FEMINISM, EMBODIMENT AND EMOTIONS

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1. Introduction

There has been substantial reflection within feminist scholarship on the role that emotion plays when considering the subordination of women within patriarchal structures and power relations. In fact, in recent decades, an “affective turn” has taken place in feminist philosophy (Clough and Halley 2007), where considering how social, political and institutional forces impact on the affective and emotional lives of embodied subjects has become a central focus of scholarship (e.g., Ahmed 2004; Brennan 2004; Gorton 2007). In an era where gender equality is ostensibly guaranteed through legislation along with equality and diversity initiatives in many liberal democracies, it is argued that certain gendered inequalities persist as a result of affective, rather than material, conditions. Examining how negative and positive affects are embedded and operationalized within social, political and institutional structures is a means to demonstrate not only how the personal is political, but also how the political registers within the personal (Gorton 2007, 336).

Feminist phenomenology has become an important theoretical frame for feminist scholarship on emotion (e.g., Bartky 1990; Dolezal 2015; McMahon 2016). Feminist phenomenology is an approach that combines insights regarding embodied experience, through phenomenological investigation, with reflections about the discursive structures which frame that experience, through feminist theory. As embodied emotional experiences are always shaped by a broad range of factors, which have political and social significance, such as age, gender, race, sexuality, ability, ethnicity, among others, feminist phenomenology attempts to reveal not only the taken for granted structures of lived experience but also the sedimented or ‘hidden’ assumptions that inform our experience with respect to these categories (e.g., Fisher and Embree 2000; Landweer and Marcinski 2016). Considering a feminist phenomenology of emotion is important as it is paramount to investigate how the structures of one’s emotional experience can affect the expression, attitude and atmosphere of one’s embodied life along with the textures of one’s experiences of intercorporeality, and furthermore the repercussions this has in familial, social and political life.

Sandra L. Bartky, writing on the phenomenology of emotion in her influential collection of essays Femininity and Domination: Studies in the Phenomenology of Oppression, argues that women “are situated differently than men within the ensemble of social relations” (Bartky 1990, 83).
She identifies that certain “patterns of mood or feeling (...) tend to characterize” women’s experience (Bartky 1990, 84). The differences in women’s social position—as a result of the material and psychic legacies of patriarchy along with the enduring embodied realities of pregnancy and motherhood—mean that, in general rather than universal terms, women find themselves living within social structures in such a way that certain emotional responses become more predominant, especially when compared to their male counterparts. While there are an array of emotions and experiences that might be identified to be characteristic of women’s experience, Bartky identifies negative self-conscious emotions as particularly central (Bartky 1990, 84). More specifically, she argues that shame is the most ubiquitous and significant emotion to the experience of female subjectivity.

As a result of their subordinated position, she writes, women “more often than men, are made to feel shame in the major sites of social life” (Bartky 1990, 93). For women, Bartky argues, shame forms a “pervasive affective attunement to the social environment” (Bartky 1990, 85). In making this claim, Bartky identifies shame not merely as a discrete emotional event occurring as a result of a breach of social norms (as described, in part, by Chapter 30 in this volume), but rather, she argues that shame, for women, is a chronic and persistent backdrop colouring all aspects of ordinary day-to-day life: “women’s shame is more than merely an effect of subordination but, within the larger universe of patriarchal social relations, a profound mode of disclosure both of self and situation” (Bartky 1990, 85). My aim in this chapter is to take up Bartky’s claim that shame, particularly in its chronic form, is characteristic of female embodied experience, or a profound mode of disclosure both of self and situation, to use her words, and to explore some of the particularities that substantiate this claim. Through exploring chronic shame in relation to female embodied experience, the mechanisms through which certain gendered power relations are sustained and reproduced will be elucidated. Furthermore, the challenges inherent in providing a phenomenology of chronic shame will be considered.

