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The construction of shame in feminist reflexive practice and its manifestations in a research relationship

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COMPULSORY DECLARATION

This work has not been previously submitted in whole, or in part, for the award of any degree. It is my own work. Each significant contribution to, and quotation in, this dissertation from the work, or works, of other people has been attributed, and has been cited and referenced.

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ABSTRACT

Despite the psychically toxic nature of shame, and the way in which it manifests so acutely within intersubjective spaces, it has historically been under-researched and under-theorised. However, a burgeoning of literature in recent years has brought an increasing awareness of shame as a pathogenic force. An investigation of this noxious affect is especially pertinent in the context of qualitative feminist research in South Africa, marked by a myriad of class, gender and race differentials between researcher and researched. I therefore consider the significant effect of shame on a specific dialogue which unfolded between myself and a research participant in the course of interviewing rape survivors in Cape Town. The interview is examined through the dual analytic resources of psychodynamic theory and reflexive research practice, with a view to gaining a deeper understanding of the implications of this noxious affect for feminist reflexive research. The analysis reveals the ubiquitous manifestations of shame within the intersubjective space, traceable through the three markers of the affect; namely the content of the narrative, the form or structure of the interaction as well as my own emotional memory of the event. The analysis tracks the shame which arose in such a research context, demonstrating how shame neither belongs exclusively to the self or the other, but is unavoidably generated, exacerbated and maintained within the relational, intersubjective field. A particular exploration of its manifestations on the micro-level of the research relationship through the analytic resource of psychodynamic understanding, highlights the necessity of feminist reflexive practice considering shame. What is highlighted is a need to reflexively locate the emotion within our racialised, gendered and institutionalised research relationships, and to wrestle with the implications this has for meaning-making and embodied subjectivity. Such a consideration would arguably provide invaluable insights for feminist reflexive research and practise as it pays critical attention to positionality, reflexivity, the production of knowledge and the power relations that are inherent in research processes.

INTRODUCTION

Shame is pervasive, and contagious. Shame is ashamed of itself. Shame activates shame. The mystifying dualism of shame is that it is at once an isolating, intimately intra-psychic phenomenon seeking concealment, yet remains deeply embedded in a visual and public interpersonal space where the self is violently and unexpectedly exposed to the critical gaze of the Other. Shame speaks to the core of the self, unlike guilt, which many authors have argued is characterised by a focus on an external event or action (Kaufman, 1995; Lewis, 1971; Morgan, 2008; Tangney & Dearing, 2002). The source of shame can therefore never be completely in the self or in the Other, but is a rupture of what Kaufman (1989, p. 22) calls the “interpersonal bridge” binding the two. For this reason, many theorists consider shame to be the most deeply disturbing of all the affects, inherently embedded within the realm of the intersubjective space between self and Other.

Like Kometsi (2001), who writes on the manifestations of shame in a uniquely South African, multi-racial clinical setting, I have become increasingly aware of the myriad of ways in which shame manifests itself so subtly yet so powerfully within our daily interactions. The pervasive and potentially paralysing nature of shame and its particular relevance to a South African research context became no more apparent to me than in the course of interviews that I, as a researcher (white¹, middle-class) have had with rape survivors (coloured, working-class). This research had as its original aim to delineate the network of discourses in which the rape of women is embedded. However, I have come to understand that our co-constructed shame which permeated the research significantly affected my emotional and intellectual investments, and contoured my interpretations of the narrative which unfolded between myself and the research participants.

Despite the psychically toxic nature of the affect, and the way in which it manifests so acutely within intersubjective spaces, it has historically been under-researched and under-theorised. This neglect has been attributed in the literature to Freud’s rather dim and inconsistent view of the affect and his decision to neglect shame in favour of guilt

¹ The following terminology will be used consistently throughout this research: “black,” “white” and “coloured.” Although I acknowledge that such racially constructed terms are offensive, they are used in order to reflect past history as well as the reality of contemporary socio-economic divisions.

(Broucek 1991, Morrison, 1989), the incompetence of scientific language to fully capture the self's shaming experience (Kaufman, 1989) and the phenomenon of "secondary shame" – that is to say the curiously contagious nature of shame which is ashamed of shame itself (Broucek, 1991; Lewis, 1971, Morrison, 1983, 1998).

However, a burgeoning of literature in recent years has brought an increasing awareness of shame as a pathogenic force, thanks to the pioneering work of self-proclaimed "shameniks" such as Morrison (1983, 1989, 1998), Lewis (1971), Kaufman (1989) Nathanson (1987) and Broucek (1991, 1997). Gilbert (1998) outlines the various schools of thought in which a wide variety of shame theories are rooted, from psychoanalysis to affect-cognitive and cognitive-behavioural theories. He argues that shame as an affect has so pervaded recent psychological theory and research that other emotions have in fact been neglected (Gilbert, 1998). Recently, the recognition of the role of shame in narcissism and theories of self-psychology by Kohut and others has opened the path for the optimal investigation of shame and has showed us how insidiously and unconsciously shame affects our lives (Morrison, 1989).

Such investigation of this noxious affect is especially pertinent in the context of qualitative feminist research in South Africa, marked by a myriad of class, gender and race differentials between researcher and researched. Here, skewed power dynamics continue to mark intellectual relations between researcher and researched (Bennett, 2000) and "deeply entrenched and racialised divisions between communities continue to shape the negotiation of power" (Swartz, 2007, p. 177). Within this context (significantly determined by class formations developed through the formal structures of colonialism and apartheid) shame is inherently linked to the politics of knowledge production and the limitations of our own positionings within such unequal power structures.

Due to these inequalities which continue to mark the landscape of African feminist research, feminists have raised questions around the ability of white women to represent black women (Bennett, 2000; de la Rey, 1997; Sunde, & Bozalek, 1993). As a writer privileged by my class and race position, such important debates have left me to question my own positioning in relation to my privileged colonial heritage and my consequent (in?)ability to represent the voices of black women. This has perhaps been

in response to “an incitement to reflexive confession” (Burman, 2006, p. 316) partly motivated by shame. I therefore share Morrison’s understanding that the conceptualisation of self-exposure underlies the motivation to write on the topic of shame:

Exposure of shame-induced feelings is likely to stimulate recurrent shame – I began to feel self-conscious, wondered whether I wanted to make myself vulnerable, to open myself up in this way to public observation and critiques. But then I reminded myself of the challenge we face through the inevitable spectre of our own shame experiences as we treat our patient’s shame. How better to address this challenge, I thought, than through measured exposure of my own shame (1994, p. 19).

Contemporary theories on shame view it as an emergent, embodied property of relation systems rooted in intersubjective fields. Lansky (1999), for example, defines shame as “a complex emotional system regulating the social bond... signalling disturbance to the status of the self within the social order” (p. 347). Ikonen and Rechart (1993) similarly see shame as intrinsically intersubjective, “a reaction to the absence of approving reciprocity” (p. 100). The definition of shame has been moved from a mere affective reaction to public disapproval to a far more complex process in which the self is both an agent and object of observation and disapproval in light of the shortcomings of the defective self being exposed (Lewis, 1971). Shame is both collective, a part of communal contrition (Rose, 2003), and deeply individual, yet the experience has a decidedly social face and is the bedrock of identity formation (Erikson, 1950; Kaufman, 1989).

From this theoretical point of departure, it is clear that shame is necessarily situated within an intersubjective field, is intrinsically linked to processes of identity formation and is a deeply embodied experience. Shame is ubiquitous, corrosive and an integral part of the intersubjective space, where shame of the self resonates with the shame of the Other. An attunement to shame is particularly crucial in our interactions, considering its potentially paralysing effect and the many ways in which shame compels us to hide and withdraw (Morrison, 1983, 1989), to “sink into the floor and disappear” (Tangney, & Dearing 2002). Therefore, the importance of locating this

pervasive yet arguably under-theorised affect has significant implications for feminist reflexive research practice as it grapples with the complexities of the research relationship dynamic and the ultimate effect on the analyses it subsequently produces (Burns, 2003; Gray, 2008; Rice, 2009). Contemporary feminist research demands that we extend our reflexivity beyond a simple stating of identity position to include a greater focus on the subjective and intersubjective research experience. Merely stating oneself autobiographically is not enough (Bennett, 2000). As Patai (1991) argues,

Sometimes these tropes sound like apologies, more often they are employed as badges. Either way, they give off their own aroma of fraud, for the underlying assumption seems to be that by such identification one has paid one's respect to "difference" (p. 149).

Therefore, in an effort to extend reflexivity beyond such simplistic reductionism, I consider the significant effect of shame on the dialogue which unfolded between researcher and researched within a specific interview, through the dual analytic resources of psychodynamic theory and reflexive research practise, with a view to gaining a deeper understanding of the implications of this noxious affect for feminist reflexive research. As Gough (2003) points out, "discussions of reflexivity rarely make reference to psychoanalytic theory, despite a long and rich tradition of writing on intersubjective dynamics" (p. 26). I therefore attempt to contribute to the debates within feminist research by coupling feminist methodologies with psychodynamic accounts of defended subjectivity (Hollway, 1989; Hunter, 2005). The aim is to facilitate an inquiry of the role of shame in the researcher's relationship to research participants and the research process (Gray, 2008). I attempt not only to understand the role of shame in the research relationship which unfolded, but to consider the way in which it was intrinsically linked to the representations of our multiple and constantly shifting identities within this space, as overtly marked by the "intersectionality" of class, race and gender (Burman, 2006).

LITERATURE REVIEW

History of the study of shame

Many authors offering a critical review on the literature on shame begin their review by bemoaning Freud's neglect of this important affect in favour of guilt, and the fact that he had no consistent theory of shame (for comprehensive reviews of the literature see Morrison, 1989 and Broucek, 1991). Throughout history, dating back to Adam and Eve's shame of being naked in the Garden of Eden, shame has been associated with the uncovering of nakedness. Freud believed that man's [*sic*] natural, primitive state was one of shamelessness. It was only when man began to walk upright, that he became ashamed of his exposed genitals. Freud spoke of shame as a barrier to instinctual life, serving a reactive, inhibitory and prohibitive role which opposed the pleasure principle. In his later work, "New Introductory Lectures on Psychoanalysis" in particular, he revoked his theory to highlight the feminine shame of genital deficiency, as opposed to the masculine shame of exposed genitals. Shame thus became a "feminine characteristic *par excellence*" (Freud, 1933/1964, as cited in Broucek, 1991, p. 12), and was associated with scophilia, or the love of sexually-oriented looking. This early theoretical conceptualisation of shame was therefore politically in line with existing dictates around the appropriate expression of feminine sexuality.

Freud viewed shame as one of the major forces promoting repression and resisting the analytic process, but did not significantly pursue this avenue of inquiry. Speculations as to why shame was so under-theorised in Freudian psychoanalysis include the fact it was a politically motivated decision related to his conflict with Adler, whose theories of organ inferiority aligned themselves more comfortably with shame than did Freud's own work (Morrison, 1989, 1983), Freud's avoidance of the topic due to his own unanalysed shame issues (Broucek, 1991, Lansky, & Morrison, 1997), or purely an inevitable outcome of the historical evolution of psychoanalysis (Morrison, 1989, 1998). Whether or not we accept these speculative hypotheses, the conclusion is clear: Freud's structural theory emphasised guilt rather than shame, which delayed an emphasis on shame as an important area of study.

Despite this bemoaned neglect on Freud's part, his introduction of the concepts of ego-ideal and self-regard are considered to be some of his most useful contributions to the study of shame (Lansky, & Morrison, 1997). Morrison (1989) argues that had Freud developed his theorising on the attainment of perfection in the ego-ideal, he may well have proceeded with an investigation of shame and its relationship to conflict and failures. In fact this exact pathway into the study of shame suggested by Morrison was closely followed by Piers and Singers (1953) in their groundbreaking book *Shame and Guilt*. As two of the first major psychoanalytic thinkers to contribute to our understanding of shame, they began by highlighting what they viewed as the essential difference between shame and guilt, an important distinction which has today been elaborated on by many theorists (Kaufman, 1995; Lewis, 1971; Morgan, 2008; Tangney, & Dearing, 2002).

Piers and Singer (1953) posit that shame reflects a discrepancy between ego and the ego-ideal with the subsequent threat of rejection and abandonment. In other words, shame is the perceived failure of the whole self. Guilt, on the other hand, relates to a transgression, causing a tension between the ego and the super-ego, with the subsequent fear of castration. Freud (1940-52) himself made no distinction between the ego-ideal and the super-ego, often using the two terms interchangeably. However, for Piers and Singer (1953), the ego ideal is described as being comprised of narcissistic fantasies of omniscience, the sum of positive identifications and social roles, and an awareness of the ego's potentialities and goals (Morrison, 1983). Finally, Piers and Singer were also two of the first theorists to emphasise bodily functions, and the self's comparison to the other, as being fundamental to the shaming experience, thus being some of the first authors to place shame in a specifically social arena. More specifically, we see the beginning of shame being conceptualised as indicating a specific social positioning, and therefore intrinsically linked to one's social identity.

Literature on the link between shame and identity burgeoned in the 1950's in particular, largely due to the work of Erikson (1950) who placed shame as central to his theories on identity formation, as well as Lynd (1958) and Piers and Singer (1953). Shame proved central to Erikson's (1950) work on identity and the life-cycle, where he linked shame to the anal-phase struggles of autonomy and self-control (Broucek, 1991). Erikson (1950) has brought to our attention the integral role which shame plays

in the social and individual process of identity formation. Kaufman (1989) further notes that the negative pole of each of Erikson's identified life-stage crises represent some elaboration of shame which needs to be worked through.

In Lynd's (1958) book on *Shame and the Search for Identity*, she focuses on the phenomenological experience of shame in order to better understand its nature and function. Like Piers and Singer, who were writing at a similar time, she outlined the distinction between shame and guilt, emphasising the involvement of the whole self as a distinguishing characteristic of shame and a further clue to its centrality in identity. Speaking to Erikson's theories of shame and identity, she noted that the loss of an identity one thought one had is as painful and shaming as the tortuous process of identity formation. She posited exposure, particularly unexpected "exposure of peculiarly sensitive, intimate, vulnerable aspects of the self" (p. 27), as central to the shame experience and argues that such exposure may violate the core of self:

Sudden experience of a violation of expectation...results in a shattering of trust in oneself, even in one's own body and skill and identity, and in the trusted boundaries or framework of the society and the world one has known. As trust in oneself and the outer world develop together, so doubt of oneself and of the world are also intermeshed (p. 46).

It is clear then that the experience of shame necessarily involves a discrepancy between self and the social situation resulting in a breach of trust. Lynd (1958) argues that the destruction of trust so central to the shame experience results either in doubts about one's own adequacy or may lead to a questioning of the basic security of the world around oneself and a strong contradiction of previous assumptions or expectations. The greater the expectation, the more acute the shame. The result, Lynd argues, is a heightened sense of tragedy. This shattering and isolating experience comes very close to Herman's (1992) phenomenological description of the experiences of trauma survivors, which will be explored later on in this paper. Much of the literature therefore views the trauma inherent in shame as the experience of being harshly and unexpectedly severed from the other – the sudden realisation that the essentially flawed nature of the true self has been exposed, a self which falls desperately short of an imagined ideal.

The idea of shame as it relates to a frustration of the ego-ideal, first highlighted by Piers and Singer (1953), is one which has been picked up on by Kohut (1966) and others. Kohut (1966, 1977) related shame to the frustration of the narcissistic self's exhibitionist demands for which the ego is unable to provide an adequate discharge. This frustration is attributed to the empathic failure of self-objects, who are unable to ground the individual with a coherent and secure sense of self. The result is a formation of narcissistic expectations due to overwhelming feelings of grandiosity and, inevitably, the accompanying vulnerabilities which form the bedrock of shame, or what he termed a sense of "nameless mortification" (1977, p. 224). He viewed anger and destructiveness as secondary reactions to shame, stating that "destructive rage, in particular, is always motivated by an injury to the self" (1977, p. 116).

Morrison (1983, 1989), one of the key contemporary theorists understanding shame from a self-psychological paradigm, primarily views shame as a response to failure in attaining the shape of the ideal self. He provides a framework for understanding shame from an internal perspective which shapes the ideal self, and has been instrumental in using Kohut's writings to indicate the central importance of shame in the application of his self-psychology theories. For example, it is Morrison who furthered our understanding of narcissistic rage and violence as most often the visible face of shame. In his chapter on *Shame, the ideal self and narcissism*, Morrison (1983) writes that "the referent of shame, then, is the self, which is experienced as defective, inadequate and having failed in its quest to attain a goal. These goals of the self relate to ideals internalised through identification with the good (or idealised) parent, and as such reflect that portion of the superego contained within the ego ideal" (p. 351).

