Introduction: How to Work with Shame

Dr. Levine: Shame is a very powerful emotion. It probably, in many ways, is the most powerful emotion because of the way it sneaks up and just takes over the person’s organism from the inside.

Dr. Linehan: The first thing you have to do with a person who has shame is ask: Does it fit the facts or doesn’t it fit the facts?

“The physiological terror and horror and sickness of it imprints on your brain.”

Dr. Borysenko: It’s very much like eating a poisoned plant.

If you eat a poisoned plant just once, you never want to go back there again because the physiological terror and horror and sickness of it imprints on your brain because that’s how we survive, by not eating poisoned plants.

So I’d have to say to shame is the poison plant of emotions. And I think it takes a lot clinically to erase that tracing of shame, which really is so deeply connected in the nervous system.

Dr. McGonigal: We often interpret the strength of the shame as a sign about how truly bad we are, or what’s truly wrong with us.

Instead, I think we should learn to read that intensity as a metric of how much and how deeply we care, not a metric of how fundamentally screwed up or inadequate we are.

Dr. Buczynski: In this program, we’re going to look at some practical ways to help clients who are struggling with deep feelings of shame.

Shame is such a pervasive issue in our work.

If you think about it, any clinical problem that presents itself with a kind of self-criticism or judgment is almost always dealing with shame.

And when shame goes untreated, it grows stronger. And it eventually reaches beyond ourselves to affect future generations.

Hi, I’m Dr. Ruth Buczynski, a licensed psychologist in the state of Connecticut and President of NICABM.

So why do people develop shame, and how do we help them control it?

We’ll first look at one powerful way to engage and dissolve shame.

Then we’ll look at how to stop shame from shutting down the body.

We’ll work with the adult shame that developed in childhood.

We’ll look at the difficult link between trauma and shame, and how to shut down a client’s shame messaging.
And then we’ll look at ways to resource our clients to tolerate shame and how to shift them out of deep feelings of unworthiness.

By the end of this series, you’ll have a focused set of strategies and insights on shame that you can immediately apply with your clients.

So let’s get right to it, and I’ll see you over in Module 1. Before you go, enjoy this quick thought on shame from the world’s foremost trauma expert, Dr. Bessel van der Kolk.

I’ll see you.

Dr. van der Kolk: People who are shameless have no empathy and have no concern for other people.

They just do whatever they feel like doing without worrying, “What will people think about me? Will people dislike me?”

People without shame are dangerous. Shame is at the center of what Darwin talked about, 150 years ago – the center of higher emotions

At the center of human structure are all of these good emotions – there are no bad emotions.

All parts are welcome, and shame is there for a reason. We don’t say to people, “Don’t be ashamed.” We say, “Let’s go there. Let’s explore shame. Let’s feel shame. Let’s see what this shame is about.”