

The Pitchfork Princess. Transforming the Torment of Shame

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Abstract

Gestalt therapist and adolescent client collaborated in writing an account of the therapeutic process in understanding and transforming a rupture within the adolescent's sense of self, originated in shame and resulting in suicidal depression. The report includes an evaluation of the etiology of the adolescent's internal conflict between sense of inadequacy in social and sexual relationships and her self-judgment and self-rejection. Through the support of the therapeutic relationship, the adolescent girl built self support by experimenting with expressing her emotions, especially anger, to family members and close friends. The process whereby the therapist facilitated the adolescent in restoring integration of self and a sense of self worth and self love is described. Furthermore, a brief discussion of perspectives of early Greeks to those in contemporary psychological literature on the dynamics of shame and self hatred is presented.

Keywords: Gestalt therapy; Shame; Self; Integration.

La Princesa de la Horca. Transformando el Tormento de Vergüenza

Compendio

Este artículo presenta un trabajo de colaboración entre una Gestalt terapeuta y su cliente adolescente que escriben sobre su proceso terapéutico, buscando entender y transformar una ruptura en su sentido de self que se originó en la vergüenza y resultó en depresión suicida. Este trabajo incluye una evaluación cerca de la etiología del conflicto interno de la adolescente entre su sentido de inadecuación con respecto a relaciones sociales y sexuales y su auto juicio y rechazamiento. A través de la ayuda de la relación terapéutica, la adolescente construyó auto-suporte, experimentando expresar sus emociones, especialmente la rabia, a los miembros de la familia y a amigos. El proceso en que la terapeuta ayuda la adolescente en la restauración de la integración del self y de un sentido de auto-estima y auto-valoración es descrito. Además, es presentada una discusión cerca de las perspectivas de los Griegos y de literatura psicológica contemporánea sobre la dinámica de la vergüenza y auto-odio.

Palabras clave: Gestalt terapia; Vergüenza; Self; Integración.

Jung (1933, p. 234) expressed his opinion about the basis of psychological transformations with a simple, yet enigmatic statement, "We cannot change anything unless we accept it." Many years later, Beisser (1970, p. 77), a Gestalt therapist, pointed that "Change occurs when one becomes what he is, not when he tries to become what he is not." Those embarking on the journey of psychotherapy to change an unwanted behavior, emotion or to understand oneself more clearly, are required to revisit those attributes or behaviors they have carefully tucked away from the judgmental eye of oneself and others. Such courageous explorers of psyche must rediscover what has been hidden, and embrace these aspects as facets of oneself.

This work of self-acceptance and the healing of the underlying shame are necessary in psychotherapy with children and adolescents. The shame experience is often a source of many symptoms that bring children and ado-

lescents into therapy. Yet, it is far too often unrecognized and under diagnosed in clinical practice, especially with children and adolescents. Shame is a relational affect, unlike the more recognized expressive affects such as anger and sadness. As a primary affect, shame serves to inform us of what behaviors, attitudes, and emotions are acceptable by others, and allow us to remain within the protective and nourishing bonds of human relationships. The shame response of looking away, of hiding one's face, or casting one's eyes down is recognized in infancy. Consequently, it is an essential emotion in the socialization of children. Healthy shame allows us to regulate our behavior in order to conform to the boundaries of social norms and rules of acceptance. From an evolutionary perspective shame has served to stabilize society. "Shame is a thermostat; if it fails to function, regulation of relationships becomes impossible" (Retzinger, 1995, p. 17).

Berger and Luckmann (1967) in their classic treatise in the sociology of knowledge wrote that the fundamental nature of reality is shaped within the context of relationships. This includes the knowledge of the self.

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The development of basic epistemological premises regarding who one is, how one is, what one does, and how one is to be in this world occur only within the matrix of significant others. For a person to have a strong sense of self that person needs to be embedded in experiences that result in the child feeling whole, loveable, and competent. However, if the child's experience of self is that of being criticized, neglected, ridiculed, disapproved of, or not supported in some manner so that she perceives that her belonging to significant others is compromised, she constructs a knowledge about the self that is shame. She feels inferior, defeated, less than, rejected, humiliated, invisible, etc. These feelings can be about a particular trait or characteristic, such as "I am stupid" or about the totality of the self, "I am all wrong." The Bollas' concept of the "unthought known" (1989) captures this pervasive sense of self that is shaped by the experience of shame. Shame colors the *knowns* about how one is accepted (or not) in relationships.

