The "Defect" at the Root of Shame

Levery night Elizabeth performs, she returns home with an awful sinking feeling, and she doesn't understand why. "I love my work. I even got a standing ovation," she says. Yet, rather than expand from the delight and exuberance of her time on stage, she contracts.

Elizabeth's contraction comes from the experience of shame, a poison that keeps us from experiencing our own joy and disconnects us from the aliveness within and around us. Whereas guilt is associated with a particular memory or event and having done something wrong, the feeling of shame is about being wrong at our coreIt is a debilitating feeling we have about ourselves that comes from a core belief that we are basically and unalterably flawed.

Where Does Shame Come From?

The poison that is the root of shame is absorbed in early childhood. As a result of not being seen and loved for who we are, we develop the belief that we are unlovable and that something is inherently wrong with us. Perhaps we were told outright that we were bad, stupid or undeserving, or perhaps we were physically abused, from which we concluded we had no value. The thing we may have done "wrong" might have been simply expressing our joyful authenticity. Like Elizabeth, we may have learned that it is not safe to be who we truly are.

Does Shame Have a Purpose?

Oddly enough, shame gives us the illusion of safety. It provides us with a feeling of control over other people's feelings and actions. If we are not getting what we want in life—in our personal relationships, in our work, even in our experience of self—a sense of

power comes from "knowing" that it is because we are inadequate. If our perceived "defectiveness" is causing the results we see, we believe there is always something we can do about it. We can do things "right."

Clinging to the belief that our inadequacy is the cause of other people's behavior towards us prevents us from accepting our inherent helplessness over others' feelings and actions. When we begin to understand that all people at all times are simply exercising their free will and it has nothing to do with us, healing can begin.

How Does One Heal from Shame?

Shame can be eradicated by taking certain steps towards healing:

- The first step is to identify your shame, to become aware of how it feels in your body.
- Once you recognize the feeling, notice shame every time it arises and experience it fully; name it and feel it.
- Be willing to express your authentic feelings—including your joy and sense of true power. Reverse the shutting down effect shame causes by giving yourself permission to fully "show up."
- Accept that other people's feelings have nothing to do with you. With compassion, choose to no longer take their behavior personally.
- Practice forgiveness—for those whose behavior led to you feeling shamed, and for yourself.

Please don't hesitate to call if you'd like help releasing the false belief that you are defective and begin affirming the unique and marvelous individual that you are. *

Ways We Deny Addiction

Addiction can be a trickster when it comes to the things we tell ourselves (or our friends or family members struggling with addiction tell themselves). Chief among them is denial. Here are 10 guises that denial can take.

- **1. Deny responsibility.** I use, but it's not my fault. I get so much pressure from everyone.
- **2. Deny lifestyle hazards.** I don't take drugs anymore; I'm just hanging out with my friends.
- **3. Deny the facts.** The guidance counselor doesn't know what she's talking about. Our son is fine—he's getting straight-As.
- **4. Deny the significance of the facts.** I've never blacked-out or been drunk at work. I'm not a wino.
- **5. Deny the duration of the problem.** Once I get my degree, I'll stop taking stimulants.
- **6. Denial that fosters false hope for future use.** After I break the habit, I can drink again at parties.
- **7. Deny emotions.** I need wine to deal with the stress. You'd drink, too, if you had my life.
- **8. Deny regarding control.** I don't need those self-help meetings. I'm doing fine on my own.
- **9. Deny family secrets.** No one at the new school needs to know that our daughter was in rehab.
- **10. Deny shame-based feelings.** I can't let myself know how bad I feel. ★

Ted Chapin



Addiction, shame, over-eating, over-giving, labeling—the themes in this issue—are often guests at the table of our families, our lives.

For many, these issues intensified during the pandemic, potentially causing serious damage to health and relationships. The unfortunate result for everyone dealing with them is a life experience lacking in stability, happiness and vibrancy.

