



CONVERSATIONS



— WITH —  
CAROLYN SPRING  
*transcribed*

## PODCAST #8 – SHAME, UNSHAME AND WHO YOU REALLY ARE



by Carolyn Spring

*Hi there! I'm Carolyn Spring and welcome to my podcast where I talk about all things trauma. I dig into the nuts and bolts of trauma, how we can recover, what blocks us, and all things neuroscience-y – what actually goes on in the body and brain during and after trauma, especially from the perspective of evolutionary neurobiology. This podcast is for anyone who's experienced trauma, or knows someone who has, which is pretty much everyone. For more podcasts, blogposts, books and training check out my website at carolynspring.com.*

Welcome to this episode – 'Shame, unshame and who you really are.'

So it's been a really busy few months, mainly focused around launching a new course '**Working with Shame**' and also, connected to that, my new book '**Unshame: healing trauma-based shame through psychotherapy**'. So really I've

spent the last six months immersed in the shame research, and immersed in my own process of figuring out what shame is, how it's affected me, its links with trauma, and how we can move out of the crippling isolation of shame: How can we overcome the self-hatred and self-loathing which really gets in the way of us doing anything, enjoying anything, *being* anything.

Probably my main insight, at least for myself, is that shame isn't *all* bad. It's something that we think of as debilitating and ugly and just destructive, and it *is* those things, but it's those things for a reason. Really, shame is just trying to protect us and keep us safe. It's beating us up for a reason. It lies to us to try to keep us from being hurt.

So two examples then of how shame keeps us safe. Firstly, when we're being abused, by someone more powerful than us, most

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of the time it's not safe to retaliate. It's not safe to fight back. If we're a child being abused by an adult, then if we complain about that, if we tell anyone, if we physically resist, then we might be hurt more. And so it's adaptive – it's smart – to lie still, to go into the freeze response, which is the shame response, and to just take it. Because then at least it might be over and done with more quickly, and we might be hurt less in the process.

So shame makes us huddle small, it stops us moving, reacting, feeling. It helps us to play dead and to submit. It stops us getting angry at what is happening, and therefore lashing out or hitting back or speaking out, by convincing us that it's our fault, that it's our badness, that we deserve it. So it's a really clever mechanism that tries to keep us safe by keeping us still. We take the blame. We submit. It's our fault.

And secondly ... imagine you want to write a book or deliver a course. You really want to help people, and you've got something to say that hopefully will achieve that. So you're motivated to do it. But then you look at the downside of it. You realise that, if you put yourself out there, you're going to be criticised. Someone somewhere is going to pull you down – maybe lots of people will. In our vicious social media/internet world, the trolls will come out in force and you'll be slapped all over with hate and kickback

and all sorts of nastiness. That's the possibility, that's what might happen if you put your head above the parapet.

And none of us like to be attacked or criticised. None of us like to be told that we're not good enough, that we've got it wrong, that we're not perfect – to have people disagree with us. That sense of being attacked activates our primitive, neurobiological defences and it feels aversive. Of course it does.

And so shame steps in to keep us safe from it. Shame says, 'You don't know what you're talking about. You don't know enough to write this book or deliver this course or record this podcast. You're not interesting enough or original enough or clever enough or qualified enough. Who do you think you are? Brené Brown? Better not get too big for your boots. Better not get out of your box. You're not good enough.'

So very much like imposter syndrome and I think in fact that that's where it comes from. It's a protective mechanism, warning us of how we might be attacked, the accusations that people will throw at us – 'who do you think you are?' Because evolutionarily, it's safer to be right in the middle of the pack, just getting on, doing normal everyday stuff. It's not safe to stick your neck out. It's not safe to lead. It's not safe to do anything different. And so shame is the way of getting us to stay safe by keeping our heads down, and



doing what everyone else does, so that we don't draw attention to ourselves.

And of course I know this, because I've experienced it! Every day that I write, the shame gremlins sit on my shoulder and say, 'You're no good at this. You shouldn't be doing this. Who do you think you are, calling yourself a writer? You can't write that – that's just your opinion. You can't prove you're right. So maybe you're wrong.' And of course, being wrong opens you up to criticism, censure, attack – it's not safe. So shame is trying to keep me safe.

