

**THE RELATIONSHIP BETWEEN SHAME AND
VIOLENCE AMONG MALE PERPETRATORS
IN THE WINDHOEK CENTRAL PRISON
– AN EXPLORATORY STUDY**

BY

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2004

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MALE PERPETRATORS IN THE WINDHOEK CENTRAL PRISON –
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ABSTRACT

This study aimed at shedding light on shame and its relationship to violence, especially among offenders who repeatedly commit violent crimes. Questions revolving around the type of relationships or bonds offenders had with their caretakers as a child and its possible consequences were answered, leading to interpretations regarding the relationship between shame and with violence.

The Social Bond Theory served as the theoretical framework for the sample. Subjects were chosen on the basis of predefined characteristics that included male perpetrators between the ages of 21 and 39 years; having committed several physical violent crimes; and being imprisoned for these crimes; are regularly in conflict with other prison inmates or staff; have continuous difficulties resolving conflicts; show characteristics of a low self-esteem; and were at the Windhoek Central Prison for these crimes, at the time of conducting the study.

The study was of a qualitative nature and data were generated by conducting individual, video-recorded, semi-structured interviews with three offenders at the offices of the Windhoek Central Prison. Each interview lasted approximately one hour.

The recorded interviews were transcribed verbatim and analysis involved Phillip Mayring's (1983, in Plattner, 2001) Qualitative Content Analysis. The Summarising Content Analysis technique was used. Together with the content analysis, Retzinger's (1991; 1995, in Scheff, 1997) list of verbal and nonverbal cues to hidden shame and anger was applied by observing the recorded material. The two methods were integrated in the interpretation to reach conclusive results based on the assumptions of the Social Bond Theory.

Some difficulties experienced during the interviews and analysis of material, were for example language, and some content may have been lost during translation of the recorded material.

A lack of sufficient opportunity for offenders to express themselves, also had an influence on the quality of relevant information obtained.

Findings were very much in agreement with the Social Bond Theory and indicated that violent offenders are generally shame-based individuals. A need for further studies in the field of shame and violence, became apparent.

The study also indicated a need to develop programs that could assist offenders in acknowledging and dealing with unacknowledged or toxic shame.

Such programs could also be implemented at a school level, helping to identify and treat shame-based children, already at an early stage of development.

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DEDICATION

- My mother
- Alexandra Mouton-Kotze
- Loraine Lacock

- *Thank you.*

DECLARATIONS

- I, Sanmari Steenkamp, declare hereby that this study is a true reflection of my own research, and that this work, or part thereof has not been submitted for a degree in any other institution of higher education.
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Sanmari Steenkamp

1. INTRODUCTION

Violence is an ever-increasing problem in Namibia. Physical violence has been shown to rate the highest of all reported violent crimes in Namibia over past years (UNDP, 2000).

Scheff and Retzinger (2001) note that street violence as well as domestic violence is “an immediate fact of life in most societies” (pxvii). Several factors that may contribute to violence in Namibia include norms and values, frustrations, stress and emotional immaturity (UNDP, 2000). Other factors mentioned are political and social stratification and economic insecurities.

The aim of this study was to investigate the relationship between shame and violence in violent offenders. It is also proposed that one emotion, shame, could be the major underlying factor that leads to violence.

Research with regard to violence and shame has not been done in Namibia so far. Shame, at an international level, has received very little attention by researchers in the past. Goleman (1987) maintains that shame as a powerful emotion, and possibly the most powerful one, has been neglected in many cases by researchers because of its elusive nature and has mostly been overshadowed by studies of guilt.

Consequently, few studies exist investigating shame's relationship to violence. Significant studies done by Lewis (1971); Bradshaw (1988); Kaufman (1989); Scheff and Retzinger (1994, in Scheff, 2000); Scheff and Retzinger (1997; 2001) and Scheff (1997; 2000) have shown that shame could be the major underlying emotion that precedes anger and contributes to the escalation of conflict that could turn into violence. Other results from these studies also show that in most cases shame and anger are unacknowledged and mostly hidden emotions, contributing to the escalation of conflict.

Chapter 2 provides a fairly extensive discussion on emotions, shame and violence. Culture and emotions are discussed briefly and most attention is given to shame as an indicator of possible violence. The chapter also includes some guidelines on a proposed reintegration of shame.

The complexity of attempting a study with regard to shame is clearly seen in the attempts to define shame. Before defining shame as an emotion, one needs to define 'emotion'. Overall, authors hesitate to give an exact definition of the term 'emotion' as it entails complex processes. The terms 'emotion' and 'feeling' are also found to have similar meanings and are used interchangeably in most literature. In this study the terms are also used as having the same meaning. Lefton (2003) states that emotions are a central part of human life, and experienced across all cultures, motivating

behaviours. The author also states that even though emotion is a very difficult concept to define, it can be described as being a subjective response generally accompanied by a physiological change in the body. The person interprets the change which prepares the person for an action associated with a change in behaviour.

Defining shame is consequently an even more complex matter as it is generally associated with guilt and many times the two terms are confused. To distinguish the two terms, guilt can be seen as coming from failing to do what we did or were supposed to do (Schultz, 1996). Shame, on the other hand, is experienced as much deeper as it involves the self, who we are and the focus is inward. Guilt is more about a failed action and shame more about a failed self (Schultz, 1996).

Schultz (1996) maintains that everyone who has had to talk in front of an audience has experienced some degree of stage fright. He argues that failure causes embarrassment and humiliation in front of others. We become ashamed, because we fear shame. Schultz (1996) notes that the wish to avoid the shame experience is so powerful that just the risk of it brings about a tremendous attempt to prevent its emergence. In a study that asked people to outline what they were feeling in a recent shame experience, the descriptions included that of cringing and wanting to run away without being able to and other related fantasies of becoming invisible (Lindsay-Hartz, 1984, in Katz, 1997). Similar to what Adam and Eve experienced, people feel

the desire not only to 'cover up' but also have an urgent wish to run away, but realise that those they want to escape from know everything already. The desire is thus not for death and not for the punishment of being buried alive, but to be alive without so much as breathing, so as not to attract observation of oneself (Lindsay-Hartz, 1984, in Katz, 1997).

Lewis (1971) points out that there are a number of variants of the shame phenomena that need to be identified accurately. Mortification, humiliation, embarrassment, feeling ridiculous, chagrin, shyness, and modesty are all different psychological states, according to this author. They do, however, have a common property of being directly about the self and overtly involving the other.

However, most of the time, one is not really aware of the fact that one is dealing with shame, and as the word itself means 'to cover', shame can be described as a truly hidden affect (Schultz, 1996). We wish to hide our shameful parts as well as the fact that we are ashamed. If one cannot prevent it, one hides it. According to Schultz (1996) when we speak of embarrassment, humiliation, or mortification, we are actually talking about shame. Loss of face, disgrace, and dishonour are all closely related to shame (ibid.).

Shame in itself is not bad as it is a normal human emotion that is an essential feeling if one is to be truly human (Bradshaw, 1988). The author continues to describe shame as a warning sign that we are not perfect, that we will make mistakes, and that we need help. Shame shows us our boundaries. It can be of great worth if one is not overwhelmed by it (Fable, 1999). The author insists that one would have no sense of privacy or intimacy if shame did not exist. One's behaviour could be altered if one is not overwhelmed by shame, using it to tell us when something is wrong in our lives.

However, shame can be transformed from a healthy human emotion into a state of being (Bradshaw, 1988). It takes over one's entire identity. It becomes one's identity in the manner that one believes that one is flawed and defective. When this happens, shame becomes toxic and dehumanising.

The first author who termed shame as a 'master emotion' was Goleman (1987). This author maintains that shame has an influence on all other emotions and the development of shame can be traced back to childhood and its role is newly appreciated in various aspects of human experience, from the greatest of achievements to the bitterest of marital conflicts.

Most literature on shame includes a reintegration of shame in order to bring resolution. Pepinsky (2000) is one of the authors that desire a system of promoting justice where offenders could be integrated back into society by

restoring and reintegrating shame. The author argues that honesty and openness create a community of understanding and trust. Another author, Katz (1997), maintains that full revelation will defeat shame. Bradshaw (1988), Scheff and Retzinger (1997) and Braithwaite (2000), all agree with Pepinsky and Katz and feel the need for a justice system where shame is reintegrated and restored. Bradshaw (1988) and Braithwaite (2000) provide step-by-step procedures of how to deal with the externalisation of internalised shame.

Goleman (1987) maintains that much of the discomfort people experience in personal relationships may evolve from shame, and that violence may also be grounded in it. Scheff and Retzinger (2000) agree with Goleman that shame can be traced back to childhood.

Chapter 3 revolves around Scheff's (1997) theory of the social bonds that distinguishes between healthy and unhealthy shame, where healthy shame develops as the result of a healthy social bond formed between child and caretaker and unhealthy shame as the result of a broken or damaged social bond. It includes a short history of how the Social Bond Theory developed and discusses several authors who contributed to the theory, such as Elias (1978, in Scheff, 1997) and Lewis (1971). The chapter outlines two states of the social bond, namely a solidarity bond, where both parties have respect for

each other, and an alienated bond, where there exists either too much distance or too little distance between the parties.

Bradshaw (1988) is another author who agrees with this process of the development of shame. Both Scheff and Retzinger (2000) and Bradshaw (1988) deduced their arguments from Erikson's (1978, in Scheff, 1997) second stage of psychosocial development, called Autonomy versus Shame and Doubt. Between 15 months and 3 years a child needs good modelling from caretakers in order to venture out and explore the world around him or her. The child needs to be assured that the interpersonal bridge that has been built between him or her and the caretaker will not be broken. If all of this is achieved, the child will develop a good and healthy sense of shame. If not, the child will enter the world with a broken social bond and a dark, unhealthy sense of shame.

Although Scheff (1997) names Erikson's developmental stage as being very important in the determination of what the states of the bonds would be in adulthood, other authors who have also contributed to the Social Bond Theory do not exclusively focus on the relationship between child and caretaker.

Toxic shame can destroy the self and according to Bradshaw (1988) it “is the core of most forms of emotional illness.....it becomes the core of neurosis, character disorders, political violence, wars and criminality” (pviii).

Scheff and Retzinger (2001) maintain that conflict arises out of a threat to the social bond and when shame is evoked and not acknowledged. Anger is the outcome of the perceived attack and is often communicated disrespectfully. However, Scheff and Retzinger (2000) state that it is important to look at the shame response within its social matrix as it functions as a threat to the social bond.

Enmeshed in the social bond is self-esteem. Scheff and Fearon (2003) describe self-esteem as the way one feels about oneself, whether justified pride or defensive behaviours because of shame. Pride and shame are directly linked to the state of a social relationship (Scheff, 1994, in Scheff, 1997). Pride is seen as a sign of a high self-esteem and an indication of a healthy social bond, whereas shame is signalling a low self-esteem and threatened social bond. However, people with high self-esteem do experience shame as painful but not as overwhelming since they have experienced enough pride throughout their lives (Scheff & Fearon, 2003).

As noted before by Schultz (1996), shame has become a hidden affect. It is many times labelled as an ‘unacceptable’ emotion by society and can become

destructive, producing self-propelling cycles of alienation (Scheff, 1997). According to the author cycles develop when a person is ashamed of being ashamed and continuous loops of shame are created. This 'unacceptable' emotion can take one of two paths (Scheff & Retzinger, 2000). It is either masked with 'acceptable' emotions, such as anger and aggression, or the person withdraws into silence or depression.

Lewis (1971) believes that the appropriate discharge of the shame state is very important. The author suggests that this can be done through awareness that the shame can be discharged in good-humoured laughter at the self and its relation to the other. Shame is totally about the self, and because shame responses have been so painful, there has been the tendency to see them as pathological regressions.

From the literature review and the Social Bond Theory it follows that the relationship between shame and violence among violent offenders needs to be investigated. Secondary goals of the study involved the offenders' states of the social bonds within the historical context as well as the states of the social bonds within the prison context.

When talking about violence, it is important to note that there exist many types of violence. For the purpose of this study, it was decided to investigate offenders who attempted to cause grievous bodily harm (GBH). This includes

physical violence such as beating, hitting, biting, slapping, burning, or attempted murder by physical means. The reason for this decision came from the statistics on violent crimes recorded by the police (UNDP, 2000). These statistics showed that GBH showed the highest rates over several years (1992-1998) and is still escalating.

In Chapter 4, the empirical conceptualisation for the study is discussed in detail. It shows clearly how the states of the social bond may indicate the relationship between shame and violence. The analysis was twofold as it included verbal as well as nonverbal applications. Aspects such as reliability and validity are also addressed.

Chapter 5 gives an explanation of how the results of the study are interpreted, presented and discussed. A full interpretation is then given in Chapter 6. This includes a description of the sample and their biographical and historical information, how the data was gathered and analysed. Chapter 6 provides the interpretations of the material on a verbal and nonverbal level. The final findings and conclusions are explained and discussed in Chapter 7, including limitations and implications of the study as well as recommendations for further interventions.

2. EMOTIONS, SHAME AND VIOLENCE

OVERVIEW

“Shame is an unrelenting feeling of not being wanted and of being unworthy of being wanted. This kind of shame is experienced whenever what you believe to be your ‘worthless’, ‘inadequate’, or ‘bad’ self is threatened with being exposed and you feel in danger of being humiliated and rejected by others. Excessive shame is a prison. It keeps a person caged in feelings of worthlessness, self-hatred, and even despair” (Fable, 1999, p1).

In this chapter a discussion of all literature found with regard to the study is presented. A literature review was deemed necessary for several reasons.

Firstly, the study deals with a complex and fairly ‘under-investigated’ emotion namely shame. To become acquainted with shame and all aspects included, this emotion is discussed to create a better understanding of what shame is, where it comes from, how it can become toxic and how it can be reintegrated. Secondly, this chapter forms a sound background on which the theoretical framework is based. Most importantly is the understanding that shame, whether healthy or toxic, develops out of the relationship with the primary caretaker early in childhood. This coincides with the Social Bond Theory that revolves around secure and insecure bonds formed during the same developmental stage in which shame is formed.

Violence is the second part to be investigated in this project. An understanding of all possible sources of violence is discussed to lay a basic foundation that would lead up to the theoretical framework which assumes that violence is a result of unresolved or unacknowledged shame. It also familiarises the reader with unsuccessful attempts of dealing with shame which in turn create destructive shame-rage spirals. Another important reason for looking at violence is the apparent necessity and urgency of an investigation into violence in Namibia.

Shame is described as a *feeling* in the above quotation by Fable. However, some authors, such as Ekman (1992a, in Ekman, 2003) and Izard (1992, in Cornelius, 1996) perceive shame to be one of our *emotions*. Shame could thus be regarded as a feeling as well as an emotion. In this discussion the words 'emotion' and 'feeling' are used interchangeably and understood as having the same meaning.

The chapter starts off with a short discussion revolving around emotions, the functions of emotions and emotions across cultures.

The complexity of defining 'emotion' is explained as different views on understanding emotions as part of the human species. Emotions are explained to be simply the experience of involvement in an event and how much attention a person gives to such an event at a given time and place.

Some authors maintain that to understand emotions one needs to see an emotion as part of three overlapping components, namely physiological, behavioural and cognitive. Assessment of emotions should thus take place taking all components into account.

The functions of emotions are explained also from the point of view from several authors such as Averill (1994), Clore (1994), Capacchione (2001), and Ekman, (2003). The argument revolves around different aspects of an emotion and that not all emotions serve the same function. The contexts in which an emotion occurs, is an indicator of what the functions will possibly be. Emotions are also regarded as information providers, warning signal systems and indicators of the quality of our lives.

With regard to culture and emotion there seem to be some basic innate emotions found in all human cultures, with all other emotions being secondary. However, as explained by studies done in this regard, there seems to exist differences in the manner emotions are expressed and talked about in different cultures.

The chapter then continues with a more extensive explanation about shame and violence. To understand the relationship between shame and violence, a sound knowledge and thorough background of shame and violence are necessary.

According to many authors shame is an emotion that has only been explored more extensively in the past few years. One of the reasons for this could be the complexity of this emotion which seems to be, as noted by authors such as Kaufman (1989), the underlying factor of most mental disorders.

Shame is named the 'master emotion' by Scheff and Retzinger (2000; 2001) because of its extraordinary social and psychological functions. In the discussion on shame, its psychosocial development is explained according to the developmental stages of Erikson. A short history of shame is given referring back to the first story in the Bible of Adam and Eve.

An important aspect that needed to be looked at was distinguishing between shame and guilt as the two terms are generally used interchangeably. However, literature shows that differences do exist between these two emotions. Shame is explained to be more concerned with the self whereas guilt would revolve more around hurting others or violating a rule. Shame is much deeper than guilt and comes from the self and is mostly about the self, whereas guilt involves the activity of the self – the wrongdoing. Both of these emotions however do involve the self.

Other important aspects of shame that are looked at include elements of shame, functions of shame, distinguishing between healthy and toxic shame. The process of how shame becomes toxic is looked at in detail and it

becomes clear that according to most literature, including authors such as Scheff and Retzinger (2000; 2001), Fable (1999) and more extensively Potter-Efron and Potter-Efron (1999) and Bradshaw (1988), shame turns toxic when it becomes a permanent state of being. It no longer signals our limits, becomes internalised and a person is overcome by what Fable (1999) calls 'paralysis'. The discussion continues to explain how in an attempt to defend oneself against the shame, the shamed person may turn to withdrawal, perfectionism, criticising and rage.

Explaining the sources of toxic shame is important background information to obtain a good understanding of how toxic shame could be a predecessor of violence. The most important source of toxic shame focussed on, was that of the relationship built between a person and his or her primary caretaker. According to Bradshaw (1988), toxic shame is passed on from one generation to the next and when one has shame-based family, toxic shame will have been passed on through interactions with one's caretakers. Bradshaw also mentions some basic dysfunctional family rules that exist in shame-based families. Blaming either oneself or someone else is one of the rules to defend against shame when things go wrong. Authors such as Potter-Efron and Potter-Efron (1999) name five sources of shame, namely the family of origin, adult shaming relationships, social (group) shame, depression, and self-shaming. These authors seem to look beyond the primary family when

looking at sources of shame, giving a larger societal picture of shame and its origins.

During the last part of the chapter, the focus is on violence. Statistics on violence in Namibia are looked at and clearly show the need for investigation with regard to the high rate of violence in the country. Apart from shame, other sources of violence are looked at such as the socio-economic status of an individual.

The chapter ends with a suggestion of how one can deal with toxic shame in offenders. To reintegrate and restore shame is discussed according to Braithwaite (2000) who states that restorative justice consists of rituals and repentance.

2.1 Emotions

2.1.1 The Nature of Emotions

Barbalet (2002) mentions that the word *emotion* in itself is overloaded with meaning. For him, the word emotion merely indicates an experience of involvement. Involvement can be experienced negatively or positively. A person may be very involved or slightly involved, but the level of involvement in an event, person or condition, will depend on how much the event matters

to a person, at a particular time and place. “It is this experience that is emotion, not the subject’s thoughts about their experience, or the language of self-explanation arising from the experience, but that immediate contact with the world the self has through involvement” (Barbalet, 2002, p1).

Reber (1995) describes emotion by saying that “historically this term has proven to be utterly refractory to definitional efforts; probably no other term in psychology shares its nondefinability with its frequency of use” (p246). Cornelius (1996) is another author who agrees with the complexity of defining emotion. The author notes that some definitions of emotion are made in terms of expressive reactions, while others in terms of cognition, and yet others in terms of emotions’ functions.

Barlow and Durand (1999) explain that emotions consist of three overlapping components, namely physiology, behaviour, and cognitive processes. Theories about emotions based on a biological model, describe emotion as deriving from one’s basic drives, including feeding, sex, reproduction, pleasure, pain, fear and anxiety and aggression (Kaplan & Sadock, 1997). They maintain that this is universal and shared by all animals, and the neuroanatomical base for these drives seems to be in the limbic system.

Kaplan and Sadock (1997) explain that human emotions are largely learned and most likely represented in the cortex. They explain that the regulation of

the drives requires an intact frontal cortex. Figure 2.1, adapted from Santrok (1999), illustrates where the frontal cortex is situated in the brain.

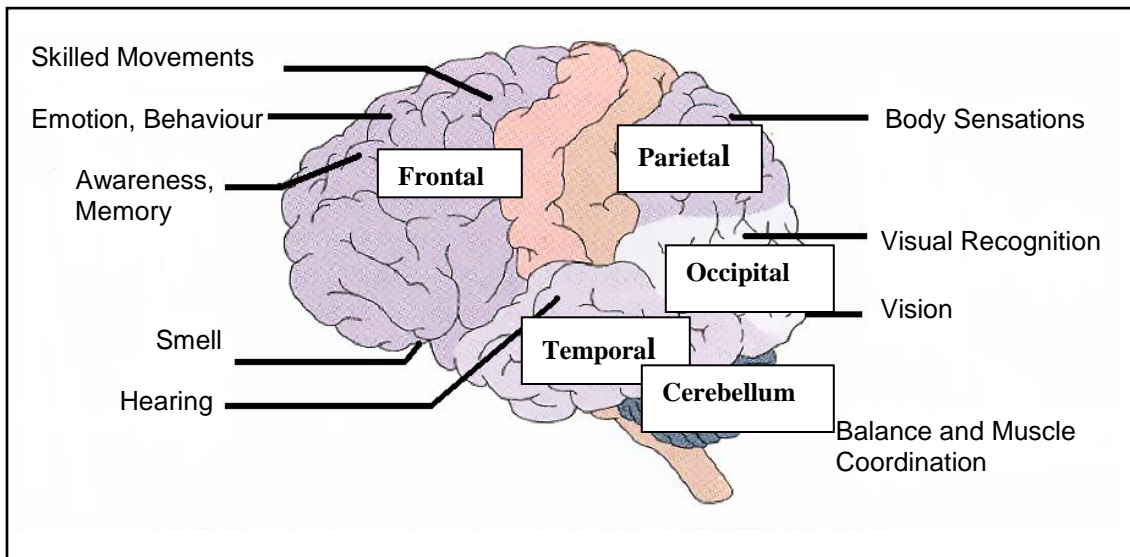


Figure 2.1

Capacchione (2001), an art therapist and popular workshop leader in the field of expressive arts therapy, states that we feel emotions with our bodies. This bodily experience is the basis on which Capacchione explains emotions. She maintains that emotions are mostly invisible, meaning that one cannot always see them directly with one's normal vision. This, however, is debatable as some bodily signs of emotions are clearly manifested. Examples of these are red cheeks when one is ashamed, embarrassed, or angry; tears when one is feeling sad, hurt, or angry; a smile when one is feeling happy or pleased.

One could assume that what Capacchione means with her statement, is for example, that when anxiety or fear is experienced, it could manifest through

bodily symptoms, which cannot always literally be seen by the person experiencing the fear or anxiety or by others. When looking at symptoms of anxiety as described in the DSM-IV (1994) and in Kaplan and Sadock (1997) such as headaches, palpitations, tightness in the chest, and stomach discomfort, one cannot always see these directly, but can feel it inside the body.

When it comes to identifying or observing other people's emotions, Capacchione (2001) notes that one recognises them by certain signs. She gives the examples of sadness being seen in a teardrop, anger in a frown, playfulness in a careless hand gesture, fear in a fidgety foot, and happiness in an ear-to-ear smile. The question that arises here, is that of how one is to know that the frown is a result of anger and not of confusion? Capacchione fails to clearly describe how she comes to these conclusions of observing other's emotions. One can only take it that her observations rely strongly on assumptions when identifying emotions in others.

Kaplan and Sadock (1997) on the other hand, state that it is important to note the complex interplay of emotions. They say it is "far beyond the understanding of functional neuroanatomists" (p93). Kaplan and Sadock pose questions such as where moral and ethical judgements develop from and what processes take place to allow beauty to be in the eye of the beholder. These philosophical questions fail to be answered by the biological

perspective on emotions, and it is probably here where the psychological and behavioural dimensions overlap to supply one with a clearer understanding of how emotions come about and what their functions are.

Barlow and Durand (1999) note that theorists who focus on the behavioural component, describe basic patterns of emotion that vary from one another in essential ways. Anger, for instance, may vary from sadness, not only in how it feels, but also behaviourally and physiologically. This behavioural and physiological manifestation of emotions serves as a way of communicating between one another. For example, if one were to have a facial expression that communicates fear, it could indicate the urgent need to ensure survival for others in case of possible danger. Thus, emotions trigger responses in others. Barlow and Durand (1999) note that this could be one of the reasons emotions could be contagious, such as mass hysteria. When these authors claim that a certain facial expression communicates fear, one wonders if the mentioned behaviour is sufficient enough to clearly indicate fear. How can one be sure that such a facial expression is not, for instance, an indication of sadness? It can only be seen as part of the whole, where the three dimensions overlap, keeping the context of the situation in mind.

Apart from the behavioural and physiological, the third overlapping dimension mentioned by Barlow and Durand (1999), is the cognitive dimension of emotion. The theorist mentioned by them is Lazarus (1991a), who proposes

that a person's particular environment at a particular time should be assessed in terms of its possible cognitive impact on that person. Thus, the form of appraisal the person makes will condition the emotion experienced. An example of this can be where one sees somebody holding a gun. This would probably be appraised as a dangerous situation, and fear will be experienced (Barlow & Durand, 1999). It will also depend on who that somebody is, for instance a soldier, policeman, security guard or a hunter as well as the environment in which the person is.

Ekman (2003) agrees with Lazarus' notion of appraisal and what Lazarus calls core relational themes. Lazarus (1991a) uses this phrase to reflect his view that emotions are primarily about how we deal with other people. The author argues that any encounter between a situation and a person produces a number of individual appraisals. These appraisals merge together to form a larger 'relational meaning' of the encounter and these meanings are what Lazarus (1991a) refers to as 'core relational themes'. The author describes the core relational themes as the central relational disadvantage or advantage in encounters and this core is the basis of each specific kind of emotion.

Table 1 gives an example of Lazarus' core relational themes for a number of emotions.

TABLE 1 Lazarus' Core Relational Themes for a Number of Emotions

EMOTION	CORE RELATIONAL THEME
Anger	An embarrassing offence against oneself
Anxiety	Facing an uncertain threat
Fright (Fear)	Faced with an immediate, actual, overwhelming physical danger
Guilt	Breaking a moral imperative
Sadness	Experiencing an irreversible loss
Happiness	Progressing toward realising a goal
Love	Desiring or to be part of affection. Usually, but not essentially, shared
Compassion	Touched by someone's suffering and the desire to help

Adapted from: Lazarus, 1991a

Ekman (2003) further explains that the term 'theme' is a good one because "we can then talk about the universal themes and the variations on those themes that develop in each person's experiences" (p24).

Ekman (2003) explains that when confronted by a theme such as the sensations of a chair that unexpectedly falls under us, it evokes in us an emotion in the absence of evaluation. It could take some time for what Ekman calls 'auto-appraisers', to assess any variations of each theme. The bigger the variation from the theme, the more time it will take before one gets to a point where reflective appraising occurs. Last mentioned is a point in time where one becomes consciously aware of one's evaluative processes, thus, thinking and considering that which is occurring.

Ekman (1992a, as cited in Ekman, 2003) argues that there are six universally identifiable emotions, and has added a seventh one recently. These are interest-excitement, joy, surprise, distress-anguish, anger and disgust. The seventh emotion is contempt. Izard (1992, in Cornelius, 1996) holds a very similar view on the question of basic emotions, but argues that there exist ten fundamental emotions. The three emotions added to Ekman's list are fear, shame and guilt. Izard (1992, in Cornelius, 1996) names these ten emotions to be fundamental as each of them has a) a particular innately determined neural substrate; b) a characteristic facial expression; and c) a definite subjective or phenomenological quality. In other words, each of the ten fundamental emotions could be seen as having a biological, behavioural and cognitive or mental dimension. It is also important to note that when assessing emotions within all three dimensions, the identification of emotions becomes more effective, reducing the chances of misunderstanding and possible mislabelling of an emotion.