Since shamed person feels objectified, attacked by others, even marginalized by a group, she or he is likely to exhibit symptoms such as anger, depression, hyperactivity, out of bounds aggression, abusive behavior, dependency, suicide, or even homicide (Morrison, 1998). Anger toward others can be turned toward the self causing self-inflicted constriction of the very functions of self one needs to develop a healthy sense of self. She or he may become isolated from relationships or stuck in a quagmire of dysfunctional partnerships. As Retzinger (1995, p. 12) observed:

A characteristic defense against shame is the turning away from the experience in some way in order not to feel the pain of rejection. The turning away makes shame difficult to recognize or communicate and it often remains unacknowledged. When shame remains unacknowledged it can play havoc in relationships.

This unresolved yet dynamic part of the person prevents her from participating fully in her life. Instead, she experiences the pain, the dread of being herself in day to day living.

The relationship between shame and retribution has been recognized across cultures and throughout history. For instance, the Greeks (Hamilton, 1942/1999, p. 38) represented these psychological and social dynamics in the personifications of Aidos (shame, modesty, social rectitude) and Nemesis (righteous indignation, retribution, vengeance). Aidos represented to the Greeks the shameful response we have when we have violated any of the rules of human discourse. Through the affective experience of Aidos, a person could anticipate the retribution of Nemesis and correct behavior and avoid a violation of values, mores, or social norms. Aidos and Nemesis were conceptualized as functioning in con-

junction for the purpose of maintaining social coherence. Aidos also represented the internal experience (shame) when one betrayed a personal value or expectation for oneself. Then Nemesis (retribution) was an act against oneself (Carins, 1993/2002; Smith, 1867/2005).

Vengeance meted out for violating the standards of society can take the form of rejection by others, inner self-punishment, or both. The psychological pain of this retribution is excruciating and can result in social and psychological isolation, if not a lifetime of suppressed aliveness in a limited existence Kaufman, an affect theorist, (1985, p. vii-viii) describes it as, "an inner torment, a sickness of the soul . . . a wound felt from the inside dividing us both from ourselves and from one another." He continues:

Shame itself is an entrance to the self. It is the affect of indignity, of defeat, of transgression, of inferiority, and of alienation. No other affect is closer to the experienced self. None is more central for the sense of identity.

In order for the effects of shame to be healed the person must come again into supportive relationships with self and others. The therapeutic relationship provides the child, adolescent or adult with a safe container for the profound work of restoring the birthright of a sense of self as loveable and capable. Within this relationship the person can recognize their shame and reveal to another the unacceptable facets of her being. Paradoxically, as these unacceptable parts are accepted by the therapist and the person, they become transformed into renewed energy for wholesome living (Beisser, 1970).

Although many works have recently discussed topics on psychotherapy (e.g. Guanaes & Rasera, 2006; Rossello & Jimenez-Chafey, 2006) studies focusing on the therapeutic process and adolescent's sense of self are relatively scarce.

In this article, which is written in collaboration with my adolescent client, Andrea C. (a pseudonym), is presented an account of the therapeutic process in understanding and transforming a rupture within the adolescent's sense of self, which developed throughout many shaming experiences in her most intimate of relationships from childhood through young adulthood. I will describe her process of looking deeply within herself to understand the source of her self-loathing and the intervention we engaged in together to heal her broken sense of self in order to become whole and self loving.

The Therapeutic Work with Andrea C

After several months of struggling with feelings of sadness and thoughts of ending her life, Andrea (Andie) knew that she needed to talk with someone. She reached

out to her older brother. He understood her reluctance to talk with her parents, so he took the step for her and told her parents of his concerns for his sister.

Fifteen-year-old Andie and I met in our first session with her father, mother, and older brother. For several months Andie had become withdrawn and sad. Her parents had asked her about the changes they observed, but she only minimized what was going on and the depth of her growing despair. She felt bad for feeling sad and angry. Her greatest fear was that if she told her parents that they might “over react”, especially her mother, and leave her feeling worse than ever. There was a history of depression on her mother’s side of the family, and her mother had recently suffered anxiety attacks which had worried Andie. As she and her family shared more about their relationships, I learned about their sense of “closeness”; however, I became aware of how Andie denied her own internal world to protect her parents. She isolated herself from the support that could have helped her cope with her increasing depression.

