## SHAME AND LEARNING

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This paper argues that an examination of cognitive shame provides opportunities for educators and students to cope more adequately with issues of trust, loneliness, and separation in classroom settings. It is further maintained that overcoming cognitive shame can lead to learning, mastery, and competence. Implications for mental health work in other settings are offered.

This paper will examine the concept of shame, in relationship to issues of trust, loneliness, and separation, within the fields of personality theory, pedagogy, and mental health. The focus of the paper is on implications for education, but these implications have relevance as well for other modes of therapeutic intervention.

Our story, like most, has a beginning, a middle, and an end. The beginning of the learning story has its roots in shame. The central thesis of this paper is that there are forms of learning that are a by-product of overcoming shame. Shame is a term perhaps best articulated by Erikson<sup>3</sup> in his second stage of psychosocial development, autonomy versus shame and doubt.

Shame must be distinguished from guilt. Guilt is the feeling that results from the violation of standards or norms that are external to the person. It is superego-related. It is the feeling

we experience when we do not heed the voice of father or mother, which says, "Do not hit your brother," or "You may not take any cookies without permission." One is discovered doing or not doing something that has been proscribed by another.

Shame is the feeling of being exposed and wanting to hide one's nakedness. It is related to ego-ideal. One has a conception of self, an image of what one can be, and the feeling of shame is experienced in not having achieved a desired and attainable goal, in lacking something, in being inadequate. Rather than being a function of not having lived up to the standards of another, it is having failed or disappointed one-self.

I am in agreement with Piers and Singer, 10 who stated, first, that it is possible to differentiate between shame and guilt; second, that one can lead to the other; and, third, that each can con-

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ceal the other. While Jacobson 7 went even further when she said, "The child who has accidents and cannot produce stools as expected feels (morally) bad, ashamed, and inferior" (p. 146), nevertheless the fact that shame and guilt come in cycles or that they may coexist does not alter the fact that etiologically they arise from different sources.

Among the emotional concomitants of shame discussed in the literature are 1) shock, 2) the fear of abandonment, and 3) feelings of isolation. Lynd 8 stressed the element of unexpectedness that accompanies shame. There is an element of surprise in discovering oneself lacking. It is not the shock of being caught with one's hand in the cookie jar, which is a crime. It is rather the surprise of being caught with one's pant's down, a posture in itself permissible, however undignified. The issue is not so much of inappropriate behavior as of unanticipated exposure. Imperfection is not a crime. Yet it suggests that we face the possibility that our self-perceptions are untrustworthy, that our self-image is inaccurate.

The apprehension of abandonment, according to Piers and Singer,<sup>10</sup> is rooted in the fear that the parent, in discovering its child's inadequacy, will walk away in disgust and that the fear of loss is perhaps related to deeper feelings of "separation anxiety," feelings that are universal and that are related to issues of dependence and self-esteem.

On this point I am in agreement with White,<sup>12</sup> who felt that it is unfortunate that Piers tried to link feelings of shame with abandonment. He stated:

Indeed the experience of shame seems to involve the impulse to run away, hide, or sink through the floor. If the basic fear were deser-

tion the basic response should be clinging, but in fact we want to get away from those who belittle us. (pp. 126-127)

Regardless of their differences, both White and Piers posited a break in a relationship as a result of shame. This issue of separation we shall return to in the last section of the paper.

With respect to isolation and loneliness, Lynd <sup>8</sup> maintained that isolation is not so much "a penalty for the shameful act as that the experience of shame is itself isolating, alienating, and incommunicable" (p. 67). Hence, contending with shame is a solitary and difficult experience.

We shall return to these concomitant feelings, but our story waits to be told. What is meant by "learning has its roots in shame" is that the desire to know begins with the recognition and location of the source of one's shame. The need to know grows from the realization that one does not know, that one is lacking, and that what is not known is something that one is capable of knowing and should know. Knowing in this sense makes one fuller, actualizes self, brings one closer to ego-ideal. One hears a Brandenburg Concerto and realizes that one does not understand it. Perhaps after the tenth hearing a loss, a gap is felt. One feels personally inadequate, because one does not understand. An attainable task has been identified through the experience of shame. The desire to fill this gap is directly related to the depth of the feeling of shame and inadequacy. Within this framework, it becomes clear that the recognition and acceptance of shame is healthy and potentially educative.