The Kohutian view on shame, so well highlighted by Morrison (1983, 1989, 1998), has thus deepened our understanding of shame as being centrally about the self, identity and its narcissistic aspirations, as well as its relation to the empathic failure of self objects. It is therefore experienced at once intra-psychically and intersubjectively. For Morrison, shame is fundamentally related to narcissistic aspirations motivated by "a yearning for absolute uniqueness in the eyes of a designated other" (Morrison, & Stolorow, 1997, p. 63). Failures in self object needs lead to narcissistic vulnerability and shame sensitivity, with shame signalling danger to perceptions of a significant

Other viewing the self as unique (Lansky, & Morrison, 1997, Morrison, & Stolorow, 1997).

Broucek (1991, 1997) shares with Morrison a perspective on the significance of shame to the self and particularly to early narcissistic developments with its roots in an intersubjective field. He identifies two primary personality types, namely the egotistical (where shame is absent) and dissociated (where shame is engulfing). He further postulated that shame, when used as a defence against feelings of vulnerability or devaluation, may instigate the creation of a grandiose, haughty narcissism, and further aids in creating a “splitting off” of such grandiosity from the self’s own awareness. Kinston (1983), considering shame from within an object-relations model, similarly views it as an experience reflecting painful self-awareness and separate identity (or self-narcissism), in the face of difficulty relating to an Other.

Helen Block Lewis (1971) has similarly emphasised the relationship between shame and narcissism highlighted by self psychological theory. She, like Kohut (1966, 1977) and Broucek (1991), views anger as a defensive, retaliative reaction to shame. She delineated the relationship between shame and anger in her notion of the shame-*rage spiral*, where the victim of shame shifts the blame onto the Other, and their sense of self is “reactivated” through the expression of defensive anger. This in turn may activate retaliatory anger, resentment and blame from the Other back onto the shamed victim, resulting in further shaming, without any constructive resolution in sight. A related self-psychological view is that shame may result from self-object failure and that narcissistic rage is consequently turned against the offending object in an attempt to purge the shame (Kohut, 1966, 1977). Thus, shame is framed as “as individual vulnerability that interacts with dyadic disorganisation and alienation, resulting in a mutual persistent cycle of shame and humiliation, coupled with guilt” (Buchbinder, & Eisikovitz, 2003, p. 357).

Like Freud, who equated shame with sexuality, Lewis poses that shame-prone people are likely to be women, prone to depression and “field dependant” – or more prone to individual concern about feedback from the surrounding environment. Guilt, she suggests, is tied to activity, masculinity and field independence. Examining shame from a phenomenological perspective, she described a split in self-functioning in

which the self is both agent and object of observation and disapproval, further locating shame within an interpersonal field and highlighting the role of objectification in shame experiences. Her conceptualisation of shame is closely in line with that of Freud's heavily gendered understanding of the affect, as she views shame as an intrinsically feminine experience, particularly as it relates to the objectified, gendered body.

Gender, shame and sexuality

Much psychoanalytic theory links shame to feminine passivity and sexuality. More specifically, secondary shame in women is seen to produce passivity, secretiveness and a predominantly pre-oedipal cast to their psyche as a result of prolonged and complex attachment to the mother (Morrison, 1989). Dianne (2008), for example, argues that bodily-based narcissistic injury and a sense of shame is a response to Oedipal longings. Through Oedipal defeat, "a female sense of inadequacy and shame may be internalised and accepted as part of one's identity, in contrast to the male phallic-omnipotent trajectory" (p. 73). Anthony (1981, as cited in Morrison, 1989) has suggested that the "identity theme" imprinted in the young girl is one of shame, leading to accompanying states of paranoia, depression, rage and envy.

Psychodynamic theory thus views the female representation of the self as lacking in both bodily and psychic integrity, with the result that sexuality and aggression is inhibited. Broucek (1991) views the envy accompanying shame as diverting attention from the meagre state of the self by focusing on the despised strength of the Other, and marks the idealised qualities towards which the self strives.

According to Broucek (1991) shame is indeed intimately connected to sexuality and gender. For him, this has less to do with psychodynamic theories of penis envy, but is more specifically related to the historic objectification of women. Like Lewis, he highlights the role of objectification in the triggering of shame, arguing that shame is the experience of being objectified by the other whilst wanting to be related to in an intersubjective mode. In regarding the gender of shame, he quotes John Berger:

Men look at women. Women watch themselves being looked at. This determines not only most relationships between men and women but also the

relation of women to themselves. The surveyor of women in herself is male; the surveyed, female. Thus she turns herself into an object (1977, as cited in Broucek 1991, pg. 121).

Thus, for Broucek, the mediation of the Other is essential in the foundation of objective self-awareness. This sense of self, as constituted by the imagined perceptions of the Other, is the basis of our most profound identification with our body - "an awareness of oneself as an object for others and, through the mirroring of the observing others, taking oneself as an object of reflection" (p. 37). Shame arises out of the tension between the mutually incompatible subjective sense of self and feeling of self-objectification, and a feeling of having one's self negated or expropriated by the Other. Women in particular are thus constructed as objects for the Other - what the Other sees and reacts to is the body and the behaviour of the body.

Objectification of women's bodies historically is thus intimately linked to issues of shame and self-esteem. Objectification theory posits that the tendency to view the self as an object to be viewed by the other and subsequently evaluated by others' affects female, but not male, subjective well-being (Grabe, 2007, Mercurio, 2008). This bodily shame expresses a basic conflict which threatens to obstruct a coherent sense of self by a severing of the body-mind relationship, what Lombardi (2007) refers to as a tendency towards the obliteration of the body. For example, there is a growing amount of evidence suggesting that body shame among women is one mediating factor in the relation between self-objectification and eating disorder symptomatology (Mercurio, 2007) depression (Grabe, 2007) and overall mental well-being, self-esteem and satisfaction with life (Mercurio, 2008).

Lindisfarne (1998) writes on systems of honour and shame from an anthropological perspective, focusing on narratives of competition between dominant men and the passive subordination of women which exist cross-culturally. For her, "gendered difference, honour and shame are located in a quasi-physical attribute – female chastity or modesty, the virgin's unbroken hymen – which is then treated as a thing and ranked and valued along with other commodities" (p. 248). She argues that abstract ideals of feminine purity (virginity and chastity) create in women an internalised ideal-self representation, upheld by the constant social threat of shame.

Tangney and Dearing (2002) similarly highlight that the “hotpoints for shame center on ... two conflicting sexual ideals – the chaste, pure, virginal bride in white versus the voluptuous sex kitten” (p. 166), and posit that no aspect of our self has been so dysfunctionally shamed as much as our sexuality. Feminine shame, from this perspective, is intrinsically linked to ideals of embodied feminine sexuality.

In her book, *Managing the Monstrous Feminine*, Ussher (2006) explores shame surrounding the feminine body as it relates specifically to the bodily functions of menstruation, pregnancy and menopause. For her, the loss of voice and power experienced by adolescent girls as they negotiate their changing feminine identities is embedded in their experiences of the fecund body, its signs of seepage and sexuality marking them as different and inevitably inducing shame:

The positioning of the body as potentially polluted, or as sexually threatening, which underpins the practise of a post-menarchal gendered segregation, can be internalised as shame and disgust ... the fecund female body as a sign of sexual temptation or taboo is reinforced, and the young women positioned as a sexual object – both desirable and threatening – a position she will occupy for the rest of her reproductive life (p. 22).

Menstruation is thus viewed as a sign of pollution, a source of debilitation and a danger leading to psychiatric illness (pre-menstrual tension), criminality and violence. It positions the female reproductive body as abject, deficient and diseased – a process inevitably inducing much shame and disgust most significantly among women themselves (Ussher, 2006). Brison (1997) similarly points to the reason for the historic denigration of women’s bodies, “historically presented as the antithesis to reason” (p. 15) as underlined by the lack of intellectual control of feminine bodily functions.

Control of the female body and of feminine sexuality has been institutionalised in social and religious forms throughout history and across cultures, often involving the shaming of female sexuality and appearance. Davis (1996) similarly examines how contemporary feminine beauty systems and corresponding cultural discourses and

practises inferiorise the female body through the construction of unobtainable ideals from which the majority of female bodies fall (shamingly) short.

Furthermore, the appraisal of bodily beauty aesthetics is embedded in a racialised hierarchy which informs judgments of beauty, femininity and desirability, whiteness signifying what Butler (2003) terms the regulative ideal of the racial matrix.

Mama (1995) argues that:

The content of “attractiveness” is invariably racialised, indicating that many black women’s early experience of their femininity is structured by the racist aesthetics which derive from colonial-integrationist discourses ... (p. 150)

Speaking to the shame associated with racialised identity formation, Tate (2007) demonstrates how “dark skin and natural afro-hair are central in the politics of visibility, inclusion and exclusion within black anti-racist aesthetics” (p. 300). She draws on conversations among “mixed race” women to explore the themes of shame which arise as they attempt to construct their racialised identities, significantly influenced by using whiteness as a yardstick for beauty. She argues that white concepts of beauty are inextricably linked to notions of sexual purity, delicacy and modesty, whereas the bodies of black women embodied a form of animal sensuality, as evident in the exhibition of Sara Baartman (Crais, & Scully, 2009). Erasmus (1997) similarly explores the politicisation of black hair in particular by class, gender and race, and the shame associated with having kinky hair. She argues that the racial hierarchies and values of colonialism have left a deep mark on the conceptions of beauty in South Africa.

Much of the literature therefore speaks to the shame relating to an objectified, racialised and gendered body, and the way in which it directs attention to negative experiences of both the appearance of the body, as well as bodily functions (Gilbert, 2002). Body shame is here defined as the self experiencing internalised negative views about the body due to a differentiation from society’s representation of an ideal body image (Pasillas, 2008). Despite the fact that shame of the body is a fundamental human experience affecting both genders, much of the literature clearly relates it more

specifically to a feminine subjectivity where the body is positioned as inferior, unruly and an indication of marked difference or deficiency (Ussher, 2006).

Shame therefore acts as socially shared information about one's (lowered) position in the community. This is the reason, Gilbert (1997, 1998, 2002) suggests, that sexual abuse may elicit such intense feelings in women of self-disgust and "self" as violated, spoiled and damaged. Many theorists (Kaufman, 1989, Lee, Scragg and Turner, 2001; Leskela, Dieperink, & Thuras, 2002; Wilson, Drozdek, & Turkovic, 2006) have similarly highlighted the pivotal role of shame in sexual abuse symptomatology. The shame of rape, its connection to the shame of the feminine body and the emotional processing of the event as well as the subsequent influence on schematic representations of self and others will now be considered.

The shame of sexual abuse

Rape activates intense inner states of powerlessness, bodily violation and humiliation (Kaufman, 1989), disempowering the survivor and breaching the intimacy barrier (Lee, Scragg, & Turner, 2001). It is this damage to the self, argues Herman (1992), which lies at the heart of trauma; the autonomy of the survivor is violated at the level of basic bodily integrity and the construction of self that is formed and sustained in relation to others is shattered. Thus survivors' subjectivities are reconstructed as fragmentary, inconsistent and contradictory (Gavey, 2005). The experience of being raped, the process of making sense of the trauma as well as the experience of revealing having been raped to others, significantly impacts both the survivor's internal identity as well as the self's social identity – in other words how the survivor is viewed in relation to the other (Lee, Scragg, & Turner, 2001). Survivors frequently remark that they are not the same person that they were before (Brison, 1997).

Shame therefore lies at the heart of the traumatic experience of rape – it is the experience of the body being exposed as inherently damaged or defiled and the consequent disconnection of the self from society. Butler (2003), for example, has marked the body as the stage on which traumatic disconnection unfolds. She constitutes the body as a public phenomenon situated squarely in the social sphere, the site of abuse and political oppression reflecting our social identities:

Each of us is constituted politically in part by virtue of the social vulnerability of our bodies – as a site of desire and of physical vulnerability, as a site of a publicity at once assertive and exposed. Loss and vulnerability seem to follow from our being socially constituted bodies, attached to others, at risk of losing those attachments, exposed to others, at risk of violence by virtue of that exposure...the body implies mortality, vulnerability, agency: the skin and flesh expose us to the gaze of others, and also to touch and to violence (p. 10).

Butler here is not referring directly to the affect of shame. However, her allusion to the exposure of the self to the Other, manifested in the body, speaks directly to processes underlying the shame following violence and bodily abuse.

Much of the literature considering the shame of traumatic events marks the significant distinction between shame and humiliation. Broucek (1991), Gilbert (1989) Lee, Scragg and Turner, (2001) and Morrison (1989), among others, argue that humiliation arises from experiences where the individual has been ridiculed and disempowered, but does not assume any responsibility for the act. In the presence of humiliation, there must be someone who humiliates and who is to blame for the damage done. Humiliation, therefore, “represents the strong experience of shame reflecting severe external shaming or shame anxiety at the hands of a highly cathected object or significant other” (Morrison, 1989, p. 15).

The distinction between the externalising attributional processes involved in humiliation and the self-attributing processes involved in shame is crucial to consider in the context of post-rape recovery. However, Lee, Scragg and Turner (2001) argue that shame and humiliation of the rape survivor are often present together and overlap in complex ways. They argue that a woman who has been raped may find the experience humiliating, but might not necessarily blame herself. Nevertheless, a sense of external shame may develop through the process of revealing the experience to others, in whose eyes she believes she is devalued. From that, she may develop a sense of internal shame to the extent that the rape has now scarred or damaged her. The result is the rape survivor harbouring feelings of injustice and desires for revenge. Herman (1992) similarly outlines the revenge fantasies of the rape survivor, in which the imagined roles of the perpetrator and the survivor are reversed. This, she argues, is

an attempt of the rape survivor to achieve some form of catharsis through the alleviation of her shame, and to restore her own sense of power.

Rosenbaum and Varvin (2007) concur with much of the literature on the shaming experience of rape which connects it with feelings of helplessness, insecurity, anxiety, loss of basic trust and fragmentation of perspective of one's own life. They view the recovery from trauma as relating to the survivor's ability to regulate strong negative emotions such as shame in relation to others, and the activation of internal good and empathic object relations, a perspective which speaks to Kohutian views on the importance of self-objects in overcoming shame. The authors further emphasise the power of trauma to split mind, body and social relations; a severance of the self from the Other which is referred to in much of the literature as being fundamental to the experience of shame (Kaufman, 1989, Morrison, 1983, 1989).

A large body of literature exists which suggests that shame, and the accompanying construction of a damaged sense of self, may therefore play a substantial role in linking the traumatic event to traumatic symptoms, strongly mediated through negative attributional cognitive processing (Andrews, Brewin, Rose, & Kirk, 2000; Feiring, Taska, & Lewis, 2002; Lee, Scragg, & Turner, 2001; Reyes, 1999). Lee, Scragg and Turner (2001) posit that the shame of trauma comes through two primary channels: trauma may confirm underlying negative beliefs about the self, or disconfirm positive self-beliefs. Thus, the pathogenic nature of post-traumatic shame is inextricably linked to self-attributional processes and its impact on the identity and self-structure of the survivor (Wilson, Drozdek, & Turkovic, 2006). Indeed, Janoff-Bulman's (1979) distinction between the characterological and behavioural self-blame of trauma survivors does not fall far from many of the theories discussed above which distinguish shame (predominantly characterological) from guilt (predominantly behavioural). Given the fragmentary, alienating nature of shame, it is not surprising that shame-proneness has been found to correlate positively with post-traumatic stress symptoms whereas guilt prone-ness has not (Leskela, Dieperink, & Thuras, 2002).

In a further delineation of the role of shame and cognitive appraisal systems in post-traumatic symptomatology, Reyes (1999) examines the role of shame-proneness, attachment anxiety and rejection sensitivity as interpersonal processing variables

which may mediate the impact of traumatic events. Interpersonal traumatic events, such as sexual abuse, were strongly correlated with higher rejection sensitivity and lower model of self scores, indicating a severe fragmentation of the survivor's self identity. Sexual abuse syndromes are therefore profoundly coloured by intense shame and humiliation, and the accompanying reactions of fear, distress, envy and rage.

Kaufman (1989) further outlines the pervasive nature of shame in the context of rape by outlining the shame-based relationship between perpetrator and survivor. Not only is the survivor most profoundly shamed herself by the experience, but is also further forced to accept the shame of the perpetrator, who Kaufman argues works through his own shame by defeating and humiliating his victim. Thus, men may learn to regulate their emotional experiences by using violence and aggression to terminate their experiences of the self-conscious and vulnerable emotions of shame, behaviour which is reinforced in part by masculine gender norms which inhibit the expression of shame (Jakupcak, Tull, & Roemer, 2005). Furthermore, the survivor's sense of shame is enhanced by a sense of inadequacy surrounding the rape as representing her public failure in achieving intimate, romantic and familial ideals (Buchbinder, & Eisikovitz, 2003).