In the early sessions with Andie, I became more aware of her inner relationships through the sand trays that she created. Her parents were mythic figures, such as the Virgin Mary and Hercules, or a King Arthur and Guinevere. In our conversations about her parents, I learned of her sense of them. Her mother was a beautiful and gracious woman whom she saw as the ideal of the woman who was always there for other people. She was also fragile, needing to be protected from the jagged and unpredictability of Andie’s emotional landscape. Her father was “the strong silent type”. She experienced him as loving, yet uninvolved with her life. Her mother was the conduit to her father for both Andie and her brother. Andie admired her father, yet longed for a more engaging relationship with him.

As young adults her parents had joined a community that was founded on principles of spirituality and healthful living. Over her childhood, her parents had become respected leaders in this community, taking on responsibility for the management of the business and daily rituals of spiritual practice. As Andie became an adolescent, she did not always agree with nor understand much of the spiritual life of the community. She said that her parents accepted her “rebellion”; however she felt that others in the community disapproved of her not participating and attending daily meditations. She felt judged by members of the community and felt alone as a young adolescent.

Her family lived on a farm in the outskirts of a larger city where she attended school. Her sense of difference and isolation was exacerbated by this distance and the unusual lifestyle of her family. Because of the distance she missed out on play dates and afterschool activities that her school friends participated in so freely. By the time Andie started high school she felt resentful

that her parents choices had kept her from having the friendships and social life she wanted.

During these sessions Andie and I developed an alliance that deepened in trust and caring. She was relieved to have a relationship where she could talk freely and gained a sense of hopefulness through our work together.

Yet, I felt her reticence to relax and recognized through her narrative, body language, and affect that she was struggling with dissociative shame (Kaufman, 1985). In dissociative shame the person would split off the unacceptable parts of the self and locates these desires, emotions, behaviors, etc. out of awareness into the shadowy unconscious. These unacceptable facets of herself can be projected onto others in her life or be a source of inner misery. According to Kaufman (1985), the source of the split or development of faulty beliefs about the self is often in the unresolved idealization of parental figures. He notes that the idealization becomes unfinished situations for the person and continues in other relationships. Such disowning impedes any growth in a secure self identity.

As the youngest member of the family, Andie looked to her parents for support and protection. However, she worried that any problem or difficulty that she had would be too much of a burden given their busy lives. In particular she felt guilty and ashamed for adding anything to her mother whom she saw as being “saintly”, yet also emotionally fragile. Even though she saw her father as strong, protective, and very capable, he was emotionally distant, almost “mysterious”. Andie often wasn’t sure what he was thinking or feeling. Her parents represented a polarity of over and under responsiveness to Andie. What burdened her more was that each would react by feeling guilty and thereby making her feel that she must not share herself with either of them.

In one family session, Andie told her parents about how she felt she had to protect them from her problems. Her parents listened and were stunned to hear of Andie’s perspective. Her mother in particular acknowledged how she would become emotional and not give Andie the attention and understanding she needed. During our discussion, she was reminded of her relationship with her own mother, which gave her greater understanding of Andie’s dilemma. Her father listened and acknowledged he had a difficult time being emotionally responsive to his family. He saw that he needed to reach out to her more. Andie was relieved in having her parents’ understanding; and her relationship with her parents became more supportive and genuine. Andie grew in her perspective of her parents as she recognized them more as human beings and less as archetypal deities.

Although Andie’s idealization of her family members had left her vulnerable to low self-esteem and shame, it appeared to me she had developed a strong sense of

humiliation in her relationship with her peers, in particular with her best friend, Alexandria. Alexandria had been Andie's best friend since elementary school. The girls were so close that the other children and parents would refer to them as "the twins". As Andie described Alexandria, she seemed to get smaller in her seat, as if wanting to disappear and escape my view of her. Andie had always felt she was the dark twin. To Andie, Alexandria shined. She described a beautiful and popular girl, who was as close as any sister could be. Alexandria knew everything about Andie, except how envious Andie was of Alexandria's charm and beauty. To Andie, Alexandria was not only beautiful, but something even more important. She was desirable.