And, you know, shame is such a huge problem for so many people. It's a universal human emotion. Not everyone struggles with shame to the extent that it limits their life in a maladaptive way, of course, but nonetheless I think it's something that everyone can relate to. And I think it's the number one big 'stuck' issue for people in counselling or psychotherapy. We did a survey last year and 99% of therapists said that they worked with shame. I'm actually surprised at what the other 1% do! But unlike most other issues, I think shame is particularly intransigent – it doesn't want to shift, it doesn't want to budge. When we think of working with childhood trauma, in many respects the traumatic aspects of certain incidents, for example of abuse, do tend to resolve over time, especially with a skilled therapist. But the shame aspects of them often don't.

And shame is triggered just by being in therapy. You're sat three feet away from another human being, who might reject you, who might abandon you, who might hate you or hurt you ... and this person is in a position of power over you ... and so it activates our primal defences. We're prone to experiencing shame in that kind of environment. So we come to therapy maybe to work through our shame issues, even if we don't call them that, but then the therapy itself activates our shame. So it's a bit of a catch-22.

And on top of that, shame acts as a brake on our behaviours. It has a stopping effect. It shuts us down, and cuts us off relationally. And so it's a real hindrance, in that sense, to the therapeutic work – which operates best when we're in connection, relationally, and when we're open to change and movement.

My new book '**Unshame**' really looks at shame in the context of the therapy room. Because I really wanted to write a book about shame, but it's difficult to write one head-on, so to speak. The danger is that if we talk directly about shame, then even at an unconscious level, we think, 'I don't want to know about this. It's too uncomfortable.' And shame just doesn't operate in a left-brain, words-based, concepts-based way. Shame is a relational thing. It's a right-brain, body-based, neurobiological feeling type thing. So the challenge is how to write a book about shame whilst

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tapping into the right brain. Because, as I explore at length on my course, shame doesn't respond well to words. We don't tend to resolve shame by just changing our mind about it. Very rarely do we just realise that we have nothing to be ashamed of, and then hey presto the shame is gone. Because shame is far more rooted in our bodies than it is in our brains.

And so in writing about shame, which is a relational emotion, I wanted to write about it in the context of relationship. And I wanted to evoke characters and setting and narrative and the things that we'd normally associate with creative writing, with fiction. I wanted to paint a picture of shame rather than just cite ten research studies.

And so in '**Unshame**' I basically tell a story. There are twenty chapters, relating to twenty therapy sessions. We talk about lots of different things in those sessions or chapters, but all along there's this narrative description of how shame feels. What it's like to experience compassion. What is experienced as shaming. So I'm trying, just a little bit, to bring it alive with words that are evocative and at times hopefully beautiful, rather than a dry academic textbook type approach.

It's a very vulnerable book and that in itself is part of the journey to 'unshame'. Shame tries to keep us safe, but a large part of the antidote to shame is courage. Courage to be who we are,

and to be seen. Courage to be despised or criticised or rejected, if that's what happens. But although we risk that, the reward, when it goes right, is connection – connection with the right people. The reward for me, writing this book, is all the people who have commented and said that it's like I'm inside their head, that it could be a transcript of *their* therapy session, that they thought it was just them, and that as a result of reading it they feel less alone and actually less ashamed.

Shame tells us that it's just us. We're the only one to think like this, feel like this, act like this, experience life like this. But that's a lie. One of the things that happens when you start being vulnerable, when you have the courage to tell your story and you start telling it how it is, is that you connect with others because of it. Over the last 9 years or so that I've been doing this work, what I've discovered more than anything is that it's not just me. I'm not the only person to have been abused. I'm not the only person to have developed what is called dissociative identity disorder. I'm not the only person to struggle with shame. I'm not the only person to experience suffering in my life. Far from it, unfortunately.

And so, when we have the courage to be vulnerable, although there is always the risk of being hurt, there is also the reward of connecting with others and realising that we're not alone.



