MIND, BODY, SPIRIT-THE RELATIONSHIP BETWEEN SHAME AND HEALTH

The Rev. Tommie Watkins, Jr., Ph.D., M.Div., L.M.S.W.

Graduate Professor
University of Alabama School of Social Work
tlwatkinsjr@ua.edu

Associate Rector and Assistant Chaplain
Canterbury Episcopal Chapel and Student Center
Tuscaloosa, AL 35401
canterburytommie@gmail.com
(305) 785-5111
Objectives

• Discuss the history and invention of shame
  • Toxic shame
  • Internalized guilt

• Define and explore the interconnectedness of mind, body, and spirit

• Discuss the interconnectedness of shame with stress, depression, anxiety, and fear
  • Sexual abuse and sexual trauma
  • Religious trauma syndrome (RTS)
  • Homonegative religious views
Objectives

• Understanding the relationship between internalized shame and low self-esteem contribute men’s health outcomes (wellness)

• Discuss ways of healing shame (affirmations, etc.)

• Introduce mental and spiritual health practices to combat internalized shame, guilt, and homophobia
Fear

- Fear- “self-reliance’s failure”
- Cannot trust God and Play God
- Opposite of Fear is not Faith, but Certainty-Ann Lamont
- Fear exercise-sharing
- “Fight or Flight” can be internalized-shame, guilt, anxiety
History and Invention of Shame

Definition

Shame binds

Biblical Perspective
- shame at individual and community levels
- separation (sin) in systems
- negative and positive anthropological views
  - original sin versus original blessing

Causes of Toxic Shame

Narratives (what we say, we co-create)

John Bradshaw- *Shame based identity*
[https://tinyurl.com/Bradshaw-Shame](https://tinyurl.com/Bradshaw-Shame) (9:31)

Brene Brown- *Shame is lethal*

Quotes
[https://tinyurl.com/Brown-Quotes-on-Shame](https://tinyurl.com/Brown-Quotes-on-Shame)
Religious Shame

- What are your religious views regarding sexuality?
- What, if any, shame and guilt, does this produce for you?
- *What internalized messages have you incorporated?*
- *In what ways have these religious views changed or remained the same?*
- *Why or Why not?*
VALUES
What are my priorities?

BEHAVIOR
What are the choices I make?

Biblical Worldview
What do I believe?

REFLECT AND ADJUST
Are my biblical worldview, my values, and my behaviors aligned?

CULTURE SHAPING
What impact am I having on the culture around me?
Self-esteem

Co-dependency

Unhealthy Relationships

Self-Love

News Print Exercise-Gay Man, Black Man, Black MSM
Differentiating guilt and shame

- Fear of intimacy
- Behavioural and characterologic. self-blame
- Blame of others
- Self-derogation

Shame

Guilt

No intimacy fear

No blame of others

Lutwak, Panish, & Ferrari, 2003
Reconnecting and Overcoming Shame

• “If God wants to relate to the whole person and be known by the whole person, then our sexuality must clearly be part of what we bring to authentic relationship with God. Many Christians cannot accept theoretically that sexuality is positive and is the most important part of nature—thus we can bring into God’s presence.”

• Those that shared sexuality and engaged in sexual discussion experienced more authentic and healthy relationships with self and others.

Reconnecting and Overcoming Shame

• Sexual stories can affect relationships with God and others as sexual sensations and images occur considerably with in one’s prayer life.

• Because one’s prayer life is at the center of spiritual direction, it is pertinent to incorporate ones spirituality and sexuality into spiritual direction practice, as God can and does speak to us in our sexual selves.*

Healing the Shame that binds https://tinyurl.com/Healing-Shame (9:39)

