

Shame, the scourge of supervision

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- [How do we construct shame?](#)
- [How does it impact in supervision?](#)
- [How can the supervisor deal with it?](#)

My motivation in writing this article is born from my personal experience with shame. It inhibited my thinking, my spontaneity, my creativity, and therefore limited my personal and professional development. Freeing myself allowed me to recover liberty, energy and legitimacy. I gained in professional competence and assertiveness within my practice as supervisor.

My purpose in writing this article is that we, as supervisors, reflect together on how we look at the process of shame in our supervision sessions. Whether these are one-to-one or group, educational or professional, with beginner or experienced supervisees, shame may be invited at any moment. It may be so discreet that no one notices except the sufferer. It all happens internally for the supervisee, with the greatest secrecy.

Shame is indescribable and lives in a solitary way. The person themselves, often unable to identify their feelings, does not understand what is happening to them. The shame cannot be put into words. Few parents or teachers explain to children the feeling of shame, and few validate it or normalise it. Shame is unspeakable. The supervisee rarely takes the risk of sharing it with the supervisor, for fear that this traumatic event will be denied or not recognised as such. The supervisor's reflections such as "I didn't mean to embarrass you!" or "That's not what I meant, you misunderstand me!" are reactions that amplify shame. It becomes unbearable. The person invaded by shame feels excluded from the group to which they belong (Tisseron, 1998). The consequence is withdrawal behaviour. The person finds themselves

alone and isolated. They need the supervisor to focus on them, to give attention, to understand the internal experience and to look for the cause. This attitude allows the person to re-enter the group and to belong again. On the contrary, if the person justifies or diverts attention to themselves and their good intentions, they reinforce the shame and the feeling of exclusion.

Shame is a profound inhibitor. It prevents those who feel it from having access to their personal power. In this article, I describe the construction of shame in the child, as well as its consequences on adult life. Then I explain a possible approach to treating it as a supervisor: being attentive to the relational needs of the supervisee. In order to support this article, I would like to present examples from my experience as a supervisee and as a supervisor, where I have been confronted with shame.

During the years of my basic training, I met several supervisors with whom I felt more or less at ease. Some, through their attitudes or words, generated a sense of shame within me. By critically confronting a decision that I had made, by being arrogant, by taking the stance of 'the one who knows', humiliating me directly (a supervisor told me "I don't care about your anger!"), by reacting strongly to some of my decisions based on their own limitations, shames and fears... faced with a particular supervisor, I always found myself 'an empty head', unable to think. I realised afterwards that this supervisor took all of the space to show us their genius (and they really did!). First place was for them. So, I felt ashamed to be so incompetent. To avoid the humiliation of giving an idea that was not as good as theirs, my head emptied and I kept quiet. On many occasions, I felt shamed by the attitude of the supervisor. I never dared to verbalise my feelings. I was always alone with my shame and my desire to disappear. I was struggling to hide it. My way of protecting myself was to criticise the supervisor in my

head, to have an arrogant internal attitude in secret. This relieved me, but the evil was there and my pain was not mitigated.

Other supervisors did not humiliate me directly, but I did not dare to address the situations that I really needed to talk about. I always brought 'politically correct' subjects. The dangerous subjects, the situations where I really doubted what I had done, where my supervisor could have seen my mistakes and my faults, I did not approach because the fear of criticism and judgement was so strong. At that point, I was not aware that I was avoiding the feeling of shame. I protected myself by over-adapting, being arrogant, and avoiding the delicate subjects that could have plunged me again into shame. At no time, during those early years of training and supervision, did a supervisor talk to me about the feeling of shame.

Then I started a new training course. For the first time I saw a supervisor speak directly and frankly about shame to the supervisees. This supervisor took an hour to treat shame before entering into the contents of the supervision. We were in group supervision for three days. This supervisor had such a presence, such an understanding of the person and their experience, such sensitivity that I was deeply touched. The supervisor really saw the supervisee, beyond the social mask, and offered an unconditional welcome. The supervisor dealt with being before the subject of the supervision, before the task to be performed. This was extremely beneficial for the supervisee. Indeed, under the influence of shame, the supervision would have been useless. The supervisee would have learnt very little, with their thought processes being tainted by the effect. Subsequently, the supervisee was able to approach the supervisory subject freely, this experience allowed me to begin to recognise my own feeling of shame, and to recover my ability to think.