And that's what this book is all about for me. Lots of survivors have commented that I've put words to *their* experience. And lots of therapists have too. It always strikes me what a lonely place providing therapy is. There's only you and the client. There's no-one else there to say whether you're getting it right or saying or doing the right thing. It's a vulnerable place to be, especially with your own shame gremlins on your shoulders telling you that you're getting it wrong. And so I was really pleased to have therapists say, having read certain chapters in particular, that they're relieved to know that it's not just them either. To really have that glimpse into someone else's therapy room.

Now what I've written in '**Unshame**' isn't a transcript of what happened. Instead I would say that it is narratively true, rather than historically true. If I were to write up an actual therapy session, many times there wouldn't be a lot to write. There would be a lot of silence, a lot of going round in circles, a lot of words that won't come, and a lot of stuff that wouldn't make sense at all. So it wouldn't work at all. So what I've done is creatively recreate them. No, the therapist maybe didn't use exactly that phrase, or tilt her head at exactly that moment that the leaves rustled outside the window. But were those concepts discussed, using that kind of language? Absolutely. Did she nod her head, and was there a tree outside? Absolutely.

So I've tried to pick up the trueness of the experience, whilst weaving together a narrative that takes the reader somewhere. So in that sense it's what's known as creative non-fiction. It's 'based on a true story' like a memoir is. It's not a verbatim account. But its essence is absolutely true.

And not every chapter is explicitly about shame, because that's exactly what therapy is like. Shame was our constant companion, as it were – the third person in the room, every single session. But I didn't always identify it as shame, and we didn't actually talk about shame directly all that often, because to do so just tended to trigger me into more shame. Instead, shame is in the dynamic between the client and the therapist. It's the need to not be seen, not be heard, not be noticed. To not cause a fuss. To not get into trouble. And at the same time there's this unquantifiable need to be seen and heard and noticed and connected with.

In my course '**Working with Shame**' I talk about how empathy and compassion are the antidote to shame, and that's what I really try to evoke in the book. There's a chapter called '**I see suffering**' all about the power of compassionate presence. And it was really difficult to write, because how do you put into words this invisible, silent power – of compassion? How do you explain what it's like to be on the receiving end of empathy,



especially when you've grown up on the receiving end of abuse? It's beyond words. But that's the nature, really, of therapy - I think, when we dig down into it, we want to parcel therapy up and file it and label it and know what's going on. But a lot of the time we can't. Therapy theory tries to put into words what is wordless, what is ineffable. Because it's two human beings sitting together in a place of pain and suffering, and where the compassion, empathy and attunement of the therapist shifts something in the nervous system and the neural networks of the client. But we can't see what it is. We can't see *how* it is. You just know if you've been on the receiving end of it that something has changed. But you don't even know what.

So the therapy I've received - many years of it now - it's something quite indescribable. And I think there's something hugely insecure about that for therapists and those who write textbooks. Because how do you justify a profession, the success of which lies in a process which we don't really understand? The work of neuroscientists like Antonio Damasio and Allan Schore and others are now beginning to shed some light on this right-brain to right-brain process, but on the whole we're in the dark. Why was it so effective, for me to sit with a compassionate human being? Why did that heal the trauma that had been caused by my abusers? How did that settle my nervous system, and bring me

back into the green zone, and allow my front brain to come back online? We know a tiny bit of this, but mostly it's just mystery.

And traditionally, in our left-brain-focused world, in our world of science, which operates only in terms of what is measurable and observable, we despise mystery. And that's one of many reasons, I think, why therapists and counsellors are not sufficiently revered for the work they do. It's highly skilled, *human* work. It's right-brain-to-right-brain stuff. It works a lot at the level of intuition and gut feelings and the body, but we don't understand it so we don't respect it enough.

But what I know, having been on the receiving end of it, is that therapy can be highly effective in resolving trauma, in disarming shame. My life is completely different as a result of it - as a result of being on the receiving end of compassion and empathy week in, week out.

I think shame is principally shifted via right-brain mechanisms - compassionate presence, empathy, attunement. But we're not just right-brain people. We have both hemispheres for a reason, and they support each other. So when we use psychoeducation, which is principally focused on the left side of our brain, when we learn about shame, about the three zones of the trauma traffic light



and how shame resides principally in the red zone ... when we learn the strategies of abusers, who are acting 'shamelessly' to transfer the shame and responsibility of their abuse to their victims ... when we understand these concepts, it can really support us to be open to right-brain experiences.