2.1.2 Functions of Emotions

A very important question to consider in regard to emotion is that of its functions. Why do we experience emotions? Is it of any value to us and why? In the following discussion I will attempt to answer the above questions as extensively as possible. Although there are several authors who address the functions of emotions, only the most relevant ones will be discussed. These

include authors such as Averill (1994), Clore (1994), Capacchione (2001), and Ekman, (2003).

Averill (1994) maintains that not all emotions have the same function as generally assumed. The author mainly argues about the functionality of the consequences of responses, saying that distinctions need to be made between “1) intended and unintended consequences; 2) short-term and long-terms consequences; 3) singular and average or predictable consequences; and 4) individual and group (biological and sociological) consequences” (p 100).

The last of these distinctions is considered as the most appropriate with regard to this project as it deals with emotion and behaviour in different contexts such as the environments the subjects grew up in and are in currently. According to Averill (1994), the last distinction involves that emotions may be functional for the individual; for the species; and for the society, with psychological, biological and sociological consequences respectively. However, what may be good for the individual may not always be good for the group and therefore an emotion could be functional as well as dysfunctional at the same time, depending on the perspective taken. The perspective can either be from the individual’s point of view, from the species’ point of view or from the society’s point of view.

Averill (1994) states that emotions fall into a heterogeneous class and to inquire if all emotions have the same function is the same as inquiring if all thoughts have the same function. The author argues that such an inquiry is just too broad to come up with a significant answer. It is suggested that each emotion should be analysed in its own right and only when the contexts in which the emotion occurs are ignored, one can look at emotions as serving the same function.

Averill (1994) continues to explain that because emotions are not a unitary occurrence, their functions may vary depending on the aspect of the emotion in question. The author takes grief as an example, explaining that it typically progresses in stages over time. During the initial stage, agitation and yearning for the loss is represented as biological based responses to separation. These responses are effective in promoting reunion; however, when the loss is permanent such as death, responses such as withdrawal or lethargy may result. Averill (1994) concludes a multiplicity of functions is possible for any given emotion depending on the aspect of the expressed emotion, what the nature of the consequences being considered are, and what point of reference is taken – individual, species, or society.

Averill (1994) also notes that when an expressed emotion is functional in a certain context, then an unexpressed emotion in the same context will be dysfunctional. The author feels that it is situations that typically demand

action or resolution that arouse emotions. However, if the emotion is not expressed, then the situation is likely to remain unchanged, to the disadvantage of the group or individual. It should be noted that in some cases the inhibition of emotions being expressed could be exactly what is needed and exhibition could become a problem. Physical and mental health comes from flexibility, not emotional inhibition or exhibition per se (Averill & Nunley, 1992, in Averill, 1994).

Clore (1994) argues that the primary function of emotion is to provide one with information, maintaining that “[E]motions supply information to others through distinctive facial and vocal expressions and to oneself through distinctive thoughts and feelings” (p103). The author states that the functionality or dysfunctionality of an expressed emotion depends on how the information value that accompanies the affective experience, is handled. Taking the example of grief again, the continued expression or complete silence of grief may equally lead to poor coping.

Clore (1994) proposes that whether one receives information or misinformation depends on one’s analysis of the experience. According to studies by Pennebaker (1991, in Clore,1994), people who initially keep their traumatic experiences secret and then reveal them to someone else, sometimes show great changes in anxiety and arousal. On the other hand, by not talking about a distressing event, a person may be unable to separate

the emotional event from subsequent experiences. Affective cues that may follow could seem potentially applicable to anything and everything, leading to contaminated judgements.

Schwarz and Clore (1983; 1988, in Clore, 1994) state that the basic function of emotion is to provide one with information on how a situation has been appraised. Agreeing with these authors, Ekman (2003) maintains that one's view of the world and how one understands the actions of others are changed by one's emotions. Confirmation of the emotion is sought, rather than seeking reason for having the emotion. The author notes that this may help one in many situations to focus one's attention on the decisions that one needs to handle the problems or challenges at hand. If one is, however, absorbed by an emotion one ignores already obtained knowledge that could disconfirm the felt emotion, just as new information from one's environment gets ignored or discarded if it does not fit to the felt emotion. Thus, the same device that guides one and focuses attention can also interfere with our ability to cope with new as well as existing knowledge already stored in one's brain (Ekman, 2003).

Others' emotion signals very often govern how one interprets others' words and actions (Ekman, 2003). The other's expressions trigger one's own emotional response and in turn, one forms an understanding of what the others' motives, attitudes and intentions are.

As a child, one learns that the free expression of certain feelings, such as anger, sadness, fear, and shame may lead to reprimands, ridicule, or punishment (Capacchione, 2001). These emotions are marked as wrong, and one assumes one is wrong for having and expressing them. When emotions are shoved underground, “they tend to explode suddenly in violent acting out, or they implode in the form of depression, anxiety attacks, stress, or physical illness” (Capacchione, 2001, p18). Thus, emotions act as an essential part of one’s mental and physical survival.

One reads emotions in daily face-to-face conversations, in postures, gestures and vocal intonation (Capacchione, 2001). The author notes that they are inscribed on one’s inner ear and eye. One listens for suggestive intensity of tone, breaks and accents. One also searches for hidden messages between the lines of a letter or E-mail, dissecting what is said and what is not said. Sometimes one does not pick up every feeling, and sometimes one misconstrues some cues. However, to get ahead in life, one has to comprehend the language of emotions – to some degree or another.

Ekman (2003) maintains that emotions determine the quality of our lives. Emotions are present in all relationships important to us, whether it occurs in the workplace, in our families or in our most intimate relationships. A remarkable characteristic about the emotion signal system is that it is always active and ready to immediately announce any emotion one feels.

Emotions can save our lives but on the other hand they can do serious damage. They could help us to behave in ways we believe to be realistic and appropriate but also to behave in regretful ways. Emotions serve us well most of the time as they get us ready to deal with what is important in life and produce various kinds of enjoyment.

However, our emotions can also get us into trouble. This happens when we react emotionally inappropriately in one of three ways (Ekman, 2003). The first way mentioned by the author is when one feels and shows the right emotion but at the wrong level of intensity. For example when one is worried but overreacts and ends up feeling terrified. The second way is when one feels the appropriate emotion, but displays it in the wrong way. An example hereof is when one resorts to the silent treatment after being justifiably angry. The last way is when one is feeling the wrong emotion altogether as in when one becomes too frightened or angry and realises afterward that one should not have become angry or afraid at all.

Physiologically certain changes take place in certain parts of the brain when one experiences an emotion (Ekman, 2003). When this happens, one is ready to deal with what has caused the emotion. Apart from changes in the brain, other parts of the body also change such as changes in the autonomic nervous system which regulates one's heartbeat, breathing, sweating and

other bodily functions. Emotions send out signals, changing one's expressions, face, voice and bodily posture.

Emotions on the positive side are activating agents that empower and inspire us, giving colour and texture to our experiences (Capacchione, 2001). Thus, feelings or emotions can play an influential role in how we perceive our experiences.

2.1.3 Culture and Emotion

A question that arises is whether emotions are universal or culture specific. There seems to be some indication, as international studies have shown, that there exist differences among cultures in how emotions are defined and identified (Cornelius, 1996; Ekman, 2003). What then makes the difference?

Castillo (1997) states that because so many mental illnesses are related to human emotion, it is vital to first look at the assessment of culture and emotion. He also notes that the assessment of mental illness should always be grounded on a sound understanding of the cultural nature of emotion in humans. In general, anthropologists seem to stick to a cultural constructivist view of human emotion, which refers to the notion that adult human emotions mainly depend on cultural concepts (Castillo, 1997). In other words, cultural schemes that mediate “between sensory stimuli and emotional reactions”

(p56). What this perspective is built on, is that the appraisal of sensory stimuli, together with the meaning of the events and the norms of behavioural reactions for adult human emotions, differ across cultures. An example of a cultural-based emotion is *Amok*. This is a South Asian trance syndrome, usually characterised by a short, sudden “outburst of unrestrained violence, usually of a homicidal nature” (p60). *Amok* is usually preceded by gloominess and ends in exhaustion. Dissociative amnesia of the episode is typical. *Amok* is indigenously understood to be caused by interpersonal conflict, personal abuse as well as shame and loss of honour (Castillo, 1997).

Zimbardo, McDermott, Janz, and Metaal (1995) argue that results of many studies have shown that there are various cultural differences in the ways emotions are talked about, manners in which emotions are expressed as well as implicit theories of emotions. Plutchik (1980; 1984, in Zimbardo, McDermott, Janz, & Metaal, 1995) developed an emotion wheel depicting eight innate emotions made up from four pairs of opposites. These are joy-sadness, fear-anger, surprise-anticipation, and acceptance-disgust. According to the authors, all other emotions are secondary variations of these eight basic emotions.

In a study by Ekman (2003), people from Brazil, Chile, Argentina, Japan and the United States were asked to identify emotions shown in several photographs. The majority of the people in each of the five cultures seemed

to agree in their descriptions of the emotions. This, notes Ekman (2003) suggest that expressions of emotions may be universal.

Mesquita and Fridja (1992, as cited in Zimbardo, McDermott, Janz, & Metaal, 1995) concluded that global statements on cross-cultural universality of emotions are inappropriate. These authors rather argue that when comparing emotions in cultures with each other, one should focus on specific aspects of emotion. In a study by the two authors, it was observed that both cross-cultural similarities as well as differences were apparent in each phase of the emotion process. The example given by the authors is that of the loss of a loved one. In this event, universal emotions are aroused but the ways these emotions are expressed differ from culture to culture.

There does exist support for the universality of emotions such as in the case of certain specific responses such as facial expressions, voice intonations and physiological responses and these have always been the core of the universalist view of emotions.

2.2 Shame

Scheff and Retzinger (2000; 2001) call shame the master emotion, as it fulfils many more social and psychological functions than other emotions. They call shame a key constituent of conscience, the moral understanding. Scheff

and Retzinger (2001, p 27) note “[S]hame is the emotional aspect of disconnection between persons”. The function of shame is to be an automatic pilot and when bypassed, moral direction gets lost resulting in conflict and anarchy.

Shame is also described as being partially pure feeling and partially a set of beliefs (Potter-Efron & Potter-Efron, 1999). These authors maintain that shame, like all other emotions, operates on a scale varying from almost unnoticeable to overwhelming experiences. Three core aspects of shame are mentioned by these authors, namely a) the fear of abandonment; b) the fear of losing yourself; and c) the fear of incompetence. All three of these aspects are also mentioned and discussed by authors mentioned further in this chapter.

Erik Erikson (1959; 1968, in Santrok, 1999) described a sense of shame as part of the second stage of psychosocial development. He called it “Autonomy versus Shame and Doubt” (p34). Bradshaw (1988) describes Erikson’s first stage as one where the child establishes a sense of basic trust. This basic trust should be greater than the sense of mistrust. If the child knows from the beginning that it can trust the world – at that stage their caretakers – an interpersonal bond begins to develop which forms a bridge of mutuality. This bridge is extremely important for the development of self-worth, as the only way that the child develops a sense of self is through a

relationship with another. “We are ‘we’ before we are ‘I’” (Bradshaw, 1988, p4).

Bradshaw (1988) describes that a relationship of trust between caretaker and child develops out of a shared experience of reciprocal interest. The trust grows and an emotional bond is formed. This bond allows the child to go out and explore the world. It becomes an “interpersonal bridge” (p5) between caretaker and child and when this trust is developed, the child is prepared to develop shame. When the shame develops, it can be either healthy or toxic. This will depend on whether the child and caretaker have developed a healthy or broken bond. If the child received enough attention and time together with good modelling of healthy shame and other emotions, a healthy and secure bond is formed. Good boundaries and limits set by the caretaker are also important. Bradshaw (1988) explains that a child should be assured that the interpersonal bridge will not be destroyed. The author elucidates the interpersonal bridge by arguing that at the age of about fifteen months a child develops the physical ability to stand up and walk. He or she now has the desire to explore and in order for the child to explore, he or she needs to separate from the caretakers. This is a crucial time because if the caretaker withdraws love and protection from the child the interpersonal bridge is also withdrawn. The child never acquires autonomy and an unhealthy sense of shame develops.

A sense of shame shows us that we are limited as human beings (Bradshaw, 1988). Like our other emotions it activates us to get a basic need met; the need of structure. Within a structured system we can operate safely. However, when one overestimates one's ability to cope with one's own stresses it may result in feelings of powerlessness and hopelessness. In return a sense of shame arises because of one's idealistic perceptions of one's coping abilities. Inevitably, healthy shame is lost and toxic shame takes the foreground. Bradshaw (1988) continues to explain that shame, especially toxic shame, comes about when one has the desire to be someone else; of wanting a "false self" (p3). Accepting one's true self seems to be the hardest task to humankind, and consequently creates the desire to be different than what one is, creating toxic shame.

It would seem that denying the 'real self' can end up in a lifetime of covering up and secrecy. Bradshaw (1988) argues that secrecy and hiding is a basic cause of suffering for all humankind. So, how can one then resolve or defend oneself against such suffering? Bradshaw (1988) suggests that it is only through self-love and acceptance, that the suffering can be ended.

2.2.1 The History of Shame

The oldest story about shame derives from the Bible (Schultz, 1996; Bradshaw, 1988). In Genesis, Chapter 2, verse 25, it is told that God had

completed creation, and Adam and Eve were settled in the Garden of Eden. Adam and Eve are said to have been both naked but not ashamed. As the story goes, they ate from the tree of knowledge, and became aware of their nakedness. They covered themselves only to be discovered by God and to be cast out of the Garden of Eden forever. Thus, “they became conscious, they were ashamed, and they were forever separated from the paradise of their innocence. Is this an allegory of inner psychic truth?” Schultz (1996, p1) claims that it is.

What Adam and Eve bought for us is a self-consciousness in which we can take an ideal viewpoint on ourselves (Katz, 1997). Adam and Eve were ashamed after they ate from the prohibited fruit, even before God saw them. What was immediately revealed to them was shameful. Bradshaw (1998) maintains that one is born with shame. This shame needs to be developed into healthy shame that is modelled by one’s caretakers. Therefore, when a child is exposed to bad modelling or shame-based caregivers, the child will also develop unhealthy or toxic shame.

According to Bradshaw (1988), the Bible indicates that shame was the gist and result of Adam’s fall. He explains further that the word ‘Adam’ is equal to that of ‘mankind’, and thus Adam stands for all human beings. As healthy shame indicates the limitations of one’s being, the denial of these turns

healthy shame into toxic shame. Adam lost his healthy shame by not being satisfied with his limitations, wanting to be more than he was.

Katz's (1997) argument could be more relevant as he maintains that Adam and Eve experienced shame only after they ate from the fruit of the forbidden tree. Once Adam and Eve received knowledge about everything, it was the instance of distinguishing between good and bad. According to the Good News Bible (1998), shame is indicated as a negative emotion closely associated with punishment. Whether Adam and Eve experienced good or bad shame is a relevant question, as one would wonder why they were ashamed of being naked when they had knowledge of everything? Bradshaw (1988) does, however, mention that the nakedness that Adam and Eve were experiencing was a symbol of their true, real selves. Thus, on a much more complex, symbolic level Adam and Eve were actually ashamed because they realised they did something wrong in God's eyes – not abiding to God's demands - therefore 'hiding' themselves in the bushes.

Scheff and Retzinger (1997) argue that shame has been a subject of extensive repression in the past, especially in Western societies. This leads to the difficulty in understanding the importance of shame dynamics in both normal as well as pathological behaviour. Schultz (1996) also mentions that earlier theorists, such as Jung and Freud, essentially ignored shame altogether. According to him, Jung called the rejected part of the self that is

closest to the ego, the shadow. What Jung never mentioned was that the shadow was the shameful part. However, Schultz (1996) does note that at a seminar in 1936, Jung spoke about 'original shame'.

Tomkins (1963, as cited in Kaufman, 1989) saw shame as being an affect of indignity, of defeat, of transgression and alienation. Shame strikes deepest into the heart of human beings; it is an inner torment – a sickness of the soul. It makes one feel naked and worthless.

2.2.2 Shame and Guilt

Shame and guilt may appear together, but they are not the same (Schultz, 1996). He describes guilt as coming from violating a rule or standard, committing an offence, or trespassing. To feel guilty, one needs a conscience or superego. Therefore, guilt is concerned with what we do or fail to do. Guilt motivates confession, and deserves punishment. It is overcome by restitution and forgiveness.

Schultz (1996) describes shame as something much deeper than guilt. It involves who we are and it enforces withdrawal. Shame can only be alleviated through acceptance. In other words, a person may feel guilt and be guilty, without being ashamed. Also, a person can experience shame but not feel guilty or without having done anything to feel guilty about. "[O]ne can do

things that bring on shame, but it is what the action means to the actor or about the actor that brings on the affect, rather than the act itself” (Schultz, 1996, p1). An example of this could be a boy who is born with red hair and freckles. He may feel ashamed about this because children are teased at his school if they have red hair and freckles. However, he may not necessarily experience guilt because of his red hair and freckles.

Fable (1999) also notes that shame and guilt are many times used interchangeably, even though they are not the same phenomenon. However, it is not strange for both to exist concurrently. Regarding the distinction between the two phenomena, guilt has more to do with doing or failing to do something, whereas shame is more about a perceived failure of being worthy, wanted or good. Fable (1999) states that guilty people fear punishment, whereas shamed people fear abandonment. As in the example of the red-haired boy, the boy may feel that his friends will abandon him because he has red hair and freckles.

According to Cloke (1998) guilt stems from different sources than shame. The reference point for shame is the self, whereas the reference points for guilt are the actions of the person. He notes “shame is about the self while guilt refers to the activity of the self... [W]hile an act of guilt can be eliminated by changing the activity which causes the feeling of guilt, shame remains as an active personality trait” (p2).

Cloke (1998) continues to explain that even though guilt is intensely forceful and puzzling, it is often relieved through the uncomplicated procedure of confession. Confession has the ability to neutralise guilt, giving the confessor a kind of forgiveness and understanding. He gives examples such as self-mutilation, flagellation and masochism, which are mostly guilt related because guilt is relieved through punishment. Guilt develops in alliance with a learned sense of what is adequate behaviour. On the other hand, shame represents a primitive wound that is produced early in development, before the presence of a moral order. From this, one can conclude that shame, although related to the self, coincides to basic desires like hunger, need, sexuality and identity (Cloke, 1998). The bond that develops between parents and children thus becomes critical in the development of healthy self-esteem and the feeling that one is able to meet requirements.

Lewis (1971) gives a more definite or particular distinction between shame and guilt; she describes shame as the explicit experience of the other's rejecting assessment. For shame to transpire, there must be a relationship between the self and the other in which the self is concerned about the other's assessment. This point is particularly important because shame is frequently given the constricted definition of either 'fear of getting caught' or else a 'narcissistic' response.

The other person or individual, according to Lewis (1971), is an essential figure in the experience of shame as he or she is usually in the status of being admired. Enchantment with the other and consciousness of the other's handling of the self, render the self more vulnerable to shame. Shame is the feeling state in which one is impressionable to falling in love.

Guilt also entails the self in explicit experiences. It is, however, the experiences of the *other's* hurt, wound, or distress that are in the foreground. There seems to be the idea of the self having done something wrong, which caused the other's hurt. The self feels guilt, and a desire to fix the other's hurt arises. 'Should haves' become the focus as an attempt to rid one of one's guilty feelings.

By implication, the self is able to escape, having done or not done something. The moment that shame manifests, in comparison, the self is unable to escape the vicarious experience of the other's sceptical assessment of the self. In guilt, vicarious experience implies a self suffering the other's rejection or scorn (Lewis, 1971). She continues, however, to describe that shame involves more self-consciousness and more self-imaging than guilt. Katz (1997) shares a similar view as Lewis in noting that guilt is often particular to given relationships, whereas shame essentially generalises. He says that in guilt an individual imagines how he or she might have acted to avoid faulty

behaviour, but in shame the individual feels that there is no way to make the wrong a right and that his or her fate is determined.

Shame has a strong tendency to excite anatomic responses (Lewis, 1971). It usually includes blushing, sweating, and increased heart rate, usually comprising of more bodily consciousness than guilt, as well as visual and verbal representation of the self from the other's viewpoint. Shame is thus a more intensely painful experience than guilt. This attribute makes shame seem to be a more primitive or illogical reaction than guilt. Both states, however, involve the self, attempting to maintain affectional connections to significant others. Shame is the experience of defeat. Guilt is the experience of hurting others or things and requires that one make suitable amends (Lewis, 1971).

Difficulties can arise in recognising one's own psychological state, because of the fact that shame and guilt are frequently fused. Firstly, shame and guilt may be elicited concurrently by a moral violation. What happens then is that the two states fuse together as an experience of guilt. Shame of oneself is thus possibly operating as a subordinate to guilt for violating a rule (Lewis, 1971).

When guilt and shame are elicited together by transgression, the shame part, although fierce, can be buried in guilt ideation and stay dynamic even after

suitable amends have been made. A second difficulty in the clarity of states of shame and guilt originates from the fact that the provocation of shame can be twofold: either a moral violation of a rule or a failure can elicit shame (Lewis, 1971).

A third reason that shame and guilt are intertwined has to do with conflict that is naturally elicited in both states. In shame, conflict within the self is experienced in the passive manner, as originating from the other. When shame is elicited by personal deception or by unrequited love, the self feels overthrown by the rejection. The self feels out of control and astounded and disabled by the aggression directed against it. One feels like crawling into a hole or sinking into the floor (Lewis, 1971). The self feels little, defenceless and childish. As long as shame is in consciousness, it is the other who is experienced as the source of aggression.

Aggression against the rejecting or deceiving other is almost concurrently provoked. However, it is humiliated fury, or shame-rage, which is concurrently being perceived as 'inappropriate' or 'unjust' fury by the person experiencing it. To be angry and furious with someone, because one is unloved by him or her, makes one easily and simultaneously guilty for being unfairly enraged. Provoked hostility is quickly redirected back on the defenceless self in the form of more shame and guilt. Lewis (1971) also maintains that evoked shame-rage, ultimately produces feelings of revenge,

turning the table towards the other. However, if the other is loved and valued the consciousness of humiliated fury is silenced, and it is turned back to the self, transformed into self-destructiveness.

2.2.3 Elements of Shame

Katz (1997) describes shame as having ten distinguishable elements, namely fear, chaos, irresistibility, revelation to the self, vulnerability, one's nature, moral incompetence, isolation, humbling, and the sacred community.

He describes these elements to be closely interrelated, and any given experience can be used to interpret any of the ten elements. He groups the elements in three classes. The first collection of elements explains how shame is an expressive process, or a way of seeing oneself from others' viewpoint. The second set demonstrates shame to be a form of praxis, or an activity of organising a sensible, problem-solving course of action. The third set explicates shame as a unique sensuality that is lived as a specific form of bodily transformation.

Perhaps the most commonly noted element of shame is that of disclosure. It is a component of the particular complexity of shame that the revelation it entails is to an audience but that that audience is in the first place oneself. Furthermore, "Others' discovery about oneself is not shameful unless one

learns of their discovery” (Katz, 1997, p233). Direct confrontation or exposure to others need not be necessary to experience shame.

It is significant to highlight the fearful peculiarity of the revelation in shame for this characteristic of the occurrence points to the development of a problem in separating or distinguishing one’s identity from that of others. When there is an instant of revelation to others, “the ashamed person often cannot or will not lift his or her head to perceive the others’ regard, and so he or she maintains a phantomlike sense of the ‘others’ whose knowledge brings shame” (Katz, 1997, p234). Here it is not really about seeing that others see oneself that causes shame, since one may never wholly capture their stare. What causes shame is the presumption of what the viewpoint of others could be, if one were to look up.

Shame conveys a sense of isolation from community. In a relationship where shame is experienced, the shamed person feels isolated. Katz (1997) gives the example of someone soiling himself. This may bring about embarrassment about one’s ability to manage one’s identity in a presented social situation. However, when it produces shame, it is through the inference that one should have the ability of self-control that would be essential when relating with others.

One may observe shame in self-reflections that find one's fundamental sensibilities existing outside any group (Katz, 1997). It is common both for members of groups that are elite and for members of renegade groups to sense shame on the disclosure of scandalous doings by a group member. Such shame can be experienced when one is reading a disgraceful news story about a stranger. Shame may emanate in this state of affairs even though one does not feel personally disclosed or at fault (Katz, 1997).

The practical aspect of shame is that it never resolves in a smooth manner, because the person in shame is consistently confronted by a sense of moral inadequacy and personal vulnerability. Whether or not shame is induced by an act that one considers as one's fault, there is an impression of inability to do the right thing. This sense is important in the shame that comes with unemployment due to plant closings, or a general economic slump.

Women who have been raped frequently report a succession of anger at the rapist, anger at any person who would imply they were at fault for 'inviting' the rape, and shame that they were incapable to stop the crime. Such examples of the victim's shame are not due to the women's 'internalisation' of oppressive variants of sexual morality. The rape victim may feel shame that her body has dishonoured her by being defenceless to alien forces that surpass her will. The rape victim's torment is preposterous in that it objects

unsuccessfully to a happening that was not the victim's mistake yet leaves a permanent stain (Katz, 1997).

Instances of empathetic shame include viewing dreadful performances in a theatre. Having paid to attend a bad performance, one might more reasonably be angry. But the performer's shameful inadequacy may be experienced as one's own. Social situations are overflowing with unwelcome implications that one is the kind of person whose reputation complements the proceedings at hand. The occurrence of shame starts in fear and moves instantaneously to a sense of chaos. Adam and Eve are frequently portrayed as running hurriedly and confused in search of a hiding place.

The anxiety in shame and in its horror is that the chaos cannot be confined to any particular act or fact. The experience of shame may originate with the discovery of some minor stigma, like malapropism but it soon brushes through the self.

Shame may be about private affairs, such as private parts or secret corruption. Others may consider private affairs less serious, but these are intimately significant to the person ashamed (Katz, 1997). Shameful experiences move from fear to chaos to humility. When 'put to shame' one is cut down, forced to drop a prior, egotistical attitude. When one stammers into

shame, one shrivels down, trying to become as tiny as possible to avoid being noticed (Katz, 1997).

After a shameful experience that seems to be permanent, people oftentimes report that they go home and start restoring their domestic surroundings. Compulsive housekeeping may be rationalised as an attempt to construct a private sense of self that is autonomous and resistant to the threats of taking part in society, but that conception is only partly accurate. The precipitance of perfecting the domestic arrangement, by cleaning and putting things in their place, by taking up forgotten responsibilities, or just by polishing an order that is already firmly incorporated, has no substantive relation to the matters that provoke shame. These must be understood as ritual customs that honour the harmony of one's nature and an order – any order – that is distinctly moral (Katz, 1997).

Scheler (1987, in Katz, 1997) developed a dualistic viewpoint that appreciated a distinction between 'body shame' and 'spiritual shame'. Body shame is about not remaining covered by social clothing. It is occasioned by a stupid mistake that indicates a general lack of education; by tactlessness that occurs when social actions are not appropriately embodied; by inadequacies due to poverty, poor health, membership in stigmatised groups, new immigrant status, and so on that put one below the minimal level of leading a 'normal' social life.

