lessen their shame by minimising the importance of the relationship within which shame had arisen or by accepting forgiveness from others, even if they continued to believe that the shameful situation did actually reflect badly on them. Conversely, some of the participants stated that they did not blame themselves for a shaming incident but found it difficult to resist the shaming appraisals of others. However, the suggestion that shame may often be managed and repaired through social interaction should not be taken to suggest that this is easily achieved. Many of the participants felt that their shame had initially left them disabled and powerless as social actors and were pessimistic about being able to overcome the feeling of shame, sometimes because it seemed to them that shame was deserved. In many cases, the possibility of repair seemed to be in the hands of others who could choose whether to support, accept and forgive the participant or shame him or her further.

The analyses presented above suggest that the significance of relations with others may sometimes have been underplayed in previous discussions of managing and

repairing shame. However, there are several reasons to exercise a degree of caution in drawing more general inferences from our data. Firstly, interpersonal factors are more likely to be prominent where shame is experienced with others present, as was the case in the current study. The perception of acceptance by others may be less salient in some private experiences of shame (Gilbert, 2003), though an internalised critical other may still feature in many experiences (Crozier, 1998; Lewis, 1971). Secondly, it is possible that others' evaluation may have been particularly difficult to resist for several of our participants who were recounting situations when they were still young enough for others (e.g. parents, teachers) to be deemed to have the right to make judgements about their behaviour. Thirdly, our research cannot be considered to have captured the full range of public experiences of shame, especially as some experiences may be too painful or shaming to be acknowledged or recounted to others. We should also exercise caution in extrapolating from the present accounts which report one-off experiences of shame, with a predominantly white, young, middle-class group, to repeated or ongoing experiences of shame sometimes faced by those who are particularly marginalised within society and for whom an aspect of their identity is stigmatised in some way. Equally, our analysis has not enabled sufficient attention to differences in experiences of shame between social groups and to experiences which may be more relevant in certain cultural contexts. For example, issues of public honour and shame seem to have particular resonance within families of South Asian heritage (Gilbert, Gilbert & Sanghera, 2004). Fourthly, although the use of written anonymised data may have enabled disclosure of some situations, the resulting responses were limited in detail compared to the data that might have been obtained via interview. In particular the data were possibly constrained by a perceived requirement to provide a coherent narrative, the structure of the questions posed and the lack of opportunity for either the participant

or researcher to question each other's meanings. Further research might usefully explore some of the issues discussed above in more depth via either an interview or a more participant-led method of data collection such as a diary. Finally, by taking the participants' accounts as attempts to convey their subjective experiences, the present analysis did not interrogate what discursive work the accounts achieved. Other qualitative work on emotion has highlighted the ways in which emotion terms can be invoked to manage accountability, for example by explaining actions or aspects of performance as understandable or by discounting the responses of others (e.g. Edwards, 1999; Locke, 2003). We have argued elsewhere from a second discursive analysis of the data that, depending on the context, either acknowledging or denying a sense of shame can be a way of managing a potentially shameful identity (XXX, 2007). While shame can be shameful (Scheff, 2003), in other contexts shamelessness might be more risky (Skårderud, 2007). Further research which examines what is achieved by talk about shame in specific interactional settings, and which explores the various discursive strategies available to resist particular shameful identities in particular social contexts would be useful in developing an understanding of shame, shaming and shame management as social processes, as well as personal experiences. Such research might usefully employ live materials rather than individual narratives in order to focus explicitly on interpersonal processes, as discursive research on other emotion-related talk has done (e.g. Cromby et al., 2010; Edwards, 1999; Hepburn & Potter, 2007) and qualitative sociological research on shame (Scheff 1995a; 1995b).

Despite these qualifications of our findings, it is worth noting that other recent open-ended studies of real-life experiences of both private and public shame with a range of participants (Brown, 2006; Silver, 2007; Van Vliet, 2008) have also strongly supported our key conclusion regarding the importance of connection with and

validation from others for repairing shame. This view of shame as a relational and interdependent phenomenon has sometimes been associated with shame in Eastern rather than Western cultures (e.g. Bagozzi, Verbeke & Gavino Jr., 2003; Mesquita & Karasawa, 2004). However, these recent findings raise the question of whether this cultural difference has sometimes been over-stated. It may be the case that this study and others which have used open-ended qualitative methods are more sensitive to the social context of shaming experiences than research methodologies which focus on the measurement of an individual's shame-related behaviours and thoughts. Therefore previous commentary based on quantitative research findings which has downplayed the importance of others' evaluations in experiences of shame, may have missed some of the interpersonal context of these. As Scheff (2003) has proposed, the shamed self may be more socially embedded in the West than has sometimes been assumed, although as supposedly autonomous westerners we may not always wish to acknowledge this.

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ⁱ A copy of the questionnaire is available from the first author.

ⁱⁱ In the original sample of 96, white women undergraduates outnumbered all other demographic groups. Therefore 21 questionnaires from this group were randomly excluded from the present analysis in order to retain as broad a mix of participants as possible.

ⁱⁱⁱ 'Younger undergraduate' refers to those in the 18-22 age-group, as opposed to 'mature students'.

^{iv} '*Narr*' indicates that the quotation is from the open-ended narrative rather than in response to a specific question. Regular typeface indicates answers provided by the participant. Questions and prompts are indicated by italics.

^v '...' indicates material omitted from the quotation.

^{vi} Explanations of the shaming situation in squared brackets are provided by the researchers, based on the participant's account.