Then I met a supervisor with whom I felt deeply secure. With this supervisor, I began to think freely because I felt certain that her/his attitudes would not be a source of shame for me. I was very grateful to be with one with whom I could think in freedom, without vigilance. The supervisor trusted me and I felt it. At no time did I perceive fear, judgement or criticism in her attitudes. I never saw that supervisor adopt a defensive position, no matter what. The supervision felt devoid of dogma, which allowed me to develop my own thinking. The supervisor's calmness held me. I saw that she/he considered me more competent than I considered myself, which strengthened my confidence and my self esteem. He/she focused on my strengths and not on my weaknesses. I perceived the supervisor's joy in working and thinking with me. We thought we were

together. There was no thinking for me, no making me think, we thought together. This supervisory relationship has been and is still therapeutic for me. It allows me to learn and think with pleasure and spontaneity. I developed my intuition and creativity. This supervisor gave me a model of supervision that I could rely on to develop my own style.

(Supervision has a therapeutic effect, even if that is not its primary objective. The supervisor participates in the personal development of the supervised. It is complementary to therapy and allows for dealing with other areas of difficulty. Principally with injuries related to schooling and learning.)

According to an American study by Lecomte (2012) during the years of psychotherapy training more than 51.5% of psychotherapists report disabling and destructive supervision experiences for them and for their clients. When asked about their experiences in their entire professional career, this figure rises to 75%. More than 50% of supervisees in university clinical psychology contexts report having experienced harmful and disabling relationship experiences.

Theoretical reminder: When and how does shame build up?

According to Erikson (1982) a child begins to feel shame from two years old, in the developmental period he calls early childhood (2-5 years). During this stage of life, the child struggles to gain autonomy. If the family environment is not sufficiently allowing, the child feels shame and doubts himself. In order to solve this developmental crisis, a balance must be struck between those two forces which oppose each other; on the one hand autonomy, on the other shame and self-doubt. The child struggles to define himself, to enforce their borders, to differentiate themselves in order to acquire their first skills. It is a time when the child is vulnerable to boundary confusion, flooding and a sense of failure. According to the reaction of the parental figures, the child develops either autonomy or shame/self doubt, or more likely a state that lies somewhere in between. The result of a satisfactory balance between these two opposing forces allows the child to develop willingness and sense of self-definition. An unsatisfactory balance marks the beginning of obsessions and compulsions in children. In families structured in shame one usually finds the following mistaken belief "To be close and to understand the other, one must be identical."

Shame, rooted very early in childhood, even before language, logical thinking or concepts means that it is normal that one has difficulty in finding the words to describe it. (Erskine (1995) indicates that shame may already be appearing at the age of 9 months) It

is a visceral effect, felt in the flesh. If no one helps the child to decode it, the child will not do this alone. This explains the inability of many adults to identify shame. That was the case in the example I described earlier.

If the child is particularly vulnerable to shame at this developmental stage, they will remain so throughout life, because shame touches the physical and psychic integrity. It concerns the being, the existence, the profound self, the dignity (contrary to guilt which concerns the act, the behaviour, and which takes root later, in the period that Erikson called the 'initiative period', where under the guilt is the fear of punishment.)

At any stage of life, a person can be overwhelmed and broken by traumatic circumstances. The loss of control and the feeling that "something is wrong with me" are internalised and the person literally becomes ashamed of themselves (e.g. being abused or beaten, victims of war, poverty or unemployment). Behind the shame there is a profound need for belonging. "If I don't belong any more what am I going to become?". This question concerns the survival of the individual.

