

Shame and Creativity

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Abstract

In this article a combination of Jungian psychology and affect theory are used as a paradigm behind an art therapeutic methodology to heal shame. The 4000-year-old story of Inanna's descent to the underworld is presented as a practical guide to clinical work. The story is parted into five steps; 1) preparation, 2) descent, 3) death, 4) return and 5) new world order. These steps are transferred into teaching directives leading to a shame healing procedure, where imagination is considered an important psychological function.

Moving from a neuropsychological understanding of psychological change, the aim is to show how art therapy can become an agent for this change, involving both left and right hemisphere in its methodology.

The article is grounded in clinical practice.

Keywords

Art therapy
Psychological creativity
Shame and creativity
Art psychotherapy
Therapeutic change

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Introduction

The background for this article is a research study on art therapy as prevention for depression (2015). Only after the study did I become aware of the influence that shame has in depression and how the signs in depression have many similarities to experiences of shame (judgmental inner voices, hiding tendencies, low self-esteem, poor imagination) (Skov, 2015).

I was influenced by Tomkins (2008), Stewart (1996), Kaufman (1996) and Nathanson (1992) and liked the idea of a limited number of affects, where shame was one of them. It led me to create the Blue Diamante model, presented in this article and I have had the opportunity to use the model as a practical tool with different groups in art therapy training during 6-day courses of healing shame.

More literature on shame is now appearing in the psychotherapeutic field after many years of silence. The dominant suggestions to the healing of shame are based on the transference relationship, where the internalization of an empathic therapist can come to replace an inner shaming voice (DeYoung, 2015; Gilbert, 2011). In some approaches writing exercises are used as a teaching tool for reflection, while imaginative activities are hardly mentioned (Skov, 2018). Considering the newer research in neuropsychology, we now know, that imagination and right brain activities are needed for psychological change (Schoore, 2012). The problem in most therapeutic methodologies of our time is, that the development in the clinical field seems to move in the opposite direction than results found in neuropsychological research. Cognitive approaches to the psyche are leaving an overload of emotional content in the right hemisphere un-integrated into consciousness, based on the belief, that rational and verbal activities are *the* healing agent for change. Considering the fact, that most shame experiences are forgotten and located in the right hemisphere, it could be argued, that such a development is another attempt to avoid confronting shame.

As an affect, we cannot control shame when it is activated. We meet the destructive effect that shame has in patterns of behavior, both for the individual and for society.

The spiral of shame can only be broken when shame is consciously confronted and a new self-image imagined as a trusting potential for the future. Therefore we need to move beyond the personal shame complex in order to get access to the resources needed for this transformation.

This is where Jung's psychology about the collective unconscious becomes an important background for imaginative activities in clinical work. If we reduce all content coming up from the unconscious to personal life experiences, we miss the opportunity to create original new self-images that have more dignity and self-compassion as found in individuals living with shame. We need a psychology where the unconscious contains more than personal rejected experiences from life.

In this article there will be a presentation of using an art therapy methodology in relation to shame. Jung's concept of the collective unconscious and the drive towards individuation are considered important in order to understand this process. The story of Inanna's descent to the underworld and her return from death, will form the archetypal structure to the clinical healing of shame, based on the work by Kramer & Wolkstein (1983).

One of the main issues in dealing with shame is, that access to original creativity and joy is blocked and replaced with negative self-expectations leading to behavioral patterns below ones true potential. These hidden images of inner greatness and hidden potentials are often expressed in images as a compensative act of creation, leading to an opportunity to explore the vitality hiding behind shame during a following therapeutic dialogue.

How do we change?

Behind all clinical approaches to the psyche, there is an understanding of the human potential to change. Our clients want to feel better and to improve the quality of their lives and as therapists we specialize in different methodologies, that we trust will support the process of psychological change.

The paradigms to change in this article build on a combination of neuropsychological research (Schore, 2012, Cozolino, 2010), affect theory and Jungian psychology. The point is to combine these different approaches with art therapy methodology as an argument to use art therapy in relation to shame.

According to Schore (2012) the transformative process starts in the oldest and most primitive part of the brain, the reptile brain, through the activation of an affect. The affect is experienced in a specific life situation and thereby attached to an emotional experience and to the limbic part of the brain, which is considered more close to consciousness than the affect itself. From this life situation the energy move towards the right hemisphere as an experience of an irrational mood not yet understood by the rational brain related to the left hemisphere. If consciousness can tolerate the emotional weight of the experience, it will affect conscious self-awareness as well as life quality. Knowing about our shame is a first step towards changing the pattern of unconscious

shame reactions, says Brown (2011) and sharing it with someone else is part of moving out of the private isolation that shame have on our lives.