Rape and shame within the South African context

While global and varied descriptions of rape commonly identify "shame" as something with which abused women often wrestle, the form of the affect may depend on the value systems of particular communities (Bennett, 2001). Much of the South African literature regarding the stigmatising and shaming effects of rape emphasises how the damage, devaluation and deviance of rape survivors is shaped by underlying contextually-specific patriarchal structures. Such structures are maintained through dominant discourses of the female sexual innocence of African women which position them as moral guardians for their respective cultural values and traditions (Kiguwa, 2004; Levett, 1994). Such discourses, informed by patriarchal notions of male domination and female submission (Boonzaier & De la Rey, 2004), inform the ostracism and shaming of women who are considered to be sexually impure. Maw, Womersley, & O'Sullivan (2008) similarly posit that culture specific gender role socialisation may be specifically related to post-rape behaviours, "which in turn influence post-rape disclosure experiences, the reactions from those in whom they

may confide and how survivors themselves narrate and make meaning of their experiences of sexual abuse” (p. 131). As such, reactions to rape survivors are located within a shame-based patriarchal structure which position survivors as defiled or morally inferior.

Wood (2005) highlights the shame of the emasculated African male within this system, linking high levels of sexual violence to patriarchal gender ideologies and to a “crisis of masculinity” in a context where working-class African men have long been marginalized. He examines prevailing gendered discourses which dictate that men can and should discipline women’s “transgressive” behaviour, sub-cultural issues pertaining to the urban *tsotsi* phenomenon, the rural practice of *ukuthwala* (bride capture), young working-class Africans’ experiences of marginalization, and the complex links between political economy and violence in this setting. He concludes by suggesting that the structural violence of both colonial and apartheid South Africa often comes to be reflected in the expression of everyday violence and rage leading to the sexual abuse of women.

According to Posel (2005a, 2005b), the public eruption of anger and anxiety surrounding sexual violence characterising post-apartheid South Africa has less to do with a deeper understanding of rape as seen within a framework of broader patriarchal ideologies, but more to do with a “scandal of manhood” (2005a, p. 248). As such, the outrage surrounding the high levels of sexual violence in the country continues to be located within the same patriarchal structures which significantly inform its high prevalence. She argues that the public shame of rape in South Africa has been largely based on a perceived inability to control male rapists, playing to fears surrounding the moral norms of a developing democracy and distracting attention from a feminist understanding of the experiences of the female survivors themselves. As a result, the attitudes of the police, the medical establishment and the criminal justice system continue to reflect a deeply shaming undercurrent to reactions to rape survivors, contributing to what is referred to in the literature as “secondary traumatising” (Artz, 1999; Koss, 2000; Pithey, 2008).

Motsei (2007) similarly argues that rape survivors are shamed by a deeply entrenched, negative social stigma surrounding womanhood, sex and sexual violence. She posits

that rape survivors in South Africa must deal with the often victim-blaming attitude of the criminal justice system - they must prove that they are not of loose moral character and that they did everything in their power to fight back. Thus, the very act of having to report being raped itself may lead to the further shaming experience of the survivor having to present her ordeal to the police, and in some cases in court, in a rational and logical manner. Confronted by a South African context informed by particular religious, traditional, political, legal and economic systems, women have had to accept being deeply shamed by “something wrong in their drawers” (p. 23) and enduring the accompanying scorn, ridicule and abandonment so often a consequence of having been raped.

A study conducted by Steyn and Steyn (2008) reveals that the majority of rape survivors in the country are not reporting their rape incidences to the South African Police Service due to fear of being revictimised, a fear assumed to be largely mediated through feelings of shame. Narratives of the rape survivors’ interviewed were significantly coloured by themes of police displaying an uncaring attitude, being intimidating and uncommunicative, and the consequent anxiety, shame and distrust felt by the survivors. It was found that most of the survivors interviewed by rape counsellors in this study believed that the police displayed an unsympathetic attitude towards them, and that they would be hesitant to seek assistance from the police in future as a consequence.

A recent South African publication, entitled “*Should We Consent? Rape Law Reform in South Africa*” edited by Artz and Smythe (2008) investigates the effect of the recently passed amendment to the Sexual Offences Bill, which largely highlights the positive steps this legal reform has made towards shifting the understanding of rape and the treatment of survivors within the criminal justice system. In this book, Naylor (2008) argues that legal responses to rape in South Africa have historically been characterised by “protecting the interests of society in avoiding unchaste behaviour, rather than protecting the interests of rape victims, with patriarchal societies criminalising rape to protect property rights of men over women” (p. 25). She thus highlights that South African institutions dealing with rape survivors have neglected to view the abuse within the context of the rights of all women to dignity, autonomy, bodily integrity and security of the person. Instead, Naylor concurs with Posel (2005a,

2005b) in suggesting that the problem of rape continues to be viewed from a decidedly patriarchal perspective, with rape understood to be the problem of one man having violated the property of another man. Naylor argues that the feminist struggle to shift societal responses to rape survivors needs to be taken at the level of legal reform, “the very site that has historically treated sexual assault victims with indifference, suspicion and, at times, hostility” (p. 50).

Furthermore, Schwikkard (2008) argues that much of the historic embodiment of misogyny in the South African judicial system leading the survivor to being shamed, lies in the rules of evidence applicable to rape trials. She provides as an example the historic use of a rape survivor’s previous sexual history being used as evidence in court, which served to demean women and thus contribute to secondary victimisation. Similarly, when the rape survivor’s counselling records are disclosed to the defence, a common South African practice, “feelings of revictimisation are experienced, reinforcing the experience of powerlessness and invasion felt at the time of the sexual offence” (Pithey, 2008, p 100). In brief, much legal reform is beginning to, and needs to continue to, take place in order to address the issue of secondary victimisation among rape survivors in order to alleviate much of the shame many experience as they enter the criminal justice system.

The pervasive threat of contracting HIV after a sexual encounter adds a further dimension to the shame of the South African rape survivor. The South African context is characterised by an unrivalled rape pandemic as well as having one of the highest HIV infection rates in the world. It is therefore unsurprising that there have been attempts to link the two pandemics conceptually, mediated by the myths and traditional beliefs surrounding female sexuality and its relationship to the virus (Chisala, 2008; Motsei, 2007). According to Tangney and Dearing (2002), “our almost innate vulnerability to shame around sex is further compounded by the stigma of the disease and then made even more profound by concerns of being judged as sinful, morally depraved or irresponsible” (p. 168). As Kaufman (1989) notes, “shame activated by AIDS itself is further magnified by fear, humiliation, disgust, and rage activated by societal response” (p. 50). As a result, women identified as having been raped, or having been identified as infected with the virus, have been

“shunned, abandoned, isolated, expelled and even killed by horrified neighbours and kin” (Chisala, 2007, p. 70).

The rape survivor’s profound shame lies not only in her experience of the humiliating and degrading event itself, but in the subsequent appraisal processes undertaken by herself and others in an attempt to make sense of the event. It fragments the core of her gendered, embodied identity, which is itself situated within a relation context from which she finds herself severed. Next to children, black women in South Africa are most vulnerable to ongoing traumatisation on a number of economic, physical and psychological levels, and are also the victims of the majority of rapes reported in the country (Maw, Womersley, & O’Sullivan, 2008). Therefore, within the South African context, the shaming experiences of “violation, helplessness and betrayal” (Kaufman, 1989, p. 124) accompanying the notoriously high levels of gender-based violence in the country is inextricably linked to what Kiguwa (2004) terms the “triple oppression of many black South African women...oppressed in terms of race, class and gender” (p. 239).

Within this context, it is impossible to consider the shame of the gendered, sexual body without linking it to the shame inherent in racialised identities, which themselves are deeply enmeshed in a complex matrix binding gender, class and socio-economic status. In this space, as Harris (2000) argues, “one must attend to the intersections of race with class and privilege, the particular arenas in which race and gender cohere and fracture, the frighteningly seamless enmeshment of constructions of race in silence, in procedural memory, in the unconscious” (p. 655).

Shame and racialised identities in the South African context

Swartz (2007) argues that the assumption of a gendered identity within the South African context in particular is “inseparable from the conscious and unconscious habitation of a racialised identity...met with fear or competitiveness, idealisation or denigration, joyful curiosity or withdrawal” (p. 361). She posits that class, racial and gender divides, deeply entrenched by our Apartheid history, continue to shape the negotiation of our identities and affect our capacity to engage freely with the exploration of unconscious communication. This means us necessarily having to

grapple with shame inherent in our differences, being Other and Othering, often a traumatic exchange in itself.

Within the South African context, deeply marked by our colonial and apartheid history, the salience of our bodily, racialised identity is significantly marked by the associated implications of privilege, class and possibility. As Miles (1997) says of race and sex: “they are inextricably bound up with each other as signifiers that seep through the constraining boundaries of rationality by virtue of evoking responses which are more visceral than rational” (p. 138). The black body bears the mark of the oppressed, is compared to privileged whiteness and inevitably found to be lacking (Robins, 1998). As such, “blacks will always be the numerical majority weighed down by the psychology of suffering minorities” (Ndebele, 1998, p. 27). The white body, on the other hand, bears the mark of privilege, of power and of access to resources, a symbol of the despised oppressor bearing the guilty mark of Cain “arising from involuntary forced association with the corrupt apartheid regime” (Straker, 2004a, p. 406). This hierarchy of authority is a source of shame for both the historic oppressor and the oppressed, inevitably bound up within Apartheid’s categories and constructions and speaking straight to the heart of issues surrounding identity through historic representation. As Suchet (2004) posits, “we all carry the haunting presence of shame and guilt as the heritage of our history, soaked as it is in the trauma of oppression” (p. 430).

As Suchet (2004) demonstrates in her re-telling of her own relational encounters with race in the intersubjective, “it is not simply that shame is located in the subjective experience of being racialized as one of dark colour, but that shame pervaded my experience of being of white colour” (p. 431). Straker (2004a) posits that many white South Africans have used the Other to deal with the shame of having to confront a de-idealised whiteness, patronizingly and paternalistically working in the interests of the Other who is “used as object to empower the white self in its group identification, in order to cover up its lack...the Other is used as a selfobject in a particular way to shore up a wounded sense of self” (p. 415). Cushman (2000) agrees with Straker that the shame surrounding white identity is inevitably linked to a sense of betrayal, or in other words of not being able to meet an ideal standard of whiteness: “whiteness is first and foremost a political signifier about the socioeconomic power that in actuality

few people possess: therefore most whites are in the position of trying to pass” (p. 613). Thus, the anti-racist efforts of white people can contain, disguise and perpetuate subtle forms of racism (Altman, 2004; Straker, 2004a), where “the Other is not merely seen as an equal, but for various complex reasons is idealized” (Straker, 2004b, p. 451).

Many white feminist researchers like myself are therefore faced with the task of absorbing and accepting the reality of our historical connection to racist ancestry, a process tainted with shame. Bennett, and Friedman (1997), for example, question the defensiveness of many white feminist researchers when faced with black women’s challenges. They note the perceived disconnection of many white women’s self identity from their social identity. In such a context, the subjective “I” is tentatively positioned as separate from the visible “I” reflecting group identity. Might this be viewed as an attempt for white feminist researchers to disconnect ourselves from the shame of our communal identities, from the shame of knowing that we “are not hungry because many black people are starving” (Bennet, & Friedman, 1997, p. 51)?

In the context of white women researching gender-based violence among black women in South Africa, there is an added dimension of shame which carries a particularly racialised and politicised dimension. As Burman and Chantler (2005) argue, any investigation of violence or abuse within oppressed communities “faces charges of fuelling racism by perpetuating widespread cultural stereotypes that these groups are more oppressive to women than the dominant culture” (p. 71). This dimension is further highlighted by Mama’s (1995) understanding of the role of psychological research in the “construction of African subjects as the objectified Other of the European imagination” (p. 18). Thus, shame may be situated in the relationship between the researcher and the researched in the form of both parties conscious of such stereotypes within this space.

Shame cannot be separated from the complex matrix of gender, ethnicity and socio-economic class informing our public identities, which are so boldly reflected through our bodies. Shame is located within the micro-level of daily encounters and continues to pervade and significantly inform the intersubjective space between our (gendered, racialised, classed, embodied) selves, and the Other.

Shame in the intersubjective field

Contemporary intersubjective theory views the shame of the self as contagious and often resonating with the shame of the Other (Hahn, 2000; Orange, 1995; Morrison, 1983). Orange (1995) notes that even in the experiential world of shame, which feels so aversive and isolating, we are intricately involved in intersubjective systems. In such intersubjective shame systems,

we feel deficient in comparison with the others, we feel we are failures in our own and others' eyes, we feel so held up to critical scrutiny in our desperate misery that we want to sink into the ground and become invisible...worst of all, there is no hope of escape from the enclosure of this world except through the encounter with another with whom I must again enter worlds of shame (p. 7).

The pain of shame, and the consequent fear of rejection and abandonment, effects both the self and the Other on multiple levels, and may result in the development of complex but predictable defence strategies (Hahn, 2000). Morrison (1983, 1989) argues that the shamed individual will polarise internal representations into devaluing and devalued introjects. In the first instance, a devaluing or shaming self-object is externalised through projection or projective identification, which could result in the experience of the Other as condemning and critical, justifying the self's withdrawal or avoidance. Alternatively, the devalued self-object is perceived as defective or inferior, justifying the expression of feelings of contempt, rage and envy. Hahn (2000) posits that

because the experience of shame involves the activation of devalued and devaluing internal representations, therapists may develop concordant or complementary countertransference identifications. These countertransference identifications are influenced further by the patient's primary reaction to shame, which includes withdrawal, attacks on self, avoidance, and attacks on others. Each of these reflects a habitual reaction to shame that is displayed in the patient-therapist relationship. (p. 10)

The splitting of devaluing and devalued self-objects speaks to Hollway's (1989) outlining of the relational defences used to defend against intolerable feelings, such as shame, which she bases on classically Kleinian defence mechanisms of splitting, introjection and projection. When individuals externalize or project devalued mental representations, they judge and condemn others for personal characteristics that they deny in themselves while feeling justified and occasionally self-righteous in their criticisms (Hahn, 2004). Mental representations retain their affectively charged and predominant visual qualities, and words are used to judge and belittle (Hahn, 2004, Lewis, 1971). Due to the psychic strength of such representations, the emotional qualities of relationships become more salient for the shamed self than verbal communication (Schoore, 2003).

It is therefore not only the primary affect of shame which needs to be considered in our interactions with the Other, but also what Kaufman (1989) refers to as defending scripts, or secondary reactions to shame. He outlines these scripts as being fear, rage or anger (which insulates the wounded self against further exposure, thereby acting as the self's protective cover), contempt (contempt by one results in shame in the other which is then retaliated, distances the self from the other whilst elevating the self above the other), the transfer of blame (which recruits anger but directs it in an accusatory, fault-finding manner in order for the self to remain pure and free from culpability), humiliation (inducing a need to seek revenge), striving for perfection (the need to erase the blemish of shame), striving for power, internal withdrawal (or the reduction of exposure to avoid further shame), humour (which reduces negative affect and attenuates the self-consciousness and exposure inherent in shame in order for the self to gain command of the scene) and denial, the final line of defence should all other defending scripts fail.

A large body of literature exists on manifestations of shame within the therapeutic relationship in particular, which speaks to the significant power imbalance dictating the nature of the relationship. As early as 1936, Horney (1936) was one of the first authors to consider the role of shame in negative transference reactions: "It has always hurt the patient to be dimly aware of flaws in his personality. But he feels humiliated if the analyst brings these flaws to his attention" (p. 36). Broucek (1991)

argues that it is the notion of transference and the asymmetrical nature of the therapist-client relationship which frequently induces shame within the therapeutic relationship, both on the part of the client as well as for the therapist.

Foucault, speaking to the power imbalance inherent in this relational asymmetry, refers to the use of confessional technology by therapists as reifying the power dynamics which subject the client to the scrutiny of disciplinary surveillance (Foucault, 1982; Hook, 2004). Confession is an act of discipline; clients are “liberated” at the cost of rendering their self-knowledge dangerously dependant on the categories and assumptions of the other (Hengehold). Such an understanding of the power dynamics underlying the therapist-client research has propelled the emotional turn in feminist reflexive practise which emphasises the dangerously fine line between care and control (Burman, 2006). As Ikonen, Echardt and Echardt (1993) note, “the mere admission of the need for help may be unbearably humiliating (p. 120). This situation is a potential source of shame for both the client (who may feel rejected at the lack of reciprocity) and for the therapist (who may feel that she has seduced the client into self-disclosure without being able to reciprocate).