If body shame is a matter of sensing that one is not competent of being effectively human according to the definitions prevalent in a given society, spiritual shame is occasioned by demands to rise above traditional restraints because of exceptional qualities. The fall of 'body shame' is to a childlike or animal nakedness; the fall of 'spiritual shame' is that of a fall from arrogant motives. Body shame comes forth independent of imputations of personal error; spiritual shame comes forth where there is a lack of appropriate humility (Scheler, 1987, as cited in Katz, 1997).

2.2.4 Functions of Shame

Shame is a very important aspect in social interaction, as it connects the individual and social aspects of human activity. Shame gives us an opportunity to choose how far or how close we allow others to be from us (Scheff, 2000).

Scheff and Retzinger (2000) mention some functions of shame. One of these functions includes shame's signalling of moral violation. The second function mentioned by the authors is that shame emerges in a basic situation where there exists a real or imagined threat to our bonds. It is thus a sign of a troubled relationship, as in the case of the infant whose life is totally dependent on the bond with his or her caregivers. Scheff and Retzinger (2000) argue that because of this dependency, shame is as primitive and

intense as fear. Lastly, shame takes on a central role in that it controls the expression as well as the awareness of all our emotions such as anger, fear and love that are not easily shown in public due to one's shame about them.

Jacoby (1996) maintains that shame fulfils an essential purpose; without shame and the control it imposes, even the most elementary form of civilised life would be inconceivable. Shame is a very complex occurrence, promoting the person's adaptation to consolidated norms and morals no less than the preservation of his or her privacy. Thus, shame can be compared to a border guard, according to Jacoby (1996), who disciplines those who exceed a certain moral code's understanding of honour and righteousness. Violation of such borders antagonise good morals and can end in social restrictions or at the very least, an inevitable loss of face.

Shame also sets bounds on interpersonal interaction, thus preserving individuality and identity. "Shame can be an accurate gauge of the emotions that regulate closeness and distance in our most intimate relationships" (Jacoby, 1996, p46). Shame has thus two very distinct functions.

One must distinguish between things that bring about shame because they insult general belief and those that are shameful because they hurt the simple truth. In the first case, one has violated a requirement to act according to social norms and expectations; in the second, one has violated an inner,

psychic order of values. Thus, on the one hand shame resists social change, while on the other it protects personal integrity (Jacoby, 1996).

Scheff and Retzinger's (1997) final argument is that shame performs an extremely important role in normal co-operative relationships, as well as in conflict. The authors maintain that shame is a signal of a threatened social bond. It is therefore important in establishing the state of one's relationship. On the other hand, pride is a signal of a secure bond. Thus, threatened bonds are the source of shame, and allows the translation of shame-language into relationship-language, and relationship-language into shame-language (Scheff & Retzinger, 1997).

2.2.5 Healthy Shame

An important issue regarding the shame theory is the difference between pathological shame and normal shame. It is possible to differentiate the two kinds of shame, as they arise in social interaction, by close observation of the distinctive way shame manifests itself (Scheff & Retzinger, 1997). According to the Social Bond Theory, "when shame is acknowledged rather than denied, it is of brief duration – usually lasting less than a minute – and serves as a signal, allowing for the repair of damaged bonds" (Scheff & Retzinger, 2001, p 29). The authors further note that when a person denies shame, he or she is ashamed of being ashamed. When this happens, shame reappears and

continues. Shame builds on shame and a wall is erected between persons because the shame stays unacknowledged.

Shame also has positive side effects. One favourable element of shame seems to be a by-product of the fear of being rejected by the family, group or culture. Thus, one may attempt to dodge the shame of dismissal by agreeing with cultural values and acting in ways that generate cultural permission. This urge to belong, to avoid shame and to be proud of one's achievements is a positive component of shame. This desire encourages people to make efforts at being accepted into the bigger culture and even to endeavour toward excellence. Herein lies a factor of human nature; fleeing pain is often a motive in directing our lives toward more positive goals that are difficult and sometimes fearful (Cloke, 1998).

Bradshaw (1988) explains that healthy shame is the open and honest expression of one's own failures or limitations. He notes that, healthy shame lets us know that we are limited as human beings. It shows us that we are mortal, and this is part of our nature as human beings. Grave problems result from us refusing to accept our limits. Healthy shame helps us to get our basic needs met, according to Bradshaw (1988). One of these needs is structure, which is developed by creating our own personal boundaries, giving us security and safety. If we did not have boundaries, we would have no limits, and without limits, we would get confused and lost. Bradshaw deduces his

arguments from the developmental theory of Erikson (1978, in Bradshaw, 1988). According to Erikson children reach the psychosocial stage at about 15 months to 3 years where they need to achieve a balance between autonomy, shame and doubt. This is commonly known as the terrible two's as the child begins to explore by touching, tasting and testing. When they do not get their way, they throw temper-tantrums. Everything is new at this stage and the child needs to take possession of things in order to test them by meaningful repetition (Bradshaw, 1988).

The needs of the child are mostly fulfilled by a firm but understanding caretaker, whose own needs should be met through his or her spouse, partner or friends. Issues such as a sense of self-responsibility, need to be resolved in order for the caretaker to be able to provide what the child needs. What Bradshaw is saying here, is that a child needs a good role model of healthy shame and other emotions. This requires time and attention, boundaries and limits. For the child, the most important experiences should be those of reassurance and security that the interpersonal bridge will not be broken if the child has the urge to try out new things in it's own way. Thus, the need to develop autonomy must be allowed. If all of this happens, the child can develop a healthy sense of shame. "It may come as a moment of embarrassment over one's normal human failures or as timidity and shyness in the presence of strangers" (Bradshaw, 1988, p6). As a balance of and limit

for the child's newfound autonomy, the sense of shame is extremely important. This shows the child that it is not divine.

Bradshaw (1988) elaborates on embarrassment and blushing in relation to healthy shame by explaining that it happens when one is caught off guard. This in other words, would be a moment where one is exposed while not ready or prepared to be exposed. It creates difficulty to cope with the situation in front of others and can lead to blushing together with a sense of healthy shame.

There is an ancient proverb that reads, "one man is no man". This, according to Bradshaw (1988) is a basic explanation of our human need for community. Our need for community in turn, points out our need for relationships, and this in turn, our need for social life. It comes down to the fact that none of us would survive if it was not for someone else being there for us. Not one of us has so much strength that he or she does not need love, intimacy and dialogue in community, says Bradshaw (1988). Therefore, without the healthy signal of shame, one would be out of touch with one's core dependency needs.

Healthy shame keeps us in our place. It shows us that we are not perfect; that we can and do make mistakes; and that we do need help. It is our

permission to be human, and helps us to create and develop realistic goals in life (Bradshaw, 1988).

Healthy shame is a source of creativity and learning, and Bradshaw (1988) notes that one of the major blocks of our creativity is the feeling that one is right. When one experiences the feeling of being right, one stops seeking new information. When one is certain, one fails to be curious, as wonder and curiosity is the core of all learning. Therefore healthy shame acts as a signal to us that we do not believe we know it all. Healthy shame activates us, making us look for new information and new things.

Other authors who also describe the useful functions of shame, are Potter-Efron and Potter-Efron (1999). Firstly, shame acts as a reminder of what one is and what one needs to feel good about oneself. By experiencing shame, one is steered in the direction of what to do to feel pride and integrity. Schneider (1977, in Potter-Efron & Potter-Efron, 1999) notes that shame protects one's most inner, private and vulnerable self from "overexposure" (p15). The authors maintain that without shame, nothing would be considered as sacred or special. Secondly, according to these authors, shame prevents or protects us against inappropriate or excessive drives, wants and needs. Lastly, shame plays a role in revealing the self to the self. It helps one realise who one is and who not.

2.2.6 Toxic Shame

If shame continues to be disguised and denied, it hinders the parties from repairing the bonds between them. In her groundbreaking study in 1971, Lewis found shame to be widespread but almost never referred to in psychotherapy sessions. It was rather ignored, disguised, or denied (Pepinsky, 2000). Goffman (1967, in Scheff & Retzinger, 2000) argued that shame, whether it was actual or anticipated, was a frightful attendant in all human contact, not just in psychotherapy.

The manner in which a person experiences shame changes according to how the person embodies that experience, often in relation to the attempts the person makes to avoid shame (Scheff & Retzinger, 2000).

According to Bradshaw (1988), shame becomes toxic when one fails to have a good relationship with oneself. A person with an antagonistic relationship with himself is shamed toxically. This is the basis, although debatable, for both neurosis and character disordered syndromes of behaviour.

How does healthy shame become toxic shame? Bradshaw maintains that toxic shame is the basic experience of a person who feels permanently flawed and defective as a human being. Shame, thus, becomes a state of

being, a core identity, and no longer signals our limits. A person who is shame-based, will guard against exposing his or her inner self to others.

Scheff and Retzinger (1997) suggest that shame is a remarkably uncontrolled emotion, which can lead to prolonged feedback loops of shame. By this is meant that one can feel ashamed of being ashamed, again and again around the loop, ending in withdrawal or depression. Being angry that one is ashamed is another loop, and ashamed that one is angry, and so on around the loop. These authors also note that shame-anger loops can occur within a person as well as between persons. They further believe that dudgeon (anger or resentment) can be infectious, ending in mutual and counter-dudgeon. Bradshaw (1988) also mentions that one can be ashamed of being ashamed, however, one will more easily admit to feeling guilty, fearful, or hurt, than shamed, because shame is an isolating feeling. Individual as well as social emotional loops can continue indefinitely (Scheff & Retzinger, 1997). When emotions such as embarrassment, indignation, resentment and hatred are persistent and relentlessly continuing, they are pathological.

Shame becomes hidden when destructive patterns of communication develop (Scheff & Retzinger, 2000). An example of a destructive pattern of communication is giving someone the silent treatment after a fight. Such destructive patterns can shame the person either intentionally or unintentionally. Direct but respectful communication is needed to avoid

shame. The authors maintain that this is not as easy as it sounds, as it is easier to be either direct or respectful. To identify interaction between respect and directness is a key condition of interpersonal communication. When one withholds information about one's feelings, thoughts and desires, subtle shaming takes place (Scheff & Retzinger, 2000). As later described in chapter three, communication is an essential part of social bonds. Scheff and Retzinger (2001) maintain that direct communication results in a secure bond and inadequate communication will inevitably lead to an insecure bond.

When an emotion is not expressed outwardly, it has the potential to become internalised (Bradshaw, 1988). When this happens the emotion ceases to function in the way of an emotion and turns into a characterological style. Bradshaw names three processes that involve internalisation of shame, namely: 1) Identification with unreliable and shame-based models; 2) The trauma of abandonment, and the binding of feelings, needs and drives with shame; and 3) The interconnection of memory imprints which form collages of shame. This internalisation is not an instant process and happens over a period of time. When all three of the above processes are consistently reinforced, shame becomes internalised.

The first process, the identification with unreliable and shame-based models, involves the lack of achieving security in the sense of self. If one belongs to something larger than oneself, one develops a sense of security and

protection of the larger reality. This is one of our basic needs. Bradshaw (1988) uses the example of a sport fan and describes that powerful emotions are experienced when a fan's team either wins or loses. One feels like a part of the team and when the team wins, one wins and when it loses, one loses. Consequently when a child has shame-based parents, it identifies with them, creating the first step in the child internalising shame.

The second process, abandonment, is about the legacy of broken mutuality. When one is abandoned, shame is internalised. Abandonment describes exactly how one feels when one loses one's original or genuine self and stops to exist psychologically. Without reflective mirroring from one's primary caretakers during the first years of life, a child cannot know who he or she is. Shame-based parents fail to mirror and affirm their children's emotions, "our identity demands a significant other whose eyes see us pretty much as we see ourselves" (Bradshaw, 1988, p12). Also included in abandonment is neglect of developmental dependency needs, abuse of any kind and enmeshment into the covert and overt needs of the parents or the family system needs.

The last process mentioned by Bradshaw (1988) is the interconnection of memory imprints that form collages of shame. Explaining this, he says that when experiences of shame occur, it is sometimes defended against. When this happens, the images of such experiences are recorded in one's memory

bank. As there is not sufficient time or support to grieve the pain of the broken mutuality, the emotions become repressed and the grief stays unresolved. As more shame experiences take place, a chain of imprints in the form of auditory and visual images are created; a collage of shaming memories, as Bradshaw (1988) names it.

As time goes on, less is needed to trigger these collages of shame memories. A word or a scene can set it off. In some situations, external stimulus may not even be necessary as just going back to an old memory can trigger an immensely painful experience. When shame becomes frozen and embedded into the core of a person's identity, it is deeply internalised and each new experience turns shame into an ever growing snowball rolling down a hill (Bradshaw, 1988).

Toxic shame can also be experienced as self-alienation and isolation, notes Bradshaw (1988). This is the experience of one not being fully oneself. In other words, some parts of one's being have become estranged to oneself. It is one's feelings, needs and desires that are bound by toxic shame. Eventually shame becomes totally internalised, and nothing about oneself feels all right. Feelings of inferiority and failure prevail. The self becomes severed and these parts are projected within relationships with others. They often become the basis of hatred and prejudice. Sometimes one has the sense of never really belonging, and this can turn into sadness at losing one's

authentic self, which is probably the deepest and most devastating aspect of toxic shame - being rejected by the self (Bradshaw, 1988).

Excessive or repressed shame can lead to what Fable (1999) calls paralysis, “the inability to do or say anything” (p2). This causes in turn that shame intensifies. Another result is that shame diminishes our energy in that it leaves us feeling lesser, fragile, and less useful. Consequently, shamed people build defences to safeguard themselves from feeling utterly overwhelmed all the time. Examples of defences are escape, withdrawal, perfectionism, criticising others, and rage.

A pattern of seeking out secluded, safe places where one can be alone and unseen is a manner of escape. Withdrawal includes physically running away as well as emotional retreating by developing detailed masks, such as smiling or trying to please others, or appearing self-confident and comfortable (Scheff & Retzinger, 2000).

In many cases the shamed person has come to believe that if he or she never makes a mistake, s/he will have nothing to be ashamed of (Scheff & Retzinger, 2000). The authors maintain that this leads to the person becoming a perfectionist, not allowing him or herself to fall short in anything. People who are forever criticising other people, attempt to pass their shame on. The person believes that he or she is better than others, which arises

from a need to avoid feeling inferior. Another way to guard against humiliation is to attack the perceived attacker. A shame-rage combination often leads to verbal or physical abuse.

2.2.7 Sources of Toxic Shame

Where does shame come from? Fable (1999) suggests many sources for shame. These include our genetic and biochemical make-up, chronic depression, our culture, our family of origin, and our current relationships that are shaming in nature, and self-shaming thoughts and behaviours. Bradshaw (1988), states that shame becomes toxic when it is transformed into an identity. Thus, shame takes over one's identity; one becomes shame.

Schultz (1996) refers to shame as an affect. He advises one to think of affect as more essential than feeling. "[A]ffect is a physiological event occurring involuntarily in the body as a response to stimulus. It results from activity in the limbic system of the brain and not the cerebral cortex, and it is mediated by the autonomic nervous system, not the voluntary motor pathways" (p2). Thus, affect originates in the unconscious. It comes uninvited, and can be present whether we know it or not. On the other hand, feeling requires self-consciousness and some reflection.

Shame is one of the primary affects. Schultz (1996) explains that the device for the experience of shame is carried in the genes, and built into the biological organism. It is omnipresent, at least among human beings. Just as other primary affects, shame has its distinctive physical expression. Some of these, according to Schultz (1996), are a sagging chest, a crumpled body with a dropped head, an averted gaze mostly downward and dilated blood vessels in the face all going together with a temporary mental disorganisation (Schultz, 1996).

The sources of toxic shame are fundamentally in significant relationships (Bradshaw, 1998). Toxic shame is also multigenerational as it is passed on from one generation to the next. The family is the first source of identity for a person, and this identity is obtained from the mirroring eyes of our primary caregivers. What Bradshaw (1988) is trying to say here, is that our future relies largely on the health of our primary caregivers, and the nature of the interactions with these caregivers. Thus, if our parents or caregivers are shame-based, the chances are good for us, as their children, to become shame-based individuals. This eventually leads to a shame-based family. The transference of toxic shame takes place on a conscious or unconscious level by means of shaming rules within the dysfunctional family.

Bradshaw (1988) names some of these dysfunctional family rules. Control is the first rule, and requires one to be in control of all feeling, behaviours and

interactions at all times. When one has control, one can defend against shame.

Second in line is perfectionism. There is always an imposed measurement involved in perfectionism, and everything that has to be done, must be done the right way. “The fear and avoidance of the negative is the organizing principle of life” (Bradshaw, 1988, p40).

Blame is the next rule, and is to be used whenever things do not go the way they were planned. Blame either yourself or someone else. When control has broken down, blame is used as a defence against shame to keep the dysfunctional system going.

Next is what Bradshaw (1988) calls “Denial Of The Five Freedoms” (p40). These five freedoms are essential for personal functionality. Each of the five freedoms involves a basic human power, namely the power to comprehend; to think and explain; to feel; to want and choose; and to conceive. Because of the maintenance of the perfectionism rule, it becomes almost impossible for the shame-based family to express these powers to the fullest. The perfectionist rule says that one should not feel, want and choose, think and explain, or understand the way one does, but the way the ideal stipulates.

The 'Denial of the Five Freedoms' rule is followed by the "No-Talk" rule, which forbids the full assertion of any feeling, need or want. It is characteristic of the shame-based family to not want to talk about their feelings, wants or needs. Thus, no one speaks of his or her loneliness and fractured sense of self.

"Don't Make Mistakes" (Bradshaw, 1988, p40) is the next rule and revolves around the notion that making a mistake amounts to being flawed. It reveals the vulnerable self. Consequently, if the vulnerable self is disclosed, one is open to self-scrutiny and scrutiny of others, and this is not admitted. One's mistakes should be hidden, but if someone else makes a mistake, shame him.

The last rule is unreliability. If you trust someone, they will only disappoint you. Therefore, do not count on reliability in relationships. "These rules are not written on the refrigerator door. However, they are the operative principles that govern shame-based families in their interpersonal relationships. They continue the cycle of shame for generations" (Bradshaw, 1988, p40).

People who experience shame often find themselves in uncomfortable situations, wanting to flee but incapable of making themselves do so (Fable, 1999). Shamed people have a fear that if others were to get to know them, they will find them disgusting or hate them. Therefore they also fear to be

caught making a mistake of any kind. These people are constantly ready to point out others' mistakes and weaknesses, and are often enraged with themselves or others over the least perceived insult to themselves or to their dignity.

Bradshaw (1988) calls toxic shame 'spiritual bankruptcy'. He says it functions autonomously, thus it can be activated internally without any present stimulus. One can conceive a situation and feel deep shame. One can be alone and trigger a shaming spiral by way of internal self-talk. More experiences of shame means being more ashamed.

Potter-Efron and Potter-Efron (1999) also mention sources of shame. Their explanation seem to extend that of Bradshaw in that it includes societal or external sources. They name five sources of shame, where the family of origin is the first source. This is similar to the dysfunctional rules named by Bradshaw previously. The second of these are 'Adult Shaming Relationships'. Marriage, work, and friendships are all examples in which someone may internalise messages of shame. The authors note that a child may grow up happy without excessive shame only to run into situations where they experience an overwhelming amount of shame. An example given by the authors is that of a boss who may believe that shaming and intimidation are the best ways to get the job done.

Thirdly, 'Social (Group) Shame' consists of irrational prejudices and biases. Potter-Efron and Potter-Efron (1999) gives the example of not being "born a heterosexual, white, male Protestant from a comfortably wealthy and intact family of European origin" (p10) leading to fair amounts of shaming. The authors call this social shame where a part of a society is looked down upon so the rest can feel superior.

'Depression' is the fourth source and entails that a person may be more prone to feeling shame together with feelings of worthlessness, hopelessness, and a deep sense of being a failure.

Lastly 'Self-shaming' refers to being one's own worst enemy. Calling oneself terrible names, comparing oneself to others and neglecting oneself because one feels that one does not 'deserve' to be treated well, are all manners in which self-shaming takes place. The authors maintain that the only way to heal from self-shaming is to recognise the shaming that occurs and turn it into self-caring.

2.3 Violence

Lauer (1995) names two distinct forms of violence, namely that of violence that occurs between two or more individuals, called interpersonal violence, and violence of groups in society, called intergroup violence. Murder, assault,

threats and psychological abuse are all forms of violence. However, in any given society, most of the time violent incidents are not reported and therefore no true statistics exists.

The origins of violence as a social dilemma are embedded within the social institutions and history of a society (Scarpitti & Andersen, 1992, as cited in UNDP, 2000). The authors maintain that there is no simple clarification for the types and degrees of violence that exist in a society and neither a simple answer. An author who supports this view is LeBeau (1997), who notes that it would involve intricate social policies and social change to reach some sort of resolution for violence.

In order to explain violence, one needs to take into account socio-cultural factors that contribute to the manifestation of violence in any given society (Lauer, 1995). Some factors that contribute to violence in a society include norms and values, frustrations, stress, emotional immaturity, individual and social attitudes, significant stratification and economic insecurity.

Scheff and Retzinger (2001) argue that shame and alienation are involved in violent conflict. These authors maintain that shame should be treated as the “individual aspect of social disconnection, and alienation as its social aspect” (pxix). The authors’ argument is elaborated on in the next chapter discussing the social bond.

Lauer (1995) argues that all societies have some level of socially accepted violence, for example that of parents who regularly reprimand their children physically. This results in the children learning that violence is used to achieve results or solve problems. Parallel to this notion is when governments apply violence to obtain social control (Lauer, 1995). In this case the individuals learn to use violence to obtain personal control.

According to LeBeau (1997), physical violence starts early in a relationship and escalates with each episode. Episodes can include pushing and shoving as trivial forms of physical violence, identified as the initial stage in research. This is also a stage where the perpetrator tests the grounds to see what the victim's response would be. In most cases the abuse is unexpected and the victim believes his or her partner when he or she promises that it will not happen again. Other types of physical violence includes arm or ear twisting, attempted murder, choking, kicking, slapping, beating and threatening with a dangerous object.

2.3.1 Statistics on Violence in Namibia

In general Namibians are seen as a peace-loving nation (UNDP, 2000). However, there seems to be a social breakdown in the family system, relationships and in norms and values in all social groups, cultures and areas.

This breakdown is seen most clearly in daily newspapers where reports of women and children being abused are almost a daily occurrence. Yet, these cases are only a small amount of the actual violence. The reason being that most of the time the majority of the perpetrators are either family members or well known to the family, leaving victims too afraid to bring shame over their families. The UNDP (2000) reports that more than 90% of the victims are women.

According to LeBeau (1997) there are a wide variety of cultures with a wide variety of beliefs about violence and acceptable cultural practices in Namibia. Most children in Namibia are taught to hit someone back if he or she hits you, whereas older children regularly use violence to control and punish younger children. Children become socialised to this norm, the norm of physical punishment.

Since independence, Namibia has experienced rapid social and political changes and therefore a better standard of living has been expected ever since (UNDP, 2000). This, unfortunately, never surfaced. One of the reasons is because of inadequate investments in the education and skills training sectors of the previous administration. As a result, Namibia is faced with a large number of unskilled and unemployed people. Consequently a nation was created full of frustrations and social aggression being expressed in many cases through violence against women, children or close relatives.

According to LeBeau (1997), political factors in Namibia were used in the past as a manner to control the nation and impose racial separation. As Namibia does not have a reconciliation process, such as South Africa, little information regarding violence of the liberation struggle has come to the foreground. At first plans were drawn up for a rehabilitation process of Namibian fighters after independence but never realised, leaving many victims and perpetrators with fear, anger and even hatred.

The strong drinking culture which can be traced back to the last century in Namibia plays an important role in the incidence of violence even today (UNDP, 2000). In many societies in the world drinking and violence goes hand in hand especially when it comes to domestic violence and murders. Sadly, many of the victims and perpetrators are family members or friends.

Available statistics on violent offences recorded by police show a very high violence incidence rate for a nation of only 1.8 million (UNDP, 2000). The year 1995 was one of the worst in Namibia, counting 16,784 reports of violence. Significant is that assault to cause grievous bodily harm (GBH) rates highest from 1992 to 1998 of all forms of violent offences. Common assault rates second highest.

Figure 2.2: Assault Recorded by Police from 1992 to 1998

Year	1992	1993	1994	1995	1996	1997	1998
Common Assault	5 531	5 468	1 748	7 069	6 383	6 910	6 518
Assault (GBH)	6 479	6 618	2 028	7 873	8 208	8 435	7 917

Source: Namibian Police in UNDP (2000)

A dramatic difference between recordings in 1994 and the other years is clearly noted. Some reasons given for such a notable difference is that much violence went underreported as well as that 1994 was a time in which violence, especially domestic violence, was much less openly talked about (UNDP, 2000). Another aspect that is also taken into account regarding this difference is “that there may be a serious short fall in documentation of charges in 1994” (UNDP, 2000, p77).

These statistics confirm that regardless of gender, violence was and is a grave concern in Namibia and drastic steps need to be taken to decrease the rates (UNDP, 2000). Reports to private hospitals and medical practitioners are not included in these statistics which only raises even more concern.

Other sources of information are prison reports although they only convey data about the convicted prisoners (UNDP, 2000). The statistics are not organised under the same headings as that of the police which makes it difficult to draw up correlations of the figures. However, the UNDP (2000)

notes that a safe inference that can be made from the prison data is that only a minute part of reported cases result in convictions. The UNDP (2000) states that this calls for serious research to be done in order to make conclusive deductions.

When analysing the figures it should be clearly understood that most domestic violence cases are classified under the heading of assault and assault with the intention to cause grievous bodily harm (GBH) (UNDP, 2000). Significant is that more than 90% of the perpetrators convicted, were men between the ages of 21 and 39 years.

The UNDP (2000) report shows that in Namibia, most physical abuse is done by men against women, occurring among the rich and poor, in all cultural groups and in all areas of the country and across all levels of education. Physical abuse ranges from hitting, burning, biting, punching to rape and murder and is often accompanied by psychological, emotional and mental abuse.

In a study in the south of Namibia, it was found that more than one-third of female victims fail to report the violence or seek help out of fear of the man's reaction (Rose-Junius, Tjapepua & De Witt, 1998). Consequently, the violence never ends because most women are afraid and ashamed. They experience guilt and believe that the assault was their own fault. Or they fear

that they might be rejected by the community and do not want to bring disgrace over the family name.

A study by Becker and Claassen (1996) showed that the majority of male and female interviewees in Mariental and Windhoek felt that it was socially acceptable to be physically abused by a partner given certain circumstances. Generally, a husband is seen as being at fault when he beats his partner out of selfishness or when he is being highly inconsiderate, for example when he comes home drunk. Yet, a number of the interviewees agreed that a husband does have the right and even the duty to discipline an irresponsible, negligent wife. If a wife should question the husband's privileges as the head of the house without good reasons, beating her would be considered acceptable.

Few differences are noted in the attitudes in different regions of Namibia (UNDP, 2000). The majority of men seem to assume the right to beat their wives or partners as a disciplinary measure and it would appear that it is part of Namibian men seeing themselves as being masculine. Women seem to accept such behaviour as long as it is not 'too extreme'.

2.3.2 Sources of Violence

According to Mulholland (2000) violence is a common feature of most societies. It is statistically shown to be a mainly male characteristic, especially of young males.

Among the character disorders of shame mentioned by Bradshaw (1988), such as Narcissistic Personality Disorder and Paranoid Personality, is Offender Behaviour.