In order to become integrated in consciousness and accepted by the ego state of mind, the experience needs to be verbalized and accepted in connection to other life experiences giving meaning to the overall sensitivity involved in the experience. As a consequence of this process that goes on in the brain, a new attitude to life can be added to consciousness, indicating that psychological change has taken place. Usually the affective stimulation also provokes forgotten memories that have some similarities to the present experience. They were once rejected as unbearable by consciousness and stored in the implicit memory system in the right hemisphere. This can lead to an overwhelming activation of emotions, which does not match the present situation and therefore often creates new rejections in relation to others. As one client expressed “I am so angry and afraid that I might hurt someone, if I let the anger out”. She knew that old stored aggression might come out as well and that she would have no control of these affects.

The Jungian approach to change is based on a living connection between consciousness and the unconscious, often referred to as the ego-self axis and the process of individuation. Through this interaction we change and unfold more and more aspects of our individual self, as a process of becoming whole. This is where art therapy has an important potential, because the language of the self is more imaginative than rational as it relates to the unconscious parts of the psyche. In order for the ego and self to interact, we therefore need the symbolical language of the self as well as the rational language of the ego. In relation to neuropsychology it means that the function of both left and right hemisphere is needed in a therapeutic method in order for change to take place. Also the affects needs to be involved in the experience of the symbol, as it might otherwise become a mere intellectual process with no potential for psychological change. So different parts of the brain are typically involved in art therapeutic processes. Considering the growing preferences of cognitive therapies, where left hemisphere is more active than right hemisphere, art therapy can add a language of the self through imaginative and affective experiences of symbols.

About shame

The affect of shame is activated through experiences of rejection (Stewart, 1996). When a rejection from someone else leads to an experience of having no worth as an individual, shame has broken the vital connection to the self, leading to self-disgust and inner emptiness. Most shame experiences are further rejected by consciousness and stored in the implicit memory system and right hemisphere, where it continues to affect our life and relationships from the

depth of the unconscious psyche. The unbearable experience of having no worth as a human being is an affect that we cannot control as it comes and goes whenever it is tricked by a similar experience, either by someone else, or from internalized judgmental voices in our own psyche. Through projections of unconscious content to the image, we can regain access to the lost memory of shame experiences and transform our self image supported by an emphatic other. Nathanson has described unconscious behavioral reactions to shame in his 'compass of shame' (1992). He refers to; attacking others, attacking self, withdrawal and avoiding behavioral scripts. I might add dissociation as a consequence of not being able to avoid the situation fast enough to escape the terrible experience of being 'killed' by someone else (Skov, 2018). The flight into another reality, is described by Kalsched in his concept of a 'self-care system' as a reaction to being traumatized (2013).

When shame is considered an affect, it is because we need shame to survive as a group and to adapt to collective expectations and moral demands. The positive aspect of shame is, when we use the vulnerability of sensing the reactions of another to adjust our own behavior for the relationship to continue. We need to belong to a group says Dissanyake (2000), and if we don't care enough about others and what other people think about us, we might end up alone and unable to survive. On the other hand, we should not care too much, forgetting who we are as individuals just following collective expectations. The challenge in living with shame lies in this divide between a narcissistic need to be mirrored and getting lost in collective expectations not being able to continue the process of individuation.

The Blue Diamante

The Blue Diamante is a model that I created after having studied the theory of affects, first presented by Tomkins (2008). Stewart (1996) made some interesting links to Jungian concepts, where the seven affects (out of originally nine), were described in relation to archetypal structures in the psyche. In the Blue Diamante the seven affects were organized in a developmental order, based on my experience from clinical practice. I felt it was important to approach shame in relation to the other primary affects and it helped me to understand why it so easily was ignored in clinical settings. Often sadness and anger take all the time and attention, covering up the more difficult affect of shame that lies underneath. In the model we can find shame closer to the self than the other three negative affects of fear, sadness and anger and close to the positive affects of joy and interest. A psychological change or improvement in life quality means, in affective terms, that we gain access to more joy and interest in our lives in order for the negative affects to be less dominant in consciousness. Using the blue diamante model, we

can see shame as a bridge to these positive affects and one way to explore them is through the experience of the artwork.