This avoidance of self-exposure is thus an avoidance of the shame experience, but equally a source of shame for the therapist herself (Lewis, 1971) who is similarly confined to her own subjectivity. Whilst the client is compelled to self-disclose (with varying degrees of willingness and compliance), the therapist must shun her² own self-disclosure and remain an essentially invulnerable symbol (Broucek, 1991). The literature on shame within this relationship highlights the fact that the assumption that the therapist is a paragon of mental health can be a further source of shame for the therapist not having a sense of mastery or control, inducing chronic feelings of ignorance, confusion and inadequacy (Broucek, 1991, Tangney & Dearing, 2002). A further source of shame highlighted by Tangney and Dearing (2002) which relates strongly to the idealised self-image of the therapist lies in the therapist’s own counter-transference reactions to client in cases where they feel anything less than genuine concern, kindness and interest towards them. Shame results from such reactions to the

² I have chosen for simplicity’s sake to use the personal pronouns “she” and “her” as opposed to “she or he” and “his or hers.”

client serving as an “anathema to the competent and compassionate self-image of most therapists” (Hahn, 2000, p. 10).

It is clear that both the analyst’s and the client’s individual shame, as well as the shame which they co-construct within the intersubjective space, play an integral part of the therapeutic process. I would suggest that many parallels can be drawn between that particular relationship and the relationship between researcher and research participants in the case of much psychological research, and in particular research based on the conduction of open-ended interview schedules. Researchers may be similarly placed in a vulnerable, shaming position, shaped in many ways by the same socially-constructed expectations. The researcher is separated from the everyday practise being studied by the social position of researcher and thus positioned in a more distant relationship to the practise being researched (Gray, 2008). Thus, as professionals, they are not expected to self-disclose.

Research participants, however, are positioned as “subjects” – both in the very concrete sense of the term as it is used semantically, but similarly as the subject of the researcher’s scrutiny or, from a Foucauldian perspective, “subject to someone else’s control and dependence” (Foucault, 1982, p. 781). As they expose themselves emotionally, the pain of this inequality represents an inevitably one-sided, demeaning experience (Appelbaum, & Stein, 2009). This is no more pertinent than within the South African research context, which continues to be marked by power differentials in terms of race, gender and class. Clark (2004), for example, has used her interviews with rural women in South Africa to demonstrate the inevitably colonial associations of researching black women in this space.

The analysis presented below tracks the shame which arose in such a research context, demonstrating how shame neither belongs exclusively to the self or the other, but is unavoidably generated, exacerbated and maintained within the relational, intersubjective field. A dialogical self exists only among relationships and cultures, and only within this does a shame system exist, pervading entire experiential worlds (Stolorow & Atwood, 1992). As such, shame is located within the analysis not as a product of isolated mechanisms, but as forming at the interface of reciprocally interacting, yet necessarily confining, subjectivities.

RESEARCH DESIGN/METHOD

Data collection

Presented below is a case study of a particular researcher-researched relationship within the context of qualitative, feminist research in South Africa. It is an analysis of the dialogue between myself and Maria, which formed part of a study conducted by myself in order to research the psychological impact of rape in survivors within 72 hours of the event. Our meeting took place at the Thuthuzela Care Centre in the Western Cape, which provides forensic, clinical and counselling support for survivors of rape – the site of my research. I interviewed Maria using a semi-structured interview schedule. Our conversation was guided by broad, open-ended questions aimed at eliciting a narrative of her experience of the event, including the details of the rape itself, her emotional reaction and her feelings towards the institutions who were dealing with the rape. After the interview, I took detailed notes of my own thoughts and feelings surrounding the interview which were recorded in a journal, an attitude of what Gergen and Gergen (1991) term reflexivity, or critical reflection on personal experience as playing an important role in the research process (Boonzaier & de la Rey, 2004, Finch, 1993; Reinhartz, 1992). The interview itself was tape-recorded and transcribed verbatim, which serves as the primary source of data for this analysis.

The transcript of this dialogue has been analysed as part of this original research, with the focus being on an analysis of the dominant discourses which shaped the narratives of the survivors I interviewed. However, I have subsequently become aware of the pivotal role of shame, which profoundly coloured the exchange between us. I therefore present this interaction as a case study in order to delineate the various manifestations of shame which arose in the intersubjective space between us.

Case Study Methodology

Atwood and Stolorow (1993, 1984) note that the case study method has a long and distinguished history. They highlight the various ways in which such an analysis embeds itself so comfortably within intersubjective theory. One of the main reasons for this is that the case study is personalistic and phenomenological – focussing on the context of the individual's world which is located along a specific temporal dimension

of the here-and-now. Thus, the intersubjective paradigm of mutual influence and reciprocity has profound implications for this particular case study:

The varied patterns of meaning that emerge in ... research are brought to light within a specific psychological field located at the point of two subjectivities. Because the dimensions and boundaries of this field are intersubjective in nature, the interpretive conclusions of every case study must, in a very profound sense, be understood as *relative* to the intersubjective context of their origin (Atwood & Stolorow, 1984, p. 6)

Therefore, because the case study method focuses on providing a rich and context-specific description of individuals, it allows for a detailed analysis and the practical application of theory to a specific meeting in time of individuals who together co-construct a unique, mutually influenced intersubjective space.

Theoretical orientation

In keeping with an understanding of the relational nature of shame, my analysis of the interaction between myself and Maria was guided by intersubjectivity theory, characterised by an awareness of the co-constructed nature of the relationship (Jaenicke, 2008). My own theorising on the relationship from a relational or intersubjective paradigm has been strongly shaped by the work of Orange, Stolorow and Atwood in particular, who espouse a dyadic relational perspective on interactions between the self and the Other which debunks the myths of neutrality, objectivity and uncontaminated transference in the relational space (Atwood, Orange and Stolorow, 2002; Orange, Atwood, & Stolorow, 1997; Stolorow, Atwood & Orange, 1999). Their intersubjective systems theory breaks away from what they term a Cartesian, isolated-mind philosophy to an understanding of the intersubjective space which is irrefutably contextual. Psychological phenomena are thus not viewed as products of isolated intrapsychic mechanisms, but crystallize from within a matrix of intersubjective relatedness.

Altman's (2000; 2004) analysis of race, class and culture within an intersubjective dyad offers a unique contribution to this paradigm. He adopts a "three person field theory" where the "third person" represents the socio-political context of both the self

and the Other. He therefore “locates the dialectism between individuality and culturality in the unarticulated behaviour that occurs in socially constructed role relationships” (Bodnar, 2004, p.584). In this paradigm, the meeting between myself and Maria in the highly contextualised intersubjective space is viewed as a “dialogic attempt between two people together to understand one person’s organization of emotional experience by making sense together of their intersubjectively configured experience” (Orange, Atwood, & Stolorow, 1997, p. 5). For example, this includes a recognition that bearing witness to Maria’s trauma in the immediate aftermath of rape rendered me vulnerable to powerful and disturbing emotional experiences mediated through shame. As Orange (1995) notes, “witness is more than a self-object function, it is an intersubjective process of realisation that allows emergence of new kinds of self-experience” (p. 11).

Buirski (2005) draws on Orange’s theories in suggesting that “in the intersubjective field constructed with the particular witness, the survivor and witness together further the unfolding, illumination and articulation of the meaning of the traumatic experience” (p. 109). Thus, self-knowledge too is regarded as being socially constructed (Walls, 2004). The approach posits that objective reality can never truly be known as “fact” but is in fact a subjective reality constructed within the interplay of subjectivities. Indeed, this begs the question: “Can a segment of an oppressed group rely on knowledge produced, researched and theorised by others, no matter how progressive they are?” (Nkululeko 1987, as cited in Motsei, 2007, p. 164).

Similarly, intersubjective theory is characterised by an awareness that “racial, ethnic and religious differences present in the dyad are important and unavoidable contextual components that impact the relationship and engagement of participants” (Buirski, 2005, p. 76). I draw significantly on Leary’s (2000) concept of racial enactments which she defines as “interactive sequences embodying the actualisation...of cultural attitudes towards race and racial difference” (p. 639) in order to further delineate the role of such enactments within the intersubjective field. In this relational paradigm, the various manifestations of self identity are similarly products of social construction. The self is not viewed as a discrete centre of action and experience, but is ontologically social (Walls, 2004). Buirski (2005), for example, highlights the impossibility of interaction without mutual influence, noting that the self’s racialised

and gendered identity is inevitably and unavoidably disclosed to the Other as observable features of the body.

When borne in mind, this context of differences begs the question of “Otherness” within the intersubjective space. As Bartky (1997) asks “what does it mean, exactly, to be more “sensitive” to the Other?... Does greater sensitivity require perhaps a merging of self and Other? ... Is a special affective repertoire necessary for the building of solidarities across lines of race and class that is not necessary when these lines are not crossed?” (p. 180). She uses the phenomenological terms “Mitwelt” (shared world) and *Gefühlsansteckung* (emotional infection) as a proposed attitude of “feeling with” as we enter into the intersubjective encounter with the Other. Analysis was therefore conducted with a consideration of the fact that both Maria and myself were emotionally infected with the shame which so pervaded the space we had created.

Data analysis within an intersubjective paradigm also carries significant linguistic implications. A linguistic perspective on subjectivity relates to the expression of the self’s perspective in discourse, and the effect of that perspective in shaping the discourse (Finegan, 1995). As Kristeva (1989) writes, “discourse implies first the participation of the subject in his language through his speech, as an individual. Using the anonymous structure of *la langue*, the subject forms and transforms himself in the discourse he communicates to the other” (p. 11). Language structure and use is therefore integral in the expression of self and the self’s identity, the representation of perspective as well as in the formation and structuring of relational discourse. This awareness significantly shaped my own process of analysis.

Data analysis was therefore characterised by a strong focus on the role of language in marking the sites of similarity and difference in our dynamic, fluid and shifting identities. It was furthermore conducted with a particularly feminist lens, characterised by a critical focus on issues of gender, gender relations and power which both constitute, and are reproduced in, social institutions (Gavey, 2005, Wood & Kroger, 2000). Consequently, the analysis was significantly informed by an awareness of the impact of gender inequities on women’s vulnerability to shame and the influence of intricately complex yet dominating power dynamics. Such a

theoretical perspective necessitates a commitment to understanding the ways in which gender is a social production, formed, reproduced and modified within the intersubjective (Hollway, 1989; Mama, 1995) as well as a critical attention to positionality, reflexivity, the production of knowledge and the power relations that are inherent in research processes (Sultana, 2007).

From this theoretical point of departure, I explore the shame that both Maria and I both carried, as well as the shame which was created and negotiated in the space between us – the transcript being viewed as the product of what was co-constructed by both of us (Parker, 2005) within a specific context. In this co-constructed space, my own theories and cultural traditions, or what intersubjective theorists term “organising principles”, as well as those of Maria, were “crucial in understanding the meanings and impasses that develop in the intersubjective field” (Stolorow, Orange, & Atwood, 2001, p. 472).

In order to track the development of shame as it was co-constructed within this intersubjective field, the analysis follows the interaction from the beginning of the interview to the end. However, specific pieces of dialogue are highlighted as marking particularly salient moments where shame was activated and passed between the two of us. Following the example of Miller (1993), who demonstrates an inferential identification of shame themes in interview data, the selection of such moments was based on a triangulated model of data analysis dictating the tracking of the affect – namely based on the form of the conversation, the content of our dialogue as well as my own emotional memory of the event.

ANALYSIS

The analysis offered here illustrates the various manifestations of shame which arose in the interaction between myself and a research participant, Maria. The case illustrates the effects of shame as it is mediated by my own identity as a 22 year old, Jewish, middle-class female researcher and Maria's identity as a 32 year old female Coloured rape survivor living in the socially and economically oppressed Cape Flats. Our dialogue is testament to the psychic consequences of shame and the accompanying feelings of envy seen in the context of deprivation and powerlessness, as well as in the ubiquitous (and often unspeakable) presence of racial and gendered trauma (Harris, 2000).

The first contact I had with Maria was in the waiting room of the Thuthuzela Care Centre, which forms part of G. F. Jooste Hospital in Mannenberg, Cape Town. She had been brought in by the police, had been seen by a doctor and was sitting in the waiting room. I approached her to ask whether she would be interested in taking part in my research by speaking to me about her feelings surrounding her experience of having been raped. At this stage, I was aware of having been overcome with an intense feeling of shame as I initiated contact. This shame was deeply connected to my own ideas of how I imagined Maria to be perceiving me at that moment and what it was that I was asking her to do. I began to doubt myself, to fear that I was perpetuating a form of exploitation in using her trauma to further assist in the success of my own privileged education. I considered the many questions which I believed I might have asked were I in her position, and which I was beginning to ask myself: Who was I to disturb her, to ask her to reveal her most private self as a favour to me, a young and inexperienced researcher? Maria agreed to my request by following me into the interview room without saying a word.

As a result of the shame which I was experiencing, and a subsequent need to alleviate it through compensating for my own inadequacy in providing her with something beneficial, I immediately and somewhat apologetically emphasised the voluntary nature of the research, suggesting that many women who come to the centre find it difficult to talk about their experience, and that she did not have to talk to me if she did not want to.

I began the conversation by telling her that,

I know it might be difficult for you, and some of the things which we talk about might make you feel sad or upset. And that's okay, we can take a break anytime you want. If you want to stop, just tell me. We can stop the interview. And, ummm, it'll just be like a conversation between us. There's no right or wrong. I just want to find out what's happening with you and how you're feeling.

I felt myself to be forcing her to reveal a part of herself which may make her feel ashamed, "sad or upset," and attempted to counteract my resultant shame by emphasising the degree of control she would have over the conversation. I was acutely aware of how distressing a retelling of the rape may be for her, of how ashamed and exposed she may already have been as a result of me knowing about the rape. In telling her that there's "no right or wrong," it is possible that I was trying to alleviate the shame related to me being able to construct my own interpretation of her experience, to pass judgement by subjecting her to the scrutiny of my own disciplinary surveillance (Hook, 2004). It was an attempt to distance myself from "other" authoritarian figures (in this case not only the police and the medical staff at the hospital, but the numerous white researchers attempting to represent the experiences of black women) who I imagined may have asked her to expose her experience of being raped. I imagined how such figures may have subsequently delivered some form of judgement in assessing her case from the perspective of their own pre-constructed categories.

The shame I have placed in the intersubjective field thus resonated with my own feelings of shame derived from two primary sources. Firstly, at that moment my own shame was significantly informed by the discomfort I felt regarding my position as researcher; the discrepancy between the ideal self I have imagined I need to be, and the fear of being exposed as less-than. Secondly, an awareness of this position of authority brings with it the shame of being in power (reified quite physically by my white skin which immediately marked me as historic oppressor) who requires nothing short of Maria but to expose the experience of being raped to me. By "just wanting to

find out what's happening with you," I attempted to extract myself from the exploitative position of authority and to offer Maria a more accepting and empathic space in recompense for this exploitation. My use of the word "just" indicated my attempt to minimise the difficulty of what it is that I was asking her to do, an attempt to reassure her that it would not be too taxing a task.

Maria nodded in agreement and went on to express her anger and confusion at being raped:

Now I'm feeling very angry. I feel so confused. I feel that there's no hope. It's almost like I'm trapped. I can't get out. I feel like no one understands, nobody cares. I can't trust even myself. Or even cry...I can't even cry. I don't know what to do. And the most important thing of all that I feel is that I don't feel anything. I feel like nobody cares ... I won't even be able to look at myself and I've lost everything.

Maria's sense of "not being able to look at myself" speaks directly to the shame felt as a result of being raped by her husband, and the subsequent severance of her own sense of self from her social environment, a rupture of what Kaufman (1989, p. 22) terms the "interpersonal bridge" binding self and Other. This sense of social isolation is evident in her sense that "nobody cares." She has "lost everything," or in other words she has lost her connection to everything. The world is not to be trusted, and Maria "can't even trust [herself]." Her words communicated a sense that the rape has taken away an acceptable form of self from her, and in its place stood a self which even she could not tolerate.

At this stage of the interview, her feelings of rage dominated her narrative. She went on to tell me that she was so angry that she could "kill someone, really hurt someone." She outlined the thoughts she had of pouring boiling water over her husband's feet: "he would have gotten so much pain. And all his skins, all his bones would have hanged on him. But most of all he would have had pain...and I wanted him to feel that pain."

Maria's wish for her husband to "feel that pain" speaks to an expressed need to achieve some form of catharsis through the reversal of roles between herself and her husband, which may serve as a way for her to restore of a sense of power and control (Herman, 1992). Her words also suggest that her own sense of autonomy has been compromised not only by the abuse of her husband, but in the resultant feelings of rage which she feared may compromise her control to the point of being able to kill someone. Her shame in that instance appeared to be related to a sense of not being able to retain control of her own emotions, of being far from an ideal, stable self, as indicated in her subsequent words:

There's so much anger, I can't even love my own ... I've got a beautiful daughter. She's at home and I can't even love her. I feel a bit for her because I'm her mother and I care for her. A mother can never leave her child...and how could I just walk? How could a mother walk away from her child?