I am again beholden to Robert White for his attempt to raise shame above the traditional psychoanalytical model. Shame has always been associated with bodily functions and exhibitionism. Jacobson 7 alone mentioned in passing the possibility that shame may be related to intellectual achievements. But, in the end, she claimed that the roots of intellectual humiliation lie in the unconscious feelings associated with anal production. White's competence model questions the centrality of the bathroom as the decisive developmental struggle and introduces social as well as locomotor alternatives as having equal relevance. This is an important addition, for I posit the existence of shame related to cognition and I am concerned with its relation to learning. I shall henceforth refer to "cognitive shame" because it will help to free the reader from the almost universally immediate negative association with the word shame.

While the choice to learn develops in cognitive shame, its successful execution frequently depends on the settings for learning. Thus we move to the middle of our story. This stage is characterized by the issues of trust and loneliness. The decision to fill the gap between ego-ideal and current functioning has been made alone, perhaps not consciously but quite definitely as a result of having experienced cognitive shame. In the following paragraphs, trust and loneliness will be examined from the perspective of the school and the therapeutic relationship.

Insofar as cognitive shame is accompanied by fears of separation and isolation, the ability to reveal ignorance, personal failings, or inadequacies to another presupposes confidence in that person. Trust in the teacher is a function both of the perception of the

teacher role and the person who occupies it. If we examine the role in the analog of the therapeutic encounter, we note that a certain amount of trust accrues to the professional therapist by virtue of his supposed training and status. Such trust is not an automatic response to the teacher role. Etzioni 4 and others have discussed the differences between the professional and the semiprofessional, and have highlighted this problem. Only when trust has been established with a person in his role, be it therapist, teacher, or lover, is one willing to expose oneself.

In terms of the teacher role, trust between teacher and student has always been tenuously maintained. For unlike the classic client-therapist relationship, student-teacher relationship is neither voluntary, dyadic, nor based on the exchange of fees for service.1 Teachers and students generally do not choose one another. Further, the interaction takes place in front of many others. And the child does not pay for the services, nor are the services necessarily appreciated or valued by the child. As a result, from a structural point of view, we find that the formal teacher role does not engender profitable use of cognitive shame.

Recent discussions of the hidden curriculum by writers such as Jackson 6 and Dreeben 2 have pointed clearly to the effects of the normative lessons of schooling. If we examine schools in light of normative behavior, we are presented with yet another barrier to using cognitive shame in an educatively profitable manner. School is a place where one shares with the teacher what one knows, and not what one does not know. The teacher asks a question and the child answers it. A student does not

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raise his hand to admit that he cannot answer a question. In fact, I would go so far as to say that a child generally shares with his teacher only his answers and rarely his questions. Thus the normative constraints of school place heavy demands on a child who wants to establish a relationship with his teacher based on trust. In this sense, finding a teacher to trust is very difficult.

There is yet another condition of schooling that hinders the establishment of trust because it so clearly differentiates student and teacher. The teacher's task is to introduce the student to the language of the discipline, so that the student may become familiar with its literature. This is not true for the therapist. His relationship with the patient is not preparatory in nature. It is not a rehearsal for life. Rather than being educative, it is reeducative. The literature, that is, his own life, is quite well known to the patient. The gap between teacher and student is much wider than that between therapist and client. The teacher's advanced knowledge makes him different and marks him as being an outsider. Thus, in addition to the problems that relate to training and status of the teacher, the organizational structure of the schools, and the normative lessons of schooling, the teacher must function within a setting in which relevance is an ever present and frequently counterproductive component of his relationship with the children in his charge.

I maintain that an examination of the loneliness of the teacher and the therapist can provide us with some guidelines for establishing trust in the setting described above. The path to trust leads through the field of loneliness. And the loneliness that the teacher and the therapist share is a function of the pedagogic and therapeutic decisions each must make. The material with which they deal is different, but the loneliness and uncertainty that precede, accompany, and follow each decision they make is quite similar.

Since the therapist receives some training in dealing with his own lone-liness, I shall dwell for a moment on the loneliness of the therapist and then contrast it with that of the teacher. Therapeutic decisions are private and grounded in the therapist's ability to deal with his own shame and loneliness. Frequently, it is through the examination of these blind spots (and they come as surprises), together with his acceptance of his own personal failure and shortcomings, that the therapist is able to help his client to grow.

For example, it is frequently the inability of the therapist to face the countertransference issues which handicaps him. From a dynamic point of view, success in the therapeutic process derives in no small part from the ability of the therapist to deal with the substance of the session in a manner that provides the client a glimpse of alternative modes of behavior, which are healthier than his present coping mechanisms.