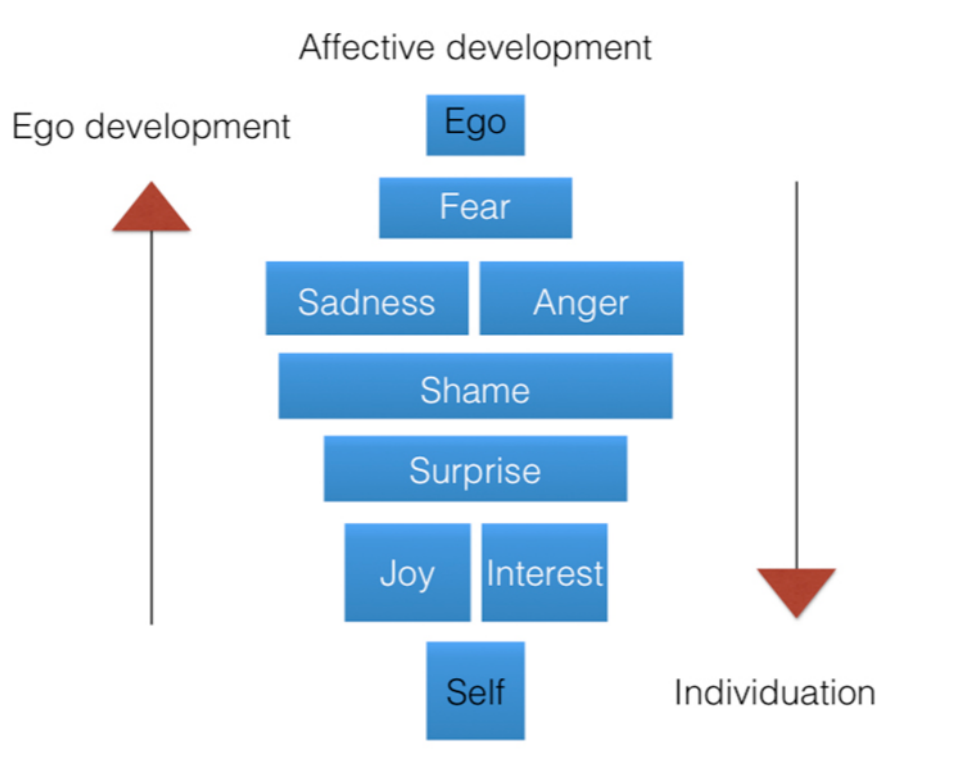


Fig.1. The Blue Diamante (Skov, 2018)

Using the Blue Diamante model as an affective guide in healing shame I found the image of that process expressed in the story of Inanna's descent to the underworld.

Bringing the affect and the image together suggests, that the process of healing shame has an archetypal pattern, involving both experience and meaning. In the following I hope to clarify this connection.

The story of Inanna

Inanna, who was the goddess of heaven and earth, married Dumutzi who was a shepherd and then became a king of Sumer.

When they returned from their honeymoon, Dumutzi said to Inanna: "Set me free" (Kramer & Wolkstein, 1983). He now wanted to be a king more than to be her husband and lover and she felt rejected in her mature womanhood. She decided to travel to the underworld to visit her dark sister Ereshkigal and began to prepare her journey by closing her offices ending all outer obligations.

She travelled through the seven gates in the underworld and by each gate she had to let go of some of her material status, her jewelry and clothes, ending up being naked in front of a furious Ereshkigal. Seven judges sentenced her to death and she was hung on a hook to rotten. Her

helper, Ninshubur, asked Enki, the great shaman and god of wisdom, for help and he created two small 'professional mourners' from the dirt of his fingernails. They were so small that no one saw them travel to visit Ereshkigal, who were now in 'birthpain' in her underworld chamber. They mirrored her pain with empathy and calmed her down. As a gesture, Ereshkigal gave them the dead body of Inanna to take with them back to earth. The condition was, that Inanna should find someone else who could take her place in the underworld. Inanna was given life by the two helpers and when she came home, she chose Dumutzi as her replacement, because he did not seem to care about her return. Out of love for her brother, Dumutzi's sister offered to take his place half of the year. Dumutzi therefore spend half of the year in the underworld and the other half together with Inanna as her equal partner.