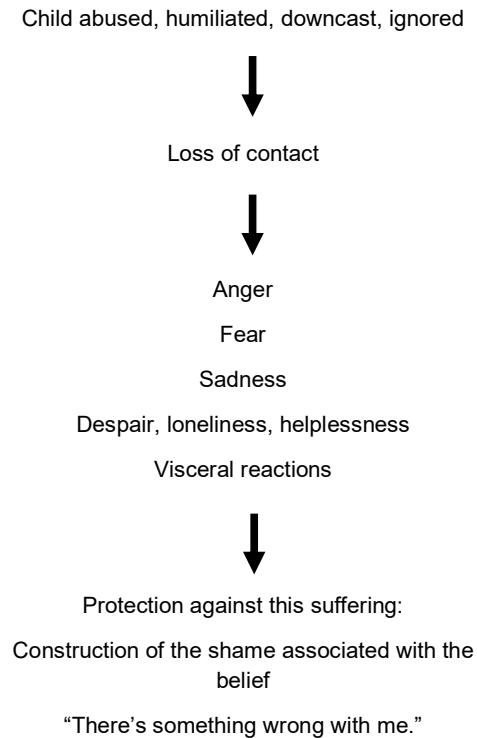
When a person is criticised or humiliated as an adult, their pain is increased by the presence of unsolved archaic shame. They remain vulnerable to profound regression, albeit temporary, whenever they relive the trauma provoked by the shame. The shamed person does not only live a sense of personal failure in the present, they also experience all the judgements and episodes of shame suffered in childhood. In my example, the weight of past shamings prevented me from responding in an appropriate way. I could not at any time challenge the supervisors, or express my anger or disappointment. I plunged silently into the pain experienced in the past.

Shame is not only generated by humiliation. A child who is abused, belittled, repetitively ignored, also feels shame. A child who is not regarded with interest, lacks visual contact, or who only matters to satisfy the narcissistic desires of the parents (child object) also feels shame and infers that they are not someone who is good, lovable, or good enough.

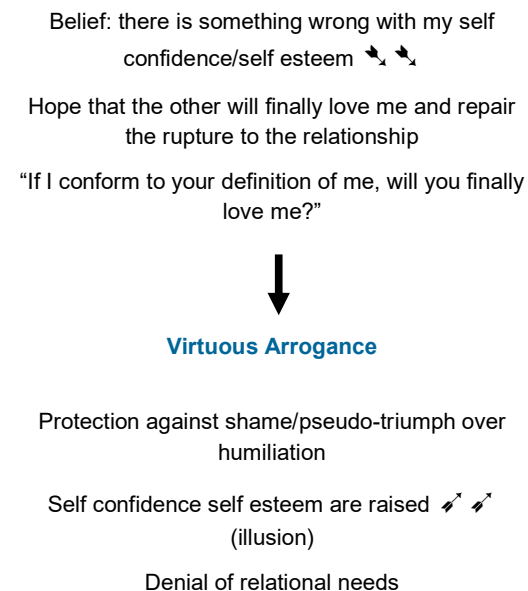
This process of adaptation has a psychological function; to provide the child with predictability and stability in their environment.

Once the shame has been fixed, it represents an intrapsychic conflict within the person: as Erskine (1995) says it is being oneself and risking the loss of the bond, or complying with the definition of the other person in order to ensure the link. Over time, failing to feel anger at parental figures, the criticisms, devaluations and humiliations are amplified and turned against oneself. They are transformed into

Construction of Archaic Shame



Shame



self-criticism and evaluation. The function of the introjection is to reduce the external conflict between child and the person on whom the child depends for the satisfaction of needs. The other is good, I am bad. This is how the split is constructed. The function of this defensive cycle of shame is to maintain an illusion of attachment to and trust of the person with whom the child once wished to obtain an imprinted relationship form of contact.

To relieve themselves of the introjection, a person can begin criticising others in the same way that their parental figures did with them. The function of such a transaction is to temporarily silence the internal criticism and to stabilise oneself. A person who is very critical towards others is dealing with a much worse treatment inside of themselves!

Virtuous arrogance: a double defence

The fantasy of superiority constitutes a defence against the humiliating memories and pushes outwards the feeling of shame. Behind virtuous arrogance, there is a denial of relational needs (Erskine, 1995). How it is built is shown on the previous page.

For what reasons can shame be reactivated in supervision?

Each of us has within ourselves, engraved in our cells, emotional memories of shame. Even though they are unconscious, they are ready to re-emerge on any occasion. Whether the events happened at the age of two years, five years, 10 years or 18 years, our body carries the imprint and this can be awakened in the adults that we are now. Learning situations, including supervision, are places that are conducive to the awakening of shame. This is due to the fact that many emotional memories of humiliations have taken root at school, and/or at home in learning situations. Sometimes the people experienced as aggressors were the teachers, sometimes the other students, sometimes the parents. *I described the different ways in which the shame was reactivated in me during supervisions. I think the supervisors were unaware of what they were inducing. If they were aware, they made the choice not to talk about it.*

Who among us does not remember feeling humiliated at school?