We begin by exploring shame, starting with the revelation that guilt and shame are not the same thing. Guilt is a feeling associated with doing wrong, while shame is a feeling associated with being wrong, being deficient at your core. See this p. 1 feature for some suggestions on ways to heal from this debilitating experience of shame.

In the Top 10, discover some of the ways addicts tend to deny the reality of their addiction. It will help you see and understand this behavior in friends and family members struggling with addiction (or even yourself).

The quiz explores how well you set personal boundaries, which are so needed when you're a person who tends to give, give, give—and then give some more.

During the past year, many of us gained at least a few extra "pandemic pounds." The p. 3 feature, however, addresses a more chronic problem with food: using it as a substitute for love.

And finally, the back page asks the question, "What is normal?" and looks at the dangers of labeling others who don't fit societal norms.

If you'd like to talk about these topics (or any others), don't hesitate to call.

Are You an Over-Giver?

'Tis more noble to give than to receive, right? Well, not necessarily. While giving can be a wonderful, heartwarming experience, giving too much of our time and energy can be detrimental to both our physical and emotional health, leading to anxiety, overwhelm and burnout. Take this quiz to see if you are giving it all away.



True False

O

00	1. The amount of time I spend listening to others far exceeds the amount of time that others listen to me.
OO	2. I hate conflict, so I'll do whatever it takes to avoid it, which often means doing something I don't want to do.
OO	3. I ignore my body's "no" signals when I think someone's needs are greater than mine.
OO	4. I feel obligated to answer the phone when it rings even when I really don't want to.
CC	5. I force myself to do things even when I don't have the energy to do them.
\mathbf{C}	6. If I don't answer all the emails I receive I feel guilty.
OO	7. In order to pay my family's bills I have to work more hours than I want to.
00	8. I schedule my work time around my clients' needs rather than around my own.
\mathbf{C}	9. I can't say no when people in need ask me for money.
00	10. When I'm out to dinner with people who have less money than I do, I feel obligated to pick up the check.
O O	11. I volunteer for my place of worship or other organizations even if I don't have the time.
\mathbf{C}	12. People won't like me if I say no.
OO	13. I'm the person everyone calls when they need help: a baby-sitter, chauffeur, or someone to fill in at work.
OO	14. My children's happiness comes before mine. I'll do whatever it takes to make them happy.
CC	15. I have a hard time saying no to my partner because I don't want him/her to feel unloved.

If you answered true more often than false, you may want to find ways to create more balance in your life by getting clear on your values and priorities and learning more about boundary setting. Please don't hesitate to call if you'd like to explore this issue further. *

16. I feel selfish if I don't share what I have with others.

When Eating Becomes a Stand-in for Love...

The pressure to look good is no secret; it's bred into us from birth. Advertising especially targets prepubescent girls, hawking make-up and designer clothes. Surveys have found that by the time they're teens, more than half of all girls say their appearance is the prime concern of their lives.

Not every teen who diets to fit society's definition of beautiful will develop an eating disorder. According to the National Association of Anorexia Nervosa

and Associated Disorders (ANAD), eating disorders are caused by a complex interaction of genetics, psychological issues, and social factors, such as a culture that promotes thinness above all else. Eating disorders are, however, an epidemic:

- Seven million women and one million men suffer from an eating disorder.
- 86 percent are afflicted before they turn 20.
- Only half say they've been cured.

How Has Food Become the Enemy?

Kim Chernin, author of *The Hungry Self: Women, Eating and Identity*, calls it a cultural crisis: in our perpetual struggle to meet the Madison Avenue definition of beauty, we lose ourselves. It's also a survival issue: food, like shelter and love, is one of our most basic human needs. If we feel we have little control over anything else in our lives, at least we can control our bodies by starving them.

For many of us, with or without eating disorders, food is a stand-in for love. People who have grown up in dysfunctional families may eat to hide their loneliness and to ensure that love keeps a safe distance. One man began gaining weight as he began losing family members. By the time both his parents and his older brother had died, he was more than 100 pounds overweight, with kitchen cabinets stockpiled against further pain.