The therapist's shortcomings frequently relate to his inadequate handling of his own feelings. The teacher's pedagogic shortcomings relate to his inappropriate planning, reflection, and occasionally sheer knowledge gaps. In the extent to which the teacher can examine and deal with his own cognitive shame, he will be better able to facilitate the learning process in his students. What is unfortunate in the teaching

profession is its lack of a tradition that encourages the examination of what, for the therapist, would be countertransference issues.

One may ask, how should a teacher deal with a child who brings to him his personal failure? Since the substance of the educational interaction is not formally emotional, the number of options open to the teacher are fewer than those available to the therapist. He cannot just inquire into the feelings associated with the failure, nor perhaps exercise the option of simply labeling the feelings and thus communicate recognition of those feelings. One of the few helpful responses open to him is to share his experience of pain or feelings of cognitive shame that derive from similar situations. And this he can do in the process of exposing his methods of dealing with inadequacy.

What a teacher tries to communicate to his charges is that denial or flight from cognitive inadequacy is not appropriate, and that the way to deal with cognitive shame is to explore and acquire, to master and become competent. Thus, the by-product of overcoming cognitive shame is learning.

For the learner, the process begins in shame. The accompanying feelings of loneliness and isolation trigger the learning process. The child seeks in his teacher a basis for trust, so that he may be able to share his inadequacies with him. If the teacher, in turn, can face his own cognitive shame and shortcomings, and if the student is permitted to view the teacher's attempt to grapple with these inadequacies, this can lead to the establishment of trust, which provides a context for the sharing of questions, acquiring knowledge, and actualizing ego-ideal.

In the conceptualization being developed here, there are two functions being played by the teacher's attempt to grapple with cognitive shame. The first is that such exposure fosters a basis of trust between teacher and students. The second is that it provides the students with a strategy for dealing with their own cognitive shame.

While the differences between schools and therapeutic settings articulated in the beginning of this section might lead one to believe that trust is more readily fostered between therapist and client, such is not always the case. First, within the therapeutic settings, trust is established only gradually. Second, despite the teacher's training, the organizational structure of the schools, the normative behavior, and the school's preparatory nature, in one most important way the teacher has an advantage over his colleague, the therapist. The therapist may foster change and growth through an examination of his own personal shortcomings. He cannot, however, share his personal insight with his client, nor can he rehearse it in his presence, because self-exposure is reciprocal in almost all relationships except the therapeutic one. Exposure of cognitive shame is legitimate within the teacher role.

Having identified in the first part of this paper the healthy components of cognitive shame rather than its debasing features, at this point I note that the teacher's examination, rather than cover-up, of his cognitive shame can help to create a climate of trust; it can foster the tools with which the child can expose himself and examine, with the help of his teacher, his own cognitive shortcomings.

Unfortunately, discussion with stu-

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dents of the lack of success in achieving curricular goals is an all too infrequent phenomenon in schools, primarily because it reveals the teacher's failure. That is threatening. Yet failure is among the prominent aspects of teaching and learning. Opportunities for handling the teacher's cognitive shame are as numerous as the opportunities for handling the child's personal cognitive shortcomings. Both are within the grasp of the teacher. The teacher's delinquency in dealing with them explains in part why schools are so ineffective in fostering learning.

We come now to the end of our story. And admit that endings and separations are not openly discussed in our society. Death, the final separation, is hidden from children and avoided and denied by adults. In the words of Fromm-Reichman,5 it is "the ultimate isolation. . . the inconceivable and ultimate loneliness" (p. 330). In that way it shares one of the central elements of shame. When death occurs to others, we have difficulty accepting it. When we must face it ourselves, we find it incongruent with our ego-ideal. Were we more able to accept our failures and inadequacies, we might similarly be more capable of facing the end of life; it is, after all, not a crime to die.

The end of the learning story is also something that is too infrequently discussed. Or perhaps something we have chosen to deal with perfunctorily. Perhaps we are ashamed of it, of our inability to cope with it. The technicist approach taken by educational administrators derives in large part from the organizational contingencies that are a function of formal schooling. It is, how-

ever, my contention that the organizational structure of schools provides a facile solution and a handy rationalization for not coping with the more fundamental psychological problem of separations and endings.

In schools, all learning interactions terminate, whether they be individual class sessions or end of the year partings. The bell rings. One is promoted. One graduates. Such separations have their emotional overlay both for teacher and student. In a fundamental sense, since terminations are the rule rather than the exception in all formal educational settings, the learning-asnever-ending aphorism obfuscates our problem of more adequately addressing the effects of separation on both student and teacher.