In group supervision, the risk of re-living the shame is increased because we find the configuration of the 'class group'. Even if we manage at a cognitive level to minimise or forget our wounds, ourselves, our bodies, will remember. The adult person in the learning situation acts unconsciously to avoid stimulating the shame felt in the past. We restrict our spontaneity, avoid risky behaviour and use strategies that we expect to protect us.

How to treat shame as a supervisor?

The treatment of shame is deeply relational. In shame, there is the fear of rejection and abandonment. This is why the posture of the supervisor is the best remedy for feeling shamed. Being aware of the relational needs of the supervisee, making them emerge in the relationship and giving importance to their meaning is a good antidote to shame. (Here I am talking about the current relational needs of the supervisee and not the unsatisfied archaic needs.) This attitude allows the healthy development of the person.

Here are the eight main relational needs (Erskine, Moursund & Trautmann, 1999):

- need for security
- the need for validation and meaning in the relationship
- need for acceptance by a stable, reliable, protective person
- the need to define oneself
- the need for mutuality, shared experiences, confirmation of personal experience
- the need to have an impact on the other
- the need for the other to take the initiative
- the need to express love

Security

The supervisee needs to feel security in order to dare to talk about shame; physical and emotional security in which vulnerability is honoured and preserved; a space free of judgement, free from ridicule. To address a delicate subject, the supervisee must perceive an unconditional positive attitude on the part of the supervisor. "I can be who I am, I can be as I am in the relationship." "I am with you and you are not going to hurt me, you are going to enrich me."

Often the supervisee does not have this internal sense of security. They think we are going to judge them, criticise them, let them down. It needs constant respect on our part. When the need for security is satisfied, the supervisee relaxes and another need manifests.

Validation

Shame is not only generated by words but by the overall attitude. The supervisor must be involved and engaged in an authentic relational contact. They need to be attentive to harmonising with the rhythm of the supervisee, which is often different to their own; to the affect of the supervisee as well as to their way of thinking. The supervisor's respectful questioning and presence allows the supervisee to respond to the need for security as well as the need

for validation. This need is that the other person validates and accepts us in all our attitudes, even those that seem inappropriate. All defensive reactions have meaning and usefulness; they allow the maintenance of integrity. Shame needs to be validated, such that it is recognised as a survival response used to protect us from the deep emotions associated with the loss of the bond. It has its origin in the past of the supervisee, and it is usual that it is awakened in a learning situation.

Acceptance by a stable, reliable, protective person

The process of supervision is as important as its content. The intersubjective experience has as much influence on the growth of the supervisee as the words exchanged. Learning is not only at a cognitive level, but also at the emotional, body, relational and behavioural levels. To access these different levels, the supervisee needs to feel they are in a secure intersubjective link (Stern, 1989). The supervisee needs to be able to rely on a stable, reliable and protective person. The presence of a supporting and containing supervisor allows the supervisee to access their vulnerability, to feel the different 'tastes of oneself' without fear. They feel accepted and protected and can look at themselves with honesty. They could then allow themselves to feel shame, clinging to the benevolent gaze of the supervisor as a child clings to its mother's eyes when experiencing painful emotions. This secure bond allows the supervisee to integrate the emotional experience. If the supervisor does not have the capacity to offer this protective presence, for whatever reason, the supervisee perceives this through intuition and feels discomfort and insecurity that disrupts the growth and learning.

The other to take the initiative

The supervisee needs the supervisor to take the initiative to address the subject of shame when it is perceived. The supervisee will not do this alone. Remember, shame is lonely and silent. Knowing that supervision awakens emotional memories from school, the supervisor may ask the following questions: "How is this supervision similar or different from your school experience? At school, how did you feel when the teacher was asking you a question? Here, how do you experience my questions? What are the attitudes on my part that help you to think, and which ones disturb you? Was there a moment when I said something that was unpleasant for you? During this session, did I say or do anything that has generated shame, guilt or discomfort for you? Have you felt incompetent at any given time? Did you experience what I have said as critical?"

Through verbalising, this relational questioning allows the supervisor to raise awareness of the

supervisee to the shame experienced in the school environment, as well as that which has been reactivated in the supervision. The supervisor gives permission to speak in order not to experience it in a silent and solitary manner. It is important that it also helps the supervisee to see how they organise themselves unconsciously to replay and relive those moments of shame, and thus to confirm the belief that there is something wrong with them. The open and respectful dialogue allows the supervisee to broaden their consciousness and to free themselves from the shame.