Erik Erikson

- Psychosocial Stages
- Psychosexual and Psychosocial growth occurs simultaneously
- Each stage of life we are faced with a crisis
- Crisis: turning point in life when we have the potential to move forward or regress
- Goal: establish equilibrium between ourselves and our social world
<table>
<thead>
<tr>
<th>Approximate Age</th>
<th>Virtues</th>
<th>Psychosocial crisis</th>
<th>Significant relationship</th>
<th>Existential question</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infancy 0-23 months</td>
<td>Hope</td>
<td>Basic trust vs. mistrust</td>
<td>Mother</td>
<td>Can I trust the world?</td>
<td>Feeding, abandonment</td>
</tr>
<tr>
<td>Early childhood 2–4 years</td>
<td>Will</td>
<td>Autonomy vs. shame and doubt</td>
<td>Parents</td>
<td>Is it okay to be me?</td>
<td>Toilet training, clothing themselves</td>
</tr>
<tr>
<td>Preschool age 4–5 years</td>
<td>Purpose</td>
<td>Initiative vs. guilt</td>
<td>Family</td>
<td>Is it okay for me to do, move, and act?</td>
<td>Exploring, using tools or making art</td>
</tr>
<tr>
<td>School age 5–12 years</td>
<td>Competence</td>
<td>Industry vs. inferiority</td>
<td>Neighbors, school</td>
<td>Can I make it in the world of people and things?</td>
<td>School, sports</td>
</tr>
<tr>
<td>Adolescence 13–19 years</td>
<td>Fidelity</td>
<td>Identity vs. role confusion</td>
<td>Peers, role model</td>
<td>Who am I? Who can I be?</td>
<td>Social relationships</td>
</tr>
<tr>
<td>Early adulthood 20–39 years</td>
<td>Love</td>
<td>Intimacy vs. isolation</td>
<td>Friends, partners</td>
<td>Can I love?</td>
<td>Romantic relationships</td>
</tr>
<tr>
<td>Adulthood 40–64 years</td>
<td>Care</td>
<td>Generativity vs. stagnation</td>
<td>Household, workmates</td>
<td>Can I make my life count?</td>
<td>Work, parenthood</td>
</tr>
<tr>
<td>Maturity 65-death</td>
<td>Wisdom</td>
<td>Ego integrity vs. despair</td>
<td>Mankind, my kind</td>
<td>Is it okay to have been me?</td>
<td>Reflection on life</td>
</tr>
</tbody>
</table>
## Erikson’s Psychosocial Stages of Development

<table>
<thead>
<tr>
<th>Approximate Age</th>
<th>Virtues</th>
<th>Psychosocial crisis</th>
<th>Significant relationship</th>
<th>Existential question</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infancy 0-23 months</td>
<td>Hope</td>
<td>Basic trust vs. mistrust</td>
<td>Mother</td>
<td>Can I trust the world?</td>
<td>Feeding, abandonment</td>
</tr>
<tr>
<td>Early childhood 2–4 years</td>
<td>Will</td>
<td>Autonomy vs. shame and doubt</td>
<td>Parents</td>
<td>Is it okay to be me?</td>
<td>Toilet training, clothing themselves</td>
</tr>
<tr>
<td>Preschool age 4–5 years</td>
<td>Purpose</td>
<td>Initiative vs. guilt</td>
<td>Family</td>
<td>Is it okay for me to do, move, and act?</td>
<td>Exploring, using tools or making art</td>
</tr>
<tr>
<td>School age 5–12 years</td>
<td>Competence</td>
<td>Industry vs. inferiority</td>
<td>Neighbors, school</td>
<td>Can I make it in the world of people and things?</td>
<td>School, sports</td>
</tr>
<tr>
<td>Adolescence 13–19 years</td>
<td>Fidelity</td>
<td>Identity vs. role confusion</td>
<td>Peers, role model</td>
<td>Who am I? Who can I be?</td>
<td>Social relationships</td>
</tr>
<tr>
<td>Early adulthood 20–39 years</td>
<td>Love</td>
<td>Intimacy vs. isolation</td>
<td>Friends, partners</td>
<td>Can I love?</td>
<td>Romantic relationships</td>
</tr>
<tr>
<td>Adulthood 40–64 years</td>
<td>Care</td>
<td>Generativity vs. stagnation</td>
<td>Household, workmates</td>
<td>Can I make my life count?</td>
<td>Work, parenthood</td>
</tr>
<tr>
<td>Maturity 65-death</td>
<td>Wisdom</td>
<td>Ego integrity vs. despair</td>
<td>Mankind, my kind</td>
<td>Is it okay to have been me?</td>
<td>Reflection on life</td>
</tr>
</tbody>
</table>
- Sense of self-reliance vs sense of self-doubt
- Explore and experiment
- Make mistakes
- Test limits
- If parents promote dependency, autonomy decreases
- Capacity to deal with the challenges is limited

<table>
<thead>
<tr>
<th>Approximate Age</th>
<th>Virtues</th>
<th>Psychosocial crisis</th>
<th>Significant relationship</th>
<th>Existential question</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early childhood 2–4 years</td>
<td>Will</td>
<td>Autonomy vs. shame and doubt</td>
<td>Parents</td>
<td>Is it okay to be me?</td>
<td>Toilet training, clothing themselves</td>
</tr>
</tbody>
</table>
## Erikson’s Psychosocial Stages of Development