Implicit in her statement that "a mother can never leave her child" is a sense of judgement, strongly informed by prevailing gendered discourses of what it is meant to be a good mother (Sederer, 1976). Maria's shame of not being able to live up to this ideal standard of motherhood is evident, manifest in her initial hesitation to complete her sentence, namely the thought of not being able to love her own daughter. Her words suggest that the shame in admitting this to me is too much to be tolerated, rendering her thoughts somewhat inarticulate. The unspoken ideal self-representation is thus a mother who would never walk away from her child, the shame arising out of the discrepancy between Maria as she is now, who has left her child with her husband, and "the image or concept of oneself as one would be if one had satisfied a specific ideal" (Schafer, 1967, p. 15, as cited in Morrison, 1989). Thus, her shame may be a response of the viewing experiencing self alone to internal need and failure, "the eye turned inward" (Morrison, 1989, p. 195).

Maria then began expressing her sense of helplessness and confusion at the time of the rape: "You can beg, you can scream but they will still hurt you. Nobody will help you. No person...but when I really wanted to, I couldn't end it. But I have to get up from the floor and show no emotions, no feelings." The assumption implicit in her statement is that any display of emotion is strongly equated with a feeling of

vulnerability and of being situated in a lower social position (“on the floor”). The rape has tainted her body as spoilt, compromising her social position in the eyes of the Other (Gilbert 1997, 1998, 2002) and has taken away her own sense of personal agency by placing her in a situation which rendered her powerless to act. Morrison (1989) suggests that the “searing” (p. 113) quality associated with descriptions of shameful experiences reflects a sense of helplessness in the face of an inability to alter the state of the compromised self.

This feeling of unworthiness, of social undesirability, of helplessness leads to a shattering of the core self of the survivor (Herman, 1992), which may lead to a paralysing self-hatred, as illustrated in Maria’s subsequent words:

I know I’m beautiful, I know myself. I’m someone who likes to look in people’s faces when I talk to them. I like to look in their eyes. But now I could never look in someone’s eyes. I could never look into my own eyes because I’m just lying to myself. I will never see that part of me again. Ever. I will never look another person in the eyes again.

Maria’s words suggest that the rape has disconfirmed her previously held positive self-beliefs in her own beauty (Lee, Scragg and Turner, 2001), and has replaced this with a shame so paralysing that she is unable to look people in the eyes. Thus, Maria’s words could imply that she had internalised the perceived glare of the Other, an audience which so strongly exposes her shame that she herself is unable to look into her eyes, placing herself as both object and subject of observation (Lewis, 1971). As Morrison (1998) notes, “to feel shame, we do not need the presence of an actual shamer or a viewing audience; we need only those internal figures who have become part of who we are” (p. 16).

Maria went on to say, “I’m in a corner, I can’t move. I don’t know how to get my life back in order again. I’m a cripple.” As Morrison (1989) suggests, “a lack of acceptance by self and others is...a central narcissistic quandary, related to the deeply felt shame of the narcissist” (p. 82). This quandary places the shamed self outside of known relational and contextual structures in the interpersonal field (Broucek, 1991), a significantly disabling position. At this point in the interview, I was aware of the

fact that Maria was not looking me in the eye, and that I too was feeling somewhat disabled by her narrative. My own shame resonated with hers. I was led by a strong desire not to put her any more into a corner, not to appear as yet another judging critic. I felt unable to respond to her shame in a way which was deservedly respectful and thus remained silent whilst she continued to recount her experiences.

Maria went on to tell me the story of her first born child, who died on her third day of school at the age of six years old. She told me of how she has come to terms with this death, and how she has been blessed with another child: “Now God gave me another child, He gave me a second child. A Barbie child. That child is so perfect that when I cry, she wipes the tears away.” Here there is a striking association of perfection with Barbie – an icon which arguably celebrates the feminine ideal, both in terms of her (white) bodily perfection as well as the middle-class lifestyle she represents. The image of the perfect child reverberates with the projective phantasies of perfection and omnipotence seen as the underside of shame (Hollway, 1989), a defensive identification with the admired Other (Morrison, 1989).

When she uttered these words, I couldn't help but consider the significance of it being this “Barbie child” who was able to alleviate her pain. The allusion resonated with images of the many attempts by powerful white supremacists propelled by humanitarian ideals to “fix” Black and Coloured people (Cushman, 2000) and consequently brought the undeniability of my own whiteness and attempts at “helping” sharply into focus in my mind's eye. Considering myself positioned as such from Maria's perspective exacerbated my shame on two fundamental levels: I become deeply aware of my own privileged position in relation to hers, and began to question whether my research would be of help to her. As a result, I found myself remaining silent whilst encouraging Maria to continue uninterrupted, imagining this to be a way of redressing the balance of power by allowing her to recount her narrative on her own terms.

Maria spoke of her second child being “stronger than I am” – and the shame she felt in not being able to provide for her as she believes a mother should. She told me that if her child is so perfect, and so able to look after herself in the midst of the ongoing domestic conflict between herself and her husband, that there is something wrong

with her as a mother: “What did I do wrong? Where did I go wrong?” There appears to have been a splitting of what is “good” – Maria’s perfect child, from what is “bad” – Maria herself as a mother (Hollway, 1989). Her lengthy explanations as to why she had to leave her child at home and why the child had borne witness to such violence could be construed as an attempt to alleviate the shame she was feeling for having left her child. Therefore, it served as a defence against my perceived judgement of her competence as a mother, portrayed in her use of rhetorical questions which may have simultaneously served as an admission of “bad motherhood” in order to pre-empt my own judgement of her value as a mother, but which also demanded no answer from me. Hoping to indicate a lack of judgement on my part, I silently indicated to her to continue.

As Maria recounted this distressing narrative, she began to cry. She went on to say, “I don’t want to be a cry-baby. Growing up, I was told, “Don’t you cry, Grown-ups don’t cry.”” At this stage I was made acutely aware of her inability to look me in the eyes. Her head hung low and she avoided my gaze, an indication as to her degree of shame at crying, at being so exposed and placed in such a vulnerable position (Exline, & Winters, 1965). The image of an ideal adult self being held up, and which could possibly have informed Maria’s shame in this instance, was the ideal of someone who did not cry, an ideal from which Maria seemingly felt herself falling short at that moment. As a result, she was positioned as a child, deemed unworthy in the eyes of the many people who may once have lead her to believe that crying is shameful behaviour, and whose judgements she seemed to have internalised.

I replied, “So you don’t think it’s a very adult thing to do?” My fear of further placing her in an even more shameful position, dictated my response: by asking her to reflect on this question, I was attempting to illustrate that I might disagree with the assumption that crying is only for children, but at the same time wanted to respect this perspective by avoiding taking a confrontational stance, lest I be cast a critic. My own shame at this juncture in the interaction between us was also significantly informed by a feeling of having forced Maria into this vulnerable position against her will, prying open her very self in order to stare into what society had dictated was the ugliest, messiest and most shameful part of her. All of this purely to cater for my own academic needs, or what Guimaraes (2007) refers to as “holidaying on someone’s

misery” (p.158). As Sunde and Bozalek (1993) question, “Can white women contribute towards the struggle to make black women’s voices heard, or are we merely using their experiences to consolidate our own (tenuous) positions within the patriarchal academic structures in which we work?” (p. 32).

Maria replied, “because what happens if you cry, people slam your face against walls. They take away your dignity, they take away your pride.” Her use of the ruthless metaphor of having one’s face slammed against a wall, exemplifies her feelings of anger towards the people in her life who have shamed her. As Broucek (1991) notes, “the face is the display board of the affects and the bodily site where the self is most localised” (p. 131). The metaphor served as a vivid, concrete example of what such severe feelings of shame might have felt like for her, particularly when one considers its violent depiction of the fragmentation of self.

Maria continued by asking me, “How can someone sleep with you without asking? How can someone just do that to you? I mean, if I had the power, like he had, like my husband, the power, I mean...” at which point her thoughts appeared to drift off and she began to talk once more of her child who was waiting for her at home. The fact that Maria chose to engage in the use of the second person participle “you” as opposed to the first person singular “I” seems significant on various levels. It was firstly indicative of her desire to remove herself as the subject of the narrative, or indeed as the shamed object of scrutiny. Secondly, it highlighted the salience of our shared gendered identity and thirdly served as an invitation to me to place myself in her position, of imagining myself having been raped by someone who has slept with *me* without asking. Such a fantastical exercise served to aid my ability to empathise with the shame and subsequent feelings of anger and disbelief which Maria was expressing.

As Broucek (1991) notes

After we become aware of ourselves as objects for others, we hope that the other will at least regard us as “SUBJECT-objects,” that is, that the “subject” aspect of our dual nature for the other will be primary in the other’s response to us, thus affirming that we exist together in a field of shared affective

experience and overlapping consciousness rather than as disjunctive consciousnesses, surveying each other as mere object (p. 46).

I would like to suggest that in asking these rhetorical questions, Maria was not looking for any particular response from me on a conscious level - the questions did not demand an answer and she gave me no time to respond. However, her questions intimated a deeply felt sense of shock and betrayal and in this sense they served as an invitation for me to acknowledge and share in her disbelief, a way of creating a shared affective experience, which I did. By so doing, I highlighted the salience of our common position as women, and validating Maria's sense of a coherent, valuable self by suggesting that the actions of the rapist were objectively horrific and any woman in her position would have an equal right to feel shocked and betrayed without needing to feel any sense of personal responsibility for the event. In other words, any response to her questions which might reciprocate a similar feeling of disbelief would alleviate notions of personal blame.

Maria's questions elicited in me a feeling of shame related to my own internal thoughts of immunity to rape, a narcissistically imagined invincibility due to the fact of my own whiteness. Rape doesn't happen in my neighbourhood, specifically not to nice Jewish girls. What rose in the space between us was a recognition of these thoughts, which Maria was able later to expose in a way with her comments that having a nice car will not necessarily prevent me from experiencing similar trauma. Within the intersubjective field, Maria's need for similarity and identification on the basis of a common gendered identity was fighting for space with my own defensive need for distance and difference. I was ashamed that my own silent belief in immunity had been revealed, and was therefore unable to answer her question. Here, my silence acted as an admission of defeat, of acknowledging the shame that I carried which was so deeply connected to notions of my whiteness having marked me as being immune to domestic abuse. I feared that Maria might therefore think of me as having participated in what Hanson (1997) refers to as "the cruel social reaction to the cruelty of rape, yet another manifestation of the uneasiness of our individuality, our unsureness of the limits of our own autonomy, our anxiety about the extent to which we are subject to contingencies not freely chosen" (p. 177).

Maria continued to express a sense of pride on overcoming her crippling shame: “I’m not going to run away. I will never. I’m not going to run. I’m going to find people who are going to help me because I know people who care so much.” I asked which people she had in her life that would care for her, and she responded “Strangers...like yourself.” I felt somewhat overwhelmed by the implications of her statement, in the responsibility that I felt it placed on me to be the caring, competent rescuer, which was in sharp distinction to my own feelings of inadequacy as a young, inexperienced researcher unsure of her own abilities. Was she relying on me to be an imagined ideal Other from which I would fall short? Had I promised too much? Stein (1995) notes that much of the shame arising from a feeling of the self being idealised underlies a fear of believing the Other lest they suddenly gain consciousness of the fact that the self is not worthy of idealisation.

Similarly, I became acutely aware of the difference in meaning each of us had attributed to this encounter. What was for me another qualitative interview, couched in the objective, professional framework which that entailed, was for Maria the chance for her to share her story with a caring listener. I felt ashamed of the various ways in which I had objectified Maria for the purposes of my own research, at times not daring to open myself to a mutual exchange of subjectivities, attempting to create a defensive distance from her pain instead of relating to her in a subjective mode (Broucek, 1991).

However, at the same time the moment allowed for the creation of a deeper level of understanding. I felt a moment of mutual acknowledgement pass in the space between us, as indicated by the validation of the shared meaning of our brief encounter. Maria told me that there was no one else to be trusted “because people talk behind your back. But I do know that there are people out there who care about me.” She recounted the ways in which she had been ostracised by many members of her community for being in an abusive relationship, and the shame she felt in having to pass people by on the streets in the knowledge that they were talking about her behind her back, marking her as inferior, unruly and deficient (Ussher, 2006).

As a result of this shame, informed not only by the rape itself but by her community’s understanding of her abusive relationship with her husband, Maria said that “I can’t

allow another man to look at me, not even a doctor, a man doctor.” She contrasted this ostracism with the help and acceptance she had experienced at Thuthuzela Care Centre, specifically by the nurses who had offered her a “nice bath and made me feel much much better.” For Maria, the alleviation of her shame was significantly connected to the opportunity for a “nice wash”, a symbolic act of purification for her embodied self, a body viewed by many members of the community, and at times by herself, as being inherently contaminated. She later went on to tell me that “I had a very nice bath...I could just get into the bath and, well, I loved the bath. I loved it.” I mirrored the joy which Maria expressed in having been able to have a bath, and shared a smile with her, responding by commenting on how much better it seemed to have made her feel to have had a bath.

She told me of the many ways in which she was “not herself,” “not the same person I used to be.” The experience of being raped, and the subsequent severation of herself from her community had tainted her identity irrevocably. She began to cry, turning to me and saying:

I used to be like...when I look at you, as a young person, we’re about the same age and I think, I hope...I hope that you don’t have to go through so much pain. It really hurts. I hope you don’t have to. I hope nobody kicks you around. Because there’s no mercy, no mercy for a poor woman. You can have the car, you can have nice clothes, but don’t let anyone take that away from you...don’t let anyone do it.

Her words marked a turning point in the interaction between us. I felt as though Maria had turned the tables in a way, positioning herself as the advice-dispensing expert holding significant power and authority, and myself in the position of the shamed and abused. I felt pinned down, trapped, “in a corner” in Maria’s words. My mind raced with images of her perception of me, the young white woman with the car and the clothes embodying a white middle-class ideal. Her marking my nice clothes and my nice car spoke directly to the reality of my socio-political background, “responsible for the material disadvantage of the majority of South Africans” (Kometsi, 2001, p. 15).

Maria continued to say that “I could never imagine myself, not in a million years.” With those words, she once again shattered the illusion of my own perceived immunity to being in her position as a survivor of rape, immunity granted to me solely on the basis of my social position as a white woman. I felt as though this confidence in my own social identity, and subsequent disbelief in ever being placed in her position, had been exposed to her scrutiny. The encounter evoked in me a feeling of my own self being cast as inherently damaged and devalued, held up to the scrutiny of the Other and found lacking. From a self-psychological perspective, Maria’s allusion to our dimensions of similarity indicated a need for a twinship (or alter-ego) self-object experience which would enable her to re-establish a secure sense of self which had at that moment been fragmented by a sense of shame and subsequent isolation (Kohut, 1966, 1977, Morrison, 1989). Paradoxically, what stood between us was a recognition of our common identities as young South African women, as well as our very obvious socio-economic differences as emphasised by Maria’s reference to “the car and nice clothes.”

Maria continued by telling me that she knew her husband was going to leave her now, that he did not care for her anymore. She still felt in a corner and did not know when she would be out of it. I immediately felt the need to comment on my surprise to hear her fears that *he* was going to leave *her*, and to insist that she be the one to leave him. However, I was attempting to alleviate some of the shame that I had already felt out of a fear of having positioned myself as the superior expert on relationships. As a result, I chose not to challenge her statement and enquired instead as to her plans for returning home. She replied that she could not go home and that nobody knew where she was. She felt abandoned and completely isolated from any social network. According to Kaufman (1989), such feelings of abandonment connected with shame relates to the breaking of the interpersonal bridge, which is further severed by the isolating experience of shame itself, creating an ever-widening gulf between self and Other.

Maria said that were she to go home, that she would not let her husband know that she had been at Thuthuzela, “I would say that I’ve been at someone else.” This provided me with insight into the shame felt by herself, and presumably many other women who came to Thuthuzela Care Centre, at having to come to a hospital centre to receive

medical and psychological help. I was only able to imagine the response of Maria's husband, and other important people in their lives, in discovering that she had been there. The sense of silence and secrecy surrounding the space in which we were located mirrored the shame, silence and secrecy which so commonly shroud women's experiences of abuse. The shame of having been placed in the vulnerable position of patient was reiterated in Maria's subsequent words: "I don't want to be a cry baby, first of all. I want to be strong," indicating a sense of her felt powerlessness which Kaufman (1989) argues acts as one of the primary activators of shame affect.

Maria told me of how she had waited at the police station for hours the day before in order to get an interdict against her husband:

And when I came home, I left all those papers at my friend's house because I know that he will take that away from me. They can take my clothes away so that I can't go anywhere. They did take my clothes away, I can't go anywhere. And sometimes they take my stuff, my money, my clothes...he always has his brother helping him. And he gave his brother a smile: "Listen, take my wife's clothes" Take my personal stuff. And anyway, ummm...I went home.