In order to work effectively with shame, the supervisor needs to be aware of their own archaic disgraces and to have treated them in such a way as to be sufficiently liberated. The supervisor thus develops a particular sensitivity to this affect, knowing it internally. The supervisor is able, through intuition, to guess at the shame 'under the mask'. The supervisor is able to name it, question the supervisee with delicacy about this painful internal experience. He/she is also able to validate the feeling, standardise and explain it, in order to alleviate the grip of the shame, de-clutter the supervisee and free up space for thinking. A supervisor who is not aware of their own shame reacts in an involuntary way, through behaviours that generate shame in the supervisee. This risks activation of a countertransference in the relationship, demanding a too high level of perfection, or criticising or being arrogant. It involves being closed to the reproaches and anger that the supervisee could otherwise express. A supervisor who positions themselves as the one who knows, who evaluates what is just or what is wrong, deprives the supervisee of access to their own thinking and the development of it. All of these attitudes occur in a very subtle way, without the supervisor being truly conscious of them. Developing emotional awareness helps protect the supervisor by promoting interactivity and intersubjectivity.

Definition of self/having an impact on the other

During the professional growth process, the supervisee goes through the various developmental stages described by Erikson. When the 'early childhood' stage mentioned earlier in this article is reached, the supervisee feels the need to define themselves and differentiate themselves. In order to allow the supervisee to gain access to autonomy, and to avoid a reinforcement of archaic shame, it is important that the supervisor validates and supports the supervisee in this process. The supervisee needs to be encouraged to express ideas, preferences, values, without humiliation or rejection, and have them validated by the supervisor even if they are different to the supervisor's own. The supervisor

needs to encourage the supervisee to speak of disagreements or discontents, and to welcome these with respect and calmness. The supervisee who expresses anger to the supervisor needs that supervisor to recognise their own errors, to measure the impact of their behaviour and the consequences. Through this, the supervisor demonstrates that the comments are being taken seriously and that the supervisor is allowing the supervisee to have impact. Hence, they can be repaired. The need to have an impact on the other is an important relational need. Not meeting this need can be a source of shame in the supervisee.

Mutual Benefit

The supervisory group is a great place to deal with problems related to shame. The mere fact of being a member of the group and expressing shame freely represents a violation of the basic rule of families and shame-oriented groups. The supervisee observes how the supervisor recognises each participant as a person, which is in contradiction with the family in which the supervisee grew up, and/or with the school environment. Regardless of the content being addressed, being listened to by peers is a restorative experience. The group is useful to realise the experience of shame because it is inevitably awakened there. If the supervisor is attentive and works on this affect in the group, it is a great place to free yourself and restore self-esteem. Sharing shame with peers and discovering that they also have similar experiences meets the need for mutuality.

This sharing of experience has the value of confirming personal experience. The supervisor aligns with the need for mutuality by giving the supervisee their own experience in an appropriate, attentive and coherent manager, that is centred on the supervisee.

In order for our action to be therapeutic, it is important to address shame in all its facets. Not to focus the supervision solely on the cognitive dimension, but to investigate the relational, emotional, body, behavioural domains as well as the domain of fantasy. Shame has permeated every domain. It touches the whole human being. If we do not allow the supervisee to realise their shame in all its dimensions, we deprive them of an important part of their humanity. The 'self-relational' model makes explicit the different domains that make up the human being (Erskine, Moursund & Trautmann, 1999; Perret, 2016). By developing their contact capacity in each of the domains, the supervisee diminishes their sense of shame, recovers their integrity, and thus gains personal power and liberty.

To Express Love

During the supervisory program, the supervisee may need to express love to the supervisor. I mean by this to express gratitude, recognition or affection. This need is natural and important in building oneself. When the expression of love is in a stalemate, the expression of one's self in relationship is damaged, thwarted. It is important to be aware of this relational need and to welcome it as representing the quality of the relationship. The non-acceptance of this need, of this gift, can be experienced by the supervisee as an injury, a rejection, and can generate shame.