<table>
<thead>
<tr>
<th>Approximate Age</th>
<th>Virtues</th>
<th>Psychosocial Crisis</th>
<th>Significant Relationship</th>
<th>Existential Question</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infancy0-23 months</td>
<td>Hope</td>
<td>Basic trust vs. mistrust</td>
<td>Mother</td>
<td>Can I trust the world?</td>
<td>Feeding, abandonment</td>
</tr>
<tr>
<td>Early childhood2–4 years</td>
<td>Will</td>
<td>Autonomy vs. shame and doubt</td>
<td>Parents</td>
<td>Is it okay to be me?</td>
<td>Toilet training, clothing themselves</td>
</tr>
<tr>
<td>Preschool age4–5 years</td>
<td>Purpose</td>
<td>Initiative vs. guilt</td>
<td>Family</td>
<td>Is it okay for me to do, move, and act?</td>
<td>Exploring, using tools or making art</td>
</tr>
<tr>
<td>School age5–12 years</td>
<td>Competence</td>
<td>Industry vs. inferiority</td>
<td>Neighbors, school</td>
<td>Can I make it in the world of people and things?</td>
<td>School, sports</td>
</tr>
<tr>
<td>Adolescence13–19 years</td>
<td>Fidelity</td>
<td>Identity vs. role confusion</td>
<td>Peers, role model</td>
<td>Who am I? Who can I be?</td>
<td>Social relationships</td>
</tr>
<tr>
<td>Early adulthood20–39 years</td>
<td>Love</td>
<td>Intimacy vs. isolation</td>
<td>Friends, partners</td>
<td>Can I love?</td>
<td>Romantic relationships</td>
</tr>
<tr>
<td>Adulthood40–64 years</td>
<td>Care</td>
<td>Generativity vs. stagnation</td>
<td>Household, workmates</td>
<td>Can I make my life count?</td>
<td>Work, parenthood</td>
</tr>
<tr>
<td>Maturity65-death</td>
<td>Wisdom</td>
<td>Ego integrity vs. despair</td>
<td>Mankind, my kind</td>
<td>Is it okay to have been me?</td>
<td>Reflection on life</td>
</tr>
</tbody>
</table>
• Sense of competence & initiative
• Freedom to select meaningful activities
• Development of a positive self view
• Lack of freedom to choose lends to guilt (guilt of choosing not to choose)
• Allow others to choose for them

<table>
<thead>
<tr>
<th>Approximate Age</th>
<th>Virtues</th>
<th>Psychosocial crisis</th>
<th>Significant relationship</th>
<th>Existential question</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschool age4–5 years</td>
<td>Purpose</td>
<td>Initiative vs. guilt</td>
<td>Family</td>
<td>Is it okay for me to do, move, and act?</td>
<td>Exploring, using tools or making art</td>
</tr>
</tbody>
</table>
Cognitive Dissonance

- Mental Discomfort (psychological stress)
- Two or more contradictory beliefs, ideas or values
- Action that contradicts personal beliefs, ideals, and values
- Confronted with new information that contradicts said beliefs, ideals, and values

Festinger, L. 1957
Cognitive Dissonance & Health Outcomes

- Black MSM addressing their sexual and religious identity and can lead to negative coping behaviors and negative health outcomes (e.g., higher sexual risk, higher substance abuse, and higher levels of depression) among Black MSM (Watkins, T. J., 2014)

- Reaching sexual minority milestones in early versus middle adolescence was associated with greater depressive and anxious symptoms (Katz-Wise, S.L., 2017)

- Reaching sexual minority milestones in late adolescence/young adulthood versus middle adolescence was associated with fewer depressive and anxious symptoms among gay men (Katz-Wise, S.L., 2017)
Cognitive Dissonance & Health Outcomes

- Shame is associated with greater depressive symptoms, less healthcare utilization, and poorer physical health among PLWH.
- People living with HIV (PLWH) are at increased risk for mental health problems such as depression and anxiety.
Religiosity among Black MSM who used crack and cocaine was also associated with higher levels of risky behavior and may increase risk of HIV and STD infection (Klobin, et al., 2006; Parsons, 2003; Reisner, et al., 2009; Stall, et al, 2003).

Research found that unprotected anal intercourse, (UAI), and polysubstance use, were associated with higher religiosity scores, and lower levels of these risk behaviors were associated with higher spirituality scores (Watkins, et al, 2015).
Shame/Guilt
- Psychosocial Stages
- Self-concept/Identity
- Self-esteem

Cognitive Dissonance
- Contradictory beliefs
- Developmental experience
- Environment
- Family
- Spirituality
- Religion
- Stigma*

Health Outcomes
- Increased risk behaviors
- Mental health disorders
- Substance abuse
- Treatment engagement
- Retention/Follow-up
- Sexual health/Prevention
- PrEP
- Physical/Oral health screenings
Unfinished Business: Shame & Guilt