For example, if you're convinced that therapy is a waste of time and that you're too broken or damaged for it to be effective – if you lack the knowledge about what therapy really is, and how it actually works – then you won't be open to having therapy. And then you won't be able to receive the right-brain-to-right-brain, life-changing power of compassionate presence.

Similarly, if your shame levels are super high and you find it unbearable, physiologically unbearable, to sit in a room with another human being, then psychoeducation around how to get back in the green zone when you're being triggered into the amber zone or the red zone, that can help you to tolerate those unbearable feelings, so that you can access the help you need.

And likewise, if through psychoeducation you begin to understand that shame is actually your friend – that shame saved your life, that its aim is always to keep you safe, but that it lies to you in order to do that – then you might be able to start to take a few risks, to show up, to be vulnerable. Because

you're able to separate out reality from the lies that shame is telling you about how dangerous it is to go for therapy, or to be vulnerable and open up.

So the two very much go together in my opinion, and they go together in my book as well. The words that are said, so to speak, in the therapy setting in the book, are highly psychoeducational at one level. So I'm using the book to explain some of these concepts, by narrating how I came to understand them in the first place. But then I'm also framing that within the context of the supportive therapeutic relationship, and the repeated moments of attunement – and misattunement – that went on between us as two human beings.

Now you might notice that I use the phrase 'human beings' an awful lot, possibly at times even more than terms such as 'therapist', 'client' and 'survivor'. Because the way I frame everything is that we are all human beings, some of us coming alongside others, to resolve unresolved suffering. We're all equal. We're all human. Some of us have, at various points in our life, more resource to spare than others, and so we can be the ones who come alongside. At other times, for various reasons – bereavement, trauma, life circumstances, age – we need others to come alongside us. It's just a backwards-and-forwards thing. But for me there shouldn't be a sense of hierarchy and power. It's very difficult to heal from

the effects of hierarchy and power in a context of hierarchy and power. Whereas, what I experienced for nearly ten years in therapy, was a skilled and trained human being (so someone with more capacity at that time) coming alongside me as a human being, to help me resolve some of my suffering. I personally don't think it's very helpful to think in terms of mental illness or even disorders, unless that's a means to accessing the coming-alongside-ness of another human being within an institutional setting, such as the NHS. What I think all survivors of trauma need to realise is that they're JUST human beings – no more, no less than others. And that what they really need is other human beings to come alongside them to undo the negative effects of abusive human beings.

Of course it's more complex than that, and I'm not dismissing the need for training or insight or knowledge or skills – far from it, especially as I train and write about those things! All I'm really doing is coming against the dehumanisation that has gone on within the medical model, where we see people in terms of labels and diagnoses, where we put people in boxes and say that they have a personality disorder or a mental illness, rather than just acknowledging their huge burden of suffering and their absolutely justifiable need for other human beings to come alongside them in that.

So I'm a bit erratic, because I'll use terms such as 'dissociative identity disorder', because we sometimes need language as a shortcut. But I'm very clear on how I define DID for myself, which is as a brilliant survival mechanism which enabled me to endure unendurable suffering. It's not mental illness. It's a response to trauma, and it makes perfect sense.

But neither is DID who I am, because that is defining myself by the trauma I have experienced, and that's not right either. The abuse is something that happened to me, but it does not define who I am. DID is how my brain automatically and naturally responded to that abuse, but it does not define who I am. I am – I always have been – more than my trauma, and more than my response to that trauma. I'm a human being.

Nowadays I no longer experience the world in quite such a fragmented way, because of the healing journey I've been on, which I summarise elsewhere as 'regulation and integration', but the fact that I no longer satisfy diagnostic criteria doesn't make me different as a human being. I am someone who has experienced chronic, extreme abuse in childhood, and I've had to work really hard to regulate the impact of that on me, to integrate that trauma to form a coherent sense of self and my own history. But that doesn't make me more than or less than. If we reduce



the baseline down to our humanness, we lose that sense of hierarchy and superiority or inferiority which is based in shame.