Offender behaviour or criminal behaviour is described by Miller (1995, in Bradshaw, 1988) as 'acting out' behaviour or 're-enactment'. By this is meant that the criminal offender's crime(s) are in many ways a mirroring of some offence that was done to the criminal in the past. An example of this given by Bradshaw is of a rapist who was sexually abused as a child. Thus, children who were once victims may re-enact the crime over and over again. They could also identify with their offender and re-enact the offence on helpless victims. This re-enactment is called 'repetition compulsion', the urge to repeat (Bradshaw, 1988).

Kaufman (1989) maintains that people who engage in antisocial behaviour, behave as if they are without shame. This syndrome indicates a "misfiring of conscience, but equating that with an absence of shame is a mistake"

(Kaufman, 1989, p152). The author continues to explain that developmentally, people with antisocial behaviour have experienced failures and shame in their early significant relationships. These handicaps caused, in turn, a failure to attach or identify with their primary caregivers. Thus, they also failed to develop the capacity to empathise, which grows directly out of identification. They see other people merely as objects to manipulate as their ability to identify has been blocked or impaired.

Kaufman (1989) argues, however, that individuals with Antisocial Personality Disorder do have shame. They do experience shame, but only in the presence of other people. In childhood, internalisation is the process that causes the child to be ashamed of norm violation, whether or not the parents or caregivers are aware of it. Thus, the ability to react with shame has not been internalised. The shame response remains externalised, which makes the child experience shame *only* when the parents or caregivers have discovered the norm violation (Kaufman, 1989).

With the Antisocial Personality Disorder individual, Kaufman (1989) explains that the shame response has not become internalised as result of the prior failure to attach to and identify with the parents or caregivers. According to the author, "identification is a necessary developmental precursor that causes one to *want* to care about the feelings of others" (Kaufman, 1989, p152).

A theory that Mulholland (2000) mentions is called the frustrated-drive theory. It basically explains that violence arises as a result of frustration of not getting one's own way. Thus, when a person is prevented from obtaining a goal, it leads to frustration and most likely violence. This frustration does not always lead to violence if there are other inhibiting forces, such as alertness to the anticipated outcome of violence or aggression. Aggression, on the other hand, may also be displaced onto other objects than the agent that caused the frustration, such as kicking a cat, when one is actually angry with the cat's owner.

However, according to Mulholland (2000), this theory does not seem to explain sufficiently all aspects involved in aggression or violence. It must be kept in mind that frustration leads to different responses in different people. Some people may respond sadly and become hopeless, while others may react positively, making an effort to overcome whatever obstacles may be in their way. Furthermore, this theory does not explain all types of violence, such as sadistic acts or violence in defence of a reputation.

The author continues to argue that if aggression or violent acts are not simply results of frustration due to external stimuli, one perhaps needs to look at the physical body, especially those of men. He maintains that there have been many disputes over the part that male hormones play in aggression. It is argued that testosterone predisposes males to aggression. Studies have

shown (Mulholland, 2000) that males produce 25 times more testosterone per day than females, and that male testosterone levels peak in the late teens and stay high until the mid-20s. This happens to be the precise time in which male aggressiveness and violence is most common. However, testosterone does not lead to violence in itself, and not all men are naturally violent.

Furthermore, violence is such a complex social phenomenon and can best be understood as the result of an intricate web of interacting factors. Some of the factors that could explain why and how men behave violently are personality, the immediate social group, the behaviour of the victim, alcohol and drugs, personal surroundings, physiological changes, mental abnormality, and social circumstances.

While some individuals over-control their emotions, others under-control them (Mulholland, 2000). These types of personality are more prone to violence than those who find a compromise between over-control and under-control. The type that under-controls, is more likely to be regularly aggressive, and the over-controllers are more likely to be seldom but extremely aggressive.

An important factor in violence is the influence of the immediate social group. The individual's behaviour in the group may be attributed more to the consequence of the group pressure than to his own personality.

A person's self-control can be altered as a result of an imbalance in the body's chemistry, perhaps brought on by fatigue, hunger or a lack of sleep (Mulholland, 2000).

Another reason for violence can be associated with people suffering from mental abnormalities. It should be noted however, according to Mulholland (2000), that it is neither the case with most violent incidents nor an issue for the majority of men who are predisposed to violence. One example could be that of a man who suffers from depression and is unable or unwilling to admit that he is depressed, becoming irritated or violent towards his family.

A last source of violence mentioned by Mulholland (2000), are social circumstances. He maintains that much of today's violence can be associated with social deprivation. He refers to many offenders that are either unemployed or employed in low-status, low-income occupations. Most of them come from regions that are poverty and deprivation stricken. Especially youths who are violent seem to lack a number of features, such as a loving, reliable, supportive adult figure (Mulholland, 2000). Most will also have suffered, as mentioned earlier, some sort of physical or sexual abuse.

Evidence obtained in a study done by Hopper and Song (1996, in Hopper, 1997), showed how socialisation can be an indicator of violence. Their study focused on two issues, namely to investigate a) the occurrence of child abuse

and violence in a sample of male college students, including the percentage of abused males who went on to perpetrate; and b) how the interaction between child abuse and masculine gender socialisation can decrease abused males' capacity for empathy and increase the likelihood of perpetrating violence against others (Hopper, 1997).

Results showed evidence of male gender socialisation, such as childhood abuse, to be a source in the development of interpersonal violence. Emotional constriction is seen as a consequence of male gender socialisation (Hopper, 1997). This constriction combined with early childhood trauma, could lead to deficits in empathy and to interpersonal aggression (Miller & Eisenberg, 1988, in Hopper, 1997).

Gilligan (1996, as cited in Landau, 1996) notes that "murderers have often been horribly abused as children – with abuse so punishing that it threatened to destroy the sense of self... the sense of shame and humiliation [in the most violent criminals] is so intense that it threatens to wipe out their self-esteem and self-respect so totally that they experience the threat of the death of the self" (p1).

He mentions that many of these murderers were victims of attempted murder themselves, often by their own parents. One of the most extreme examples that Gilligan (2000) gives is that of an inmate who had committed a brutal

rape and murder of a young woman. When asked about the scars on his wrists and ankles, the prisoner responded by saying that it was where his mother used to shoot him. Instead of spanking the boy, the mother used to shoot him when he misbehaved.

Gilligan (1996, as cited in Landau, 1996) believes that such abusive acts produce feelings of shame that become unbearable to the extent that it can lead to a kind of death of the self. Most of the perpetrators feel that they have 'died', and that their personalities have died – almost feeling like zombies or robots (Gilligan, 1996, as cited in Landau, 1996). He continues to say that most of them reported that they were emotionally dead or numb. Thus, these perpetrators lacked the capacity to feel guilt or remorse.

Most of the abovementioned explanations of violence, except that of Gilligan (1996, in Landau, 1996) and Gilligan (2000), ignore the possibility that violent acts may have been directly the result of shame.

Because shame is always lurking and waiting to come to the surface, understanding the extremity of the shame experience is very important for repairing the impaired bond between the offender and others (Scheff & Retzinger, 1997). The offender who has been publicly condemned for his wrongdoing, is likely to be ashamed. The supporters of the offender may be ashamed because of their relationship to him. The victim is likely to be

ashamed in the sense of feeling betrayed, violated, and/or impotent, as well as the victim's supporters, in that they identify with her and share this kind of shame. The public at large will likely shame or humiliate the offender, demanding not only justice but also, in some cases, revenge (Scheff & Retzinger, 1997).

2.3.3 The Reintegration and Restoration of Shame: A Desire to Promote Justice

Pepinsky (2000) describes the desire of promoting justice that restores and reintegrates shame to find ways to weave people that one identifies as victims and offenders into communities, rather than keeping them isolated and separated from others. The author maintains that nothing is as important for the understanding of what builds a community, than trust. Furthermore, he maintains that "nothing is more fundamental to trust than honesty and open sharing of information and feelings...[T]he concealment that produces and is perpetuated by shame is by definition failure of honesty and openness, and therefore, by definition as well, the root destruction of community" (p1).

Katz (1997) argues that what makes the self-revelatory character of shame strange, is that the experience lingers between disclosure and disguise. What is revealed is something that one does not yet and maybe cannot completely cope with. Full revelation is guaranteed to defeat shame. When it

seems impossible to escape enduring exposure, for example, after one is caught shoplifting and open to public accusation, shame seems unbearable, but just for that reason, it ultimately diminishes. The author also states that where criminal acts lead to shame, the public welcome punishment, defining what is needed for restoring the offender to the moral community.

Apart from Pepinsky (2000) and Katz (1997), authors such as Bradshaw (1988), Scheff and Retzinger (1997) and Braithwaite (2000), also support a justice system where shame is reintegrated and restored. Bradshaw (1988) proposes methods of externalising internalised shame. These methods involve the offender coming out of hiding by social contact. This means honest sharing of feelings with important others; being involved in 'legitimising' the abandonment trauma of the offender; teaching the offender to externalise old memories that might be unconscious; and being aware of what it is that mostly trigger shame spirals.

Braithwaite (2000) explains the process of restorative justice. For the author restorative justice involves "restoring victims, restoring offenders and restoring communities" (p1). Other losses that might also require restoration include property loss, security, injury, empowerment, dignity and harmony grounded in the assurance that justice has been served.

Braithwaite (2000) goes on to define restorative justice in saying that it consists, in practice, of rituals of repentance. The author's argument is based on the theoretical framework of Scheff and Retzinger's (1991, in Scheff, 1997) shame-rage spirals. However, the first author to explore shame-rage spirals, was Katz (1988, in Scheff & Retzinger, 2000). For this author, violence is the ever-present awareness of humiliation. Rage can simultaneously recall and transform the humiliating experience, according to the author. He explains this point more clearly by noting that "righteous indignation is the stepping stone from humiliation to rage" (p1). In other words, the author is saying - with the assumption that humiliation is equal to shame and violence equal to rage - that violence creates shame and to get rid of the experience of shame, violence is used and inevitably shame is re-experienced. This forms the destructive shame-rage spiral.

The alternative that Braithwaite (2000) proposes to the shame-rage spirals is the repentance ritual. This, according to the author, should form "the stepping stone from shame to restoration of peace, dignity and damaged social bonds" (p2). Scheff and Retzinger (1997) maintain that unacknowledged shame is frequent among people as well as the inability to deal with chronic shame. With regard to sex offenders, these authors name some traits shared among them.

Firstly, sex offenders take offence or feel insulted and humiliated rather quickly. Secondly, they are not able to free themselves from continuous loops of shame. Thirdly, for offenders the loops take the form of being ashamed of being angry which leads to constant humiliated fury, named to be the emotional base for contempt and hatred. (Scheff & Retzinger, 1997). Lastly, these offenders have no secure social bond to turn to and share their unexpressed feelings. The same authors argue that this combination of continuous shame–anger loops and non-existing bonds, produces “either madness, suicide-homicide, or sexual assault” (p2).

Scheff and Retzinger (1997) propose a treatment procedure to resolve shame-rage spirals. The first step mentioned is to uncover the hidden shame. This they base on the technique used by Lewis (1971; 1977; 1987, in Scheff and Retzinger, 1997), to uncover shame in psychotherapy. The technique involves acknowledging the hostility and tracing it back to earlier events. In this case, the offender would realise that he experienced feelings of rejection and inadequacy earlier in life, which were expressed as hostility. As in Lewis’s technique, the offender would then be helped to explore the feeling of shame verbally, progressing to the exposure and release of shame (Scheff & Retzinger, 1997).

The second step in the treatment procedure requires patience from offender as well as therapist, as the offender must learn the skill of tracing back anger to shame, leading to the offender experiencing shame through discussion. This requires extensive teamwork between offender and therapist.

The last part in the procedure is that of communication skills. Here the offender learns to communicate with others, especially those who he offended against. One can assume that this would not necessarily include the victim of an offender, but can for example mean that a male sex offender learns to communicate with women in general. In doing so offenders learn to acknowledge and release the shame, when they re-experience feelings of shame, inadequacy and/or rejection in relationships with women. Braithwaite (2000) notes that Scheff and Retzinger's analysis is applicable to shame-rage spirals of the least and worst sort.

Other repentance rituals discussed by Braithwaite (2000), is that of conferences. These include family group conferences, community accountability conferences, and diversionary conferences. The author explains that these rituals are based on the principal philosophy from the New Zealand Maori justice traditions. In the 1980's the Maori community were deeply distressed, as they believed that the Western justice system caused the Maori extended family to fall apart. For them, social control was first and foremost the responsibility of the extended family and not of the state. They

also viewed the Western justice as barbaric, as it left the accused without support. Maori tradition requires that the family of the offender share the shame of allegation made by victims. The offender should experience the shame of letting his family down, as it can be resolved immediately through expressions of forgiveness by the family, accompanied by gestures of repentance by the offender. The asset this type of shame has is that it is easier to be overcome than the Western sense of shame that can wear down those who internalise it. In the Maori way the family bonds are restored.

The coordination of conferences can be handled by the police, state welfare agencies, or institutions of civil society such as churches or schools, as already done in some repentance programs (Braithwaite, 2000). A practical guideline is given by the author to show how such a ritual can proceed.

The facilitator of the conference invites the offender and his/her family, as well as people whom the offender says care about him/her and his/her family. This forms the structure for reintegration at the conference. The facilitator also invites the victim and his/her family and friends. This forms the structure for shaming at the conference.

By simply telling the consequences of the offence for the victim and his/her family, the shaming process occurs naturally. Many times offenders are surprised to hear the consequences of their actions. It is important not to

force the production of shaming, as it occurs naturally through dialogue. This also prevents disrespectful shaming that could be reduced to stigmatisation.

Braithwaite (2000) explains that victims who are modest about their suffering, but whose modesty is revealed by their supporters, are actually more likely to provoke shame. On the opposite side, mothers of offenders who are modest about the worries the offence has caused are more influential than complaining mothers, as long as her supporter points out the modesty.

One should, however, keep in mind that many violent offenders are inclined to shamelessness (Braithwaite, 2000). The offender has learnt how to guard and protect himself from shame. Sometimes, however, shameful consequences told by the victim can touch the mother of the offender to such an extent that the offender experiences the shame of letting her down, and that has the most power (Braithwaite, 2000).

3. THE SOCIAL BOND THEORY

Introduction

The theory I chose for this study is the Social Bond Theory, developed by Thomas Scheff (1997).

This theory is based on the assumption that when social bonds between two individuals or an individual and group are broken or threatened it may lead to, among others, shame-based syndromes (Scheff, 1997). When these bonds continue to be broken or threatened, the continuing cycles of the shame experience could escalate and intensify, having catastrophic results such as violence. Scheff and Retzinger (2001) state that this approach is made up of several approaches, bringing the sociological, psychological, historical and the political together. The Social Bond Theory covers the main objective of what this study is about – the relationship between shame and violence.

Scheff (1997) argues that social relationships are essential for all of the social sciences. However, according to the author, these have never been explained in a manner that summarise their larger importance, and yet relationships between persons are primary and basic. To understand the basis of social relationships, Brown and Keller (1979) note that the first human need, apart from safety and survival, is that of relationship. According

to these authors the urge to belong or to relate will always be at “the centre of the human universe” (p1). When the need to bond is met, humans grow and prosper, when the need is not met, humans become lonely and alienated (Brown & Keller, 1979). These authors also note that there are two aspects involved in the communication between people, namely relationship and information, where the relationship determines the information, forming bonding and personal identity.

The Social Bond Theory evolved out of earlier theories of social relationships (Bowen, 1978) and attachment of infants to their caretakers (Bowlby, 1969). Out of these concepts Scheff (1997) concentrates on how social bonds between caretakers and infants are established and what form social relationships take. Bi-modal alienation is considered to be the most common form of social relationships according to Scheff (1997). This happens when members of a group are over-involved with each other and so distantiated from members outside the group that they are unable to relate to them.

Scheff (1997) further defines social relationships based on the three-part typology of Elias’ (1987, in Scheff, 1997) I-We balance, namely independence, interdependence and dependence. By using these concepts, it is possible to determine whether social bonds are alienated, engulfed or solidarity.

The three states of the bonds can be determined by focussing on the use of pronouns 'I', 'you', 'we' and 'it' in discourse as suggested by Elias (1987, in Scheff, 1997). The level of emphasis and placements of these pronouns are indicative of the state of the bonds.

Lewis (1971) is another author from whom Scheff draws his theory. Lewis' study on low-visibility shame contributed to the Social Bond Theory in that results showed repetitive patterns of shame that went undetected by the patients as well as the therapist. These were largely hidden and provoked hostility in the patients towards the therapist. Other studies done by Lewis (1971) also showed that men were more likely to hide their shame than women. Scheff (1997) notes that when shame stays hidden and unacknowledged, men mostly become aggressive rather than to experience the shame.

The Social Bond Theory proposes that personality, basic behaviours, and attitudes develop from the nature of relationships with others (Scheff, 1997). It also suggests that the quality of children's social bonds will determine the extent to which children become effective and responsible adults. Thus, attunement, mutual identification and understanding are involved in bonds and threats to the bond identified by bonds that are too loose or too tight (Scheff, 1997).

Self-esteem is directly linked to the states of the social bond as a person who is feeling justified pride in him or herself indicates healthy social bonds, whereas unhealthy social bonds are more common among those who feel shame (Scheff, 1997). Thus, a high self-esteem equals a healthy bond and a low self-esteem equals a broken bond. The longer feelings of low self-esteem and consequently shame are suppressed, the more shamed a person becomes (Scheff, 1997).

Apart from self-esteem, communication tactics is also named to be essential in indicating whether individuals have a secure or insecure social bond. Scheff and Retzinger (2001) elaborate on open and direct communication and the dangers indirect communication and secrecy holds in relationships.

Scheff and Retzinger (1997) describe how the idea of the social bond can help clarify how high levels of conflict arise and continue to intensify. The authors maintain that emotions associated with broken or threatened bonds take on a central role in that they inform both the self and other of the state of the bond at any given time. However, as shame becomes internalised as a result of weak or broken bonds it becomes unconscious and identifying shame becomes problematic. Retzinger (1991; 1995, in Scheff, 1997), developed a method to indicate shame and anger that may be hidden by identifying verbal as well as non-verbal cues of shame and anger (Appendix A).

3.1 Developing the Social Bond Theory

Scheff's (1997) Social Bond Theory is largely based on several earlier theories and approaches. The term 'the social bond' was taken from Bowlby (1969), whose work centred on the life-threatening effects of insecure attachments of infants to their caretakers. According to Scheff (1997), infant studies have shown that human infants have a strong, genetically programmed capacity for social interaction and attachment. For example, in the first year, they have the capability to take part in a game of taking turns at looking and looking away and smiling at the caretaker; through this game mutual delight and love is formed between parent and child (Scheff, 1997). This love, a secure bond, can only develop if the parent of the child continues to play the game, notes the author. Brown and Keller (1979) note that any relationship, whether formal or informal, involves feelings of intensity; some kind of authority arrangement; and most importantly the self image of those involved developed by interaction with each other.

Continuing in the direction of Bowlby, were Bowen (1978) and other family theorists. Central to the typology of social relationships in many earlier theories is the distinction of insecure relationships by Bowen into two different and opposite types, namely cold and distant relationships, called isolated or 'cut off', and relationships that are too suffocating and close, referred to as 'fusion' or engulfment. Scheff's (1997) theory is also central to these issues,

using the terminology from the family systems theory that distinguishes between secure, isolated and engulfed bonds.

Table 3.1 Bowen's (1978) Distinction of Insecure Relationships

ISOLATED OR "CUT OFF"	Cold and distant relationships.
ENGULFMENT OR "FUSION"	Suffocating and too close.

Sociologists have defined relationships in terms of typical roles, such as the father-daughter relationships (Scheff, 1997). Role-relationships are generally made up of equal rights, duties, and rules that regulate interaction between persons in their respective roles, according to the author. The concept of role-relationships can be helpful in that it determines the kinds of behaviours expected within a given society, but is of limited use when one wants to understand an actual relationship between certain people, as the relationship does not refer to specific behaviour but rather to idealised, abstract expectations (Scheff, 1997). The author further argues that there exist a wide variety of actual occurrences between a father and daughter or therapist and client and if one wants to grasp what really goes on in relationships, the Social Bond Theory helps to prevent the occurrence of stereotypical concepts, such as in role-relationships.

'Bi-modal alienation' (Scheff & Retzinger, 2001; Scheff, 1994, in Scheff, 1997), is seen as the most common form of social relationships in present

times. This means, according to the authors, that a group or single person can be engulfed within and isolated without. Examples given by the authors are sects, cults and academic schools of thought, where this pattern involves engulfment within groups and isolation between them.

The authors explain this more concretely by using the example of a doctor, his or her patient and the concept of 'forgetting'. In the doctor-patient relationship, the patient is not expected to know the role of the doctor, but the doctor is expected to be familiar with the role of the patient, since the doctor has been and will be a patient before and after becoming a doctor. It is thus expected that the doctor will understand patients. However, Scheff (1997) maintains that many doctors tend to 'forget' the patient's experience and consequently do not understand their patients. This is not attributed to a lack of knowledge, but to emotional barriers that doctors erect against the knowledge. Thus, a wall is built between the doctor and the patient. Doctors become engulfed with other doctors and isolated from their patients. These misperceptions cause and exist in bi-modal alienation. Scheff (1997) argues that "[W]ar fever, the lust for conflict, whatever the cost, can occur because members of the public within each nation maintain a false solidarity (engulfment) with their fellow nationals, and fail to identify with the enemy as persons like themselves (isolation)" (p136).

3.2 Elias' I-We Balance

Elias (1987, in Scheff, 1997) developed a three-part typology called social figurations. The first part is independence, where a lack of co-operativeness prevails because of too much social distance; the second part is interdependence, where there is a balance between self and other that allows for effective co-operation; and thirdly there is dependence, where there is a lack of co-operativeness because of too little social distance. Scheff and Retzinger (1997) use all three of these concepts in their theory of social bonds.

Table 3.2 Elias' (1987) Social Figurations

INDEPENDENCE	Lack of co-operativeness because of too much social distance.
INTERDEPENDENCE	A balance between self and other that allows for effective co-operation.
DEPENDENCE	Lack of co-operativeness because of too little social distance.

In order to give the idea of the I-We balance an empirical basis, language can be a pointer of the “state of the social bond between two people, by focusing on the use of pronouns, particularly I, you, we, and it” (Scheff & Retzinger, 1997, p1). The placement of these pronouns within a sentence, and the importance given them, can be used as clues to differentiate the three different states of the bond, namely: 1) solidarity (to be in a close union of

interests); 2) isolation (to be separated from others) and; 3) engulfment (to be overwhelmed).

Elias (1977, in Scheff, 1997) further suggests a manner of connecting levels of integration to the experimental world, explaining that within the concept of the I-We balance, independence should be noted in discourse by emphasis on the 'I'; dependence on the 'We'; and interdependence on a balance between 'I and we'. The state of integration between individuals or between groups may be seen in the grouping of pronouns in their discourse (Elias, 1987, in Scheff, 1997).

Elias' notion of the I-We balance is deduced mainly from the verbal factors of interaction, ignoring the non-verbal. Scheff and Retzinger (2001) and Scheff (1994, as cited in Scheff, 1997) proposed an approach to this balance which is oriented to both verbal and non-verbal components. Nonverbal elements include sounds, facial expression and other bodily gestures that are often just as important as words (Scheff, 1997). Retzinger (1991; 1995, in Scheff, 1997) found in a study of sixteen instances of escalating conflict that even though overt anger was present in four marital quarrels, "cues to unacknowledged shame invariably *preceded* the indications of anger" (p44). Shame usually arises out of manner, and parties involved always have a disrespectful manner which evokes shame (Scheff, 1997). Escalation of such conflict would then rather be caused by unacknowledged shame than by

conflicts of interest. Scheff (1997) concludes that it is hidden shame that leads to insult and revenge, interfering with sensible solutions.

3.3 States of The Social Bond

Scheff and Retzinger (1997) mention that earlier theories of the social bond, included only two states namely solidarity and isolation. The idea of engulfment as another form of alienation is omitted. In family systems theory, engulfment is considered a very important aspect in relationships, and is occasionally called enmeshment or fusion (Scheff & Retzinger, 1997). What happens normally, is that engulfment is confused with solidarity. However, engulfment can be distinguished from solidarity by understanding that in engulfed relationships one or both parties 'inferiorate' their own thoughts and feelings to those of the other, whereas in solidarity each party recognises and balances respect for the other's position with respect for one's own (Scheff & Retzinger, 1997).

When the bond is too loose, the relationship is isolated, meaning that there is mutual misunderstanding or failure to understand, or mutual rejection (Scheff, 1997). Relationships are engulfed where the bond is too tight, meaning that at least one of the parties in the relationship understands and embraces the standpoint of the other at the expense of his or her own beliefs, values or feelings. By rejecting parts of one's self, the other is accepted. In engulfed

families, for example, a child can only be 'good' by blind obedience and conformity, by giving up his or her curiosity, intuition, or feelings. In such a relationship, both the child and the parents are alienated. The child is alienated from the self because he or she gave up important parts of the self out of loyalty to, or fear of, the parents. The parents are also alienated from the child, since they are unaware of the parts of the self that the child has rejected. Because of the lack of relationship talk, frequent punishment and threats of punishment, children seem to be intimidated by their parents (Scheff, 1997).

This view of alienation is similar with, and extends Durkheim's (1905, in Scheff, 1997) theory of social integration, which developed out of a study of the causes of suicide in 1905. He argued that bonds that were too loose or too tight generated suicidal tendencies. Scheff's (1997) theory goes beyond that of Durkheim, in that it includes the microscopic components of this system, as well as the structure of a secure bond, which is only implied by Durkheim. A secure bond involves a balance between the viewpoint of the self and the other, according to the author. A secure bond exists where each party understands and accepts the viewpoint of the other. This acceptance, however, does not involve giving up major parts of one's own opinions. A secure bond in the family thus leads to responsible conduct (Scheff, 1997).

Thus, according to Scheff and Retzinger (2001), destructive conflict can be explained in terms of two interrelated concepts of alienation and shame. They maintain that prolonged conflict or violence happens under two basic circumstances, namely when the parties involved in the conflict “are alienated from each other and are in a state of shame; and two, their state of alienation and their shame go unacknowledged” (pxviii).

Scheff and Retzinger (1997) suggest that careful analysis of the state of social relationships might call for using both the I-We and the pride-shame approaches. The first is simpler, the second more indirect and elaborate, requiring use of a method developed by Retzinger (1991; 1995, in Scheff, 1997) to identify cues to shame (Appendix A). “The limitation to determining the I-We balance is that human beings often use language in a less than straightforward way, disguising their own motives and goals” (p3). Although debatable, the author also states that word choice is mostly voluntary and intentional, and that one can hide one’s motives and goals through verbal expression.

Since shame signals are mostly stereotyped and out of consciousness, the analysis of non-verbal cues can pick up hints about the state of relationships even when they are concealed and symbolic (Scheff & Retzinger, 1997). Modern developments in theory and method supply a manner of detecting low-visibility shame and illustrating its role in behaviour. Gottschalk and

Gleser (1969, in Scheff, 1997) were the first to develop reliable scales for inferring emotion from verbal statements, although much of their focus was on picking up low-visibility anger and anxiety.

In every moment of contact, one's status in relation to the other is continually being signalled. This happens unintentionally and at any given moment, status-relevant verbal and non-verbal signals both indicate and determine the state of the bond. This can be applied to interaction between adults, as well as to contact between adults and children (Scheff, 1997).

3.4 Lewis' Contribution to the Social Bond

Another author, who has contributed to aspects of shame and the social bond, is Lewis (1971). She used the method of Gottschalk and Gleser (1969, in Scheff, 1997), a systematic procedure for coding emotions. The author states that by using this approach Lewis discovered a repetitive pattern of shame and anger being hidden.