Over the years of being friends, Andie had come to experience Alexandria as more successful with boyfriends and with other friends as well. Andie on the other hand felt like the tag along, the fifth wheel with friends. Andie saw Alexandria as being the one who always had a boyfriend, was always vivacious, and was always easy socially. Throughout elementary school, Alexandria's social ease benefited Andie. She was included in friendships, play dates. Andie also felt popular because she was with Alexandria. Gradually, Andie reported becoming aware that she was popular only because she was Alexandria's friend. As the girls went into high school at fourteen, she began to feel bad about herself as she recognized Alexandria's ease with boys. Their friendship began to change in other ways as well. Even though they stayed best friends, Alexandria would often exclude Andie when she became involved with a new boyfriend or girlfriend. As Andie felt more guilt about her anger at her best friend, her feelings about herself became more painful. She was ashamed to talk with me about her resentment of Alexandria's social success and her own difficulties and rejections. Her envy grew into jealousy as Andie became convinced that "Alexandria has it so easy." Alexandria's social charm eclipsed Andie and she felt invisible. She came to feel that everything about her was undesirable. "There is nothing about myself that I like," she shared.

In her first works with sand trays, Andie represented herself as "Dopey" and "Eyore", also as a crying child and as a raging monster and witch. She used "Cookie Monster" to express her feelings of being unattractive and insatiable in her needs. She selected figures of pretty females as her friends, encircled together, separate from the crying child who looked on at them. These images represented the hateful invectives and personal insults Andie recited subliminally to herself throughout the circumstances of her everyday life.

Andie dated occasionally in high school, but always felt she was in Alexandria's shadow. Then she met Eduardo. For a short time, their relationship gave her hope that maybe she was desirable. He pursued her with

flowers in class and seemed excited about her. Andie liked him very much as well. But before long the relationship began to turn into something that confused Andie. She felt scared of him at times. In spite of his temper and bursts of anger, she stayed in the relationship, convinced this was her only chance at a relationship. Soon, Eduardo was unresponsive and was unavailable. He did not return calls or text messages nor did he show up after school to meet her. The relationship ended and Andie felt distraught in his abandonment of her. She turned her disappointment and confusion into a tirade about her failure as a girl. As the days and weeks went by, she fell into a chasm of self-loathing, depression, and hopelessness about her life.

Retzinger (1995, p. 12) pointed out that "Events that elicit shame often appear trivial in the outer world (unrequited love in adolescence, for example), but because of the importance the experience has to the self, the feelings often refuse to subside."

Andie believed that a girl, such as Alexandria, was worthy of love and respect, and she was not that girl - nor did she feel that she would ever be. When Andie talked about her inadequacy as a person often twisted in her chair gazing away from me. Although she did not have the language of shame, she talked of her conviction that there was something very wrong with who she was. Her sense of unworthiness deepened to the point that she felt suicidal.

The Transformation of an Experience of Shame into an Experience of Connection

Many writers (e.g., Beisser, 1970; Jacobs, 1996; Jung, 1933, 1965; Kaufman, 1985; Morrison, 1998; Oaklander, 2006; Yontef, 1993) has discussed the process of overcoming the constriction of shame as becoming more able to accept and love what has heretofore been unacceptable to the self. "The goal of the therapy is the transformation of the experience of shame into the experience of connection and the development of the skills and processes to support that transformation ongoingly in the patient's life" (Wheeler, 1995, p. 84). Being embedded in a therapeutic relationship where the beliefs and feelings about the self can be shared and received by another without further humiliation (Jacobs, 1996) is necessary for the person to begin to develop a renewed relationship with the self, a relationship based on self-acceptance and a restored conviction of lovability and competence. The adolescent needs to experience, and have confidence in, being correctly and fully understood with a therapist who is congruent and authentic and able to communicate genuine acceptance (Yontef, 1993).

Andie and I had developed over several months of work a therapeutic alliance where she felt supported in taking the next steps on her own behalf. The healing of

shame and the release from the power of self-retribution required interventions that included: (a) externalizing of the experience of the offending part of the self in a concrete symbolic form; (b) expressing the emotions of resentment, anger, and hatred toward the offending part; (c) developing an understanding of this offending part that allows the person to eventually affirm their underlying goodness; (d) reintegrating the offending part toward a deeper acceptance of the whole self and greater connectedness in relationship, and (e) ultimately, finding choice in living (Kaufman, 1985; Oaklander, 2006; Yontef, 1993). A key function of the process of therapy is to acknowledge the shame, the feelings of unworthiness, which emerge through the adolescent's experience of acceptance or rejection in family and community and to transform the inner torment of the soul to self-love and self-nurturing.