My journey out of shame therefore has mirrored my journey out of trauma, and actually I'd say that largely they are the same thing. Trauma sends us out of the green zone into amber or red. Shame likewise sends us out of the green zone, usually into red. They are both ways in which our nervous system is dysregulated. The answer to both is regulation – someone who's in the green zone and able to stay in the green zone, coming alongside us and using their 'regulated-ness' to help to regulate our nervous system – so that we can integrate what's happened to us; so that we can have an integrated sense of self.

One of the things I'm particularly interested in is, who are we when we strip away the trauma? Quite understandably, the trauma can be so overwhelming – as it was for me – that we live our lives looking through its lens. It's like the air around us – we can't see it, we just breathe it in and everything we see and hear and perceive is carried through it as a medium. And so we have a trauma-centric view of ourselves. I think this is what drives the need for many people with DID to reify their parts – to make them more real than they are, to elaborate them and live their lives through their parts. I think it makes perfect sense.

But for several years I've been fascinated in exploring and discovering who I am *apart from the trauma*. Because otherwise, we're never going to be able to heal – if we're dependent on having been traumatised to give us a sense of identity. My trauma goes back as far as I can remember – my earliest memories. So in that sense, I could say, 'But I have no idea who I am outside my trauma, because it's who I've always been. It's all I can remember.'

But I think that's shame speaking, and that one of the ways out of shame is to really fall in love with who you are. To really know who you are. Because shame says, 'You're not enough. You're not good enough. You're bad. You're unacceptable. You won't be liked as you are.' And unshame says, 'I'm okay just as I am. I AM good enough. I AM acceptable. I am me, and it's okay to be me.'

And so for me that process was about discovering who I actually am. In practical terms, I did that via therapy, and that experience, as I detail in the book, of discovering that it's okay to be ME. That I'm sat with this human being, and they're not judging me or criticising me. They're not rejecting me. They're not abandoning me. When I cry, they don't turn their nose up in disgust or send me away. When I'm stuck in self-loathing, they don't loathe me too. So a very powerful process, over several years, of coming to see myself through the therapist's eyes – as acceptable, as okay.



But then on top of that, there were a couple of tools in particular that I found useful. One was the Myers-Briggs assessment tool, and in particular one that I did on a website at [16personalities.com](https://16personalities.com). That showed me consistently that I match up to what's called INFJ, and when I read their description of an INFJ, it was so spot on it was uncanny. Almost scary, in fact! And that made me realise that this is who I am, and who I've always been, and always will be, regardless of whatever trauma I've suffered. I'm an introvert – not because I was abused, but because that's who I am. I love words and to write, not because I was abused, but because I'm an INFJ. So that really spoke to me, and exploring that in a lot more depth really helped me to figure out who I am, and to be okay with who I am.

The second tool which I came across a year or two ago is called the **VIA Character Strengths** assessment. It's got huge research backing to it – it's come out of the positive psychology movement and the work of Martin Seligman and others – and it basically has come up with a list of 24 strengths, and then based on your assessment it lists those strengths in order. So everyone has all 24 strengths, but some are stronger than others and some are your 'signature strengths'.

And for me it was fascinating too because again it was so spot on. So my top strengths are creativity, love of

learning, humour and curiosity. I read a lot, I write a lot, I learn a lot, and I laugh a lot – that's pretty accurate! And it has nothing to do with trauma. So I'm a person separate from my trauma – that was absolutely fundamental for me to understand, and for me to be able to start building on those strengths and appreciating myself for them, rather than always looking at what's wrong with me, how defective I am, how messed up, how broken.

Therapy gave me the setting to talk about the brokenness, to resolve the trauma – and that's absolutely essential because society as a whole doesn't want to acknowledge it or give us space to mourn our losses – but on top of that, I've worked towards unshame by finding out and being and becoming who I was always meant to be. And that's been absolutely liberating.

So that's all we have time for in this episode. Thank you for joining me. Links to everything I've referenced in this podcast can be found on my website and in the show notes. And you can subscribe on Apple Podcasts, on Spotify, or you can listen direct from my website at [carolynspring.com/podcasts](https://carolynspring.com/podcasts).

I hope that helps, even a little and speak soon!