As she said this, Maria pointed to the hair on her head, indicating how her husband had grabbed her hair whilst chasing her. I was immediately filled with a sense of rage at the cruelty of her husband's actions, unable to fully conceive of the sense of utter helplessness and humiliation I assumed must have arisen out of being so mercilessly objectified (Broucek, 1991). It would be possible to suggest that the shame evoked in Maria by such an encounter was significantly informed by a sense of having been objectified by her husband, seen as a bodily object to be exploited by other members of his family. The specific mechanisms of the exploitation were similarly striking: the association between shame and a feeling of nakedness is an archaic construction dating back to the Bible's recounting of Adam's shame of being found naked in the garden of Eden, an association alluded to in much of the shame literature. In Maria's case, I hypothesise that her literal nakedness spoke to a much deeper sense of being mercilessly exposed and publicly shamed.

I listened silently as she recounted more and more of the details of the abuse and more specifically of the rape, and her sense of absolute powerlessness in the face of it:

And then he pushed me down on the floor. That is why I had this bump here. It's almost like he forced me down. And he held a screwdriver, an orange screwdriver, against my throat and he said that the more I screamed he would just stab me in the throat. Because I was already so tired and mixed up. I couldn't push him away or anything. And he just forced himself on top of me....and then he had sex with me.

She relayed the narrative with her head down low, avoiding eye contact and evidently distressed. Her shame was palpable. In retrospect, it is possible that Maria's explanation of being "tired and mixed up" for not attempting to resist her husband at that moment served as a pre-emptive attempt to defend against the perceived blame which she believed I might have attributed to her, and which had been attributed to her by others for reportedly being unable to defend herself against her abusive husband. My own silence at this point in the encounter was due in part to a feeling of being overwhelmed with the depth of her pain and feeling a need to limit my identification with her distress and vulnerability. This resonates with the observations of Burman and Chantler, (2004), who, upon reflecting on their work researching domestic violence, noted that researchers themselves "might have often felt "shamed" because of their lack of engagement, and/or knowledge, or feelings of being overwhelmed both with issues of abuse and specifically in relation to minoritised women" (p. 390).

Maria talked of how she had stayed with her child watching TV, after having been chased by her husband following the rape. Both herself and her child were so tired that "I couldn't even look at her." Her head had begun to get sore, and she asked herself "Why do you feel like this?" She looked down, and I was once more aware of the shame she felt in having been so violently abused in front of her child following the rape, a shame so paralysing that she was unable to look her child in the eyes. The sense of powerlessness came not only in feeling unable to prevent her husband from physically and sexually abusing her, but also in her shame about feeling ashamed in

front of her child. This appeared to have brought forth a jolt of recognition of her ashamed state, an example of what Morrison (1989) terms “secondary shame.”

Maria then looked up, turned to me with some pride in her voice and said,

And then I feel, for a second, that I wasn't going to have it. And then I said to myself, “No Maria, remember you have your interdict. You did something”
And then, “Don't stop.” I wanted to stop, I wanted to get out... This morning I just got up and I just left. I just said to him, “You will never touch me again”
And I left.

Horney (1950) relates pride directly to shame, “pride and self-hate belong inseparably together, they are two expressions of one process” (p. 109). From this perspective, Maria's pride in leaving her husband was an attempt to regain a sense of autonomy and control, a way in which she could reclaim the situation and alleviate her shame. She referred once more to the “nice, fresh bath” that she had just been able to have, and told me that she wouldn't have been able to talk to me had she not been able to take a bath. Her comment could be understood on many levels, and I was left wondering what to make of it. Was she suggesting that my intrusive questioning would have interrupted an important process of self-healing? Or would she have been too ashamed to speak to me if she felt physically unclean?

Maria went on to say:

Thank you for listening, and I hope that you keep up with what you're doing. I know myself, I know that I can do it. God is all I have because God has put me here. I'm here for a special reason. And I hope that you will make something of your life. That's the kind of person I used to be, talking to people. I can't take your confidence away, I can never put you down.

It could be argued that from Morrison's (1989) self-psychological perspective located within narcissism, Maria's belief in being there “for a special reason” may indicate a form of defensive grandiosity. Morrison argues that shame reflects “an on-going tension-generating dialectic between a narcissistic grandiosity and desire for

perfection, and the archaic sense of self as flawed, inadequate and inferior following realisation of separateness from, and dependence on, objects. Similarly, a metaphorical dialectic exists between the wish for absolute autonomy and uniqueness and the wish for perfect merger and reunion with the projected fantasy of the ideal.” (p. 66). It could therefore be argued that Maria’s shame was inextricably linked to her grappling with feelings of narcissism. Her sense of “specialness” was imagined in terms of her self’s complete grandiosity, autonomy and independence, as well as in an imagined worthiness for merger with a fantasised ideal, a role which I had assumed to a certain extent in our encounter.

Her words indicated a possible desire for merger with an idealised Other, viewed from within a self-psychological paradigm as a defence against feeling ashamed, was reflected in Maria’s direct reference to me being “the kind of person *I* used to be,” and her seemingly effortless weaving between referring to herself and referring to me as being able to “make something of *your* life.” This sense of narcissistic pride related to a symbiosis with an ideal Other was similarly reflected in Maria having expressed a sense of pride in having been able to find someone like me, someone “who cares.” Her apparent idealisation appears to have been based on the premise that the ideals of her own self, namely those in relation to being someone who cares, have been achieved in me (Morrison, 1998).

It could be argued that Maria’s narcissistic construction of myself as being confident, caring and unwilling to let anyone “put me down,” were generated to deny and eliminate her own feelings of shame. This was particularly relevant to her own feelings of inadequacy relating to being unable to care for her child, which was implicitly compared to my own perceived ability to care for her. Her sense of shame surrounding an inability to “care” was subsequently indicated in her going on to tell me, “I can’t think of other people. I only think about myself.” This was immediately followed by her saying “A mother will never stay long away from her child, never.” She explained to me that a lot had been taken away from her and that it would therefore take time but she would like to get her life together. I understood this explanation as a way to defend against the shame inherent in her own perceived failure as a mother in staying away from her child, “a narcissistic reaction evoked by a lapse from the ego-ideal” (Lewis, 1971, p. 37):

I'd like to get my life back together. And start walking away from the people that hurt me the most. That I love the most. So then I look, you know, I cry and cry. So if I look at my life, I look at a road, but there's no end. And it looks as though there are a lot of stumbles that come my way. I'm ready for it. I thought I wasn't ready for it, but I am. That's why I made my choice to get the interdict.

Maria's reflections on her own life path reflected an acquisition of objective self-awareness associated with shame, a "tearing of oneself from the self" (Broucek, 1991, p. 38) which marks the beginning of a possible relationship with herself as well as a possible self-alienation. Interestingly, her despair and shame were juxtaposed with a sense of pride and achievement in having acquired the interdict, symbolising her own power, autonomy and control.

Maria went on to explain that "because I'm Muslim, I don't have any rights towards the husband," further marking the socio-cultural and religious differences between us. She expressed a sense of powerlessness which she perceived as being inherent to her own identity as a Muslim wife, and all the duties and obligations which that seemed to entail for her. She felt that as a Muslim wife, "they take your money away...because if it's his T.V. it will stay his T.V." Thus, the acknowledgement of religious difference brought with it an acknowledgement of the socio-economic implications of that religious difference, an expression of the meaning which she attributed to her own cultural and religious heritage. Maria's identity as a Muslim wife was not only informed by her religious beliefs but also by the socio-cultural, religious and economic matrix in which she was embedded. As Lynd (1958) notes, "the more fully one is aware of his own individual identity, the more fully he is aware of the immensity of the universe and his own place within it" (p. 255). Maria told me that as a Muslim woman:

I have to give other people lots of power, in higher places. Like the law, like people, you know. I can judge them because they can assure me that it's not me. I know it's not me, but if someone tells you, "It's you, it's you, it's you," then you keep on remembering that it's you.

The transfer of power from Maria to other people “in higher places” brought with it a sense of giving up her own autonomy to people who are imbued with the power to pass judgement on who is and who is not deserving of blame. Maria cast herself in the powerful position of judge who was able to critically review the opinions of others who attempt to reassure her. However, she simultaneously presented herself as the object of judgement, being exposed to the scrutinising voice of the ubiquitous, anonymous “they” who attributed the blame to her. The power which Maria spoke of giving up was thus equated with the somehow socially sanctioned right to pass judgement. The sense of shame which she expressed was deeply imbedded in this sense of being so mercilessly judged, relating to the root meaning of the word shame as to uncover, to expose, to wound (Lynd, 1958). Maria’s words spoke to a process of a self-evaluative internalisation, whereby she hears the accusations of the external Other and internalises the severe criticisms to the extent that she herself believes that she is to blame; “you keep on remembering it’s you.”

Maria also brought in the voice of her husband, who was telling her that “it’s because of you. It’s because of what you did. It’s because of what you made me into.” In that instance, the accusatory voice casting shame on Maria was not the imagined faceless mass of judges, which could be read as forming some manifestation of social audience, but was specifically the voice of her husband who was cast as the humiliator. She asked me, “Why must I run around and scream and look like a mad person? I don’t want him to make me mad.” Her expressed fear was one of being pathologised or of being driven mad. Broucek (1991), argues that the shame of being seen as mad relates to the self being objectified as a flawed object of scrutiny, in need of being watched under close surveillance, as opposed to being understood and related to in a subjective and experience-close paradigm. Her words spoke directly to my own fear that, by engaging in such a process of research, I was similarly objectifying her experiences. I felt ashamed that my position as researcher might be one equally as pathologising and objectifying.

Maria went on to speak about her work as a hairdresser and the sense of autonomy her employment gave her: “I don’t depend on him financially to support me. That’s the one thing he can’t take away from me. I can support myself ... I’ve got my own tools.”

She explained that being financially independent was of huge significance for her in reclaiming a sense of pride in moments of the most acutely felt shame, because

When he hits me, all crumpled up, all hurt, he kicks me, he's injured me, he gives me the ... I feel I have no hope. But I pick myself up and I blow someone's hair.

At this stage of our interaction, Maria seemed to have regained a stronger sense of control, as was exemplified in her subsequent comment that "from this point to that point, it's all up to me." This control was similarly reflected in the structure of our narrative, which she was dictating in that instance, whilst my own silence was making space in the interaction for her to carry on. She continued:

Because that's what makes me happy, [to] make my hair nice again, make my clothes nice again, make myself presentable. Because the way that you look is the way that people treat you. If you look nice, people treat you nice. If you look like, clothes just hanging, you look like a mad person.

Once more there was a reference to a fear of being pathologised by an Other, of looking "like a mad person." A sense of being marked as psychologically damaged was equated with being inadequately or poorly clothed. Thus, there was an implicit connection made between a presentation of an ideal self, as revealed through an attractive body which would be socially receivable, and a presentation of the body which would lead to being treated as "mad", which in that case could presumably be read to imply a self which is fundamentally bad, damaged or deviant and ultimately regarded as socially rejected, devaluated and shamed (Gilbert, 2002).

She continued by comparing her own physical appearance to mine:

You look nice with your pink jersey...you like a woman that's in control of her life. That's what I want to look like, not like you, or be you. I can't be you, you are you. I just want to be like you. Just be so confident. Just go somewhere. Just treat people with respect and be like a human being, not like

a *hoender been* [chicken bone]. A *hoender been* you eat and then you throw it away.

It can be argued that in her construction of me as “confident” and “in control,” Maria imbued me with a power which she referred to as having been “stripped away” from her by her husband. Morrison (1989) refers to the interaction between envy and shame, suggesting that

“envy leads to the identification (via projective identification) with the powerful object, which becomes a possession under the control of the self...for envy of the powerful object to flourish, the object must be compared with the shame ridden, incompetent self” (p. 108).

Seen from this perspective, her words mark me as the powerful object worthy of respect, which sits in stark contrast to Maria’s own depiction of herself which positions her as a less-than-human chicken bone. Interestingly, the respect her words mark me as deserving, is intrinsically linked to my “nice pink jersey” – possibly signifying material wealth and thus indicating the link between socio-economic status and immunity from shame. The words thus speak once more to the class differences which existed so profoundly between us.

Maria went on to reiterate the fact that she was proud of meeting someone who cares, a statement which reinforces Morrison’s notion of shame leading to identification and potential merger with an envied Other. The idealised, caring Other I seemed to have represented at that moment for Maria extended into her own sense of self in the sense that it was her who had been able to “find someone who cares.” This resonates with Kohutian theories that a shame-driven need for the reparation and maintenance of the self depends on the unconditional availability of the approving mirror-functions of an admiring self-object or on the potential for merger with an idealised one (Kohut, 1966, 1977).

I replied by acknowledging how difficult it could be for people to talk about their experiences like she had done. The motivation for my words was two-fold. Firstly, in that moment I had become acutely aware my own shame in perceiving myself not to

be the caring, ideal Other and of my subsequent desire to detract attention from the uncomfortable feeling of being idealised so overtly by placing her as the subject of our co-constructed narrative, a subject worthy of praise and admiration. This attitude among feminist researchers is referred to by Featherstone (1997) as “maternal ambivalence” where women working with abuse ward off fantasies of some kind of essential harmony and the corresponding shame that is generated when such fantasies are frustrated. Secondly, through the expression of my own admiration for Maria, I was attempting to acknowledge that the potentially shaming experience she may have been going through in having to recount the rape to me, thereby attempting to provide some alleviation from the shame pervading the intersubjective space we had created in order to replace it with a sense of pride and of accomplishment. This led Maria to reflect on how ashamed she had initially felt in the beginning of our interaction:

At the beginning you feel like, how can you cry to a stranger? I mean, I don't know you. I don't know where you come from. So I don't know if I can trust you. I don't know if I hate you! I expected you to chase me away, but you didn't....so I can just lift up my eyes.

This acknowledgement of the strangeness of the situation served to further emphasise the marked differences in our identities, “where we came from.” It is evident that Maria's sense of shame for having cried was significantly compounded by our distinct differences in identity – “how can you cry to a stranger?” I believe that our racial, religious and socio-economic differences may have served to heighten a sense of mistrust between us, mediated through a feeling of Otherness, of having little common ground with which to navigate the interaction. The fact that Maria was expecting me to chase her away indicates her own profound sense of self as so fundamentally flawed or damaged that chastisement, ostracism and ridicule from an Other are only to be assumed. A reflection on the degree of devaluation which occurred as a result of the abuse can be seen in Maria's following words:

I don't know if I can ever look at people again but after the crying and tears, I can look up and I can say, “You don't deserve it.” Nobody does, but when I look down I can't face a person. I feel that I can chase you and hurt you the way that I am hurt.

Her words speak to an implicit link between the degree of shame, experienced as social devaluation, and the capacity to look people directly in the eye, in other words to face them as being on an equal social footing. Maria was referring to a shame which would quite literally be exposed through the body, more specifically through her facial expression, were she to look someone in the eye. The implicit assumption being mutually created and understood in that instance between us was that if one feels good or comfortable about relating to another he or she would engage in mutual glances (Exline and Winters, 1965).

There is a strong allusion to the rage Maria might have been feeling in response to having been so shamed. A revenge seeking fantasy (Herman, 1992) of placing herself in the position of humiliator, was evident in her expressed desire to “chase you and hurt you the way I am hurt.” This reflects a tension between the ideal self, someone worthy of respect who does not deserve to be sexually abused, and who has the power to chase, to hurt, to humiliate, and the shamed self who “can’t face a person.” Interestingly, the juxtapositioning of Maria’s words implicitly create a correlation between feeling ashamed (“I can’t face a person”) and feeling the need for revenge (“I can chase you and hurt you”), suggesting that the two are inextricably linked.

It is striking that the alleviation of such shame, expressed by Maria as a feeling of being able to look someone in the eye again, was only made possible “after the crying and the tears.” Despite the fact that this was not the aim of our meeting, her words indicate that the journey which we had taken together had been a psychologically beneficial one for her. The space was filled with talk of pride, of Maria’s hope for being able to once more look people in the eyes. Her own hopefulness and expressed transformation through “the crying and the tears” resonated with my own sense of hopefulness surrounding a belief in having conducted a “good” interview – measured by a sense that I had acted in a sufficiently professional manner, and had elicited content-rich and meaningful material without leaving with a sense that I had in some way emotionally exploited a psychologically distressed research subject.

The sense of hopefulness which dominated the tone of the narrative in that instance may indeed have served to metabolise and remediate some of the shame within the

space which we had created, a way for both of us to have constructed a psychologically more coherent and bearable space in which to part. In retrospect, my comparative silence throughout the interview may be attributed to both my own shame regarding my relatively privileged position in relation to Maria, but equally to a sense of the silence as an appropriate indication of respect for her in making space for her voice to be heard. Ironically, it is her voice which dominated the dialogue throughout our interaction, yet her story remains spoken through my own strong interpretive voice as author.

Thus, our parting was strongly informed by a tension between the various manifestations of shame which had arisen in the space between us, and a need to counteract it through reclaiming a sense of pride and hopefulness for the future. This was reflected in Maria's parting words, which spoke to a self which had been shattered by shame, and a presumably deeply-felt desire to reclaim a socially acceptable, coherent self:

In my community, I am not a person that's weak. I'm a person that people look up to. If they could see me now, they'd never believe it. They would just shake their head. And I want that back. I want me back. The way I used to be.