Some Phases of the Therapeutic Process

The first step in this process was to identify the rejected self and to represent it in a concrete symbolic image such as a drawing, clay figure, poetry, psychodrama, or movement (Carroll, 1996, 2006). Exploring the inner experience through our interaction this image was an essential part of the therapy.

Throughout our work I had heard Andie express judgments and criticisms of herself that she said as if they were facts of her being. Her judgments were global and reflected her inner conflict and attacks on herself. I decided to talk with her about this inner split between the idealized self and the voice of self-criticism and self-loathing. She knew without any confusion or question what I was asking. She told me that her inner voice told her that she was not good enough, not pretty, not going to make it in life, would always be alone.

As the second phase in the process, I asked Andie if she would draw a picture of how this conflict felt inside to give us an image that we could see, that we could relate to. She agreed. Using colored pens, Andie drew an image of a pretty, blonde girl dressed in a short skirt, cut off top, purse, and high heels. She had horns and carried a pitchfork representing the torment that Andie felt from this idealized image of a desirable girl. The name of this image became, "The Pitchfork Princess." The polarity of this image was that of "Unlovable Ursula." Ursula was dejected, sad, and alone. Together these images represented the split and the unresolved idealization and degradation of what was desirable and unlovable.

As we moved through this process and with support of the images, she expressed anger, resentment and jealousy toward her friend and toward her internalized sense of inadequacy. She had an opportunity to say what she had always wanted to say, but had been afraid to say out loud. "I hate myself; I hate that I am never chosen.



Figure 1. The pitchfork princess. Grayscale version of the Andrea's drawing

I hate that I am not pretty. I deserve to die." This part of the process took several sessions as we talked about other situations and events in her life. I gave her the homework of becoming more aware of when the inner Pitchfork Princess was tormenting her with her critical jabs and pokes. We laughed a little at thinking about the image of the pitchfork and the jabs. Andie began to grasp the pain she inflicted on herself.

As her therapy progressed she developed more of an understanding of her family and her development. She began to appreciate her need for acceptance and how difficult it had been for her to feel good about herself with a friend who was quite at ease socially. Also, she developed an awareness of the difficulties she had had living in her community and in not sharing in much of the social outlets of other children. She also was able to see that by comparing herself with her friend Alexandria, Andie had minimized her own beauty and talents (Andie

was exceptionally beautiful, reminding her therapist of Michelle Pfeiffer. This observation was shared with Andie later in the therapy process when she was able to appreciate the compliment). She was becoming blind to herself, only able to Alexandria's virtues. She loved her friend of so many years and depended on her for approval and acceptance. Yet, her relationship brought emotional pain.

With this awareness, we revisited the images of Pitchfork Princess and the experience of Unlovable Ursula. During one session, I asked Andie to imagine an all-accepting image such as a "Fairy Godmother" (Oaklander, 2006), a "Good Mother" (Yontef, 1993) or a accepting part of the person (Kaufman, 1985) and begin a conversation with the Princess that went something like this:

Even though you hurt me with your criticisms, I know that you are just trying to help. I see that you need love and acceptance, just like Unlovable Ursula. I know it is hard for you, but I love you. I will be here for you.

Andie used the projection of the accepting part of herself as a "Good Friend." For Andie, this felt strange to express words of caring and love to something that hurt her and that she hated, even through another image such as the Pitchfork Princess.

After we had worked with the projections for several minutes, I encouraged her to try saying this to herself. Andie agreed, but not without expressing some awkwardness and doubt about the suggestion of loving this painful part of herself. Wasn't the work of therapy to change this into something more acceptable? Something to make her feel better?

Again, the words of Jung (1933, p. 235) enlighten this therapeutic impasse:

That I feed the hungry, that I forgive an insult, that I love my enemy . . . All these are undoubtedly great virtues . . . But what if I should discover that the least amongst them all, the poorest of all the beggars, the most impudent of all the offenders, the very enemy himself – that these are within me, and that I myself stand in need of the alms of my own kindness-that I myself am the enemy who must be loved-what then?

Indeed, it is not easy to learn to assimilate understanding and compassion for one's frailties, failures, weaknesses, limitations, and aggression toward self and others. Yet, in doing this, the process of transformation begins.