How do teachers deal with separation? They do so most frequently by retreating or hiding behind the facade of their role, and denying the strong attachments that develop during the course of the intense, year-long relationship with their students. As I have suggested elsewhere,11 "the summer months offer a period of relaxation and rejuvenation that is followed by a new beginning and a new crop of students." The summer vacation offers a period of recuperation, a period of time during which the wounds of separation heal. Evidence of this recuperative period nevertheless does not yet explain the source of the need being addressed. For this we must look further at separations.

Mahler 9 and her colleagues considered the effect of terminations in their discussion of the process of separation-individuation. This process takes place at the same time as that stage described by Erikson as autonomy versus shame

and doubt. Mahler's formulation derives from an inquiry into autistic process in children. As the child develops, we witness an initial phase of symbiosis in its relationship with the primary caretaker. This symbiotic relationship is discussed as both an intrapsychic and a behavioral phenomenon. In the latter case, over time the child is willing to venture out on his own, secure in the knowledge that his caretaker is close at hand. But the process is discontinuous. The child takes two steps forward and one step backward to reconfirm his mother's presence. Eventually, healthy child does break away from its mother to establish a relationship based on a separate identity. In Mahler's words, the child individuates. The relationship has ended and begun on a new level. The child who fails in this process develops a form of autism.

The process is emotionally complex. It is accompanied by a high degree of ambivalence on both sides. On the one hand, the child has a great need and a great fear of separation. On the other hand, the mother has a great need and a great fear of maintaining the symbiotic relationship. The first says, "I want to go, but fear being apart." The other says, "You must go, but I don't want to be alone."

Before examining this process as it relates to the teacher and his student, let us view this dramatic process as it might unfold on the first day of school. This is the day when the child formally enters the outside world. The mother has mixed feelings of pride and sadness. She wants her child to go but has fears for his safety. He is leaving her, and she deals with this occasionally, not quite wholesomely, by convincing herself that the child can no longer be

cloaked in the mantle of innocence that is a function of his age and size. He is thus dependent, and needs to remain under her watchful eye. In some cases, the mother's need for the child to remain with her is greater than the child's need to retain the symbiotic relationship with her. Such a situation presents the child with a host of unresolvable problems which can lead to pathology.

There are at least three components of the above situation that deserve our attention. They can be formulated by means of the following parental questions: 1) Do I think my child has sufficient skills to brave the elements? 2) Do I trust him to apply these skills in my absence? 3) Am I strong enough, secure enough, to be able to cope with my child's waning dependence on me? The first two questions relate obviously to judgments about the child's ability, while the third requires an assessment of the mother's feelings about her adequacy in her role. Her self-doubts are as ubiquitous as the feelings of separation anxiety experienced by the child. To repeat a point made earlier, it is not a crime to feel this way. But still the mother is hesitant to reveal these feelings; such doubts are not consistent with a mother's ego-ideal. Were the mother able to deal with these feelings openly, she would be engaging in the type of behavior described earlier as coping with cognitive shame.

What has been argued thus far is that there is a stimulus to learning which is grounded in the perception of shame. For the child to cope successfully with his cognitive inadequacies, he must develop a dependent relationship with his teacher, based on trust. The teacher must be able to communicate to the child, in both word and deed, that it is

all right that he does not know. That is the primary reason for them both being in school. The teacher must use his own failings as a means to establish a relationship, and as a method to provide tools for the child. By accepting the child's inadequacies and providing him with a model for coping, the teacher facilitates the attainment of ego-ideal in his student. It may be only after the child is able to face cognitive shame as a healthy feeling that he can learn.

What I have emphasized in these closing paragraphs is that not only will an examination of cognitive shame provide the *child* with a particular climate and specific tools, it also can aid the teacher in feeling more comfortable with his own role, and thus facilitate the separation that is so fundamentally entrenched in the teacher-learner encounter.

There is yet another facet of this ominous responsibility of the teacher, which is the development of the ego-ideal itself. In the extent to which the teacher feels able and faithful to his own perceptions, he must communicate to the child his feeling and belief that the child is more capable than he in fact thinks himself to be. In this way, the teacher can help to nurture and expand the child's ego-ideal through encouragement and identification.

Our story has in essence been a simple one. Cognitive shame can be educative, if it serves as a trigger to mastery and achievement. The teacher facilitates this process by modeling his own coping behavior. He does this both to help the student and to help himself cope with the exigencies of teaching.

In this concern with the relationship among shame, trust, loneliness, and separation, many more questions have been raised than answered. The intent has been to explore some aspects of the relationship among these concepts and their relevance within the classroom setting. It is suggested, however, that more adequate attention to these issues can be of benefit not only to teachers and those who train teachers, but to a wide range of education and mental health workers in school and other settings.

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