CONCLUSION

Shame is difficult to track, due to its elusive nature. We go to considerable lengths to conceal the affect. We hide our shame behind the guises of anger, envy, contempt or depression. However, our behaviour and our language, the various ways in which we experience both our own shame and that of the Other is unmistakably palpable, enabling us to feel and explore its many channels and permutations in the intersubjective space between self and Other (Morrison, 1998). It is likely to be expressed in physical appearance as well as behaviour. Typically, the head hangs forwards, eyelids droop, the brow furrows and the gaze is cast downward, body posture is stooped and the gait is slow and shuffling (Exline, & Winters, 1965, Lewis, 1971). One of the limitations in analysing the various manifestations of shame within the intersubjective space between Maria and myself is the fact that the data analysed comprised of a written transcript (transcribed verbatim from a digital recording of the interview). Thus, analysis was limited by the neglect of the physical dimension of our meeting in tracking what is arguably one of the most visibly conveyed of all the emotions (Morrison, 1998).

Despite this significant limitation, the analysis reveals the ubiquitous manifestations of shame within the intersubjective space, traceable through the three markers of the affect; namely the content of the narrative, the form or structure of the interaction as well as my own emotional memory of the event. Often shame cannot be thought or talked about directly, but may be signified through a choice of words which serves either to describe or disguise itself. Our shame is accompanied by envy, rage, contempt and idealisation mediated through the relational defences of projection, splitting and introjection (Hollway, 1989). As Morrison (1998) notes, “fortunately, the language of shame often gives clues, if the listener is open to perceiving them” (p. 39). The words of myself and Maria reflected a piece of self-experience which is a clear example of the impact of shame, the roles of socio-cultural identity in the generation of shame and the way in which shame is readily defended against through other emotions.

Shame is an individualistic, subjective response to a uniquely constructed experience. However, certain categories of experience may predictably lead to acute feelings of

shame connected to both its public and private triggers (Morrison, 1998). Rape is one such category. The dualistic role of the shame of rape is linked to the fact that the act itself, in its violation and humiliation of the survivor, is inherently shaming. Furthermore, the survivor's belief that she is to blame, generated intrapsychically or as a result of societal attitudes towards the abuse, compound the shame. Brison (1997) observes that trauma of human origin "severs the connection between the self and the rest of humanity. Victims of human-inflicted trauma are reduced to mere objects: their subjectivity is rendered useless and viewed as worthless" (p. 15). The shame which attaches itself so strongly to rape, framed the interaction between myself and Maria on numerous levels by opening up a veritable Pandora's box of shameful feelings. However, despite the rape itself having acted as a metaphorical magnifying glass underscoring the shame between us, it only served to highlight a pre-existing shame inevitably framing our interaction.

Our co-constructed shame was partly framed by the racial differences strikingly evident between us, so boldly reflected through our bodies. The racial and religious differences existing between myself and Maria, speak to a power divide which profoundly influenced the dialogue which unfolded between us. As Leary (2000) and Harris (2000) propose, our racialised subjectivity are identities lived under the yoke of social shaming and oppression – we see skin as bearing depth and social surface, see the body as material and social, see the psyche historicised. For this reason, several African feminists have, in recent years, suggested that the exploration of "whiteness" should be a primary political focus of white feminists working in Africa (Bennett & Friedman, 1997). My own identity as a white, Jewish, middle-class and University-educated female profoundly coloured my own experience of self, of Maria, and necessarily my perception of the intersubjective space we had created - inevitably viewed through my own specific paradigms.

Despite the fact that my relationship with Maria was one of interviewer-interviewee, as opposed to analyst-patient, our relationship was undoubtedly cast in many ways by the same shame-inducing asymmetry of a pre-existing frame, me in position of neutral expert and Maria in the vulnerable position of psychologically distressed subject. Her shame in being identified as a survivor of rape resonated with my own shame in asking her to expose the painful and humiliating experience, and my own feelings of

inadequacy related to the falling short of a professional ideal. As Orange (1995) notes, there is no such thing as an infant, there is no such thing as a patient, and there is no such thing as the patient or the analyst's shame. I would similarly extend her argument to suggest that in the interaction between us, there was no such thing as my shame or Maria's shame. Instead, our interaction was shaped in a fundamental way by the shame which arose in the space between us, a shame intrinsically linked to the politics of knowledge production and to the inadequacies and exclusionary characteristics of prevailing institutional practises regarding the authority of privileged researchers (Burman, 2004; Gray, 2008; Taylor, 1996).

Research from within a feminist reflexive framework demands recognition of the powerful yet subtle ways in which shame can significantly inform the research relationship. Unacknowledged shame may lead to researchers themselves having trouble maintaining neutrality and to research participants becoming idealised or vilified rather than seen as they are (Scheff, & Retzinger, 1997). It is therefore critical that the powerful influence of shame is considered in feminist reflexive practise. This is particularly pertinent given the renewed interest in a wider "reflexive turn" in the emotional politics of feminist research which considers the research interview as the point or moment of contact at which subjectivity is formed, negotiated and manoeuvred about (Burns, 2003, Jensen, 2008, Rice, 2009). As Rice (2009) argues,

Feminist investigators have explored influences of identities such as race, class, gender, age, ability and nation on researchers' interactions with respondents and on the integrity of knowledge they produce.... Significantly, such an insight may point to the importance of *not* retreating to familiar axes of power and oppression (race, class and gender) as primary interpretive lens when researching women (p. 262)

Given the return of the body and emotions as a site for feminist and psychological inquiry, and a focus on the "emotional geographies" of the research relationship (Burman, 2004, 2006; Burman & Chantler, 2004), what is called for is a reflexivity that takes into account much more than an acknowledgement of the ways in which we 'affect' the data collected and how our own (powerful) subject positions are implicated in research. Analyses of power relations which focus solely on structural,

namely racial, inequalities within the research space are limited – what is called for is a focus on what Burman (2003), terms the “intersectionality” of multiple differences as a promising starting point for critical thinking and practise. This would enable a deeper consideration of the constantly shifting degrees of transparency and obscurity, connection and separation that recur in the multiple relations that constitute reflexive research and knowing (Doucet, 2008). As Gray (2008) argues

Emotional identifications and attachments are central to the (re)framing of the object of study and the politics of knowledge production. Thus, attempts to find more reliable grounds for knowledge claims must be located in the interrelated landscapes of feeling, intellect and politics (p. 935).

This is particularly relevant to the South African context of qualitative psychological research, largely dominated by white women interviewing black and coloured women (Motsei, 2007) in a context of high levels of trauma, specifically gender-based violence, HIV/AIDS and poverty – a landscape creating a veritable breeding ground for shame. Swartz (2007) marks that discussions of race in South Africa, particularly those situated within a professional context, are often laden with anxiety, and that a shame-induced avoidance of naming or confronting such anxiety can cause a debilitating paralysis. Therefore, in such a context, we need to not only track the effect of shame on the research subsequently produced, but to similarly be guided by ethical principles in considering its “extra-discursive” effects on participants (Burns, 2003; Rice, 2009). Such a consideration would arguably be in line with Mama’s (2007) call for African intellectuals in particular “to engage more proactively with the methodological implications of their own liberatory intellectual ethics...framed by considerations of identity” (p. 1) in the context of multiple axes of difference, inequalities and relational politics.

It is the very fact that we are so deeply embedded in this socio-political context which holds the key to relational transformation, offering us the opportunity to acknowledge the affects of our own context on the way in which we perceive the Other, reshaping our realities and transforming the lens through which we view the world. Thus:

We have an unparalleled opportunity to understand better what lives inside us unconsciously, by looking closely at what happens in encounters with what we as individuals experience not just as otherness but as the forbidden, the taboo. For every person, the contents, the anxiety will be different. There is no generic way of looking at race in analysis – or gender, or sexuality – it will be as unique as our own subjectivity and projected fear (Swartz, 2007, p. 362).

However, there is similarly a need to challenge discourses of transparency which invite researchers to subject themselves to the scrutiny of others through an incitement to confession. I would argue that such subjugation is, ironically, also motivated by the shame of our limitations as researchers. If reflection necessarily “requires an ability to view oneself as others view one” (Stephenson, Kippax, & Crawford, 1996, p. 183), it is the inherently shaming experience of confession through a “penetrating gaze” (Gray, 2008, p. 936). Such confessional technologies being brought into feminist reflexive writing may equally threaten to become a new tool of regulation, normalising and circumscribing emotional expression (Burman, 2006). Indeed, particular perceptions of reflexivity are becoming the index for judgements regarding what is “good” and what is “bad” research (Gray, 2008). Finlay (2002), for example, goes so far as to name the process of reflexivity one of “outing” the researcher, connoting the shaming process of exposing one’s subjectivity. Furthermore, the academic language and tone within which such reflexivity is situated may lead to a retreat of the privileged researcher into inaccessible and insular “ivory tower angst” (Langhout, 2006, p.272), “navel-gazing” or an “impasse” of research underlined by fears of (mis)representation (Sultana, 2007, p. 375). Rather, this particular analysis has outlined the positionality of shame, the way in which it is not only located in individual interiority but reactively constructed in the intersubjective. An understanding of such reflexivity should therefore be widened from a self-centred exercise to consider the critical relations which shape academic work (Doucet, 2008).

Shame is a powerfully communicating affect with potentially paralysing effects. Alleviating its noxious effects requires an awareness and acceptance of its ubiquitous presence in our lives, as well as the conditions in which shame plays an important part (Morrison, 1998). The recent burgeoning of shame-related literature, and a particular exploration of its manifestations on the micro-level of the research relationship

through the analytic resource of psychodynamic understanding, has highlighted the necessity of feminist reflexive practise considering shame. We need to reflexively locate the emotion within our racialised, gendered and institutionalised research relationships, and to wrestle with the implications this has for meaning-making and embodied subjectivity. Such a consideration would arguably provide invaluable insights for feminist reflexive research and practise as it pays critical attention to positionality, reflexivity, the production of knowledge and the power relations that are inherent in research processes.

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References

- Altman, N. (2000). Black and white thinking: A psychoanalyst reconsiders race. *Psychoanalytic Dialogues, 10*, 589.
- Altman, N. (2004). Whiteness uncovered: Commentary on papers by Melanie Suchet and Gillian Straker. *Psychoanalytic Dialogues, 14*, 439-446.
- Andrews, B., Brewin, C., Rose, S., & Kirk, M. (2000). Predicting PTSD symptoms in victims of violent crime: The role of shame, anger and childhood abuse. *Journal of Abnormal Psychology, 109*, 69-73.
- Appelbaum, A. H., & Stein, H. (2009). The impact of shame on the psychoanalysis of a borderline child. *Psychoanalytic Psychology, 26*, 26-41.
- Artz, L. (1999). *Violence against women in rural Southern Cape: Exploring access to justice within a feminist jurisprudence framework*. Unpublished Masters Thesis, University of Cape Town, Cape Town.
- Atwood, G. E., Orange, D. M., & Stolorow, R. D. (2002). Shattered worlds, psychotic states: A post-Cartesian view of the experience of personal annihilation. *Psychoanalytic Psychology, 19*, 281-306.
- Atwood, G. E., & Stolorow, R. D. (1993). *Faces in a Cloud: Intersubjectivity in Personality Theory*. London: Jason Aronson.
- Atwood, G. E., & Stolorow, R. D. (1984). *Psychoanalytic Inquiry Book Series: Vol. 4. Structures of Subjectivity: Explorations of Psychoanalytic Phenomenology*. Hillsdale NJ: The Analytic Press.
- Bartky, S. L. (1997). Sympathy and solidarity: On a tightrope with Scheler. In Meyers, D. T. (Ed.), *Feminists Rethink the Self* (pp. 177-198). Oxford: Westview Press.
- Bennett, J. (2000). The politics of writing. *Agenda, 46*, 3-12.
- Bennett, J. (2001). "Enough lip service!" Hearing post-colonial experience of gender-based violence. *Agenda, 50*, 88-96.
- Bennett, J., & Friedman, M. (1997). White women and racial autobiography. *Agenda, 32*, 49-55.
- Bodnar, S. (2004). Remember where you came from: Dissociative process in multicultural individuals. *Psychoanalytic Dialogues, 14*, 581-603.
- Boonzaier, F., & de la Rey, C. (2004). Women abuse: the construction of gender in women and men's narratives of violence. *South African Journal of Psychology, 34*, 443-464.
- Brison, J. (1997). Outliving oneself: Trauma, memory and personal identity. In Meyers, D. T. (Ed.), *Feminists Rethink the Self* (pp. 12-39). Oxford: Westview Press.

- Broucek, F. J. (1991). *Shame and the Self*. New York: Guilford Press.
- Broucek, F. J. (1997). Shame: early developmental issues. In Lansky, M., & Morrison, A. (Eds.), *The Widening Scope of Shame* (pp. 41-62). London: The Analytic Press.
- Buchbinder, E., & Eisikovitz, Z. (2003). Battered women's entrapment in shame: A phenomenological study. *American Journal of Orthopsychiatry*, 73, 355-366.
- Buirski, P. (2005). *Practising Intersubjectively*. New York: Jason Aranson.
- Burman, E. (2003). From difference to intersectionality: challenges and resources. *European Journal of Psychotherapy, Counselling & Health*, 6, 293-308.
- Burman, E. (2004). Taking women's voices: The psychological politics of feminisation. *Psychology of Women Section Review*, 6, 3-21.
- Burman, E. (2006). Emotions and reflexivity in feminised education action research. *Educational Action Research*, 14, 315-322.
- Burman, E., & Chantler, K. (2004). There's no place like home: emotional geographies of researching "race" and refuge provision in Britain. *Gender, Place and Culture*, 11, 375-397.
- Burman, E., & Chantler, K. (2005). Domestic violence and minoritisation: Legal and policy barriers facing minoritised women leaving violent relationships. *International Journal of Law and Psychiatry*, 28, 59-74.
- Burns, M. (2003). Interviewing: embodied communication. *Feminism and Psychology*, 13, 229-236.
- Butler, J. (2003). Violence, mourning, politics. *Studies in Gender and Sexuality*, 4, 9-37.
- Chisala, S. (2008). Rape and HIV/AIDS: Who's protecting whom? In Artz, L., & Smythe, D. (Eds.), *Should We Consent: Rape Law Reform in South Africa* (pp. 52-71). Cape Town: Juta.
- Clark, J. (2004). "Burning beneath the gaze": a critical exploration of the positions, problems and possibilities of reflexivity in the research process, unpublished paper presented at *RIHSC Inaugural Conference*, Manchester Metropolitan University, July.
- Crais, S., & Scully, P. (2009). *Sara Baartman and the Hottentot Venus: A Ghost Story and a Biography*. New Jersey: Princeton University Press.
- Cushman, P. (2000). White guilt, political activity and the analyst: Commentary on the paper by Neil Altman. *Psychoanalytic Dialogues*, 10, 607-618.

- Davis, K. (1996). From objectified body to embodied subject: A biographical approach to cosmetic surgery. In Wilkinson, S. (Ed.), *Feminist Social Psychologies: An International Perspective* (pp. 104-118). Buckingham: Open University Press.
- de la Rey, C. (1997). South African feminism, race and racism. *Agenda*, 32, 6-10.
- Dianne, E. (2008). Sex and shame: the inhibition of female desires. *Journal of the American Psychoanalytic Association*, 56, 73-98.
- Doucet, A. (2008). "From her side of the Gossamer wall(s): reflexivity and relational knowing. *Qualitative Sociology*, 31, 73-87.
- Erasmus, Z. (1997). "Oe! My hare gaan huistoe": Hair-styling as black cultural practise. *Agenda*, 32, 11-16.
- Erikson, E. (1950). *Childhood and Society*. New York: W. W. Norton.
- Exline, R. V., & Winters, L. C. (1965). Affective relations and mutual glances in dyads. In Tomkins, S., & Izard, C. (Eds.), *Affect, Cognition, & Personality*, (pp. 319-351). New York: Springer.
- Featherstone, B. (1997). "I wouldn't do your job!" Women, social work and child abuse. In Hollway, W., & Featherstone, B. (Eds.), *Mothering and Ambivalence*, (pp. 167-192). London: Routledge.
- Feiring, C., Taska, L., & Lewis, M. (2002). Adjustment following sexual abuse discovery: The role of shame and attributional style. *Developmental Psychology*, 38, 79-92.
- Finch, J. (1993). "It's great to have someone to talk to": ethics and politics of interviewing women. In Hammersley, M. (Ed.), *Social Research, Philosophy, Politics and Practise* (pp. 116-180). London: Sage.
- Finegan, E. (1995). Subjectivity and subjectivism: an introduction. In Stein, D., & Wright, S. M. (Eds.), *Subjectivity and Subjectivism* (pp. 1-15). Cambridge: Cambridge University Press.
- Finlay, L. (2002). "Outing" the researcher: the provenance, process and practise of reflexivity. *Qualitative Health Research*, 12, 531-545.
- Foucault, M. (1982). The subject and power. *Critical Inquiry*, 8, 775-795.
- Freud, S. (1940-1952) *Beyond the Pleasure Principle and other writings*. English translation by John Reddick, 2003. London: Penguin Books.
- Gavey, N. (2005). *Just Sex? The Cultural Scaffolding of Rape*. London: Routledge.
- Gergen, K. J., & Gergen, M. M. (1991). Toward reflexive methodologies. In Steier, F. (Ed.), *Research and Reflexivity* (pp. 76-96). London: Sage.