Inanna as an image of healing shame

As a language of the soul, mythological stories reflect different developmental aspects of the archetypal self. In order to use a myth as a guide to psychological change, we need to recognize the story as images related to our own lives, either as symbols of the past or as new images of a future identity. Inanna, being the goddess of heaven and earth, is also a passionate woman, who has the courage to confront shame by conscious will. The confrontation did not 'happen' to her as it does to most of us, when we feel overwhelmed by the negative consequences of being shamed. Inanna made a conscious choice to confront the queen of shame living isolated in the underworld/ unconscious domain, as a result of her experience of being rejected by her husband. In order to make the story useful as a guide to practical work, I parted it into 5 steps. 1) preparation, 2) descent, 3) death, 4) return and 5) new world order (Skov, 2018). Each step was transformed into different activities in an art therapy procedure of healing shame and connected to the Blue Diamante model as the affective counterpart to the images in the story. I have found all steps important in transforming shame, even though the actual confrontation with the shaming other does not take place until the phase of death, when Inanna is killed by Ereshkigal. Another point in the story is, that she is not alone during her journey. Her helper is informed, that if she has not returned from the underworld within three days, Ninshubur must seek help for her rescue. This indicates, that Inanna was well prepared for the coming death and already knew what was to come, only the affects were felt at a later time in development. This is the purpose of the preparation phase. We learn about the psyche and the process of change, before we actually let go, in order to experience unconscious content. I think the preparation keeps us sane, when we meet the strangeness of the unconscious reality so far away from how we normally experience life. Working with images as psychological reflections is a way to slowly become

familiar with the unconscious without the fear of being overwhelmed, keeping the distance between ego and self throughout the dialogue. In the table below I present the five steps in healing shame as an image from the story, an activated affect and art therapy activities.

Step in the story	Steps in the Blue Diamante	Art therapy activities
Preparation	Fear	Getting familiar with psychic reality through creative processes and dialogues with images. Teaching in shame and Jungian concepts
Descent	Sadness - Anger	Expressing scenes from life, where sadness and anger were held back. Letting go of old ego identity
Death	Shame	Expressing shame scenes and imagining a positive mother in the shame scene
Return	Surprise	Discovery of new identity in the image without the shaming voice interfering
New world order	Joy - Interest	Exploring new identity through creative expression

Table 1. Comparison between steps in the story, the Blue Diamante and art therapy activities.

During the process of getting familiar with psychic reality, memories from the personal life are dealt with in therapy. Some clients have difficulty with anger and feel stuck in their sadness, while others have problems with aggression and with making boundaries in the outer life. Working through these issues in therapy have the purpose of balancing the ability to access sadness and the inner life, as well as anger and the outer life. This is a necessary balance to obtain as a preparation to confront shaming others in past as well as in future situations. Otherwise we are either lost in the inner complex of shame, or in aggressive patterns of behavior without the ability to change these patterns.

During the descent towards deeper layers in the unconscious, we learn to let go of the attachment we have had to outer expectations, while we focus on the coming meeting with new aspects of the self. This part of the journey is a personal and object-relational process, where self-consciousness is understood as a result of what we have become.

In the death phase of the journey, a shame scene from life experience is expressed in a painting. This will bring forward the vivid memory and affect of shame, which needs to be shared with a trusting other, like a therapist or a supportive group member. One of the tasks in this sharing is to avoid solving the conflict attempting to help the shamed individual to feel

better, but instead to find the two small helpers, created by Enki in the myth, who can mirror and just listen to the experience told by the shamed individual.

Another task is to limit the inner judging voice, as a sentence coming from the shaming other, like ‘you are no good’, unlovable, ugly etc....From this point, the journey back to life begins, starting with an imagination of a good mother. The good mother is visualized as intervening in the shame scene and painted into the picture. How would she appear and change the scene, if she had been there to protect the person from being attacked by the shaming person? A final task is to find her voice as a future replacement of the inner judging voice, as a sentence like: ‘your are lovable just the way you are’, or ‘I will always be there for you’, etc.. She is further explored in the image as a new scene, which can be role-played or in other ways anchored in the psyche. The activation of the good inner mother voice needs to be repeated a number of times, in order to stay functional as a new mental construction in the psyche. Following this new voice, different behavioral patterns will appear in life as well as in the artwork. The self will be supported by good mother mirroring leading to new self-discoveries in the artwork as surprises connected to forgotten potentials in the psyche. Using the artwork as a preparation to the lived experience in outer relationships can become a process of anchoring the new identity through the positive affects of joy and interest that are explored without the shaming voice interfering in the process of creation. The imaginative inner mother replaces the transference on to the outer therapist as a more effective and direct experience of an emphatic aspect of the self.