Lewis' approach was broader in the sense that her study provided a rationale for inferring low-visibility shame from observable external cues, verbal and non-verbal (Scheff & Retzinger, 2000; 2001). Lewis (1971) found in her study, through transcriptions of several hundred recorded psychotherapy sessions, that neither patient nor therapist was aware of episodes of low-

visibility shame, even though they were present in every session. Lewis (1971) notes that patients showed hostility towards the therapist when unacknowledged shame was cued. The author concludes that the hostility came about because it was not acknowledged by the patients and not interpreted by the therapist.

Other studies done by Lewis (1971; 1977, in Scheff, 1997) were about the difference between whether a person is primarily oriented toward others' viewpoints (field dependence) or one's own (field independence). The results of the studies showed that women tend toward field dependence or engulfment, whereas men more toward field independence or isolation. The studies also showed a connection between field dependence and the format shame takes on; women tend to express shame in an overt undifferentiated manner and men tend toward a bypassed type of shame. In other words, women display shame more overtly whereas men are more likely to disguise and deny shame.

Shame and anger are universal emotional responses to, and signals of, threatened bonds as they are instinctive. Scheff (1997) notes that if this statement is true, then shame and anger would be a prominent figure in all love relationships. The author follows the position developed by Lewis (1976; 1981; 1983, in Scheff, 1997) to explain how social attachment is the

fundamental human motive. The author maintains that Lewis' work implies that ambivalence is predestined in intimate relationships.

3.5 Self-esteem, Shame and The Social Bond

Scheff and Retzinger (1994, in Scheff, 2000) as well as Elias (1978, in Scheff, 1997) continuously talk about the self and feelings of shame and pride. Scheff and Retzinger (2000; 2001) and Scheff (1994, in Scheff, 2000) argue that emotions of pride and shame are directly relevant to the state of social relationships, and can assist as pointers "of the nature of that relation from moment to moment" (p3). In the authors' view pride is the emotional equivalent of a safe, unalienated bond, and shame an indication of a threatened bond. This brings us to an important aspect included in the social bond, namely self-esteem (Scheff & Fearon, 2003). Self-esteem involves what one *feels* about and how one assesses oneself. Having a high self-esteem can indicate that one may feel justified pride in oneself, whereas low self-esteem often causes feelings of shame about oneself or creates defensive behaviours against feelings of shame (Scheff & Fearon, 2003).

The abovementioned authors name some aspects of self-esteem that could derive from self-feelings. These include perceptions, beliefs, and concepts regarding the self, that include attributions regarding others' perception of the self and behaviour toward self and others. Thus, according to Scheff and

Fearon (2003), self-esteem is first and foremost concerned with how one feels about oneself, with all other aspects reflecting feelings that are directed at the self.

Scheff and Fearon (2003) further maintain that social bonds can explain otherwise complicated aspects of self-esteem. One of these is why some persons have a low opinion of themselves despite many reasons for high self-esteem, and others a high opinion of self that is based on a misconception of reality. The authors argue that because self-esteem is first and foremost affective, one would have to identify such persons' distinctive emotional states overtly as well as covertly. The authors conclude that the level of self-esteem could represent how well one does overall in managing shame.

Individuals with a high self-esteem experience shame as painful but not overwhelming, as they have had enough experiences of pride throughout their lives (Scheff & Fearon, 2003). The authors maintain that a person with a low self-esteem seems to lack enough experiences of pride to deal with shame. He or she experiences shame as a tragedy to be avoided as far as possible. However, when unable to avoid, its effects can be disruptive or even disastrous. Scheff (1997) explains the dynamics of relationships in terms of the emotions that go with alienation. Pride indicates and produces solidarity, whereas shame indicates social control. Reber (1995) defines social control as "the control that a society exerts upon the individuals within

it” (p730). One could assume that when shame has been labelled as an ‘unacceptable’ emotion by a society it will be a signal of the larger control the society has on the individual. For this reason, shame is mostly hidden or denied, becoming disruptive and producing self-propelling cycles of alienation (Scheff, 1997).

This concept of cycles of alienation coincides with Scheff and Retzinger’s (1997) concept of shame-rage spirals. These spirals come to be when a person is ashamed of being ashamed and continuous loops of shame are created. These occurrences are the authors’ understanding of the means of repression.

A perceived injury to the self, verbal abuse, disregard, disapproval, unfaithfulness, and criticism, are all sources of shame whether imagined or not (Scheff & Retzinger, 1997). According to the authors, studies have indicated that people with damaged bonds tend to have high levels of dependency needs that are denied or not fulfilled. The studies have also shown that these individuals are especially prone to shame and high levels of conflict.

Scheff and Retzinger (2000) maintain that a substantial part of the male gender all around the world “have been socialised to be strong, brave and competent” (p1). They argue that it has led to men being shamed into

suppressing vulnerable emotions, especially fear, grief, and shame. Most male adults are not conscious of these emotions. Therefore they don't often shake with fear, sob with grief, or hang their head in shame when these reactions are appropriate, as noted by the authors.

Males deny shame, fear, and grief most of the time (Scheff & Retzinger, 2000). The authors maintain that these emotions do not just disappear but are still there, causing havoc. They argue that emotions should be felt and not acted on. The longer emotions are suppressed, the more tense and shamed one becomes. A further argument by the authors is that because most men are specifically socialised to hide feelings of shame, the sense of being weak, incapable, useless or incompetent should also be disguised. This leads to men going blank or getting enraged, rather than experiencing these painful feelings. 'Unacceptable' emotions (such as shame) take one of two paths, but both lead potentially to disasters (Scheff & Retzinger, 2000). The most dramatic, according to these authors, is to mask them with 'acceptable' emotions, such as anger and aggression but the more common path is to withdraw into silence and/or depression.

To come back to the issue of shame and the social bond, Fearon (1994, in Scheff & Fearon, 2003) conducted a study that showed how shame appears to be dedicated to the maintenance of social bonds. In this study discourse analysis was applied to two videotaped interviews in which subjects were

questioned about their answers to a self-esteem scale. It showed the successive organisation of affect arising in response to threats to social relationships, and individual variances in the subject's styles of coping with these threats. The authors maintain that these studies suggest that pride and shame are omnipresent in social interactions and form an essential part of personal identity. The authors state that shame comes about when a person is met with a threat to his or her relationship with others (Scheff & Fearon, 2003). It is assumed that the authors' understanding of the maintenance of bonds is that because these affects arise out of social interaction, social bonds exist. These affects are the creators of social bonds, whether healthy or unhealthy.

The main objective would then be to secure these bonds. Secure bonds are characterised by feelings of joy, pride, and happiness, whereas threatened or damaged bonds are filled with feelings of insecurity, anger, sadness, and shame (Scheff & Retzinger, 1997).

3.6 Communication and the Social Bond

Scheff and Retzinger (2001) name communication tactics to be important indicators of a secure or insecure social bond. They note that when direct communications exist between two parties, a secure bond will be sustained.

However, when indirect communication tactics are used, an insecure social bond will prevail.

The authors argue that the “isolated form of alienation is usually accompanied by silence or destructive conflict” (p30). This includes the engulfed form of alienation and not expressing ‘negative’ information to the other. Scheff and Retzinger (2001) provide the simple example of a couple blaming each other and not acknowledging their own part in causing the conflict. They argue that for social relationships, open communication is functional and imperative.

Direct communication, according to these authors, includes revealing one’s thoughts and feelings in a respectful manner to the other. This involves avoiding the use of deception and evasions such as denial. It results in the possibility to have a disagreement without damaging the social bond. According to Scheff and Retzinger (2001), the two aspects involved here – disagreement of content and a respectful manner – are the two aspects absent in most of the cases of conflict they have studied. The authors argue that in their theory it is predicted that in a relationship, most aspects are carefully hidden from the two individuals involved, by the two individuals involved.

As shown in Figure 3.1 and Figure 3.2 below (as cited in Scheff and Retzinger, 2001, p 35), the authors propose four basic dimensions of

relationships, namely “*the state of the bond (degree of attunement), the state of the accompanying emotions, patterns of communication, and the degree of cooperation*” (p34).

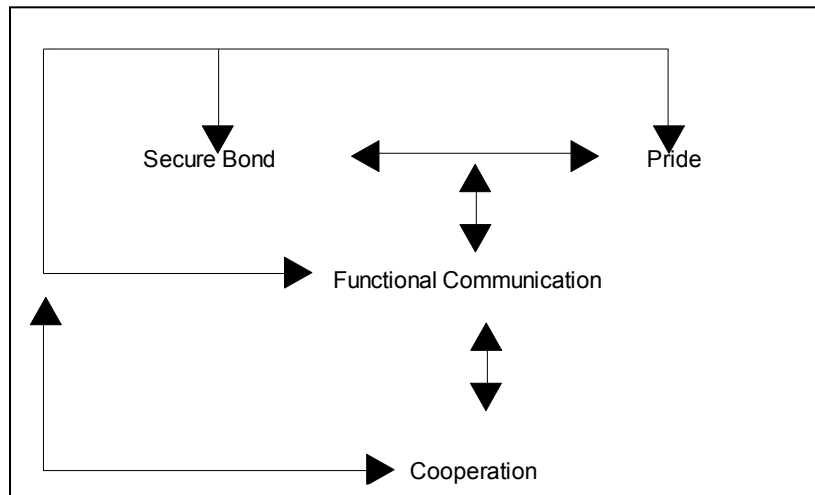


Figure 3.1 Social Solidarity and Cooperation

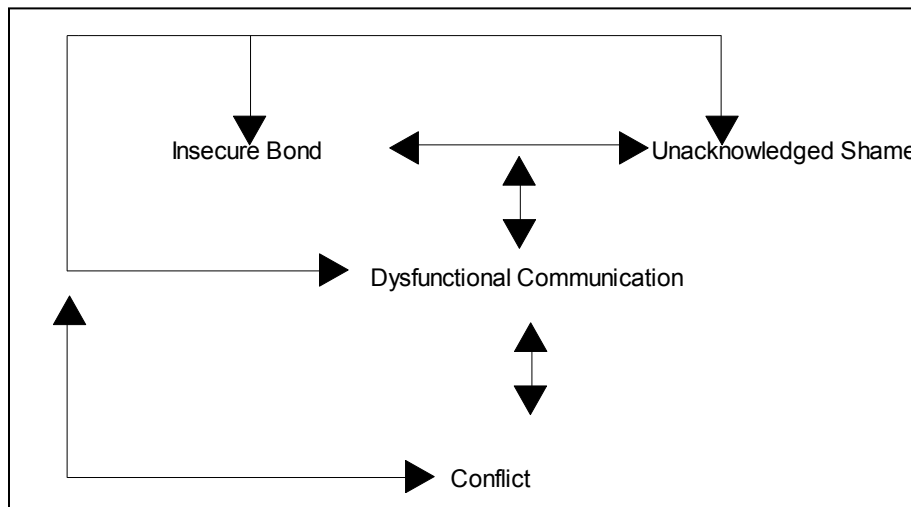


Figure 3.2 Alienation and Conflict

Scheff and Retzinger (2001) note that because the state of the bond is in the first position it does not necessarily mean that it precedes shame, but that the two could occur reciprocally. The authors argue that being connected with

others is an instinctive aspect of being human, where shame is seen as the emotional part of alienation. Unacknowledged alienation and emotion will always lead to dysfunctional communication, resulting in separation or continuing conflict.

Summary

To bring all the concepts from the different authors together, the social bond theory can be summarised as follows in figure 3:

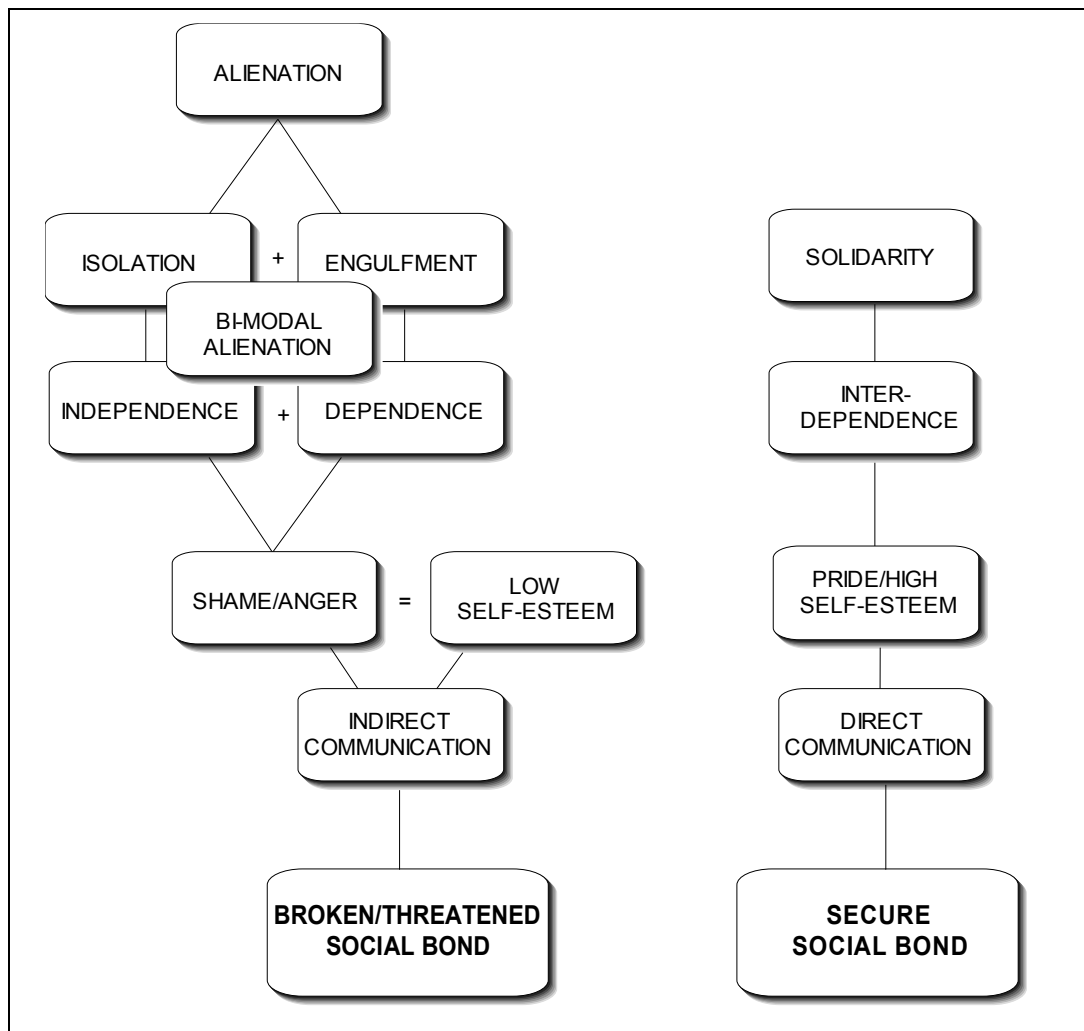


Figure 3.3 Summary of Social Bond Theory

Thus, the Social Bond Theory gives many pointers of aspects that my study revolves around. For instance, one aspect I investigate is whether the offender had developed a secure or insecure social bond with his primary caretakers as a child. The focus is on social relationships and the bonds that develop within these relationships.

It would be essential to look at the development of social bonds during early childhood, as much of the Social Bond Theory focuses on attachment between infant and caretaker. This seems to be an important indicator of whether healthy or unhealthy social bonds and consequently healthy or unhealthy shame will develop and prevail throughout the infant's life. Even though most authors do name attachment between caretaker and child as important, some indicate that unhealthy shame could develop later in life. It could be assumed that a person who had a weak bond development as child, may have a pre-disposition with regard to handling and coping with shame and the eventual behaviour that may follow as result of shame.

Lewis (1971) for instance names the orientation of a person's viewpoints. The author states that one could be orientated toward others' viewpoint or towards one's own viewpoint. This distinction brought out differences between males and females as results of a study by Lewis, showing that women tend to be more orientated toward others' viewpoints and men more toward their own. Other studies (Scheff & Retzinger, 2000) showed that men

tend to hide their anger and shame most of the time as many believe that these are 'unacceptable' emotions. They also look at how these interactions between the self and others can determine the different states of the bond over time. Different time frames within the offender's life are investigated, as one cannot assume that the offender already had a broken social bond since infancy.

As maintained by the Social Bond Theory, a broken bond mostly indicates a person who experiences toxic shame. The study will, after determining the states of the bond, investigate possible experiences of healthy and unhealthy shame in the past and in the present. With Retzinger's (1991; 1995, in Scheff, 1997) list of verbal and non-verbal cues to hidden shame and anger, current experiences of toxic shame can be identified.

As communication seems to be an important indicator to the states of the bonds, it would be essential to look at how the offender tends to communicate. By looking at open and closed or direct and indirect communication tactics used in the interviews together with direct questioning regarding communication tactics, some light could be shed on the states of the social bond the offender had as a child and as an adult.

Along side this, the relation shame had with the violent crimes committed can be investigated as from the point of view of the offender.

4. RESEARCH METHODOLOGY AND METHODS

Introduction

As earlier discussed in Chapter 2, Namibian Police reports of recorded violent offences show that common assault as well as assault to do grievous bodily harm (GBH) have rated the highest of all violent crimes in Namibia from 1992 to 1998 (UNDP, 2000). Assault to cause GBH received the highest rating. Ninety percent of the cases reported were of male perpetrators between the ages of 21 and 39. These high figures raise serious concern and the investigation of violence among male offenders showed to be a very necessary and long outstanding one in this country (UNDP, 2000).

The primary goal of this study was to investigate the relationship between shame and violence among some violent offenders in the Windhoek Central Prison.

The Social Bond Theory developed by Scheff (1997) argues that shame is a predecessor of violence. The theory maintains that threatened or broken social bonds may under certain conditions create unacknowledged shame, which in turn may lead to violence. The continuation of this pattern may result in shame-rage spirals.

Secondary goals of the study included:

- a) the determination of the states of the offenders' social bonds within their biographical and historical context;
- b) the determination of the states of the bond in the context of the prison;

By determining the states of the bonds, it was possible to make inferences regarding the offenders' sense of shame within the different contexts. It was assumed that when an offender presented a weak or broken social bond, a consequently shamed individual was also presented. The Social Bond Theory maintains that shame is mostly a hidden affect.

This results in difficulties obtaining personal experiences of shame and its relationship to violence. Although certain questions were constructed to address shame experiences directly, Retzinger's (1991; 1995, in Scheff, 1997) list of shame and anger cues was also applied to identify hidden shame and anger.

Weak bonds indicate low self-esteem and shame, according to the Social Bond Theory. A shame-based person has assumingly a low self-esteem, meaning that by investigating the offenders' sense of self, shame could be identified.

Apart from focussing questions on relationships and self-esteem to determine the states of the social bonds, communication patterns and tactics were also woven into the questions. By direct observation of the offender's current communication tactics as well as questioning tactics of childhood, inferences could be made with regard to the state of the social bonds in the past and local setting. This is based on the Social Bond Theory in which Scheff and Retzinger (2001) argue that direct or open communication tactics indicate a secure social bond and indirect or closed tactics indicate an insecure bond and vice versa.

4.1 Research Methodology

The study was of a qualitative nature and attempted to obtain an understanding of shame and violence.

According to Silverman (1993), qualitative research does not initially have a specific hypothesis, but hypotheses are formed during the early phases of the research. This author provides a prescriptive model of qualitative research in which, among others, it is maintained that field research should be based on theory instead of being defined by technical considerations such as what is measurable. The Social Bond Theory mainly drove this research study as the focus was on states of the social bonds to obtain an understanding of shame and violence.

Silverman (1993) also notes some defining characteristics of qualitative research. One of these is that a broader version of theory can be provided by field research rather than just a relationship between variables. With the research being conducted in a different cultural context to the one in which the theory was developed, it was hoped that a broader understanding of the Social Bond Theory could be obtained and not only findings regarding the relationship between shame and violence.

The orientation of the study was mainly interpretive, which focuses on the thorough reading and assessment of texts (Neuman, 2000). Here, texts can refer to conversations, written words or pictures. The aim of such assessment in the interpretive social sciences is to determine meaning embedded within text (Neuman, 2000). The author argues, "the interpretive approach holds that social life is based on social interactions and socially constructed meaning systems" (p72). In this study, video recorded semi-structured interviews were transcribed and content analysis of the written texts was applied to discover meaning with regard to the state of the social bond. Together with the content analysis, nonverbal cues of hidden shame and anger were also identified using Retzinger's (1991; 1995, in Scheff, 1997) list of cues.

The interviews were conducted in either English or Afrikaans depending on what the offender found to be more comfortable.

The study was exploratory in the sense that shame's relationship with violent crimes is a fairly new topic in the social sciences and has not yet been explored at all in Namibia.

4.2 Setting

The study was conducted at the Windhoek Central Prison in Windhoek. Interviews took place in one of the offices at the Windhoek Central Prison with the permission of the Commissioner of Prisons (Appendix D).

The purpose of the study was explained to each offender and participation took place on a voluntary basis. Anonymity was assured to each participant. Informed consent (Appendix B) from each participant or offender was obtained for the videotape recordings of the interviews. Also mentioned in the consent form, was the provision of a summarised report to the participants as well as the management of the prison, if requested.

4.3 Sample

As qualitative research mainly focuses on the value and intensity of the data samples are mostly chosen purposefully (Struwig & Stead, 2001). Neuman (2000) maintains that qualitative researchers do not focus much on representativeness or comprehensive techniques for obtaining a probability

sample. The author notes that the qualitative researcher's attention is rather on how a sample or small set of cases, units, or activities interprets social life. It would then be the aim of the researcher to collect cases and events and/or actions that will deepen understanding (Neuman, 2000). Because of this, qualitative researchers prefer to use nonprobability sampling.

In this study, theoretical sampling was used to carefully select cases and reflected characteristics, such as the display of a low self-esteem, regular aggressiveness and continuous shame-rage loops, set out in the Social Bond Theory. The sampling was thus guided by the theory. Individual cases deemed appropriate were selected as to obtain personal opinions and understandings about shame and violence. As assumed in the Social Bond Theory, it is mostly young, adult males who hide anger and shame and have difficulties expressing shame which results in aggression or violence. The focus was on social bonds that mainly involve relationships, shame-rage spirals and self-esteem as discussed in the Social Bond Theory.

The characteristics of the sample were thus defined beforehand and included the following:

- a) male offenders;
- b) between the ages of 21 and 39 years;
- c) who had committed more than one physical violent crime;
- d) who were imprisoned for these crimes;

- e) are regularly in conflict with other prison inmates or staff;
- f) have continuous difficulties resolving conflicts;
- g) shows characteristics of a low self-esteem;
- h) in the Windhoek Central Prison at the time of conducting the interviews.

In qualitative research, according to Struwig and Stead (2001), it is not possible to determine the size of a sample without considering the purpose and goals of the research to be done. The authors also maintain that qualitative researchers are more interested in the richness of the collected data than in the extent to which generalisations to the population can be made. Because the study involved intense analysis and interpretation of verbal and nonverbal cues to shame and anger, a sample of three participants or interviewees was deemed adequate. With the defined characteristics available the sample of offenders were identified with the cooperation of the social worker in charge at the Windhoek Central Prison.

As the social worker in charge was more familiar with the individual offenders and their histories, it was important to obtain her input. Apart from this, the social worker's cooperation insured that more reliable sources of information could be obtained. It also offered an opportunity to get background information regarding the current prison setting.

The social worker initially identified nine offenders who fulfilled the characteristics needed for the study. This was mainly decided on to assure that at least three of the nine offenders would volunteer to participate in the study. After explaining what the study was about and the risks it would involve for the offenders (as explained more clearly in the consent form, Appendix B), four offenders volunteered to be interviewed.

4.4 Data Generation

The data was generated by means of a semi-structured interview, in either English or Afrikaans, and lasted approximately one hour per offender. Biographical, historical, and cultural information from the offender as well as information about the past and current settings were obtained. The interview was pilot tested by three different individuals to assure clarity and understanding of all the questions.

Struwig and Stead (2001) note that a semi-structured interview is “the combination of the structured and unstructured interviews” (p98). Each participant is asked predetermined questions in a systematic manner, also providing for the participant to elaborate on issues beyond the limitations of the question. Such an interview allows for possible new aspects to arise, which could then be investigated in detail on the basis of explanations given by respondents (Bless & Higson-Smith, 1995). The semi-structured interview

allows for the individual to communicate their experiences, viewpoints and knowledge (Plattner, 2001).

In this study the semi-structured interview was aimed at obtaining information regarding the contexts in which social bonds were formed as well as information from which inferences regarding the states of the bonds could be made.

The focus of the interview was on relationships the offenders had formed with their primary caretakers during childhood as well as trustworthy relationships they presently have. A second part of the interview focussed on the offenders' self-esteem – the way they saw themselves as children as well as how they see and feel about themselves presently. The Social Bond Theory maintains that people with a low self-esteem tend to be more prone to toxic shame than those with a high self-esteem. Embedded into the structured questions, was the offenders' communication tactics, a reliable indicator with regard to the state of the bonds as mentioned in the social bond.

At this point, it seems necessary to look at the type of information that would be obtained from the offenders. According to Neuman (2000) field researchers maintain that participants subjectively interpret their experiences within a social context and what is to be taken as the truth will be reflected in

the results from social interaction and interpretation. Thus, subjectivity is not eliminated from the data gathered.

The data gathered in this study were mainly obtained from the offenders' point of view; how they experienced their childhood relationships with primary caretakers. As shame is mainly about a failed self, subjective opinions were included in the data.

Logically the information gathered was retrospective and it only included one source, the offender. As information is gained from the perspective of the offender, one assumes that the offenders' memories are inevitably distorted. This raises some problematic issues with regard to the quality of the content of information gathered.

According to Baker (1982, in Silverman, 1993), what is important is that "these data express interpretive procedures or conversational practices present in what both interviewer and interviewee are *doing* through their talk and non-verbal actions" (p107). The author notes that because of this the interview responses need not be seen as true or false encounters of reality. More importantly, these responses can be treated as presentations of standpoints and ethical forms (Silverman, 1993). Whyte (1980, in Silverman, 1993) maintains that the interviewer should be aware of and recognise that ambivalence is rather common state of man and that conflicting sentiments

are given at any time. The author also argues that altering sentiments exist according to the situations in which man finds himself.

Silverman (1993) asks whether one must choose between seeing interviews either as potentially 'true' reports or as situated narratives. According to the author, the answer for this question will depend on the purpose of the study. In this case the study revolves very much around relationships and self-esteem. Whether the offenders recall history in a distorted manner or not does not seem that important, as the focus would be on their *perceptions*. These perceptions give a sense of self-esteem the offender experienced as a child as well as in adulthood. As argued by the Social Bond Theory, self-esteem is a very important part of the social bond and a low self-esteem indicates a broken social bond, which in turns indicates a shamed individual. The Social Bond Theory also maintains that the nature of development of the bond determines the child's ability to cope with shame, and determines the nature of self-esteem the child will have in adulthood.

Opinion questions and factual questions were used to gain some information about the offender's experiences of shame. Opinion questions also produced nonverbal cues or behaviour (Bless & Higson-Smith, 1995). Some questions were aimed at obtaining opinions with regard to the perception the offender had of his childhood caretakers as role models. As predicted in the Social Bond Theory, shame-based individuals mostly had shame-based caretakers

in childhood who consequently did not provide good modelling to the child. Self-esteem was also considered an important aspect in the determination of the state of the social bond, and therefore questions were constructed accordingly.