- Gilbert, P. (1997). The evolution of social attractiveness and its role in shame, humiliation, guilt and therapy. *British Journal of Medical Psychology*, 70, 113-147.
- Gilbert, P. (1998). What is shame? Some core issues and controversies. In Gilbert, P., & Andrews, B. (Eds.), *Shame, Interpersonal Behaviour, Psychopathology and Culture* (pp. 3-38). New York: Oxford University Press.
- Gilbert, P. (2002). Body shame: A biopsychosocial conceptualisation and overview with treatment implications. In Gilbert, P., & Miles, J. (Eds.), *Body Shame: Conceptualisation, Research and Treatment* (pp. 3-55). New York: Routledge.
- Gough, B. (2003). Deconstructing reflexivity. In Finlay, O., & Gough, B. (Eds.), *Reflexivity: A Practical Guide for Researchers in Health and Social Sciences* (pp. 21-36). London: Blackwell.
- Grabe, S. (2007). Body objectification and depression in adolescents: The role of gender, shame and rumination. *Psychology of Women Quarterly*, 31, 164-175.
- Gray, B. (2008). Putting emotion and reflexivity to work in researching migration. *Sociology*, 42, 935-942.
- Guimaraes, E. (2007). Feminist research practise: using conversation analysis to explore the researcher's interaction with participants. *Feminism and Psychology*, 17, 149-161.
- Hahn, W. K. (2000). Shame: Countertransference identifications in individual psychotherapy. *Psychotherapy*, 37, 10-21.
- Hahn, W. K. (2004). The role of shame in negative therapeutic reactions. *Psychotherapy: Theory, Research, Practise, Training*, 41, 3-12.
- Hanson, K. (1997). Reasons for shame. In Lansky, M. R., & Morrison, A. P. (Eds.), *The Widening Scope of Shame* (pp. 155-180). London: The Analytic Press.
- Harris, A. (2000). Haunted talk, healing action: Commentary on paper by Kimberlyn Leary. *Psychoanalytic Dialogues*, 10, 655-662.
- Hengehold, L. (2000). Remapping the event: Institutional discourses and the trauma of rape. *Signs: Journal of Women in Culture and Society*, 26, 189-212.
- Herman, J. (1992). *Trauma and Recovery*. London: Pandora.
- Hollway, W. (1989). *Subjectivity and Method in Psychology: Gender, Meaning and Science*. London: Sage.
- Hook, D. (2004). Foucault, disciplinary power and the critical pre-history of psychology. In Hook, D. (Ed.), *Critical Psychology* (pp. 210-238). Cape Town: UCT Press.

- Horney, K. (1936). The problem of the negative therapeutic reaction. *Psychoanalytic Quarterly*, 5, 29-44.
- Horney, K. (1950). *Neurosis and Human Growth: The Struggle Towards Self-Realisation*. New York: Norton.
- Hunter, S. (2005). Negotiating professional and social voices in research principles and practise. *Journal of Social Work Practice*, 19, 149-162.
- Ikonen, P., & Rechartd, E. (1993). The origin of shame and its vicissitudes. *Scandinavian Psychoanalytic Review*, 16, 100-124.
- Jaenicke, C. (2008). *The risk of relatedness: Intersubjectivity theory in clinical practise*. Lanham: Jason Aranson.
- Jakupcak, M., Tull, M. & Roemer, L. (2005). Masculinity, shame and fear of emotions as predictors of men's expressions of anger and hostility. *Psychology of Men and Masculinity*, 6, 275-284.
- Janoff-Bulman, R. (1979). Characterological versus behavioural self-blame: Inquiries into depression and rape. *Journal of Personality and Social Psychology*, 37, 1798-1809.
- Jensen, T. (2008). "Speaking as a mother": notes on becoming a researcher and not getting onto supernanny. *Feminism and Psychology*, 18, 384-388.
- Kaufman, G. (1989). *The Psychology of Shame: Theory and Treatment of Shame-based Syndromes*. London: Routledge.
- Kiguwa, P. (2004). Feminist critical psychology in South Africa. In Hook, D. (Ed.), *Critical Psychology* (pp. 278-315). Cape Town: UCT Press.
- Kinston, W. (1983). A theoretical context for shame. *International Journal of Psychoanalysis*, 64, 213-266.
- Kohut, H. (1966). Forms and transformations of narcissism. *Journal of American Psychoanalytic Assn*, 14, 243-272.
- Kohut, H. (1977). *The Restoration of the Self*. New York: International University Press.
- Kometsi, K. (2001). Multi-racial clinical settings and the counter-transferential feelings of a black clinical psychologist. *Psychoanalytic Psychotherapy in South Africa*, 9, 11-21.
- Koss, M. (2000). Blame, shame and community: Justice responses to violence against women. *American Psychologist*, 53, 1332-1343.
- Kristeva, J. (1989). *Language the unknown: An initiation into linguistics*. New York: Colombia University Press.

- Langhout, R. (2006). Where am I? Locating myself and its implications for collaborative research. *American Journal of Community Psychology*, 37, 267-274.
- Lansky, M. (1999). Shame and the idea of a central affect. *Psychoanalytic Inquiry*, 19, 347-361.
- Leary, K. (2000). Racial enactments in dynamic treatment. *Psychoanalytic Dialogues*, 10, 639-653.
- Lee, D. A., Scragg, P., & Turner, S. (2001). The role of shame and guilt in traumatic events: A clinical model of shame-based and guilt-based PTSD. *British Journal of Medical Psychology*, 74, 451-466.
- Leskela, J., Dieperink, M., & Thuras, P. (2002). Shame and posttraumatic stress disorder. *Journal of Traumatic Stress*, 15, 223-226.
- Levett, A. (1994). Problems of cultural imperialism in the study of childhood sexual abuse. In Dawes, A., & Donald, D. (Eds.), *Childhood and adversity: psychological perspectives from South African research* (pp. 240-260). Cape Town: David Philip.
- Lewis, H. B. (1971). *Shame and Guilt in Neurosis*. New York: International Universities Press.
- Lindisfarne, N. (1998). Gender, shame and culture: An anthropological perspective. In Gilbert, P., & Andrews, B. (Eds.), *Shame: Interpersonal Behaviour, Psychobiology and Culture* (pp. 246-260). New York: Oxford University Press.
- Lombardi, R. (2007). Shame in relation to the body, sex and death: A clinical exploration of the psychotic levels of shame. *Psychoanalytic Dialogues*, 17, 385-399.
- Lynd, H. M. (1958). *On Shame and the Search for Identity*. New York: Harcourt, Brace and Company.
- Mama, A. (1995). *Beyond the Masks: Race, Gender and Subjectivity*. London: Routledge.
- Mama, A. (2007). Is it ethical to study Africa? Preliminary thoughts on scholarship and freedom. *African Studies Review*, 50, 1-26.
- Maw, A., Womersley, G., & O'Sullivan, M. (2008). The psycho-social impact of rape and its implications for expert evidence in rape trials. In Artz, L., & Smythe, D. (Eds.), *Should We Consent: Rape Law Reform in South Africa* (pp. 121-143). Cape Town: Juta.
- Mercurio, A. (2007). The relation between self-objectification and body shame: An analysis of mediating and moderating variables. *Dissertations Abstract International*, 68 (4-B), 2714.

- Mercurio, A. (2008). Self-objectification and well-being: The impact of self-objectification on women's overall sense of self-worth and life satisfaction. *Sex Roles*, 58, 458-466.
- Miles, K. T. (1997). Body badges: Race and Sex. In Zack, N. (Ed.), *Race/Sex: Their Sameness, Difference and Interplay* (pp. 133-144). New York: Routledge.
- Miller, S. (1993). *The Shame Experience*. London: The Analytic Press.
- Morgan, M. L. (2008). *On Shame*. New York: Routledge.
- Morrison, A. P. (1983). Shame, the ideal self and narcissism. *Contemporary Psychoanalysis*, 19, 295-318.
- Morrison, A. P. (1989). *Shame, the Underside of Narcissism*. Hillsdale: The Analytic Press.
- Morrison, A. P. (1994). The breadth and boundaries of a self-psychological immersion in shame – a one-and-a-half person perspective. *Psychoanalytic Dialogues*, 4, 19-35.
- Morrison, A. P. (1998). *The Culture of Shame*. New Jersey: Jason Aronson.
- Morrison, A. P., & Stolorow, R. D. (1997). Shame, narcissism and intersubjectivity. In Lansky, M., & Morrison, A. (Eds.), *The Widening Scope of Shame* (pp. 63-87). London: The Analytic Press.
- Motsei, M. (2007). *The Kanga and the Kangaroo Court: Reflections on the Rape Trial of Jacob Zuma*. Cape Town: Jacana Media.
- Nathanson, D. (1987). A timetable for shame. In Nathanson, D. (Ed.), *The Many Faces of Shame* (pp.1-64). New York: Guilford Press.
- Naylor, N. (2008). The politics of a definition. In Artz, L., & Smythe, D. (Eds.), *Should We Consent: Rape Law Reform in South Africa* (pp. 22-51). Cape Town: Juta.
- Ndebele, N. (1998). Memory, metaphor and the triumph of narrative. In Nuttall, S., & Coetzee, C. (Eds.), *Negotiating the Past: The Making of Memory in South Africa* (pp. 19-28). Cape Town: Oxford University Press.
- Orange, D. M. (1995). *Emotional Understanding: Studies in Psychoanalytic Epistemology*. New York: Guilford Press.
- Orange, D. M., Atwood, G. E., & Stolorow, R. D. (1997). *Working Intersubjectively: Contextualism in Psychoanalytic Practice*. Hillsdale, N. J.: Analytic Press.
- Parker, I. (2005). *Qualitative Psychology: introducing radical research*. London: Open University Press.

- Pasillas, R. M. (2008). Accepting, suppressing and monitoring thoughts about body shame in college women. *Dissertation Abstracts International*, 69 (4-B), 2636.
- Patai, D. (1991). US academics and third world women: is ethical research possible? In Gluck, S., & Patai, D. (Eds.), *Women's Words: The Feminist Practise of Oral History* (pp. 149-169). New York: Routledge.
- Piers, G., & Singer, M. (1953). *Shame and Guilt*. Springfield, Il: C. C. Thomas.
- Pithey, B. (2008). The personal is the political: Disclosure of rape survivor's personal records. In Artz, L., & Smythe, D. (Eds.), *Should We Consent: Rape Law Reform in South Africa* (pp. 99-120). Cape Town: Juta.
- Posel, D. (2005a). The scandal of manhood: "Baby rape" and the politicization of sexual violence in post-apartheid South Africa. *Culture, Health & Sexuality*, 7, 239-252.
- Posel, D. (2005b). Sex, death and the fate of the nation: Reflections on the politicization of sexuality in post-apartheid South Africa. *Africa*, 75, 125-153.
- Reinharz, S. (1992). *Feminist Methods in Social Research*. New York: Oxford University Press.
- Reyes, G. (1999). Attachment, shame-proneness and rejection sensitivity: Interpersonal processing variables that may mediate the impact of traumatic events. *Dissertation Abstracts International: Section B: The Sciences and Engineering*, 60, 374.
- Rice, C. (2009). Imagining the other? Ethical challenges of researching and writing women's embodied lives. *Feminism and Psychology*, 19, 245-266
- Robins, S. (1998). Silence in my father's house: memory, nationalism and narratives of the body. In Nuttall, S., & Coetzee, C. (Eds.), *Negotiating the Past: The Making of Memory in South Africa* (pp. 120-140). Cape Town: Oxford University Press.
- Rose, J. (2003). *On Not Being Able to Sleep: Psychoanalysis and the Modern World*. London: Random House.
- Rosenbaum, B., & Varvin, S. (2007). The influence of extreme traumatization on body, mind and social relations. *International Journal of Psychoanalysis*, 88, 1527-1542.
- Scheff, T. J., & Retzinger, S. M. (1997). Helen Block Lewis on shame. In Lansky, M., & Morrison, A. (Eds.), *The Widening Scope of Shame* (pp. 139-154). London: The Analytic Press.
- Schore, A. N. (2003). *Affect Regulation and the Repair of the Self*. New York: W. W. Norton.

Schwikkard, P. J. (2008). Getting somewhere slowly – the revision of a few evidence rules. In Artz, L., & Smythe, D. (Eds.), *Should We Consent: Rape Law Reform in South Africa* (pp. 72-98). Cape Town: Juta.

Stein, R. (1995). *The shame experiences of the analyst*. Conference presentation: Cross-currents in Self-Psychology. San Francisco.

Stephenson, N., Kippax, S., & Crawford, J. (1996). You and I and she: memory-work and the construction of self. In Wilkinson, S. (Ed.), *Feminist Social Psychologies: An International Perspective* (pp. 182-200). Buckingham: Open University Press.

Steyn, E., & Steyn, J. (2008). Revictimisation of rape victims by the South African Police Service. *Acta Criminol*, 21, 41-60.

Stolorow, R. D., & Atwood, G. E. (1992). *Contexts of Being: The Intersubjective Foundations of Psychological Life*. London: The Analytic Press.

Stolorow, R. D., Atwood, G. E., & Orange, D. M. (1999). Kohut and contextualism: Towards a post-Cartesian psychoanalytic therapy. *Psychoanalytic Psychology*, 16, 380-388.

Stolorow, R. D., Atwood, G. E., & Orange, D. M. (2001). Cartesian and post-cartesian trends in relational psychoanalysis. *Psychoanalytic Psychology*, 18, 468-484.

Straker, G. (2004a). Race for cover: Castrated whiteness, perverse consequences. *Psychoanalytic Dialogues*, 14, 405-422.

Straker, G. (2004b). A look beyond the mirror – What he saw and I didn't: Reply to commentary. *Psychoanalytic Dialogues*, 14, 447-452.

Suchet, M. (2004). A relational encounter with race. *Psychoanalytic Dialogues*, 14, 423-428.

Sultana, F. (2007). Reflexivity, positionality and participatory ethics: negotiating fieldwork dilemmas in international research. *ACME: An International E-Journal for Critical Geographies*, 6, 375-385.

Sunde, J., & Bozalek, V. (1993). (Re)searching difference. *Agenda*, 19, 29-36.

Swartz, S. (2007). The power to name: South African intersubjective psychoanalytic psychotherapy and the negotiation of racialised histories. *European Journal of Psychotherapy and Counselling*, 9, 177-190.

Tajfel, H., & Turner, J. C. (1986). The social identity theory of intergroup behavior. In S. Worchel & W. G. Austin (Eds.), *Psychology of intergroup relations* (pp. 7-24). Chicago: Nelson-Hall.

Tangney, J. P., & Dearing, R. L. (2002). *Shame and Guilt*. New York: Guilford Press.

Tate, S. (2007). Black beauty: Shade, hair and ant-racist aesthetics. *Ethnic and Racial Studies*, 30, 300-319.

Taylor, K. (1996). Keeping mum: the paradoxes of gendered power relations in interviewing. In Burman, E. et. al. (Eds.), *Challenging Women: Psychology's Exclusions, Feminist Possibilities* (pp. 106-124). Buckingham: Open University Press.

Ussher, J. M. (2006). *Managing the Monstrous Feminine: Regulating the Reproductive Body*. New York: Routledge.

Walkerdine, V. (1996). Working class women: psychological and social aspects of survival. In Wilkinson, S. (Ed.), *Feminist Social Psychologies: An International Perspective* (pp. 145-161). Buckingham: Open University Press.

Walls, G. B. (2004). Towards a critical global psychoanalysis. *Psychoanalytic Dialogues*, 14, 605-634.

Wilson, J.P., Drozdek, B., & Tukovic, S. (2006). Post-traumatic shame and guilt. *Trauma, Violence and Abuse*, 7, 122-141.

Wood, K (2005) Contextualising group rape in post apartheid South Africa. *Culture, Health and Sexuality*, 7, 303-317.

Wood, L., & Kroger, R. O. (2000). *Doing Discourse Analysis: Methods for Studying Action in Talk and Texts*. Thousand Oaks, California: Sage.

Wurmser, L. (1981). *The Mask of Shame*. Baltimore: Johns Hopkins University Press.