2. Shame, embodiment and female experience

Bartky is, by no means, the only feminist scholar to identify shame, particularly in its chronic form, as a characteristic of female experience and social oppression (e.g., Bouson 2009; Johnson and Moran 2013). There exists a long association historically, theologically, sociologically and philosophically between women, shame and the body. As the psychologist Paul Gilbert notes: “Control of female sexuality (and the female body) has been institutionalized in social and religious forms for hundreds of years and more (...) often involving the shaming/stigmatizing of female sexuality and appearance” (Gilbert 2002, 35). In The Second Sex, Simone de Beauvoir, drawing on insights from biology, social and economic history and sociology, gives a philosophical account of the process of becoming a woman, essentially characterizing this process as “an extended lesson in shame” (Guenther 2011, 11). Beauvoir discusses how many ordinary female anatomical differences, such as the onset of menstruation, sexual maturation and breast development, have long been occasions for shame, especially recurring shame about embodiment, for young girls (Beauvoir 2010, 336–341). These bodily changes, deviating from an imagined norm of male bodily stasis, are seen as shameful and of needing concealment, and this has a long history in many cultures and traditions. As Beauvoir writes, “[The young girl’s] metamorphosis into a woman takes place not only in shame but in remorse for suffering that shame” (Beauvoir 2010, 347). The experience of becoming and being a woman, as Beauvoir and other feminist thinkers
argue (e.g., Manion 2003; Locke 2007; Fischer 2018), historically involves a process of learning to interpret the body as a site of shame (on Beauvoir, see also Chapter 16 in this volume).

The strong relation and association, historically and culturally, between women’s bodies, women’s sexuality and shame, both personally and politically, is far from trivial. The male body has set the standard for the ‘normal’ or ‘neutral’ body in philosophical accounts of experience and subjectivity—and there is a long tradition of feminist writing critiquing phenomenologists such as Husserl, Merleau-Ponty and Sartre for this implicit bias in their work (e.g., Young 1980; Murphy 1999; Fisher and Embree 2000; Olkowski and Weiss 2006). As a result, women’s bodies and female experience are positioned as essentially deviant from this (male) norm or, in some cases, even pathological. Inevitable events in female embodiment such as pregnancy, childbirth, menstruation and menopause are positioned as anomalies of ‘normal’ experience, which are not only stigmatized, but also pathologized, requiring professional medical attention.

Furthermore, a significant site for shame for women is in the realm of the seemingly ‘trivial’ concerns of appearance and physical attractiveness. The control of women’s bodies through oppressive beauty norms has been an explicit focus of the feminist critique of the patriarchal framework of consumer capitalism and neoliberalism for several decades. It is widely acknowledged by feminist thinkers that appearances cannot be considered a trivial concern for women and that body dissatisfaction is part of a systematic (and oppressive) social phenomenon. Appearances are intimately linked to how one values and sees oneself, and, furthermore, to one’s social worth and position within a social group. Increasingly, beauty ideals have become ethical ideals (Widdows 2018, 30). Failing to achieve certain standards of attractiveness through the physical body has repercussions for one’s sense of self. One is not just failing to achieve a discrete social norm, but instead this embodied failure is viewed as global, and, as a result, it is an occasion for shame (Widdows 2018, 31–35). This is especially the case for women, as how they look and present themselves affects how they are treated and their chances for success in various aspects of their lives.

That which is considered a ‘normal’ and allegedly attainable standard of attractiveness is, in fact, an ever-shifting and unattainable body ideal. As a result, women, as Susan Bordo notes, are often “obsessed” with their bodies and are “hardly accepting of them” (Bordo 1993, 14–15). The continuous comparisons a woman may make between her actual body and versions of the socially constructed ‘ideal’ body represented in media images are a potent source of shame. Women’s bodies, already shame-prone as a result of their cultural inheritance, are continuously positioned as inadequate or inferior when compared to these elusive body ideals; shame, and body shame in particular, becomes a permanent possibility. Jane Northrop notes that the “potential for women to feel shame is ubiquitous and potentially overwhelming” (Northrop 2012, 179). In short, ubiquitous and oppressive social structures position the appearance of women’s bodies as a constant opportunity for the experience of shame. As physical and personal ‘inadequacies’ are recurrent, difficult to alleviate and ever-shifting, shame can become permanently anticipated, part of a ‘normal’ landscape of experience, or an “affective attunement” to use Bartky’s formulation (Bartky 1990, 85).