When real love—the kind that can heal our wounds—shows its face, it can become easier, and safer, to reach for the Rocky Road.

Becoming our true selves is work, although it doesn't have to be painful. Nor does food need to serve as a substitute for the nourishment we crave. Instead, food can be our medicine, as indigenous peoples use this word: that which heals us into wholeness.

Anita Johnston, Ph.D., author of *Eating in the Light* of the Moon, sees a spiritual and emotional hunger

that women try to fill with food, when what's needed is a strong connection to the feminine spirit. Johnston uses myth and storytelling to reconnect women to the natural rhythms of the Earth "that celebrate the power of women's intuitive wisdom—a formidable gift that contemporary women often conceal or suppress (like the natural roundness of their bodies) in order to fit into society's emphasis on the linear, rational, logical mind."

These issues are also being addressed by male leaders

such as poet Robert Bly, whose gatherings help men get in touch with their essential nature, making them less likely to act out their sense of disconnection with food.

The following "conscious eating" cues can help tip the scales in your favor:

Plan ahead. Decide what and when to eat, make a shopping list, and stick to it. Enjoy preparing your food as much as you'll enjoy serving and eating it.

Eat slowly. It takes about twenty minutes for your brain to get the message that you're full. Chew your food thoroughly and put your fork down between bites.

Eat mindfully. Don't watch the news or read while eating. Pay attention to your plate.

Drink plenty of water throughout the day. Studies have shown that a feeling of hunger can actually be thirst, misinterpreted.

Eat three daily meals. It's easy to overeat if you're famished. If you know you'll be on a tight schedule, pack healthy

snacks such as raw veggies, fruit, and nuts.

Join or launch a healthy eating circle. Gather with like-minded people to support one another in becoming your authentic selves. 12-Step groups, such as Overeaters Anonymous (OA) and Food Addicts in Recovery Anonymous (FA) are good places to start.

If you suspect that you or someone you know has an eating

disorder, don't hesitate to call. The problem is unlikely to go away by itself, and early intervention is key to recovery. *



The Danger of Putting Labels on Ourself and Others

Jennifer has 60 potted plants around her house—all in purple pots, to match her home's door and windows, her car and the hats she wears when walking her two cats.

Is there something wrong with Jennifer? Is she, um, normal?

Most of us yearn to be special, an individual. At the same time, we don't want to lean too far out of the tree—we also want to fit in, be accepted...be "normal."

But what does it mean to be normal? Even experts struggle with the word; medical textbooks use words such as "usual" and "not ill" and "conforming to a cultural norm." However, what is usual to one group of people—tattooing, to give one example—may be completely weird and repulsive to another group. Does that make it normal or abnormal?

The real danger comes in labels the ones we put on each other and the ones we call ourselves. People who don't fit in are often labeled as abnormal or different, and that stigma can eat into their feelings of self-worth and belonging. Our culture, with its narrow definitions and media depictions of the "right" way to be, doesn't help.

We harm ourselves when we agonize that something we feel, believe in, dream about or just wear on our bodies is not normal, or when we feel shame and hide things. Normal is a big playing field and most of us fit somewhere on that field.

Or, as comedienne Whoopi Goldberg puts it, "Normal is nothing more than a cycle on a washing machine."

Still, we worry about being normal. Is it normal to sleep 12 hours instead of eight? Is it normal for my five-year-old son to dress in high heels and pink tutus? Is it normal to grieve a loved one for years? Is it normal to be happy so much of the time? Am I at a normal weight? Is it

normal to want to be alone a lot? Is it normal to spend hours on the computer? Is it normal to be afraid of dogs? Is it normal to be the only person crying in a movie theater when everyone else is laughing?



We limit ourselves when we try to fit ourselves into a box labeled "normal." It can be an awfully unimaginative, stifling, boring place to be. In trying to be normal or to fit in, we may shut down those parts of us that define who we really are.

So, take a deep breath, and know that you may be different, you may even be a little strange in some areas—but most likely, you are as "normal" as the rest of us. *

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