- Unresolved issues from early development
- Psychosocial Stages: Failure to meet a task/overcome crisis
- Manifest as resentment, rage, hatred, pain, anxiety, grief, guilt and abandonment
- Preoccupation, compulsive behavior & self-defeating behavior
- Development of unwanted parts of self
- Goal: acknowledge and process unexpressed feelings
Unfinished Business: Shame & Guilt

**Impasse**
- “Stuck point”
- External support unavailable
- Traditional way of thinking no longer works

**Therapeutic Technique**
- Accompany without rescuing
- Validate the frustration
- Encourage to fully engage unexpressed feelings

**Reframe**
- Accept self without judgement
- No longer avoids unwanted parts of self
- Reframe
- Self-actualization
# Resilience & Self-Acceptance Approach

<table>
<thead>
<tr>
<th>Death &amp; Dying</th>
<th>Resilience &amp; Self-Acceptance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denial: refuses to believe</td>
<td>Denial: internal religious conflicts, behavioral &amp; lifestyle risk may increase, test technology &amp; competence of provider questioned</td>
</tr>
<tr>
<td>Anger: When no longer able to deny</td>
<td>Anger: towards self, the situation, partner, family, community</td>
</tr>
<tr>
<td>Bargaining: accepts death, but wants more time</td>
<td>Bargaining: (Impasse) Bartering with a higher power, challenges with retention &amp; adherence, unfinished business of shame/guilt surfaces, development of stigma/fear, ambivalence towards actions steps (Trans-Theoretical Model)</td>
</tr>
<tr>
<td>Depression: realizes death will come soon</td>
<td>Depression: surviving versus thriving-push pull/abusive relationship towards living, traditional methods of thinking vs new narrative</td>
</tr>
<tr>
<td>Acceptance: understands and accepts the fact they are going to die</td>
<td>Acceptance: Parts of me will die and will be reborn (cognitive reframing), self-growth, fluidity in defining wellness</td>
</tr>
</tbody>
</table>
7. Acceptance
Well, it could be worse. We'll just have to make the best of this. And hmmm, this is starting to look like a blessing in disguise. I'm glad this happened.

6. Bargaining
I might as well agree things are not going to change. A miracle is not going to happen. If I can do that, I can at least get on with the rest of my life. Besides, if I can get out of all this wallowing in misery and avoidance I can think clearly again, manage the problem better, and work more effectively on possible solutions.

5. Depression
Oh no, it is true. But there's nothing I can do. I'm trapped. It's hopeless. Nobody could solve a problem like this.

4. Anger
Get out of here, you so and so!!! Don't tell me anymore! This is nuts! I can't stand news like this!

3. Denial
This can't be true. This is not happening to me. We are not failing. In fact, we know what we're doing. It is you who are wrong.

2. Receipt of Bad News
Wow, that's bad news.

1. Normal Existence
Capable of objective, valid reasoning, unclouded by doubt and undue emotion.

The Cycle of Acceptance
With examples of what happens in the different steps. The cycle applies to individuals or organizations. Most of the examples are for an individual. The cycle begins with receipt of bad news.

Confusion, early bargaining, and continued anger and denial
Why did this happen to me? I didn't do anything to cause this. What are we going to do?

Aggression
I'm going to slap (or fire) anyone who says anything more about this. I'm going to sue my doctor because he is not doing all he can to help me. You're not even qualified to say what you've said! (And various other forms of ad hominem attacks, such as shooting the messenger.)
A message from Motivational Interviewing (MI)

• Intrinsic motivation for change arises in an accepting, empowering atmosphere that makes it safe for the person to explore the **possibly painful present** in relation to **what is wanted and valued**

• Ambivalence (Impasse)
  • Uncertain about what the future holds
  • The past or current situation feels more familiar
  • Doubts about if the familiar will fit into their future goals

• Develop Discrepancy
  • Goals vs Behaviors
  • Develop awareness of this gap
  • The gap is were **motivation** is created

Miller & Rollnick, 2002
The Unfinished Business: Shame & Guilt

**Impasse**
- “Stuck point”
- External support unavailable
- Traditional way of thinking no longer works

**Therapeutic Technique**
- Accompany without rescuing
- Validate the frustration
- Encourage to fully engage unexpressed feelings
- Motivational Interviewing

**Reframe**
- Accept self without judgement
- No longer avoids unwanted parts of self
- Reframe
- Self-actualization
SELF-CARE TECHNIQUES

• Meditation (Yoga, Zenograms, Art, etc.)
• Physical exercise (walking, running, jogging, gym, etc.)
• Prayer
• Diet/Nutrition
• Sleep schedule
• Positive affirmations vs. “Who told you that you were naked?”
• Mental health/therapy
• Social support
• Medication adherence
• Self-LOVE