3. Understanding shame

Shame is commonly understood to be an emotion that arises when we are concerned about how we are seen and judged by others. It is what is called a self-conscious emotion, in that the object of shame is oneself and, furthermore, it involves an awareness of how
other people view the self. As such, shame is an emotion that involves both self-awareness and social interaction (even if this interaction is just anticipated or imagined). We feel ashamed when we are seen by others (whether they are present, imagined or internalized) to be flawed in some crucial way, or when some part of our core self is perceived to be inadequate, inappropriate, or immoral. Distinguished from guilt, where we feel bad about an action or something that we have done, shame is about the person that one is. In a moment of shame, we feel deeply and often irreparably flawed, or that we are unworthy and unlovable.

Shame has both acute and chronic forms. When struck by a moment of acute shame, we can understand shame to be a discrete experience that arises, has a certain duration, and then passes away. During the moments of the shame experience, it is characteristic that one is overwhelmed physically, and common physical responses to shame include a sense of intense physical exposure, coupled with a sense of wanting to hide or withdraw. In moments of shame, the body folds in on itself. Often, our posture is stooped, the gaze is downward, and the head is bowed; we want to shrink or get smaller, or to just disappear. There are many other physical signs of shame, such as blushing, stuttering, sweating, blanching, hesitating, cowering, covering the face, and a sinking feeling. Accompanying these physical and physiological responses is an intense feeling of emotional anguish or pain. There is a sinking feeling of dread, coupled with an acute anxiety. An acute episode of shame is experienced as an overwhelming feeling of self-consciousness that is focused on some negative evaluation of the self and a concern with how the self is or will be perceived by others.

The extreme negative self-consciousness that comes with shame, coupled with its intense physical response, gives shame its most recognizable feature: the feeling that one is completely, and uncontrollably, exposed. This exposure leads to a physic, along with a sense of physical, paralysis or, what Kaufman terms “binding.” Kaufman writes: “Exposure can interrupt movement, bind speech and make eye contact intolerable. Shame paralyzes the self” (Kaufman 1993, 5, 18). One feels isolated, singled out and intensely conspicuous, as though paralysed in a spotlight. There is a strong feeling of vulnerability that comes with this sense of exposure. It feels as though everyone can see your flaws or misdeeds and that they may scorn, judge and then ultimately reject you. As a result, acute shame is alienating, isolating and deeply disturbing. It can provoke powerful feelings of despair, inferiority, powerlessness, defectiveness and self-contempt, to name a few.

As a result of acute shame’s deeply painful and disturbing nature, it is widely acknowledged that we go to great lengths to avoid and circumvent shame experiences. In fact, anticipated shame is a powerful force within in social interaction, where individuals in social situations make continuous efforts to avoid shame, embarrassment and other negative self-conscious experiences that might arise because of social transgressions. We unremittingly design and adjust our behaviour and appearance to avoid shame in order to avoid the pain of social rejection and the threat of severing our social bonds. In this way, anticipated shame acts as an invisible and often unacknowledged boundary in social interaction, delineating the contours of what is permissible or acceptable, and the standards for ‘normal’ behaviour, appearance, speech and so on.

Anticipating acute shame experiences, and making efforts to avoid them, is an ordinary part of social interaction and human lived experience. However, when the anticipation of shame becomes overwhelming and a constant feature of every interaction and experience, then we can start to see how shame can become chronic in nature, or form an “affective attunement,” as Bartky postulates (Bartky 1990, 85).
4. A phenomenology of chronic shame?

Living with chronic shame, one might experience a pervasive and enduring sense of shame that colours many aspects of life and social interaction. Shame, instead of being an acute and fleeting episode, becomes global and diffuse, causing a continuous sense of social anxiety, personal inadequacy and relational disconnection. Chronic shame can be linked to an enduring feature of the self, for instance, one’s appearance, weight, skin colour or social status. However, research suggests that susceptibility to chronic shame in adult experience can be caused by a variety of factors, including childhood abuse or highly dysfunctional shame-based family dynamics, as well as being a feature of certain psychopathologies such as PTSD or social anxiety disorder (Dolezal and Lyons 2017, 3). As the theologian and philosopher Stephen Pattison, who has theorized extensively about shame, writes:

There is an enormous difference between acute, reactive shame and the chronic shame that shapes a whole personality and may last a lifetime. When individuals appear to experience the whole of life as actually or potentially shame-productive and manifest such symptoms as withdrawal, self-contempt, inferiority and gaze aversion as a matter of course throughout their everyday lives, shame has become pathological and chronic. (Pattison 2000, 83)

Chronic shame, in contrast to experiences of acute shame, has a very different phenomenology. While chronic shame would share many of the painful features of acute shame, such as emotional pain, self-consciousness and a heightened sense of visibility, chronic shame is not experienced as an acute incident of emotional torment and hyper-self-consciousness, but rather as a background of pain and self-consciousness, perhaps becoming more acute in moments of exposure or self-awareness.