As she became more comfortable with the idea of loving herself rather than rejecting herself I asked her to practice saying these words out loud on a daily basis, to a mirror or a picture of herself. During this part of the process, Andie began to take in the self-affirming messages and gradually felt different in her sense of herself in her daily functioning.

Finally, over the next few weeks, Andie became more her own best friend, more relaxed and less self-critical. She began the difficult work of separating herself from her friend of many years, Alexandria. She entered the necessary process of sometimes not seeing her as much, allowing herself to feel and talk about her anger towards her. When she was with Alexandria, she began to voice more of her feelings. She allowed herself to have other friends and to participate in events without her. Andie tolerated the pain of looking more realistically at her friend. As she did so, she became more aware of her own virtues of beauty and self worth. To Andie's amazement, her relationship with Alexandria became more satisfying and rewarding.

She began dating other boys from time to time. She got involved with a couple of young men who also disappointed her and left her feeling sad and deflated. This gave us an opportunity to talk about her relationship with her father and what she thought she wanted in a man and relationships. She became more realistic in her assessment of why relationships fail and was more resilient as she grew in self understanding.

At the end of her junior year, Andie decided to apply to a fashion institute in another city. This required her to design a complete line of clothes and to present a marketing plan. She worked weeks on the proposal and its presentation to the faculty of the institute. She was acknowledged for her talent and vision by being given an early acceptance. Andie was overjoyed with this and felt like she was about to enter a new time in her life.

Her senior year seemed to drag. There were other challenges in relationships. She became involved with a few young men and learned to be more assertive about her needs in relationship. Toward the end of her senior year, she became infatuated with a close friend of her brother's. He seemed to like her as well; however, she learned that he was more interested in the pursuit than the relationship. She once again felt dejected and worried about falling into the abyss of her depression. At about this same time there were a few deaths that affected her deeply- a friend her age, a young infant cousin, and an elderly leader in the community. She questioned the meaning of life, her life.

In a synchronistic moment, she watched a video tape of "The Secret," which is a philosophical perspective that gives special importance to loving one's self and fulfilling one's purposes and dreams. Andie was open to this message that reinforced her work in her therapy. In her next session, she tearfully told of "knowing" that she had to love herself. She realized that no person or thing was the answer. Loving herself, loving all aspects of her was the secret to finding joy and peace.

As she prepared for graduation, Andie was more at peace with herself, her family, friends, and her

community. She talked of finding a renewed faith and of rediscovering those principles of living that had sustained her family. Prom, senior class trip, graduation followed. As Andie thought of beginning her studies at the fashion institute, living in a large city, and making new friends, she quietly mused in one of our last sessions together: "I feel like my life is just beginning; and the best is yet to come."

As her senior year closed we also closed our therapeutic work. Andie gave more time at the end of school to friends and social events. She submitted a fashion project to the Institute and was awarded a full tuition scholarship. Her closing sessions focused on her awareness of accepting all of her experience of self. She came to appreciate her anger and letting her family and friends of both genders know of her needs. She looked at her senior prom pictures of herself and recognized her beauty. We were also writing this article together which facilitated our reflections on our work over several months. In talking about her development of the course of her therapy, Andie and I found a deeper connection as we shared our perspectives and emotions about all she had overcome.

At our last session, she brought her parents and her brother. They all reflected on the changes over the two years not only with Andie but for all of them. I felt that bitter sweetness we as therapists experience as we say good-bye in the unending story of a beautiful life. Through Andie's work, I, too, had come to find greater self acceptance and peace with another layer of my shame. I felt grateful for this time with Andie.

With the support of our therapeutic relationship, Andie discovered that she could come to accept, even love, all aspects of herself; thereby transforming her inner torment to renewed aliveness. Through the integrative work, she entered into her daily life with a greater capability for emotional well-being.

Conclusion

Perls (1948), co-founder of Gestalt Therapy, wrote "The goal of therapy is to restore that amount of integration that leads to its own development." From the perspective of Gestalt Therapy, the source of psychological dis-ease is the splits or lack of integration that prevents the human organism from self-regulating within a given environmental field (See Perls, Hefferline, & Goodman, 1994). The process of integration, of becoming a whole person, requires us to regain the energy of all the polarities within our self-experience. As humans we are vulnerable, vicious, and compassionate, not only with others, but more importantly with ourselves. The process of therapy is to provide a relational container in which the client can reorganize her perceptions, awareness, and judgments of self in order

to restore a greater availability to the full experience of Now and a readiness for what comes next in her life.