The interview guideline (Appendix C) was constructed by extracting keywords from the literature review and the theoretical framework. These keywords reflected the states of the social bond in relationships the offender had as a child as well as the offender's self-esteem and communication tactics. From these keywords questions were constructed in such a manner as to obtain the information needed to describe the states of the bond within the different contexts.

The information was recorded on videotape. Dowrick and Biggs (1983) maintain that the use of video recordings have "added an entirely new dimension to the study of human behaviour" (p 34). The authors maintain that because of the low cost of videotape, the simplicity of amateur recording as well as the possibility of playback, validity and reliability increase and chances of omitting important information while analysing decrease. Scheff (1997) agrees with Dowrick and Biggs in that the videotaped interview also allows access to features of the texts, which are often ignored and to replay, which is seldom available to researchers.

However, Dowrick and Biggs (1983) also argue that there exist some real dangers and disadvantages to video recordings. One of these dangers is that it can become tempting to over-analyse records purely because they are available. This could lead to missing the goals of the study. Another disadvantage is that the participants' behaviour can become less spontaneous as the participants may be more concerned about being recorded. This could lead to misinterpretation of certain behaviours.

Although the video recordings were used to transcribe verbal dialogue, it also aimed at obtaining nonverbal behaviour. To avoid over-analysis or misinterpretations, another researcher was brought in to provide interpretations and analysis of the non-verbal behaviour. By using Retzinger's list of cues, less spontaneous verbal and nonverbal behaviours would not have a negative effect on the interpretations, as the list picks up 'hidden' cues of shame and anger.

In a study done by Retzinger (1991, in Scheff, 1997) about the causes of escalating marital quarrels in four couples, the results showed that even though overt anger was present in each case, unacknowledged shame cues always preceded the indication. From this the author developed a list of cues to identify hidden shame and anger to use as a guideline (Appendix A). This list was applied throughout the interviews in this study and helped the researcher to identify when the offender might be attempting to hide shame

and/or anger. Once identified, the researcher could obtain more valuable information and content with regard to the shame and anger.

4.5 Data Analysis

The analysis of the results was twofold. Two methods were used, namely Mayring's Qualitative Summarising Content Analysis (1983, as cited in Plattner, 2001) and the identification of nonverbal hidden shame and anger cues using the list developed by Retzinger (1991; 1995, in Scheff, 1997). These two methods were used separately, but were combined in the final interpretation of the results.

One reason for using both methods mainly derives from the Social Bond Theory that argues that most studies focus only on verbal behaviour and omit any nonverbal behaviour, also considered as important. This also increases reliability and validity of conclusions and interpretations made from the gathered data. Another reason is that because shame and anger are mostly hidden, according to the Social Bond Theory, the list of cues provides a manner of identifying verbal as well as nonverbal cues to shame and anger which might otherwise be difficult to pick up.

In order to get an understanding of shame's relationship with violence it was important to identify the state of the social bonds first. The Social Bond

Theory argues that when a person developed a weak or broken bond with his or her caretaker, the state of the person's social bond in adulthood, will be weak or broken. This, in turn, also indicates a shame-based individual. From the biographical and historical background of the offenders, the states of the bonds could be determined within the contexts they were developed or formed, as well as in the context of the prison.

4.5.1 Mayring's Summarising Content Analysis

It was decided to use the Summarising Content Analysis technique of Mayring's (1983) Qualitative Content Analysis as it provides a manner of dealing with huge amounts of verbal material in a fairly short time (in Plattner, 2001). This method focuses on *what* the interviewees said. Mostly, with Qualitative Content Analysis, semi-structured or narrative interviews are applied to obtain data (Plattner, 2001). Thus, this method of data analysis is well suited to the method used in this study to generate data.

The technique of Summarising Content Analysis aims at the reduction of text material to the main contents (Plattner, 2001). Before applying Mayring's technique some basic systematic steps should be taken with regard to Qualitative Content Analysis.

Table 4.1 describes the basic steps to follow in Mayring's Qualitative Content Analysis.

TABLE 4.1: BASIC STEPS TO CONDUCT QUALITATIVE CONTENT ANALYSIS:

STEP 1	Determine the relevant units of the material to be used
STEP 2	Describe by who, where, when and how the material was obtained
STEP 3	Describe in which form the material is obtained
STEP 4	Describe theoretical direction to be used in the interpretations of the material
STEP 5	Determine the specific theoretical framework in which the material will be analysed
STEP 6	Determine which techniques of Qualitative Content Analysis are to be used Apply the technique and create a system of categories
STEP 7	Check if the categories apply to the material and relate to the theoretical framework

(Plattner, 2001)

As mentioned in Step 1, the relevance of the units to be used from the material will mainly be deduced from the Social Bond Theory. With the keywords already listed, the relevant units include all material pertaining to the relationships the offenders had with their caretakers and their self-esteem as children and as adults.

After having followed the abovementioned steps for qualitative content analysis, the Summarising technique involves its own set of steps to be applied as part of the evaluation process. Some of the steps have to comply with what is called 's-rules' and are discussed in more detail below. Table 2

describes the seven steps by Mayring (1983, p 55) as translated by Plattner (2001, p 7):

TABLE 4.2: PROCESS MODEL OF SUMMARIZING CONTENT ANALYSIS

STEP 1	Determining the units to be analysed
STEP 2	Paraphrasing those parts which carry content (S1-rules)
STEP 3	Generalising paraphrases with regard to the level of abstraction determined (S2-rules)
STEP 4	First reduction through selection; deletion of similar contents (S3-rules)
STEP 5	Second reduction through construction and integration of contents at the intended level of abstraction (S4-rules)
STEP 6	Compiling a system of categories
STEP 7	Re-checking the system of categories with regard to the original material

The S-rules as described by Mayring (1983, in Plattner, 2001) are as follows:

S1 – Rules: Paraphrasing

1. Delete all parts of the text not carrying any or little content.
2. Transform the parts of text with content to the same level of language.
3. Transform the parts of text into a short grammatical form.

S2-Rules: Generalisation

1. The contents of the paraphrases are generalised to a chosen level of abstraction in such a manner that the original content is still understood.
2. The expression of the sentences is generalised in the same manner.
3. Paraphrases above the intended level of abstraction, are left as is.
4. If in doubt, consult the theoretical assumptions.

S3-Rules: First Reduction

1. Generalisations with similar meanings should be deleted.
2. Generalisations regarded to be unimportant or meaningless on the new level of abstraction should be deleted.
3. Generalisations considered to be important should be left as is.
4. If in doubt, consult the theoretical assumptions.

As explained, the S-rules apply to Step 1 through 5 of Summarising Content Analysis. The results of the evaluation of the study were reflected in the system of categories compiled in Step 6 and formed the basis on which interpretations were made with regard to the primary and secondary goals of the study.

With the above analysis process complete, the videotaped recordings were replayed with the focus on checking the identified categories that were

created from the content analysis. Before interpretation, statements summarised in the categories should still reflect the original paraphrases (Plattner, 2001).

Plattner (2001) also mentions that results of a qualitative nature may result in the “generation of hypotheses” (p3), leading to possible follow-up research projects of a quantitative nature.

4.5.2 Retzinger’s List of Cues to Hidden Shame and Hidden Anger

After completing Mayring’s Summarising Content Analysis, the nonverbal part of the study was analysed.

As Retzinger’s list only provides the cues that can indicate hidden shame and hidden anger, the researcher used her own discretion in analysing and interpreting the findings. As the interviews revolved around relationships and self-esteem, these two categories also became a central part in the nonverbal interpretations.

To insure objectivity, another researcher was required to check nonverbal cues identified by the researcher.

The method of interpretation was constructed and included a quantitative nature according to the following steps:

- a) Record number of instances of cues indicating hidden shame and hidden anger;
- b) Compare number of hidden shame and hidden anger instances found within individual interviews;
- c) Compare instances found between offenders;
- d) Look at possible relations that cues have with relationships and self-esteem; and
- e) Make overall interpretations.

The interpretations of the two methods were integrated as to yield richer interpretations.

4.6 Reliability and Validity

Reliability and validity can be seen as the safety measures of a study. Denzin & Lincoln (1994) describe reliability as the degree to which results are replicable by another researcher. Runyon, Haber, Pittenger, & Coleman (1996) note that reliability “refers to the consistency of measurement” (p48). This means that every time a certain event, object or construct is measured under the same conditions, it results in the same findings.

Validity is defined as the accurateness of a measurement or a test (Runyon, Haber, Pittenger, & Coleman, 1996). The authors maintain that for a test to be valid, the procedure involved in testing should actually measure the object or event under investigation. In conclusion Runyon, Haber, Pittenger, and Coleman (1996) note that if a procedure of measurement is not reliable, it will also not be valid. However, as noted by the authors, this does not mean that when a measurement procedure is reliable, that it is also valid.

In this study, reliability would mean that if other researchers watch the videotape recorded interviews, transcribe it and apply Philip Mayrings' Summarising Content Analysis together with Retzinger's list of cues to shame and anger, they should come up with similar findings.

Other aspects of reliability, such as internal and external consistency, were also looked at in this study. Internal consistency is described as "whether the data is plausible given all that is known about a person or event, eliminating common forms of human deception" (Neuman, 2000, p368). The author notes that misinformation, evasions, lies, and fronts are all examples of human deceptions. To counter this problem, information regarding the offenders' actions and experiences of the past and the present could be compared to verify internal consistency over different social situations.

External consistency is defined by Neuman (2000) as “verifying or cross-checking observations with other, divergent sources of data” (p368). To accomplish external consistency in this study, the videotape recordings acted as a source for verifying verbal and nonverbal behaviour. Also, because this method provided the possibility of instant replay, it was possible to test the researcher’s observations afterwards. Another researcher was brought in to verify findings and observations. This secured the external consistency of the study.

In terms of validity, the study aimed to keep the setting as natural as possible. Therefore interviews took place at the Windhoek Central Prison, within the context of the prison. As the purpose of the study was explained carefully to the understanding of the prisoners and confidentiality assured, a relatively undisturbed presence of the researcher was achieved.

After discussing the characteristics of the population that was needed for the interviews with the social worker in charge of the prison, the valid sample was obtained. Information with regard to the present prison context could also be obtained from the social worker’s point of view which increased validity.

Lastly, by following the steps set out in Mayrings’ Qualitative Content Analysis, the relevant material needed to determine the results of the study

were extracted, assuring that the analysis actually included that which needed to be measured.

5. RESULTS - DISCUSSION OF PRESENTATION

5.1 Sample Profile

Three individual interviews were conducted with male offenders between the ages of 21 and 39 years; who had committed more than one physical violent crime; who were imprisoned for these crimes; are regularly in conflict with other prison inmates or staff; have continuous difficulties resolving conflicts; showed characteristics of a low self-esteem; and in the Windhoek Central Prison at the time of conducting the interviews.

Each interview lasted approximately an hour. Biographical and historical details were not video recorded, but obtained by asking the offender the details and writing it down on a separate answer sheet. This was mainly done because it was of a factual nature and would consequently not add relevant nonverbal information. Another reason for not video recording the biographical and historical details were that it showed during the pilot test to be somewhat time consuming and would therefore result in irrelevant material and be costly.

Figure 5.1 below shows some demographic and historical details of the offenders at the time of the interviews.

Table 5 Biographical and Historical Details

Offender	#1	#2	#3
Age	35 years	34 years	38 years
Race/Culture	Damara	Coloured	Damara
Home Language	Damara	Afrikaans	Damara
Caretaker(s) as a child	Parents	Mother (and Stepfather)	Grandfather (and parents)
Marital Status	Single	Single	Single
Description of Childhood Neighbourhood	Fairly safe, did not like the neighbourhood	Middleclass, lots of violence	Dangerous, lots of drinking
Offences Committed	Murder, theft, assault, kidnapping, possession of a firearm, pointing of a firearm	Two murders, Armed robbery, assault, other small cases	31 Counts, including three murders, theft (live stock), rape, assault, car theft, escaping
Sentence	49 years	3 Life sentences and 75 years	128 years
Years already Served	4 years	8 years	13 years
Times Imprisoned	Three times including current imprisonment	Second time including current imprisonment	First time in prison

5.2 Presentation of Results

Three semi-structured interviews were videotape recorded in Afrikaans and were immediately translated into English when transcribed. The English dialogue was translated back into Afrikaans to assure that none of the contents were lost during the initial translation. Factual biographical and historical information were obtained by handwritten answers on a separate answer sheet.

Transcribing was done to obtain written data that were analysed by using Mayring's Summarising Content Analysis. The visual material was used to observe nonverbal behaviour using Retzinger's list of hidden shame and hidden anger cues (Appendix A).

In applying Mayrings' Qualitative Content Analysis, the first step involved the determination of the parts of material that were to be used. Text parts included in analysis revolved around information with regard to the relationships offenders had with their caretakers, the offenders' self-esteem and communication tactics. For this reason, the questions and comments of the researcher were not included in the analysis.

Texts were further reduced to parts that included material containing contents relevant to the literature review and more specifically the theoretical

framework. The list of keywords extracted (Appendix C) from the literature review and the theoretical framework aided in determining the relevant contents. For example, if the extracted keywords are 'boundaries or limits set by the caretaker', the focus would be on how the offender describes the strictness of his caretaker and what he was allowed to do and what not. This would then form part of the how the offender describes his relationship with his childhood caretaker, giving an indication of the state of the social bond. By determining the states of the social bond within the contexts of the offenders' childhood and local setting (prison), interpretations were made to obtain the offenders' sense of shame. However, the use of Retzinger's list (Appendix A) provides more direct indications of hidden shame and hidden anger. By applying these two methods the primary and secondary goals of the study could be reached. The goals were as follow:

Primary goal:

To investigate the relationship between shame and violence among some violent offenders in the Windhoek Central Prison; and

Secondary goals:

- a) the determination of the states of the offenders' social bonds within their biographical and historical context;
- b) the determination of the states of the bond in the context of the prison.

All interviews took place on an individual basis at the Windhoek Central Prison in the office of the social worker in charge. All interviews were conducted on the same day. The social worker initially identified nine offenders who fitted the characteristics described above. Seven of the nine turned up at the office of the social worker where the researcher shortly explained the purpose of the study. Participation was voluntary and four offenders agreed to take part in the study. Each offender read through (or was read to) the consent form (Appendix B), which was completed and signed. This ensured confidentiality and participation.

All four offenders were interviewed, however, only three were eventually used in the interpretation. The three interviews with the most relevant material were chosen for the interpretation.

Interpretation of the material was based mainly on the theoretical framework chosen for this study, namely the Social Bond Theory. The theory is described in detail in Chapter 3. After the content analysis was complete, the recorded material was viewed and interpreted according to Retzinger's list of shame and anger cues (Appendix A). Results based on the theory and list of cues were combined and final interpretations were made.

5.3 Discussion of Results

The findings of the applied methods of analysis of data are presented in two sections in Chapter 6. First the findings of the verbal analysis are discussed, followed by an interpretation of the findings. Then the nonverbal analysis' findings are presented, also followed by an interpretation. Chapter 7 provides the combined interpretations and conclusions made from the findings, as well as limitations and suggestions and further interventions for the study.

The primary and secondary goals were kept in mind throughout the study and analysis.

Categories were identified with regard to relationships and self-esteem, with communication tactics woven into these.

The following categories were identified with relationships in the historical and biographical contexts:

1. Childhood relationship with caretaker(s).

- i) Feelings towards caretakers
- ii) Role-modelling
- iii) Attention and time spent with child
- iv) Providing needs

- v) Disciplining and punishment of child/Conflict
- vi) Communication tactics

2. Offender's self-esteem during childhood.

- i) Emotional responses
- ii) Behavioural responses

3. Describing the environment in which the child grew up.

- i) Conditions
- ii) Neighbours

Categories identified in the local prison context were the following:

1. Current relationship with important other(s).

- i) Feelings towards important other(s)
- ii) Role-modelling
- iii) Attention and time spent with each other
- iv) Providing needs
- v) Conflict
- vi) Communication tactics

2. Offender's current self-esteem.

- i) Emotional responses
- ii) Behavioural responses

3. Describing the environment in which the offender currently finds himself.

- i) Conditions
- ii) Staff and Inmates

The nonverbal section was analysed by observing the videotape recordings of the offenders. Even though Retzinger's list of cues does provide for verbal cues of hidden shame and hidden anger, time restrictions and relevance of such material led to the decision to exclude the verbal part of the list when observing. Another reason for excluding the verbal cues, was that Mayring's Qualitative Content Analysis sufficed for the verbal part of the study.

Nonverbal observations were divided under the categories provided by the list of cues for hidden shame and hidden anger as such:

1. Hidden Shame Cues

- a) Hiding behaviour such as:
 - i) the hand covering all or parts of the face,
 - ii) gaze aversion, eyes lowered or averted.

- b) Blushing
- c) Over-control such as:
 - i) turning in, biting, or licking the lips, biting the tongue
 - ii) forehead wrinkled vertically or transversely;
 - iii) false smiling; or other masking behaviours.

2. Hidden Anger

- a) Brows lowered and drawn together, vertical lines appear between them
- b) Eyelids narrowed and tense in a hard fixed stare
- c) Lips pressed together tightly
- d) Hard direct glaring
- e) Leaning forward towards other in challenging stance
- f) Clenched fists, waving fists, hitting motions

6. FINDINGS AND INTERPRETATIONS OF RESULTS

Three offenders were individually interviewed at the Windhoek Central Prison to investigate the relationship between shame and violence among violent offenders.

6.1 Findings of Verbal Data according to Mayring's Summarising Qualitative Content Analysis

6.1.1 Biographical and Historical Context

Three categories were identified with the offenders, within the biographical and historical context:

1. Description of relationships with childhood caretakers.
2. Offender's self-esteem during childhood.
3. The environment in which the offender grew up.

Category 1: Description of relationships with childhood caretakers.

Descriptions of the type of relationships the offenders had with their caretakers as children could be identified through qualitative analysis. Understanding the offenders' viewpoint of his relationship with his caretaker

could give a better perspective of the offender's history with regard to the social bonds that developed.

Sub-categories that were identified under Category 1, were the following:

- i) Feelings towards caretakers
- ii) Role-modelling
- iii) Attention and time spent with child
- iv) Providing needs
- v) Disciplining and punishment of child/Conflict
- vi) Communication tactics

i) *Feelings towards Caretakers*

The offenders express very different and contradictory feelings toward caretakers. Initially, the offenders describe feelings of safety, trust, and love towards their caretakers, however as the conversation continues, they seem to contradict their earlier statements.

One example is that of feeling safe with caretakers. From the start, one offender showed a strong tendency to contradict himself. With regard to safety he says:

Offender 1 (p6): "Yes, I felt safe with my parents because they...they hit me a lot, they would hit me but I always won them."

There are several possible reasons for this contradiction. It could be that the offender, who tended to speak a lot, spoke before he thought about the question. Another reason could be that he might have wanted to present himself as a 'good person' to the researcher, denying his own negative feelings towards his caretakers. A last possible reason for such contradictions could be that the offender had an 'adulthood' viewpoint which came into conflict with his 'childhood' viewpoint. Upon further inquiring into the matter, the offender responded:

*Offender 1 (p7): "I won them later because I ran away from home
when they hit me, then I never come back home."*

From this passage, it becomes very clear that the offender did not feel safe in his own home with his caretakers as a child.

The other offenders' descriptions with regard to feeling safe in their childhood homes, or with primary caregivers, were positive as well as negative. Offender 2 was clear on saying that he did not feel safe with his parents and also said that he would not talk to them about his problems. He seemed to have felt safer with other people and friends, for example:

*Offender 2 (p5): "...but I never wanted to go back. Those people, as I
grew up with them, we stayed like brother and sister."*

Offender 3 considered his grandfather as his primary caretaker, even though it is presumed that he stayed mostly with his parents until the age of nine years. On inquiring about feeling safe with his parents he answered very directly, without elaborating:

Offender 3 (p3): "No."

However, upon asking whether he felt safe with his grandfather, he answered:

Offender 3 (p3): "My grandfather knows me, with my grandfather I did not have a problem at home."

Overall, it would seem that none of the offenders truly felt safe with their caretakers and would rather run away from home or escape to better environments or circumstances.

Trust among the three offenders revolved mainly around whether the offenders could speak openly to their caretakers about any problems or concerns they had as children.

Offender 1 and 3 felt that they could speak openly with their caretakers about their problems. However, as mentioned earlier, Offender 2 felt he could not speak to his parents.

Feelings such as being loved, wanted, a sense of belonging, being worthy, were not consistent with the initial reactions of the offenders. All the offenders agreed that they felt loved and wanted by their caretakers:

Offender 1 (p1): "...love they did give me although they had little money..."

Offender 2 (p1): " She loved me."

Offender 3 (p2): "...my grandfather liked me a lot..."

Offender 3 was the only one who described feeling unloved by his parents by saying:

Offender 3 (p3): "that father my mother had...he did also not like me..."

and

Offender 3 (p3): "no, I am not worthy to those people, to live with those people, then I go with my grandfather,..."

Offender 1 and 2, seemed to lack enough proof that they truly felt loved, accepted, wanted and understood by their caretakers as they later on in the interview mentioned several instances of escaping, avoiding and running away from home, for example:

Offender 1 (p2): "...then the women...were seen more important than the men..."

Offender 1 (p3): "if my parents understood me at that time...if they took into account then they would have decided 'let's give the boy what he needs'."

Offender 1 (p11): "...there was not a good relationship between me and my brothers and sisters and my mother...I later decided...that I would no longer stay at my mother's house. There where my father was not, there I walk from you and so I went to look for other places."

Offender 2 (p2): "So most of the time with those people I stayed..."

Offender 2 (p4): "...those who I never could take, then I avoid my own sisters and brothers, then I think, then I feel I must do on my own things."

ii) Role Modelling

With regard to the offenders' view of their caretakers as role models, most agreed that their caretakers were good role models, however, their understanding of the question entails how the caretakers educated them rather than behaviour modelled to the child. Thus, providing education, learning and guiding the child to do what is right.

Offender 1 (p2): “..my parents taught me well that at least I had to stay in school so I would not end up like other children in jail...I did not take it to heart...”

Offender 2 (p3): “She always told me ‘(), if you see there is fall-outs or a fight, come and run rather home and so on, rather be scared than going over to hurt people.”*

Offender 2 (p3): “...she never allowed wrong things.”

One example that proved to be very clear was that of Offender 3, who described his parents' behaviour as:

Offender 3 (p3): “No, my mother and my father drink a lot...look if they get drunk, then they have fall-outs...and when they have fall-outs, then they fight.”

iii) Attention and Time spent with Caretaker

All offenders agreed that they did not receive the attention and time they needed from their caretakers. With the exception of Offender 3 who named fairly notable occasions of time spent with his grandfather, he maintained a strong dislike towards his parents and all questions regarding his parents

(considering that he presumably stayed with them for 9 years) were responded to with short, avoiding answers.

Offenders 1 and 2 showed some contradiction in regard to time spent with their caretakers, as they initially responded to spending a lot of time together, but failed to name anything specific that involved sufficient attention and time spent with caretakers. Apart from this, all three offenders spoke continuously about regularly running away from home, avoiding home, or living in different places than home.

iii) Providing Needs

Offender 3 felt that his grandfather tended to his needs, that he gave him the things he asked for, such as love, care and understanding. However, his own parents, especially his stepfather (whom he calls 'father' at times and 'stepfather' at other times), never seemed to do anything he asked them, and the only time he spent with his father was when being sent to get things he could never find and then being hit for not finding it:

*Offender 3 (p9): "...I can say my father, but it is not my father...no
look that father of mine, he hit me a lot, he hit me
a lot, I could not even stay at the house..."*

Providing for his needs, Offender 1 commented as such:

*Offender 1 (p10): "...at home...every now and then I did steal sugar
and stuff if the people gave us such awful food..."*

however, earlier he said:

*Offender 1 (p2): "...look we never got hungry if I was at the farm...I did
not get hungry..."*

v) *Disciplining and Punishment of Child/Conflict*

Disciplining involves what the caretakers did to help the child realise his limits and boundaries and included punishments, manners of educating or bringing the child to understanding of the rules of life. However, most of the offenders experienced their parents as being unfair and punishing them for nothing. The offenders were mostly portrayed themselves as innocent and tend to look for excuses or shifting blame, for example:

*Offender 1 (p2): "..but if I got home late, I was...chased away...locked
out, I could not get home late."*

*Offender 1 (p3): "Yes, there were fairly strict rules at home and that is
what I say today, it was a bit wrong..."*

*Offender 1 (p3): "they favoured the women and elder ones but us little
ones not..."*

Offender 2 (p2): "..at the end we always had a fall-out...run to the

*mother...and she always took the little one's side,
the one is told 'you are wrong'."*

v) Communication Tactics

Communication tactics between caretaker and child differed among the offenders as Offender 1 and 3 felt they could speak openly to those who they considered their caretakers. Offender 2 described himself as not the type of person who would speak openly to his parents. However, all the offenders seemed to be quite unhappy with their childhoods and mentioned that what they communicated to their caretakers, was not always heard or understood. Communication styles or tactics were also observed throughout the interviews and most offenders showed an avoiding manner when asked about their feelings.

This could be because the offenders are unfamiliar with such questions or that they might have felt insecure about themselves, protecting their weaknesses, as they all seem to feel a need to portray themselves as innocent and good people.

Category 2: Offender's self-esteem during childhood.

From the qualitative content analysis, keeping the main themes of the Social Bond Theory in mind, the offenders' sense of self was important to be

identified, as this would indicate either shame-based individuals or proud individuals.

From the descriptions of offenders regarding their self-esteem during childhood, the following sub-categories were identified:

- i) Emotional responses
- ii) Behavioural responses

i) Emotional Responses

Emotional description of the offenders revolved around how the offenders felt about themselves. These emotions involved their reactions to certain experiences they had during childhood. From these descriptions positive emotions were expressed, however, negative emotions far outnumbered the positive emotions.

Some emotions that proved more prevalent were those of feeling like dying, worthlessness, humiliation, shame, guilt, regret, and incompetence. As the following offenders describe feelings of humiliation and incompetence:

Offender 1 (p2): "...one feels so humiliated, you don't feel like living anymore..."

Offender 3 (p9): "Why can't I not find a thing for me that he send me to...if I go then a second time I do not find him then I go and say the third time then he says 'go look' if I am on my way, then he comes, then he catches me, then he hits me..."

Upon asking if his parents ever humiliated him, he answered:

Offender 2 (p6): "...sometimes I did nothing and then my father hit me, now all of that made that I swore and then walk away from home...yes."

Most offenders expressed guilt and regret about wrong-doings in their childhood years, however most of them seem to feel that they were not all guilty as others were to blame for their mistakes.

Offender 1 (p2): "...clothes are old...I have to wear...I wore, but it forced me that I later had to steal other people's stuff although I did not want to steal..."

Offender 3 (p7) "I felt very bad...to do such things...because of a person's handlings, makes that you do things you did not want to do."

A strong feeling of escaping and being someone else also became evident in the responses to questions regarding the offenders' sense of self-worth and shame. Upon asking Offender 3 if he sometimes rather felt like being someone else, he responded:

Offender 3 (p10): "Yes."

After inquiring if he felt like running away or hiding, he responded by telling that there were times he lived in the field for up to two weeks, hiding from his parents, expressing his sense of worthlessness:

Offender 3 (p3): "...no, I am not worthy to those people, to live with those people'..."

Interestingly, Offender 2 responded to the question of wanting to be someone else, that he would have liked to be a better person. This would mean that he did not necessarily want to be someone else, just better. However, he did express a strong need to run away or just disappear, but mostly from his parents, not himself, as seen in the following quote:

Offender 2 (p10): "That is actually the whole thing...that is what caused me to later go with those people to..."

ii) Behavioural Responses

Behavioural responses showed the same pattern as found with the emotional responses, indicating more negative traits than positive traits. Mostly offenders would describe their actions to experiences negatively, indicating their personal abilities to cope and belief in themselves.