Beware of juxtaposition

By being attentive to the relational needs in the learning process, being respectful of the person and their rhythm, the supervisor can provoke in the supervisee the emergence of painful emotional memories. This contrast can be indigestible to the supervisee, especially if their relational needs have not been taken into account in the past. Indigestible in the same way as would steak and chips be for a child suffering from malnutrition for a long time. The child would be physically unable to digest it. If this is the case, the supervisee will 'spit out' the food to avoid being sick. Precisely because it is too good, it cannot be integrated. Therefore, it is important not to give too rich relational food too quickly. It is necessary to give it using a 'dropper', gradually, so that the person manages to digest it. And above all, to practice the questioning of relationships regularly by means of questions such as "How was my attitude different from that teacher you told me about? or "What emotions do you feel when I address you in this way?" The supervisee then has the possibility to put into words this contact that is being experienced inwardly, as well as the emotions that ensue, and to gain in consciousness.

(Juxtaposition occurs when the client experiences a contrast between what is brought into the relationship (therapeutic or supervisory) and what was needed and not received in the past. (Erskine, Moursund & Trautmann, 1999).

To complete this article, here is an experience that I have had with a group of six professionals that I supervise regularly. The supervisions take place over the course of a day. During the session, I invited them to work in two sub-groups of three. One participant brought a subject, the other two questioned them in order to allow them to move forward in their reflection. I left them 20 minutes for this exercise. On their return to the big group, I discovered two emotionally collapsed participants (to whom I will give fictitious names to ensure anonymity). Both were filled with shame. The safety

in the group allowed them to express it rather than to swallow it silently. One of them, Micheline, explained to us that Nathalie's insistent questions had caused her to feel shame, the sensation of being null, of not being up to par in her client work. These words were unbearable for Nathalie, increasing her own sense of shame. Shame to have provoked the shame of Micheline through her questioning. Shame to the point of not being able to sense the support of the members of the group. "I feel so bad." she said. She stood up to leave the room. I stopped her and refused to let her go out alone, putting myself physically in front of her. Going out alone would have only increased the shame. She cried, refusing to stay. She asked to go out with someone. I agreed, she chose a participant to accompany her. I let them leave the room.

Micheline had stayed in the group and offered to share her experience with us. Sharing shame reduces its impact. I took the time I needed to support Micheline, and then I offered them a coffee break. I went out to see Natalie. Sharing with a colleague had allowed her to calm down. I invited them to re-join the group and she agreed with difficulty. In the large group we talked about their respective experiences. I searched with them for the cause of what had happened. They had already worked together as a sub- group and that had never happened before, so why especially today? We discovered that the subject of Micheline's supervision was about working with a client who was herself filled with strong archaic shame. This shame was out of the consciousness of the client and had never been addressed in the sessions. The client's shame had then burst into the sub- group in the transference of Micheline and Natalie. This awakened their own archaic shame and the cumulative effect was explosive. Updating these elements made it possible to make sense of the event, and both were helped, contained by a benevolent and secure group. Micheline was left with an essential element to continue in her work with the client.

Conclusion

Shame can be compared to mould. If we leave it in a dark place, it grows and proliferates, mould grows in the dark. If on the contrary one is attentive and it is exposed to light, it dries up and stops growing.

Shame has many forms and many faces, always in order to go unnoticed. Unfortunately, most of the time it does. By hiding and remaining secret, it cannot be liberated and resolved.

The protection of the supervisee is part of the ethical code of our profession. For this reason, it is the responsibility of the supervisor to know this feeling well, and to treat it in a proper manner, in therapy or in supervision.

It is the responsibility of supervisors to know how shame is active within them, its place in their history, how it has impacted on their own development, and what protections they have put in place to deal with it.

It is the responsibility of supervisors to be aware of their own pent up emotions behind their shame, so as not to project them onto supervisees.

It is the responsibility of the supervisor to create the conditions so that the shame of the supervisee can emerge and be named. Sometimes the supervisor may have to 'dig up' the shame buried inside the supervisee.

It is the responsibility of the supervisor to know how to treat it in order to help the supervisee to free themselves from the shame.

In the supervisor's engagement with themselves, the profession, and through the connection with the supervisee, the supervisor responds to the fundamental principles of ethics:

- develop your personal competencies (know how to be)
- develop your skills (know how to do)
- develop your social skills (know how to relate)

I thank you for the interest you have brought to my reflections. I hope that, through these, I have succeeded in transmitting to you the complexity and depth of shame. I hope also to have stimulated in you a desire to deepen your awareness, for yourself as well as in your practice.

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