



HELPING HANDS



Shame

(excerpts from GoodTherapy.org)

The experience of shame—a feeling of being unworthy, bad, or wrong—can be extremely uncomfortable. Shame has the potential to change the way we see ourselves and may lead to long-lasting social, professional, and other difficulties.

The word “shame” means different things to different people. *Shame is very different from guilt and embarrassment.* Guilt is usually understood to involve negative feelings about an act one has committed, while embarrassment deals with a societal reaction. *Shame, on the other hand, involves negative feelings about oneself, and although a person can be shamed by peers or society in general, shame can also be experienced secretly.*

Unresolved shame can lead to feelings of depression, anxiety, and low self-esteem. Shame may also be a symptom of some mental health diagnoses, such as body dysmorphia, or the product of a traumatic experience, such as rape or sexual assault.

Living with shame, regardless of the shame's source, can be a lonely and demoralizing experience. Therapy can help by addressing the underlying cause. When shame is due to a past misdeed, a qualified counselor can support a person to make amends or move on.

WHERE DOES SHAME COME FROM?

The experience of shame can be deeply unpleasant. People experiencing shame are struck by the overwhelming belief that they—as opposed to their actions or feelings—are bad. In some people, this may inspire a change in behavior. In others, shame can be paralyzing.

Shame has many sources. Sometimes a person is plagued by feelings of shame without a clear cause. Some studies have linked conditions such as depression or social anxiety to shame. Because mental health conditions such as depression or anxiety remain stigmatized, a person experiencing shame due to these conditions may continually become more ashamed of themselves and their condition, making symptoms worse and making it difficult to seek help.

HOW TO GET HELP FOR SHAME

Getting help for shame begins with identifying shameful emotions. Some people are not conscious of their shame. Others know they feel ashamed, but worry that seeking help will force them to disclose their shame to others. Because shame is linked to feelings of unworthiness and low self-esteem, some people fear that those from whom they seek help will eventually discover that the shame is deserved. They fear exposure, and worry that others will reject them when they see the truth.

These are self-defeating thoughts. Shame is treatable, no matter where it comes from. If you feel that your shame is deserved, it's important to know that your shame serves no purpose. Instead, it may cause you to harm yourself or others.

Brene Brown's shame resilience theory is a comprehensive approach for preventing and overcoming shame. Brown argues that resilience to shame has four components:

- Recognizing signs of shame and understanding a person's triggers for shame.
- Awareness of shame, its cultural origins and how it functions in relationships.
- Reaching out to others to share your story.
- Giving voice to feelings of shame, since shame derives much of its power from secrecy.

HELP DEALING SHAME

Shame often stems from a traumatic experience. A person may fear that they deserved the trauma, experience guilt and shame about having survived, or feel ashamed of sexual or other abuse. When shame is due to trauma, it's critical that therapy is trauma-sensitive, addressing the root cause of shame. Some treatment options include:

- Cognitive behavioral therapy (CBT): CBT helps people understand the connection between their thoughts, emotions, and behaviors. Therapists focus on automatic thoughts that typically go unnoticed—such as “I don’t deserve love if I make a mistake.”
- Cognitive processing therapy (CPT): CPT is short term and involves talking about your trauma. CPT works to understand how trauma affects emotions and behavior, and implements strategies for controlling the effects of trauma, including shame.
- Stress inoculation training (SIT): Stress inoculation training is a variant of CBT that teaches people how to respond to stress before it overwhelms them. It includes training on breathing techniques, muscle relaxation, noticing and changing automatic negative thoughts, and role-playing exercises.
- Eye movement desensitization and reprocessing (EMDR): EMDR is a stage-based approach to treatment that uses specific eye movements to help a person talk about a trauma. Over time, a person learns to manage their emotions and to integrate the trauma into their life story.

These techniques may also work for other forms of shame, such as shame due to depression. Finding a therapist who respects your values and helps you set goals is key. Your local Employee Assistance Program representative listed below can help you find the right resource.



The heart and soul of the District 141 Employee Assistance Program is the local lodge EAP peer coordinator. These dedicated men and women volunteer their personal time to assist other union members and their families who are experiencing personal difficulties. EAP peer coordinators do not make clinical diagnoses or clinical evaluations, however, they are trained to make a basic assessment of your situation and refer you to an appropriate resource for a more detailed evaluation. EAP peer coordinators will follow up to ensure you have been able to access services that addressed the difficulty you were experiencing.

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EAP Calendar

2020

EAP I

March 7 - 13

EAP II

June 28 - July 3

EAP III

July 12 - 17

EAP IV

August 2 - 7

Please contact your Local Lodge Secretary/Treasurer or Local Lodge President for information about enrolling in any EAP course