One of the strongest behavioural traits indicating self-esteem, was that of running away or escaping difficult situations, indicating a lack of believing in themselves. For example:

Offender 1 (p1): "I always ran away from school,..."

Offender 2 (p2): "...I had my own pride and felt ' so I can go and struggle for myself.'"

and later

Offender 2 (p4): "...then I always look for something to, to get away from it...that they can stay away from me."

As seen above, Offender 2 describes himself as having pride, however looking at this statement in context leads one to interpret it more as a feeling of wanting to avoid or escape.

On the positive side, offenders did describe themselves as being conscientious, competent, trusted and not violent. Offender 1 described how,

even though he did not own anything himself, he took care of his little brother. Offender 2 describes his hard work for his grandfather as a child, going to the town to buy him things. However, most of these traits lacked good examples or were contradicted as responded by Offender 1:

Offender 1 (p11): "I am not an aggressive person, really, truly huh-huh..."

and

Offender 1 (p11): "then I took a stone and chased him with a knife and then he ran away..."

All offenders proved to have been fairly aggressive during childhood, however they did not always elaborate in detail on exactly how they were aggressive, yet again blaming others for their aggression:

Offender 2 (p3): "With that I had always hurt them with sharp things or so on..."

Offender 2 (p8): "...the older guys in front of the shop, it all made me to take on that aggressive attitude..."

Offender 3 did not elaborate on his aggressiveness and as with many of his answers, he only affirmed shortly that he was violent as a child.

Category 3: The environment in which the child grew up.

Descriptions of the environment in which the offenders grew up were indicated as an important category as it showed that the environment influenced some behaviours observed by offenders. Information was taken from the biographical information obtained verbatim before the videotape recording as well as obtained in the recorded interview.

The following sub-categories were identified:

- i) Conditions
- ii) Neighbours

i) Conditions

Conditions described by the offenders were mostly negative. Overall they felt that the environments in which they grew up were of a dangerous, unpleasant nature. Examples of the offenders' descriptions of the conditions, are the following:

Offender 1 (p1): "...we were poor people..."

Offender 1 (p6): "...the hostel where I stayed....in the food there were worms,..."

Offender 2 (p10): "...because look if I see life now and the other side is better than this side..."

Offender 3 (p3): "I am still a young one if I maybe say something my father says 'man, I will hit you as well'. That makes that a man rather run away from home."

ii) Neighbours

The offenders felt endangered and expressed feelings of unpleasantness with regard to their caretakers and neighbours, as Offender 2 puts it:

Offender 2 (p2): "...the older guys...we always saw down hill...he is bigger than me,...you get sent to the shop, they want to take your money...he takes out a knife..."

6.1.2 Prison Context

Three categories were identified with the offenders, within the local prison context:

1. Current relationship with important other(s).
2. Offender's current self-esteem.
3. Describing the environment in which the offender currently finds himself.

Category 1: Current relationship with important other(s).

Through the content analysis, descriptions of the type of relationships the offenders have with those they consider to be important other(s) within the current prison contexts could be identified. The offender's description of his current relationships together with his self-esteem could shed light on the state of the bonds in the prison context.

The following sub-categories were identified with the offenders:

- i) Feelings towards important other(s)
- ii) Role-modelling
- iii) Attention and time spent with each other
- iv) Providing needs
- v) Conflict
- vi) Communication tactics

i) Feelings towards Important Other(s)

Different opinions were obtained from the offenders with regard to their current relationships with those they considered to be important other(s) in their lives. One offender felt that he had no important other in his life at this time as he notes:

Offender 3 (p11): "No, since 1990 when I came in prison, I have not, I

have not had a person.”

This response was for important other(s) both inside and outside the prison. Offender 1 and 2 felt that they had important other(s) inside the prison as well as outside.

Offender 1 (p15): “The most important person in my life...I do not look at people anymore...I look up to God and I love everybody just like I love my mother...”

Offender 2 (p5): “The only woman who has brought me that far...and it was a social worker who sat in this office...she did at least cheer me up...she later got brought me back from the bad stuff so that I can say today I am a person.”

Offender 2 (p14): “If I have to look back today...that white lady, she is always somewhere in my brain, she and my sister...”

Thus, apart from Offender 3 who felt he had no important other(s), the other two offenders seemed to have important people in their lives, whom they feel safe with, can trust and depend on.

Offender 1 contradicted himself by implying that he is a friend to all, but also said that fellow inmates used each other for personal gain, as for example:

Offender 1 (p16): "Look, we love each other...there are men that do not think what other men think, but we others who love our neighbour..."

Offender 1 (p14): "They use you basically...the guys say here...article friends. The day I get a visit from outside then everybody laugh at me...the man who sits and eats good food in front of me...that day he also greets me...such is life."

ii) Role Modelling

In terms of role-modelling the offenders' seem to lack good examples in prison, as only one offender could name a person who opened his eyes, showing him how things should be, making him understand himself. As explained in the category on the prison environment, it becomes clear that the examples the offenders have with regard to the prison guards is only that of unfair treatment and favouritism.

iii) Attention and Time Spent with each other

Attention and time spent with important other(s) were found to be almost non-existent as regular visits from important other(s) rarely happen. Offenders

maintain that it is because of financial constraints that visits from outside are limited.

iv) Providing Needs

It also became clear that not all of the offenders have access to social workers, and felt abandoned and emotionally deprived:

Offender 3 (p11): "No, if we had someone here that like can sit like this and talk with me, also not. If someone treats you like this, that you think 'God, no man, the people have thrown me away, he does not think (#\$%^) of me'."

v) Conflict

Differing opinions were expressed with regard to the offenders' descriptions of them being violent at this time. Offender 1 said that he does not consider himself an aggressive person, but later he states that when he feels suffocated, he becomes aggressive. Offender 2 said that he used to be very aggressive as he was a gangster when he arrived at prison. Offender 3 noted that he still becomes aggressive a lot. A possible explanation for such different opinions could be that these offenders stay in different sections of the prison.

vi) Communication Tactics

Communication tactics observed in offenders tended to be of a closed nature, as they understated their emotions using phrases such as “feeling bad”. Avoidance of feelings or information regarding their true selves occurred many times, as they had a tendency to derail from the questions asked. They would sometimes give irrelevant answers or deny certain feelings, contradicting the content of their stories.

Category 2: Offender’s current self-esteem.

Sub-categories identified under the offenders’ current view of himself, were:

- i) Emotional responses
- ii) Behavioural responses

i) Emotional Responses

All the offenders showed strong feelings of shame and humiliation. They also felt regret about their offences, however mostly blamed others as they did in childhood. Offender 1, contradicts himself by initially not blaming anyone but himself.

*Offender 1 (p13): “To be ashamed does not help, ...you talk the truth,
to be ashamed to ask for money from someone to
buy me food then I rather go and stand here and*

put in without anyone seeing me, only God sees me...so...it is such things...hunger is no-one's playmate...yes...and to be ashamed will make you do all sorts of stuff."

Offender 1 (p15): "At this stage I feel very bad for myself. I take a lot, I blame myself, yes. I blame myself, I do not give others blame, I am the cause of it."

Offender 1 (p15): "...it is very unfair that I am in prison today...I am not the guilty person. I did not commit that deed,...What I said they ignored, and they took the word of the man who falsely accused me, to be arrested because of that man,..."

Offender 2 admitted that he did commit the offence, but felt that he was unfairly in prison as others were to be blamed that he ended up in prison:

Offender 2 (p14): "...to be honest I am regretting...then he said, 'no man, there is a small job' and that small job made that I am sitting deep in prison today."

Offender 2 (p16): "...I feel I am unfairly punished...I was hired to kill someone...I have to say the guilty people are outside."

Only Offender 3 admitted that he was justly convicted and that he was guilty of committing the crimes. He expressed extreme regret for what he had done, however also shifted blame:

Offender 3 (p12): "Look what I did, I cannot say that is good what I had done...I will do a thing that I did not want to do because of your actions."

ii) Behavioural Responses

Positive views of themselves included presenting themselves as a good friend, as being a protector and guide for others in the prison. Offender 2 regarded himself as being more mature now and being capable of giving good advice to other inmates.

Category 3: Describing the environment in which the offender currently finds himself.

Sub-categories identified through qualitative content analysis, were the following:

- i) Conditions
- ii) Staff and Inmates

i) Conditions

Conditions in the prison at this time are described as over-full, hard and mostly offenders felt that they are suffering. None of them felt happy inside the prison and there was a general desire to rather be on the outside. Offender 1 expressed his feelings about how he considered conditions inside the prison to be:

Offender 1 (p11): "...and I am in the cell and it is midnight, then I want fresh air, and it feels as if I could just hang myself..."

Other conditions that are experienced by the offenders were that of boredom and loneliness.

ii) Staff and Inmates

With regard to inmates and staff, the offenders all agree that prisoners are regularly being treated unfairly:

Offender 3 (p12): "...certain prisoners have advantages and other prisoners do not have advantages...many of the people here, that are here, are looked at because of the money they have...is full of corruption."

6.2 Interpretation of Verbal Findings

Overall, if one looks at the views of the relationships the offenders had with their caretakers, it would seem that none of them truly had a good relationship with their caretakers, contradictory to their initial responses. The only exception is that of Offender #3 who saw his grandfather as his primary caretaker and experienced a close relationship with him. However, it should be noted that this offender stayed with his parents for presumably nine years (the formative years) and during those years he had a very unstable, unhappy relationship with them.

As mentioned in the literature, it would seem that all the offenders failed to establish a sense of basic trust as they felt neglected and disregarded by their caretakers. Even if initial responses were that caretakers spent time and gave attention to the offenders as children, they failed to give relevant examples to affirm their responses. This can according to the Social Bond Theory, and supported in most literature, lead to an insecure bond developing between child and caretaker. One can conclude that they failed to form an interpersonal bridge because of a lack of trust.

Together with time and attention, opinions with regard to the caretakers as role models prove to be somewhat different. None of the offenders described their caretakers to be bad role models, but felt that the treatment they

received from the people in the house was unfair. Only one offender mentioned his parents' alcohol problems to provide a concrete example of bad role modelling. However, none of the offenders seemed to have a very close relationship with their caretakers as they seemed to avoid, run away or escape from unpleasant situations at home.

Caretakers seemed to have failed in setting the correct boundaries and limits for the children at a young age, as all of them showed deviant behaviour from a very young age. This will be discussed further under the self-esteem category.

Offenders' relationships within the biographical and historical contexts, as well as in the current prison context, proved to be cold and distant, or as described by the Social Bond Theory as 'cut off'. This also, according to the theory, is a form of an alienated bond.

One of the offenders revealed that he was a gangster in his earlier days in prison. This is a perfect example of what the Social Bond Theory calls bi-modal alienation. The offender proved to be engulfed within the gangster life and isolated from everybody who were not gangsters. One could say that he had 'forgotten' the rules whereby 'normal' society lives, and only saw a life for himself as a violent gangster and living according to these rules.

As explained in the Social Bond Theory, each of the offenders seem to fit into one or more of the three social configurations named by Elias (1987). Offender 1 could be described as being independent, as he mostly stayed in hostels. This physical distance from his parents seemed to have resulted in social distance as well, causing a lack of co-operation between him and his parents. Offender 2 seemed to be quite interdependent towards his grandfather as they seemed to have reached a balance between self and other, resulting in effective co-operation. However, with his parents there existed a clear independent figuration as the two parties seem not to have had any social connection and thus, no co-operativeness. Offender 3 seemed to also show a strong independence from his parents, partly as result of avoiding conflict at home and running away.

Offender 1 exhibited what Scheff (1997) calls a disrespectful manner causing shame. When his parents would give him a hiding, he would run away and when found he would scold his parents saying that it was their fault that he had run away. This lack of respect for authority, according to the Social Bond Theory, indicates unacknowledged shame, and in this case, causes conflict.

Even though one offender felt he had a secure relationship with his grandfather with whom he grew up with from the age of nine years, the Social Bond Theory seems to place more emphasis on the forming of an interpersonal bridge from a younger age. This would lead one to conclude

that the social bond of this offender was already broken before he came to live with his grandfather. It is difficult to find evidence that the broken bond formed with his grandfather was sufficient to replace the relationship he lacked with his parents. This offender strongly expressed dislike towards his parents and avoided any questions regarding feelings towards them. Consequently as discussed in the Social Bond Theory, this indicates a shame-based individual.

When Offender 2 spoke about his incompetence in finding something for his father, he displayed a good example of one of the dysfunctional family rules discussed in the literature review by Bradshaw (1988), called "Don't Make Mistakes". It is the rule that maintains that if one makes a mistake, one is flawed. As Offender 2 had a tendency of avoiding feeling-words in general, one can only interpret this as feelings of humiliation and incompetence and consequently shame.

Another of these rules that were apparent in all three offenders was that of 'Blame'. The offenders displayed a lack of autonomy as they continuously blame others for their mistakes and never fully take responsibility for any of their actions. It also indicated that the offenders lacked the insight and knowledge to distinguish between right and wrong as well as what their limits are. According to the literature this strongly implies an unhealthy sense of

shame. Blame, as noted in the literature, is also a way of defending oneself against shame and ensures a continuous dysfunctional system.

When observing the overall views the offenders had of themselves, they mostly expressed feelings that indicated a low self-esteem. Their negative feelings of themselves outweighed the positive feelings by almost one to three.

All the offenders had difficulty acknowledging and expressing shame, generally using words such as 'feeling bad'. They were, however, able to express feelings of not wanting to live anymore, of humiliation and guilt. These emotions, according to the Social Bond Theory, are all indications of hidden shame. One offender seemed to agree that it was because of shame and hunger that he stole. When he told his story, he distanced himself by the indirect manner in which the story was told. It seemed a careless way, as if he referred to what a person would do and not what he did. This is also evident of what Scheff (1997) says in the Social Bond Theory about disguising true feelings: "...human beings often use language in a less than straightforward way, disguising their own motives and goals" (p3).

As discussed in the literature review, one offender did express feelings of guilt, as he mentioned that because of him, innocent people were hurt. According to the literature on shame and guilt, it proved that the offender did

indeed feel guilt and not shame as he expressed distress for another's hurt and pain.

Self-esteem is directly connected with the state of the bonds according to the Social Bond Theory. A low self-esteem indicates a threatened bond. Perceptions and beliefs the offenders had of themselves as well as others' perceptions of them, showed feelings of worthlessness, rejection and disregard. According to the theory this indicates a low self-esteem and consequently a weak social bond. Together with these factors, offenders also tended to become defensive when talking about their crimes, especially by denying or trying to convince the researcher of their innocence. This is all characteristic of shame-based individuals as discussed in the theory.

All three offenders described themselves as unhappy children, feeling worthless and incompetent. They had a strong desire to be someone else and would rather escape either from themselves and/or the circumstances they were in, by running away or avoiding their home environment. As Bradshaw (1988) explained in the literature review, toxic shame often comes about as result of desiring to be someone else or wanting a "false self" (p3). A shamed person will rather avoid and reject parts of the self in order to avoid toxic shame. Unfortunately this does not seem to relieve the shame, and results in self-shame.

With regard to the local context, the findings did not differ much from that of the biographical and historical contexts. Offenders generally did not have good relationships with an important other(s) at this time, if they had any. Many of the facts recorded during childhood, reoccurred in adulthood such as blaming and feelings of being neglected. In some instances one could say that circumstances have deteriorated as offenders have limited access to visits and feel little trust for fellow inmates and staff.

All offenders displayed signs of a low self-esteem at the time of the interview, although some felt that they have matured since they came to prison. They felt more confident, respected and wise, giving advice to younger inmates. However, according to the literature this can be interpreted as disguising one's toxic shame. Evidence for this assumption or interpretation is the offenders' more regular mention of feelings of self-blame, regret and humiliation. Together with this they also feel that they are in prison unfairly and innocent of the acts they have been committed for, still blaming others for their own wrongdoings. These findings correlate with those of childhood self-esteem. Expressing feelings of shame directly was a problem and was mostly conveyed through expressions such as 'feeling guilty' and 'feeling humiliated'.

An interesting observation was evidence of Lewis' (1971) findings on the orientation of viewpoints between men and women. As with the findings in

her studies, the offenders all had a very strong tendency to be orientated towards their own viewpoints, and had difficulty grasping others'. Offender 1 is a good example. Even though he seemed to understand that his parents had good reason to keep him away from his friends, by sending him to a school far away, he still blamed them for depriving him of a good education.

Communication patterns in the biographical and historical context as well as the prison context also proved to be similar. Apart from offenders not truly feeling able to talk openly to their caretakers, except for Offender 3, they also do not really have the opportunity to express themselves to someone who they can trust. Communication patterns were mostly of a closed nature as avoidance of feelings, especially feelings of shame, were prevalent. According to Scheff and Retzinger (2000) shame becomes hidden when destructive communication patterns develop. In this study, communication patterns or tactics proved to be destructive. The authors mention that withholding information with regard to one's feelings, thoughts and desires, creates subtle shame. Subtle shame could be identified with the offenders closed manners of communication.

Generally the environments in which the offenders found themselves as children, were unpleasant. Violence and aggression were always present and this treatment seemed to trigger a response of trying to escape in some way or, literally to run away.

Current conditions in prison appear to be unpleasant for all three offenders, as they feel that unfair treatment prevails. A strong sense of being neglected became clear with each offender, especially with regard to their mental health, as they do not seem to receive any personal assistance (of a psychological nature) within the prison.

6.3 Nonverbal Findings according to Retzinger's list of Cues to Hidden Shame and Hidden Anger

Nonverbal behaviours were observed and interpreted within the context and content of what the offenders were talking about. Two categories were identified by the given list of cues (Appendix A), namely:

1. Hidden Shame Cues
2. Hidden Anger Cues

Category 1: Hidden Shame Cues

Sub-categories given by the list of cues were the following

- a) Hiding behaviour such as:
 - i) the hand covering all or parts of the face,
 - ii) gaze aversion, eyes lowered or averted.
- b) Blushing

- c) Over-control such as:
- i) turning in, biting, or licking the lips, biting the tongue
 - ii) forehead wrinkled vertically or transversely;
 - iii) false smiling or other masking behaviours.

During the observation of the videotape recorded interview of the three offenders with regard to hidden shame cues, the following were observed:

Note that times are given mostly according to minutes into the conversation, as obtained from the display panel on the videotape player.

Offender 1

00:15 Within the first 15 seconds of the interview the offender partially covers his face when he talks about his relationship with his family. Soon afterwards he averts and lowers his eyes several times.

01:00 About 1 minute into the interview the offender looks the researcher in the eye when he repeatedly notes that his family was poor, however when talking about the fall-outs in the house, his eyes avert.

03:00 When talking about stealing other people's belongings the offender repeatedly bites his lower lip.

05:00 and 06:00 During the discussion about favouritism towards the girls in

the house, the offender displays cues such as biting his lip and holding his hand on his chin.

08:00 When talking about how he lost his job, he bites his lower lip.

09:00 He bites his lip while explaining how guilty people were finally arrested and stolen goods returned to the rightful owners.

10:00 Discussing his love for his parents and time spent with him, the offender has his hand on the side of his face.

13:00 Maintaining that his parents did not spend enough time with him, his eyes are averted and lowered.

14:00 Upon blaming his parents for not keeping him in schools where he could learn English, his eyes avert.

15:00 Talking about friends being a bad influence on him, he covers part of his face.

18:00 Maintaining that he felt safe with his parents, he lowers his eyes and covers part of his face when explaining how he walked away from home.

20:00 Discussing parents comparing him with others, his eyes are lowered and he covers his face partially.

26:00 Explaining that he does not want to raise his children as he was raised, suffering and having a difficult life, his eyes are lowered and he covers

his face partially.

28:00 When talking about his mother always helping him, his eyes are averted and he covers his face partially.

29:00 On explaining how he sold dagga to support himself, he bites his lower lip.

33:00 Showing his independence from his parents and supporting his little brother, he covers parts of his face. Also when explaining that he is not an aggressive person, he covers his face partially.

35:00 Telling the story of how the boy fell out of the tree and how it was an accident, he produces a false smile and then covers his face partially.

38:00 Where fellow inmates question how this man (the offender) could possibly be in prison for murder, he covers part of his face and bites his lower lip.

42:00 On describing how he felt when he did not have enough money to pay for goods at a shop and the teller would not give him the extra money, he lowers his eyes, bites his lower lip and covers his eye.

47:00 On feelings about being in prison, his eyes are averted and he bites his lip.

Offender 2

00:16 When talking about relationship with caretakers, he covers part of his face.

01:00 Explaining that there was no communication in their house, he licks his lips.

02:00 Discussing favouritism in the house, he covers part of his face

08:00 On explaining how none of his siblings cared for his mother when his father died, he covers different parts of his face.

11:00 Explaining how he could not talk openly to his parents, he covers part of his face.

15:00 When talking of not abiding by the rules of the house, he covers part of his face.

19:00 On parents not supporting him, he covers parts of his face and his eyes are averted.

21:00 When having to describe himself, he covers part of his face.

21:00 On confirming that he suppresses many emotions, he bites his lip.

23:00 Upon answering about wanting to be someone else and saying he wanted to be a better person, he shows a false smiling, averts eyes and covers parts of the face.

23:00 Talking about how he helped his struggling mother, he covers part of

his face.

24:00 On feeling like running away, he covers part of his face.

25:00 Talking about his mother loving him and her financial difficulties to travel so far to prison, he covers part of his face.

27:00 Expressing feelings about being in prison, he bites his lip.

27:00 Discussing differences in his life since childhood, he covers part of his face.

29:00 When talking about himself when he first arrived at prison, he covers part of his face.

30:00 Talking about things he likes about himself, he licks his lips.

31:00 Talking about how much he used to smoke, he licks his lips.

33:00 Explaining that a lot of people have respect for him, he covers part of his face.

34:00 Talking about being chained up, he covers part of his face.

34:00 Talking about important others, he gives a false smile.

35:00 Explaining his relationship with his sister, he covers part of his face.

35:00 On being in prison, he covers part of his face.

36:00 Explaining how he got to be in jail, he covers parts of his face.

37:00 Talking about a person who he trusts inside of prison, he covers parts of his face.

38:00 Explaining that he is a helpful friend, he covers part of his face.

39:00 On fighting in prison, his eyes are averted.

39:00 On the fairness of him being in prison, he displays false smiling and averted eyes.

41:00 On how fighting or aggression in prison is handled, he displays false smiling.

43:00 Commenting on his gangster life in prison, his eyes are lowered, he displays false smiling and he covers part of his face.

Offender 3

00:25 When talking about his relationship with his grandfather, his eyes avert and lower and he covers parts of his face.

02:00 Thinking of what his grandfather thought about him as a child, he gives a false smile, his eyes lower and he covers parts of his face.

03:00 On whether his grandfather was a good role model to him, his eyes lower and he covers parts of his face.

04:00 On his parents drinking and hitting him, he covers part of his face and lowers his eyes, and then wrinkles his forehead.

05:00 When talking about his parents, he lowers his eyes and bites his hat.

05:00 Saying that he is worthless to his parents, he covers part of his face.

- 12:00** On how his grandfather handled his fighting, he covers part of his face.
- 13:00** On grandfather supporting him, he covers part of his face and lowers his eyes.
- 13:00** On not being humiliated by his grandfather, he covers part of his face and lowers his eyes.
- 14:00** Talking about not remembering the rules of the house, he gives a fake smile and lowers his eyes.
- 15:00** Talking about when he got disciplined by his grandfather, he covers part of his face and lowers his eyes.
- 16:00** Saying how his father used to hit him, he covers part of his face and lowers his eyes.
- 16:00** Telling how unfair things happen in prison, he has a wrinkled forehead.
- 16:00** Describing how doing certain things can be to your disadvantage, licks his lips and lowers his eyes.
- 17:00** Saying that he did not really want to come to the interview, he covers part of his face.
- 19:00** Discussing opinions within the house, he covers part of his face and lowers his eyes.
- 19:00** On always being aggressive, he covers part of his face and lowers his eyes.

- 20:00** Confirming that he was a very unhappy child, he covers part of his face, lowers his eyes and bites his hat.
- 21:00** Telling how his father would hit him for nothing, he covers part of his face, bites his finger nail and averts his eyes.
- 23:00** On feelings about himself, he covers a part of his face and lowers his eyes.
- 23:00** On saying he feels worthless to those people, he gives a false smile.
- 24:00** On wanting to be someone else, he lowers his eyes and covers part of his face.
- 26:00** Thinking of himself today, he gives a false smile, lowers his eyes, covers part of his face and licks his lips.
- 27:00** When talking about having an important person to trust, he lowers his eyes and covers parts of his face.
- 27:00** Saying that he is alone, he licks his lips.
- 28:00** When asked his opinion about being in prison, he lowers his eyes, covers part of his face and displays horizontal lines on his forehead.
- 29:00** On being fairly in prison, he covers part of his face, lowers his eyes, then displaying horizontal lines on his forehead and licks his lips.
- 30:00** When telling about the crime that he had committed, he covers part of his face and lowers his eyes.

30:00 On the fighting and unfairness of prison, he covers part of his face and lowers his eyes.

30:00 Explaining that he does things he does not want to do, he covers part of his face and lowers his eyes.

32:00 Maintaining that this will be the last time that the researcher will ever see him, starts crying and covers his whole face.

Category 2: Hidden Anger Cues

- a) Brows lowered and drawn together, vertical lines appear between them
- b) Eyelids narrowed and tense in a hard fixed stare
- c) Lips pressed together tightly
- d) Hard direct glaring
- e) Leaning forward towards other in challenging stance
- f) Clenched fists, waving fists, hitting motions

During the observation of the videotape recorded interview of the three offenders with regard to hidden anger cues, the following were observed: (Times are given mostly according to minutes into the conversation, as obtained from the display panel on the videotape player)

Offender 1

03:00 When talking about stealing other people's belongings the offender repeatedly narrows his eyelids.

07:00 Explaining on how he raised his brother on his own because he saw his parents also 'starting' with his brother, he leans forward.

08:00 Complaining about how he lost his job and that it must have been God's decision, he leans forward.

11:00 Maintaining that he cannot blame his parents anymore, his eyelids are narrowed into a fixed stare.

13:00 Leaning forward upon explaining that he was deprived of a proper education.

17:00 A clear narrowing of the eyelids when explaining how awful the food was at the hostel.

30:00 When explaining how little food they got at home, his eyelids narrow.

40:00 Explaining how people outside the prison do not understand how to rehabilitate prisoners, he leans forward in a challenging manner.

49:00 Leaning forward when explaining how people claimed that he made unfair deals in his business.

54:00 On explaining that families do not help the prisoners when they are released from prison, he leans forward.

59:00 On telling how he went to prison for the first time when he sold dagga, he presses his lips together.

Offender 2

00:01 On explaining that there was no communication in the family, he lowers his eyebrows forming vertical lines between them and pressing his lips together.

04:00 Explaining how he was bullied as a child, his eyelids narrow and his eyebrows lower, forming vertical lines between them.

05:00 When talking about the cases made against him as a child after hurting others with sharp objects, his eyelids narrow.

08:00 Explaining how he could not take the idea of 'dividedness' between stepsiblings and blood siblings, his eyebrows lower, eyelids narrow, his fists clench and he waives them up and down.

11:00 Not wanting to go back home, his eyebrows lower, forming vertical lines between them.

14:00 Explaining that he is not someone who deliberately seeks trouble, his eyebrows lower forming vertical lines between them.