As an overall process of healing shame, I find each step important and necessary indicating, that shame experiences are strongly connected to many other life conditions, which we normally don’t think of as shame-related. Also the preparation phase is important as a way to avoid being re-traumatized when confronting the shaming other (again). The last phase of a ‘new world order’ indicate a change in attitude towards life. An attitude with more understanding of others, because we now know how to use our vulnerability with compassion (Brown, 2011).

Why art therapy?

The benefit of using art therapy in healing shame is based on an integrative approach. As a general suggestion, I find a balance between creative activities, therapeutic individual processes, art-based group interactions and use of symbolic communication, to be a transformative frame for psychological change. In working with groups, I suggest art therapeutic directives following the 5 steps in Inanna’s journey mentioned above. The directives can vary according to the creativity of the therapist and the group of people involved. In the following, some of the

differences between art therapy and other (more cognitive) approaches are suggested as an argument to use art therapy in working with shame.

The psychic reality

When confronting the inner life we meet the strangeness similar to when we dream, only in art therapy we are awake. Becoming familiar to this kind of reality give us the possibility to use imagination as a forgotten language of the soul. Through imagination we can come to see new parts of ourselves without feeling shame of what we see. This will support the ego – self-connection and the process of individuation.

The expressive process

Projection of unconscious material through the expressive process, leads to a differentiation between the unconscious and consciousness, making it possible to interact with the unconscious through the dialogue with the image. The release of affects to the image further supports ego stability avoiding the affects to overwhelm the ego from inside.

Surprise during the dialogue

During the therapeutic dialogue, the use of symbolical interaction with the image is often part of the more personal discussion, where the image is recognized as an image of the lived reality. During the symbolical interaction, new understanding can come forward and surprise the ego adding a new experience to the consciousness that is already known, as for example when the good mother is imagined and painted into the image. This surprises the ego, because the good mother was missing in the personal shame scene and now explored as a new possibility for change. The condition is, that imagination is to be trusted as a psychological placebo and bridge between the two hemispheres.

Activation of positive affects.

The positive affects are easily activated during the creative process along with a certain familiarity of being expressive without the inner judging voice interfering. This of course is a result of a repeated training of separating the ego from the inner judge, which were discovered during the death phase. In my research with depressed individuals I found, that the inner judge became visible in the artwork as a destruction of more self-related and authentic parts of the image. They were either painted over or ridiculed afterwards, making no space for a new attitude towards the self. I therefore concluded, that a conscious awareness of the inner judge during the

expressive process was necessary for the positive affects to manifest in the body as well as in the image.

The shame free space

Shame is mostly communicated through the eyes. The way someone looks at us, can be felt like a negative evaluation of who we are and therefore eye to eye contact is always more vulnerable than when discussing images, where the focus is on the image, and not on each other. We can never really be sure, that the client experiences our good intentions, because earlier experiences might have been less positive. In the discussion of the artwork, we have an opportunity to create a good and trusting relationship in a symbolic way, before a more direct interaction with the client. What is also important is, that the client meets aspects of the inner self during the dialogue with the image, where the therapist becomes a facilitator of the process. The transference on to the therapist is more or less replaced by the transference of the self to the image and this supports the ego – self - relationship in the client. In the relational approach to healing of shame, there is no space to explore the inner self except through the transference on the therapist, who should then carry the image of being more or less divine! The artwork makes it possible to move beyond the personal and into the archetypal, where new potentials in the psyche can be explored as coming from ones own self.

Discussion

Using art therapy methods to transform the negative influence of shame has shown to be a good contribution to the cognitive approach dominating the clinical field. In relation to the Jungian concept of the ego - self axis, the experience of inner wholeness and personal worth are explored through the image. The psychology of rejection is also a psychology of shame and to the experience of not being loved enough to be chosen by another. To develop a compassion for ones own inner self, without falling into the trap of narcissistic illusion, can support personal growth and lead to a more compassionate attitude to others (Skov, 2018). Some individuals living with shame are stuck in depressive states, where the affect of sadness is more conscious than the affect of aggression. Understanding shame as an underlying self-image to these and many other conditions can motivate clinicians to bring more attention to shame in their clinical work with clients. Using Inanna as a model for change, this process takes us through the five phases of preparation, descent, death, return and new world order. In this archetypal procedure, we find a tool where re-traumatization can be avoided and instead further the process of individuation.

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