This narrative of Andie's therapy represents my clinical experiences with children as young as four years, as well as adolescents and adults. Much of the literature on shame acknowledges that it often at the heart of many of the symptoms that children, adolescents and adults bring to therapy and yet it is overlooked or disregarded in the treatment approach. I regard this work as essential for successful therapeutic treatment. At this time, I am particularly interested in other research and case studies that examine the long-term benefits of this process in working with resolving shame and restoring self integration.

Comments by A. C., Client

As we have worked on this chapter, all this seems so long ago. It has been difficult learning to take care of myself because I have always thought of myself as a people pleaser. I wouldn't speak up if my silence would make someone else happy. I don't know where I would be today without therapy. I am always glad to let others know that therapy can, and it does help. I have learned to care and love myself; but because not liking myself has been such a long habit, this is sometimes difficult. I am continuing to work on loving myself and feel inspired by doing so. I realize today that I want to love myself. I can't feel good just by having others love me (2007).

References

- Beisser, A. (1970). The paradoxical theory of change. In J. Fagan & I. Shepherd (Eds.), *Gestalt therapy now* (pp. 77-80). New York: Harper.
- Berger, P. L., & Luckman, T. (1967). *The social construction of reality*. Garden City, NY: Anchor Books.
- Bollas, C. (1989). *The shadow of the object*. New York: Columbia University Press.
- Carins, D. (2002). *Aidos: The psychology and ethics of honour and shame in ancient Greek literature*. New York: Oxford University Press. (Original work published 1993)
- Carroll, F. (1996). No child is an island. In B. Feder & R. Ronall (Eds.), *A living legacy of Fritz and Laura Perls: Contemporary case studies* (pp. 151-169). Monclair, NJ: Feder and Ronall.
- Carroll, F. (2006). The enigmatic tween. In G. Marlock & H. Weiss (Eds.), *Handbuch de Körperpsychotherapie* (pp. 803-810). Stuttgart, Germany: Schattauer Verlag.
- Guañes, C., & Rasera, E. F. (2006). Therapy as social construction: An interview with Shelia McNamee. *Revista Interamericana de Psicología*, 40, 123-132.
- Hamilton, E. (1999). *Mythology*. New York: Grand Central. (Original work published 1942)
- Jacobs, L. (1996). Shame in the therapeutic dialogue. In R. Lee & G. Wheeler (Eds.), *The voices of shame: Silence and connection in psychotherapy* (pp. 297-314). San Francisco: Jossey-Bass.
- Jung, C. G. (1933). *Modern man in search of a soul*. San Diego, CA: Brace Jovanovich.

- Jung, C. G. (1965). *Memories, dreams, and reflections*. New York: Vintage Books.
- Kaufman, G. (1985). *Shame: The power of caring* (Rev. ed.). Rochester, VT: Schenkman Books.
- Morrison, A. (1998). *The culture of shame*. Northvale, NJ: Jason Aronson.
- Oaklander, V. (2006). *Hidden treasure: A map to the child's inner self*. London: Karnac.
- Perls, F. S. (1948). Theory and technique of personality integration. *American Journal of Psychotherapy*, 2, 565-586.
- Perls, F. S., Hefferline, R., & Goodman, P. (1994). *Gestalt Therapy*. Highland, NY: The Gestalt Journal Press.
- Retzinger, S. (1995). Shame and the social bond. In D. Parker, R. Dalziell, & I. Wright (Eds.), *Shame and the modern self* (pp. 6-20). Melbourne, Australia: Australian Scholarly.
- Rossello, J. M., & Jimenez-Chafey, M. J. (2006). Cognitive-behavioral group therapy for depression in Adolescents and diabetes: A pilot study. *Revista Interamericana de Psicología*, 40, 219-226.
- Smith, W. (2005). *Dictionary of Greek and Roman biography and mythology*. Ann Arbor, MI: University of Michigan Library. (Original work published 1867)
- Wheeler, G. (1995). Shame in two paradigms of therapy. *The British Gestalt Journal*, 4(2), 76-85.
- Yontef, G. (1993). Shame. In *Awareness, dialogue and process: Essays on Gestalt Therapy*. New York: The Gestalt Journal Press.

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