21:00 Talking about suppressing, he presses his lips together.

27:00 On talking about being in prison, he presses his lips together.

28:00 Discussing unfair treatment in the prison, he clenches his fists and leans forward.

31:00 Talking about how much he used to smoke, he presses his lips together.

32:00 On blaming others for his mistakes, he presses his lips together.

39:00 Explaining how he was hired by other people, he presses his lips together.

42:00 Saying how being in chains made him 'hard', he clenches his fists.

44:00 On regretting his gangster life, he presses his lips together.

Offender 3

15:00 On getting hit by his father, he presses his lips together.

16:00 Talking about unfair things happening in prison, his eyelids narrow.

16:00 Saying that he did not want to come to the interview, his eyebrows lower with vertical lines between them.

21:00 Telling how his father hit him, his eyelids narrow and his eyebrows lower with vertical lines between them.

23:00 On feelings about himself, his eyelids narrow.

27:00 Talking about having no one to trust, his eyelids narrow.

30:00 On doing things he does not want to do in prison, his eyebrows lower

and lift vigorously.

6.4 Interpretation of Nonverbal Findings

After the videotape recordings were observed by another researcher as well, objective interpretations could be made. The interpretation of nonverbal findings initially took on a quantitative nature, in order to make comparisons between cases and categories identified. No specific number of occurrences or instances were used, but rather approximates of differences found. This was mainly decided on because of the differences in length of the interviews.

a) Recorded Number of Instances of Cues Indicating Hidden Shame and Hidden Anger

The offenders displayed almost twice as many instances of hidden shame cues as hidden anger cues.

This is an interesting observation as one sees a notable difference between unacknowledged shame and unacknowledged anger. It would seem that the offenders were more prone to display hidden shame than hidden anger.

No major differences were found between hidden shame cues within the biographical and historical context and the prison context. However, hidden

anger cues instances were almost twice as many in the prison context than those recorded in the biographical and historical context.

Possible reasons for this finding, could be that offenders' opportunities to express their anger or aggression are being suppressed by the current prison system. Another reason for the small number of hidden anger cues recorded in the childhood context, can be due to the offenders' avoidance and contradictory information regarding their aggressiveness as children. A last reason could simply be that they could not remember.

b) Compare Number of Hidden Shame and Hidden Anger Instances Found within Individual Interviews

Offender 1 and 2 displayed almost twice as many hidden shame cues as hidden anger cues, whereas Offender 3 exhibited about three times more hidden shame cues than hidden anger cues.

Offender 2 showed the most cues of hidden anger, whereas Offender 3 showed the most hidden shame cues.

This is an interesting observation as one recalls that Offender 3 was the only one who actually admitted that he was fairly sentenced to prison, whereas the other two offenders felt that they were either not guilty of the crime, or that they were in prison because of other people's actions.

Within the two contexts under investigation, Offender 1 displayed more hidden shame cues in the childhood context than hidden anger cues. No major difference between hidden anger and hidden shame cues in the present context was noted. Offender 2 displayed twice as many hidden shame in the prison context as well as twice as many hidden anger in the present context. Offender 3 displayed more hidden shame cues in the biological and historical context, but more hidden anger cues in the prison context.

c) Compare Instances Found between Offenders

It became quite clear that Offender 1 had certain cues that repeated themselves in both shame and anger. Within the hidden shame category, biting his lower lip, having lowered or averted eyes, and covering parts of his face were the most repeated cues recorded. In the anger category, it was leaning forward and narrowing of the eyelids that cued hidden anger in Offender 1. Offender 1 also had a tendency of physically closing himself up by holding his hands tightly together and keeping his knees together when he seemed to feel shamed. Another observation in the shame category, is that the offender seemed to display all the cues for hiding behaviour and apart from 'forehead wrinkled vertically or transversely', he also displayed over-control. Blushing is the only sub-category that the offender did not display.

Another observation with Offender 1 was his elaborate swinging and gesturing with his hands and arms where hidden anger cues were identified. Although Retzinger's list does name clenched fists, waiving of the fists and hitting motions, these elaborate movements do seem important. This could then also be interpreted as indications of hidden anger.

Offender 2 was more likely to display covering parts of his face and licking his lips in the hidden shame category. Apart from blushing, he displayed all the cues under the category of hidden shame, indicating a bit more hiding behaviour than over-control. In the hidden anger category, this offender had the tendency to press his lips together, lower his eyebrows and narrow his eyelids with notable occasions of clenching his fists. Offender 2 exhibited more clearly direct indications of anger than any of the other two. Interestingly, this offender had a very open and relaxed manner of sitting, almost lying back in his chair with his legs spread open. Observed in this offender was that whenever he felt uncomfortable he would lean forward and move in his chair, especially when the content revolved around feelings about himself.

Offender 3 showed a very distinct difference between cues to hidden anger and hidden shame. He displayed the most hidden shame cues, mostly displayed cues such as covering of the face and lowering of the eyes. This offender also displayed the least hidden anger cues consisting mostly of

narrowing eyelids. An overall observation with this offender in comparison to the other two offenders, was that Offender 3 seemed quite nervous throughout the interview, holding on to a hat for dear life, twisting the hat every now and then. He was also the only offender who got extremely sad and eventually cried, covering his whole face with the hat at the end of the interview.

d) Possible Relations that Cues have with Relationships and Self-esteem

All observed instances could be categorised in terms of relationships and self-esteem.

Offenders 2 and 3 showed more hidden shame with regard to self-esteem with Offender 1 not having a notable difference between relationships and self-esteem. The same was found with the difference between relationships and self-esteem with regard to hidden anger.

Most instances revolving around relationships showed hidden shame that included only hiding behaviour, whereas instances revolving around self-esteem included approximately the same amount of hiding behaviour as over-control. The only cue that was not observed in the hidden shame category was that of blushing. The dark complex of the offenders could have contributed to this lack of observation.

In the hidden anger category offenders tend to have almost the same number of instances between self-esteem and relationships. No notable differences were observed with regard to the type of cues displayed in instances of self-esteem and relationships.

e) Overall Interpretations

It can be concluded from the above findings that all offenders did show two or more hidden shame cues and hidden anger cues throughout the interview.

Offenders tend to over-control emotions of shame with regard to self-esteem. Overall, offenders displayed most of the cues named in Retzinger's list with the exception of 'Blushing'. As this list was developed within a western context, it is understood that the offenders may have experienced blushing. Observing it, however, was not possible as they all had fairly dark complexions.

Offender 1 displayed all of the cues noted in the list except for 'Brows lowered and drawn together, vertical lines appear between them' and 'hard direct glaring'. A reason for not observing lowered brows and vertical lines appearing between them could be due to the quality of the videotape recording.

Overall, it was found and interpreted that all offenders showed unacknowledged shame and anger. Although hidden anger showed to be less unacknowledged, instances indicated that they do experience more unacknowledged anger within the prison setting than they did within the biographical and historical context.

7. CONCLUSION

The primary goal of this study was to investigate the relationship between shame and violence among some violent offenders in the Windhoek Central Prison.

It was an exploratory study and to reach the final conclusions, an attempt was made to determine the states of the social bonds within different contexts. The secondary goals of the study as described in Chapter 4 of this study were as follows:

- b) the determination of the states of the offenders' social bonds within their biographical and historical context;
- b) the determination of the states of the bond in the context of the prison.

To achieve the first of the secondary goals, offenders' childhood relationships, childhood self-esteem and childhood communication tactics were investigated.

Conclusions made from the verbal analysis of the study indicated that offenders had formed insecure attachments to their caretakers. As they failed to develop a secure bond with their caretakers, they became shamed-based individuals.

Most of the offenders felt a sense of isolation from the community, which indicates a person who experiences shame, as noted in the Social Bond Theory. The nature of the relationships the offenders had with their caretakers was found to be “cut off” as named by Bowen (1978), also known to be a form of an alienated relationship. One offender did have the opportunity to experience a relationship with his grandfather that could be described as solidarity.

None of the offenders showed a relationship during childhood that could be described as an engulfed relationship, explained by Bowen (1978) to be the other form of an alienated relationship. This, as described in the Social Bond Theory, is when a relationship is so close that the persons involved give up part of themselves to accommodate the other. In general, mutual misunderstanding existed between offenders and caretakers, which is also evident of a weak or threatened social bond.

As self-esteem is directly relevant to the state of the social bonds, it was important to include this in determining the state of the bonds in the different contexts. Within the childhood context, the offenders proved to have all suffered from a low self-esteem. Feelings of worthlessness, incompetence, humiliation and rejection were all present in the offenders, indicating a low self-esteem. Generally offenders would blame either their caretakers or others for their unhappiness as children and deny any guilt with regard to their

wrongdoings as children. The traits are all indicative of a low self-esteem according to Scheff (1997).

According to Scheff and Retzinger (2001) indirect manners of communication indicates an insecure bond. The communication tactics used by all three offenders proved to be indirect and dysfunctional, as all offenders tend to either deny or disguise their feelings and mostly avoided any direct answering of questions regarding childhood feelings they experienced.

Unacknowledged shame and unacknowledged anger were found to have been present in all of the offenders during childhood. This is evident in the fact that the offenders, except one, seemed to lack the opportunity as children to really express their anger and shame, partly because they ran away and partly because they did not trust their parents. Although nonverbal analysis revealed interesting findings, Retzinger only supplied the list of cues but not formal methods to analyse or interpret findings and the only relevant conclusion that can be made with regard to this study is that the offenders do have hidden shame and hidden anger.

It is thus fair to say at this time that there exists enough evidence to conclude in the biographical and historical context, offenders indeed had a broken social bond with their caretakers.

Regarding the state of the bond within the local prison context it was found that offenders' overall relationships were weak or threatened. Similar findings to that in childhood were indicated within the prison context.

As explained in the Social Bond Theory, the offenders seemed to fit each of the three social figurations named by Elias (1987).

The bonds of the offenders could then be described as mostly isolated. The social bonds were thus found to be too loose within both the contexts and one can thus infer that these offenders mostly experienced toxic shame throughout their lives, with isolated instances of feeling pride.

Bi-modal alienation seemed to exist among most of the offenders. In the local prison context, they described a sense of not being understood by the outside world whereas fair understanding amongst the inmates existed, while they failed to see the viewpoints of 'those' who caused their imprisonment. Yet, the offenders did mention feelings of isolation within the prison community.

One offender differed notably from the other two offenders. He was the only one who admitted his guilt and expressed true regret for what he had done. He also showed genuine guilt about his wrongful deeds. However, he did blame other peoples' actions for the deeds. This offender was also the one who showed the least hidden anger, but the most hidden shame. This could

indicate that even though he does acknowledge his feelings of guilt, he feels extremely ashamed of himself. Contrary to the theory, one would have expected this offender to display much more hidden anger. However, it should also be noted that Lewis (1971) does mention two ways hidden shame is handled by men. It can either be expressed through 'acceptable' behaviour such as anger and aggression or the person may fall into silence and/or depression. It is believed that this offender is suffering from depression.

One clear difference between the bonds developed during childhood and those that exists currently was in the intensity of the relationships, as offenders seemed to have less contact with important others currently. Self-esteem seemed to also be even lower than in childhood as offenders expressed more self-blame and regret, but also tended to cover their true feelings with blame.

Offenders showed, as within the childhood context, to still have a low self-esteem, also expressing feelings of incompetence, guilt and one instance of shame. Communication patterns or tactics were of an indirect nature and offenders failed to express their feelings and thoughts, rather internalising these feelings and blaming others. They tended to avoid, deny and derail when it came to self-feelings.

Nonverbal analysis showed that most of the offenders displayed cues that indicated hidden shame and anger. These cues were kept in context to what the offenders were talking about to provide relevant interpretations.

The findings of the second secondary goal of the study were thus that offenders had a weak or broken social bond with those whom they considered as important other(s).

As the answers of the states of the social bonds within both contexts were similar, it can be concluded that as assumed by the Social Bond Theory, those who commit violent crimes have toxic shame.

Consequently, a strong link exists between shame and violence among perpetrators of violent crimes within the Windhoek Central Prison.

7.1 Limitations and Implications of the Study

Finding material relevant for the literature review and the theoretical framework proved to be rather difficult. As shame, and especially shame with regard to violence has not been investigated until recent years and mostly internationally, finding printed material was difficult and costly. Most sources were found on the World Wide Web, but proved to be mostly repetitions.

During the course of the interviews, certain factors were observed that could have had an influence on the results of the study.

One factor that stood out quite clearly was language. Only one of the offenders' home language was Afrikaans, whereas the others are Damara Nama speaking. Understanding what they meant was sometimes difficult and, although the researcher did her best to stay objective, some subjective assumptions could have occurred. Even though the interviews were translated from Afrikaans to English verbatim and re-checked to confirm correct translation, there is a possibility that some of the content was lost.

A second limitation to the study was that the researcher experienced some frustrations in obtaining relevant information from the offenders. Although questions were put quite clearly, offenders showed to have a need to 'just talk'. A reason for this occurrence could be the fact that the offenders seem to have no access to social and psychological help within the prison. Currently the prison does not have a psychologist employed and the social workers do not suffice for the number of offenders currently imprisoned.

Other implications or limitations to obtaining the relevant interview data for the study, may be that the researcher had difficulties sticking to the trail of relevant questions. A more structured manner might have assured less irrelevant information. Reasons for the way of questioning could be explained

by stating that the researcher took caution not to aggravate the offenders, as sensitive issues were discussed. Therefore offenders were invited and allowed to discuss what they felt was important at the time.

Because of the strong desire to prove their innocence, some offenders gave very contradicting answers to many questions, resulting in complications when it came to the content analysis. Although offenders did come forth as being fairly unaware of the video camera, some instances were observed where they would become conscious of the camera. This would result in offenders trying to 'state their point to the world', painting a picture of them being good, innocent people who have been unfairly punished.

The nonverbal analysis was found to be somewhat complicated by the quality of the recording. Facial expressions were not clearly visible, especially movements around the eyes. This could have had an effect on the eventual outcome of the nonverbal analysis.

Also with regard to the nonverbal part of the study, the fact that the verbal part of the list of hidden shame and anger cues was left out, may have deprived the study of more conclusive and valuable results.

A difficulty experienced by the researcher with regard to hidden shame and hidden anger cues was the initial intention to be aware of these cues while

doing the interviews. This proved to be harder than expected, resulting in the researcher missing some valuable cues which could be elaborated on, especially where shame was indicated. However, it should be kept in mind that the offenders did tend to hide these cues very well and they only became apparent after careful observation of the recorded material.

7.2 Suggestions for Intervention and Research

The results gained from this study could provide important information regarding the understanding and treatment of violent perpetrators, as well as the prevention of violence in Namibia.

Findings of this study could be used to design a programme with methods where offenders could learn how to acknowledge their hidden shame. Since the study confirmed most of what was claimed in the literature and in the theoretical framework, examples of such methods, provided in the literature review could be a guideline for designing such a programme.

Such a guideline could also be applied to schools, in institutions with juvenile offenders and in youth organisations. This could assure a less violent future for Namibia. A 'Life Skills' programme could be implemented to identify and deal with toxic shame and anger in teenagers or even children. As the Social Bond Theory places emphasis on childhood development and identifying the

'signs' early in a child's life, this theory could be used as giving direction in developing a guideline. Hopefully this will lower the probability of future violent offenders.

Further suggestions could be to conduct a study of a quantitative nature to investigate if offenders of violent crimes have more shame and the nature of that shame.

Evidence with regard to the current conditions in the prison indicated that there exists a serious need for psychological help for the prisoners. At the current time prisoners do feel a strong need to just talk with someone who is willing to listen.

This study indicated an enormous need for further studies in shame and violence. The consequences of shame, especially toxic shame should be realised, not only in already sentenced offenders, but in juveniles as well. Children need to be able to express their shame and anger in a healthy manner. Although a big task, teaching caretakers how shame becomes internalised and toxic, how to acknowledge their own shame will lead to more peaceful and less violent children in the future of Namibia.

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APPENDIX A

Identifying Feelings

As developed by Retzinger (1991; 1995)

Identifying cues for particular feelings is useful in helping parties save face, or at least for identifying the potential for losing face. Being aware of even subtle indicators can help avoid escalation. The following include ways to detect feelings through various means: verbal, paralinguistic and visual.

Verbal Cues

SHAME

alienated, rejected, dumped, deserted, abandoned, estranged, isolated, separate, alone, disconnected, disassociated, detached, withdrawn, inhibited, distant, remote, split, divorced, polarized.

confused, stunned, dazed, blank, empty, hollow, spaced out, lost, vapid, hesitant, aloof.

ridiculous, foolish, silly, funny, absurd, idiotic, asinine, simple-minded, stupid, curious, weird, bizarre, odd, peculiar, strange, different.

inadequate, helpless, powerless, defenseless, weak, insecure, uncertain, shy, deficient, worse off, small, failure, ineffectual, inferior, unworthy,

worthless, flawed, trivial, meaningless, insufficient, unsure, dependent, exposed, inadequate, incapable, vulnerable, unable, inept, unfit, impotent, oppressed.

uncomfortable, embarrassed, restless, fidgety, jittery, tense, anxious, nervous, uneasy, antsy, jumpy, hyperactive.

hurt, offended, upset, wounded, injured, tortured, ruined, sensitive, sore spot, buttons pushed, dejected, intimidated, defeated.

ANGER

mad, frustrated, irritated, aggravated, cranky, cross, hot-tempered, ireful, quick-tempered, short fuse, enraged, fuming, agitated, angry, furious, irritable, incensed, indignant, irate, annoyed, mad, pissed, pissed off, teed-off, upset, bothered, resentful, bitter, spiteful, hold a grudge.

Other verbal Cues:

SHAME

Mitigation (to make appear less severe or painful); oblique, suppressed reference such as "they", "it", "you"; vague; denial; defensive; verbal withdrawal (no response); indifference (acting "cool" in an emotionally arousing context).

ANGER

Interrupt; challenge; sarcastic; blame

SHAME-RAGE

Temporal expansion/condensation or generalization such as saying "you always..." or "you never. .." Triangulation (bringing up a third party or object).

Paralinguistic Cues

SHAME

Vocal withdrawal, confusion of thought, over-soft; hesitation; self interruption (censorship); many filled pauses (-uh-); long pauses; silences; stammer; fragmented speech; rapid speech; condensed words; mumble; incoherence, lax articulation; tensely laughed words.

ANGER

Staccato (distinct breaks between successive tones); loud; heavy stress on certain words; singsong pattern (ridicule); straining; harsh voice qualifiers.

SHAME-ANGER

Whine; glottalization (rasp or buzz); choking; tempo up/down; pitch up/down

Visual Cues

SHAME

1. Hiding behaviour such as:

- a) the hand covering all or parts of the face,
- b) gaze aversion, eyes lowered or averted.

2. Blushing

3. Over-control such as:

- a) turning in, biting, or licking the lips, biting the tongue
- b) forehead wrinkled vertically or transversely;
- c) false smiling (Ekman & Freisen, 1982); or other masking behaviours.

ANGER

1. Brows lowered and drawn together, vertical lines appear between them.

2. Eyelids narrowed and tense in a hard fixed stare.

3. Lips pressed together tightly.

4. Hard direct glaring

5. Leaning forward towards other in challenging stance

6. Clenched fists, waving fists, hitting motions

Like all human expressions (including words), the meaning of these markers are context-related; that is, their relevance depends on the relationship between self and other. Look for constellation of markers in context; the more markers from each category, the stronger the evidence.

APPENDIX B

VIDEO RECORDING CONSENT STATEMENT

1. I, the undersigned, understand that the purpose of this research study is to investigate the relationship between shame and violence among violent offenders in the Windhoek Central Prison. I also understand that the procedure will take the form of a semi-structured video recorded interview and will last approximately an hour.
2. Risks and discomfort for me as participant may include the following: reactions and feelings as a result of the anticipation of being recorded, such as suspiciousness, fear, anxiety etc, and while they are usually short-lived, these reactions may at least temporarily influence how I respond toward others. I understand that the researcher will be available to discuss any concerns that I or she may have over my reactions or responses.
3. I understand that my identity will be kept anonymous throughout the recording and analysis of all gathered information used from the video recordings in this study. I also understand that all recorded information will stay confidential. I understand that all recorded tapes will be stored in a safe manner with limited access to them.

4. Only one other approved researcher and the supervisor will have access to the tapes during analysis. This is important to assure objectivity in the study as the researcher will also participate in the interview. However, in spite of these precautions, the possibility of unauthorised access to the tapes exists; I do understand that there is some possible risk of identification through facial visual identification by researchers who may view the videotapes.
5. I understand that the participation in this study is completely voluntary and can be terminated at any time without penalty or consequences for myself.
6. I understand that because the analysis of the video tape recordings includes non-verbal elements, the videotapes will not be erased immediately upon the date of completion.
7. I understand that a summarised report will be made available to the management of the Prison on request.
8. The researcher, Ms Sanmari Steenkamp, can be contacted at 081 283 1054 for any information about the participant's rights or questions he may have about the study. Alternatively, the research supervisor, Dr Gudrun Kober, can be contacted at (061) 371 551.

I fully understand the risks involved and the limitations in the procedures described above and I freely and voluntarily consent to the video recording of myself for the purpose of the research study on the relationship between shame and violence among violent offenders in the Windhoek Central Prison.

Also, I give up the right to view the recorded videotapes, but the videotapes may be viewed and scored, and the information processed and used by those persons specified in the project informed consent document, which I have signed.

PARTICIPANT'S SIGNATURE

DATE

I am satisfied that participant has given an informed consent.

SANMARI STEENKAMP (RESEARCHER)

DATE

APPENDIX C

INTERVIEW GUIDELINE

Keywords: (**RELATIONSHIPS** - bonds = alienated [engulfed/isolated] or solidarity)

- trust of caretaker
- attention and time spent with caretaker
- modelling/role model – caretaker
- boundaries and limits set by caretaker
- shared interest between child and caretaker
- punishment (disapproval, disregard, verbal/physical abuse) and rewards given by caretaker
- communication styles – open/closed
- respect, safety, security
- family rules (control, perfectionism, blame, denial, don't make mistakes, unreliability)
- defences (escape, withdrawal, criticising, rage, attack)
- behaviour toward self and others

Keywords: (**SELF-ESTEEM** - bonds = alienated [engulfed/isolated] or solidarity)

- sense of self / self-worth
- desire to be someone else
- feeling self-consciousness
- self-acceptance
- powerlessness
- helplessness
- secrecy and hiding
- desire to withdraw
- feeling abandoned
- seeing self as failure
- feeling unwanted
- blushing, sweating, increase in heart rate
- anger, conflict, revenge
- feeling pride, joy, happiness, content, free
- sense of self-responsibility
- feeling embarrassed, shy, humiliated, ashamed
- feeling inferior
- perceptions, beliefs about the self
- other's believed perceptions about self
- desire to avoid
- suppressing 'unaccepted' emotions – shame

1. BIOGRAPHICAL AND HISTORICAL INFORMATION:

1.1 Age _____

1.2 Culture/Race _____

1.3 Where were you born? _____

1.4 Where did you grow up? _____

1.5 What is your home language? _____

1.6 How many siblings do you have? _____

1.7 Which child were you? _____

1.8 Who took care of you as a small child? _____

1.9 Are they still alive? _____

1.9.1 If not, when did they pass away? _____

1.10 What is your highest level of education? _____

1.11 Did you have a job before you were sentenced to prison? YES/NO
If yes, what did you do? _____

1.12 Are you married/divorced/single? If married/divorced, for how long?

1.13 Do you have children? YES/NO If yes, how many and how old?

1.14 Is this your first time in prison? YES/NO

1.14.1 If no, how many times have you been in prison? _____

1.14.2 For how long have you been in prison now? _____

1.14.3 What is the crime(s) that you have been sentenced for? _____

1.15 Describe the neighbourhood/place/environment where you grew up?

2. DETERMINING THE STATES OF THE BOND WITHIN

BIOGRAPHICAL AND HISTORICAL CONTEXTS

(all questions will be elaborated on where necessary)

2.1 If you think back to your childhood, did you have a good or bad relationship with your (caretaker)? Explain.

- How did you feel about your (caretakers)? Why?
- How do you think they felt about you? How come?
- Was there a lot of conflict in the house? Explain. How was it handled?
- Do you feel that your (caretakers) were a good example for you as a child? Explain.

2.2 How much time did you spend with your (caretakers)?

- What did you and your (caretaker) do together?
- Did you get enough attention from your (caretakers)? Explain.
- Did your (caretakers) know when you needed anything? Did they give you what you needed as a child?

2.3 As a child, did you feel safe with your (caretakers)? How come?

- What made you feel safe with your (caretakers)?
- Could you speak openly about what bothered you? What would happen then?
- Did your (caretakers) ever humiliate you? How?
- If you got in trouble outside the house, say for instance in school, did your (caretakers) support you? Explain.

2.4 Were there certain rules of the house? Can you remember any of these rules? What were you allowed to do and what not? Did you grow up in a strict household? Explain.

- If you did something wrong, how were you disciplined by your (caretakers)?
- If someone else did something wrong, were they disciplined in the same way you were? Did disciplining differ or change over time?
- How did it make you feel when you got disciplined?
- How did you react when you got disciplined? Explain.

2.5 If people had different opinions or viewpoints in your home, what would normally happen?

- Did you ever become aggressive as a child? Explain.
- Did it happen a lot? How often? Why?
- Was there anyone specific you got aggressive towards? Explain.

2.6 What kind of a child were you?

- Were you a happy or unhappy child? Explain.
- Did you feel good or bad about yourself? Explain.

2.7 Did you sometimes wish that you could rather be someone else?

- Did you ever feel like just hiding or running away or disappearing? (all the time, only sometimes, or rarely)
- Did you ever feel unwanted or neglected by your (caretakers)?
- Why do you think you felt like this?

3. STATES OF THE BOND IN THE PRISON CONTEXT

3.1 Looking back at your childhood today, do you still feel the same about yourself?

- What is different today? Explain.
- What is the same today? Explain.
- What do you like about yourself? Dislike? How come?

3.2 Who are the most important persons in you life today? How come?

- If you differ with these important people, how is it handled?
- How do they feel about you? How come?
- And how do they feel about your crimes?

3.3 Is there anybody in prison with whom you have formed a trusting relationship since you have been here? Explain.

- Do you spend a lot of time together? Explain.
- Can you openly speak to these people/person? Explain.

3.4 How do you feel about being in prison?

- Do you feel the sentence was fair? Explain.

3.5 If you get in a fight or conflict here in prison, what do you do? How is it handled by others? Explain

APPENDIX D



REPUBLIC OF NAMIBIA

MINISTRY OF PRISONS AND CORRECTIONAL SERVICES

Enquiries: Ms. A. R. Katjivena
Tel. No.: 061-2846291
Fax No.: 061-2846285
My Ref.:
Your Ref.:

Office of the Commissioner

Private Bag 13281

19 August 2004
WINDHOEK
NAMIBIA

The Officer in Charge
Windhoek Central Prison
Private Bag 13281
Windhoek

RE: RESEARCH STUDY: THE RELATIONSHIP BETWEEN SHAME AND VIOLENCE AMONG PERPETRATORS OF VIOLENT CRIMES

Your request dated on 28 June 2004, on the above matter bears reference.

Your request has been granted, to conduct the research study at Windhoek Central Prison. Necessary arrangement will be made with the authorities at the institution.

The Namibian Prison Service should be provided with a copy of the research outcome at completion.

Thanking you in anticipation.

A handwritten signature in black ink, appearing to read 'E. Shikongo', written over a dotted line.

E. SHIKONGO
COMMISSIONER OF PRISONS