In fact, it is widely acknowledged that chronic shame is less about discrete shame experiences, but instead is an affective atmosphere—or attunement—that colours many, if not all, aspects of one’s life. Living with chronic shame may not mean that shame is continuously experienced, but instead that the threat of shame is more predominant and persistent. Chronic shame, hence, is not a state of perpetually feeling ashamed, but rather, a state of persistent “shame anxiety,” where there is an “anticipatory anxiety about the imminent threat of being exposed, humiliated, belittled or rejected” (Pattison 2000, 85). Anticipated shame comes to be an enduring part of experience.

What is most challenging when attempting to articulate a phenomenology of chronic shame is that it is frequently silent, repressed or unavailable to reflective consciousness. Shame is an experience that is so painful and intolerable that it is often forced outside the realm of conscious lived experience: It is forced “underground” (Scheff 2004, 231), and as a result, chronic shame often “disappears” or is “bypassed” (DeYoung 2015, 24). Rather than the searingly painful self-consciousness that accompanies episodes of acute shame, chronic shame can be invisible, both to the self, who is experiencing it, and to others around them. As a result, there are challenges to identifying, diagnosing and describing the experience of chronic shame, and, concomitantly, attempting to describe its phenomenology.

In her recent book Understanding and Treating Chronic Shame, the relational psychotherapist Patricia DeYoung discusses how many of her clients who suffer from chronic shame do not even know that they are experiencing shame (and related strategies to circumvent the threat of shame) with debilitating frequency. DeYoung writes: “Clients come for help with troubled emotions and difficult relationships. They say they have problems with stress, anxiety,
depression, or self-esteem. But they don’t name shame as a problem” (DeYoung 2015, 3). She describes chronic shame as “silent,” shadowing her clients’ experiences in the world:

Clients who struggle with the disintegrating power of chronic shame may not daily or consciously expect to be annihilated by shame. However, the threat is always around somewhere, just out of awareness, kept at bay. What they live with daily is what it costs them to keep from falling into shame.

(DeYoung 2015, 19)

Stephen Pattison echoes these insights: “few people may describe themselves as chronically shamed, many exhibit behaviour and attitudes such as consistently blaming others, being passive, deprecating themselves and their achievements, or ridiculing self and others” (Pattison 2000, 120).

As a result, what seems to characterize the experience of chronic shame is not enduring or repetitive experiences of shame but rather an atmosphere of anticipated shame that leads to compensatory behaviours or experiences. Instead of shame, what often enters reflective consciousness and the landscapes of lived experience are powerful “defensive scripts,” or rules and habits of interaction, which make it possible for an individual to avoid the constant pain of shame (Kaufman 1993, 113). Shame anxiety activates a variety of “reactive scripts and actions,” Pattison writes, drawing on the work of the shame theorists Donald Nathanson and Gershan Kaufman (Pattison 2000, 120). “These scripts are ‘performed’ or activated when shame threatens” (Pattison 2000, 111). While some of these scripts allow the shame experience to manifest, others use denial or bypassing as coping mechanisms. Nathanson describes four basic shame scripts: shameful withdrawal, masochistic submission, narcissistic avoidance of shame and the rage of wounded pride (Nathanson 1992). Through this schema of reaction patterns, a wide range of behavioural forms emerge that help one cope with the perceived threats to one’s social bonds and one’s identity that shame experiences provoke, no matter how mild or intense. Defensive scripts commonly lead to a wide range of experiences or states of being such as narcissism, depression, perfectionism, aggression, violence, anxiety, addiction and social withdrawal, among others (Pattison 2000, 110–130). In other words, chronic shame is frequently cloaked by other experiences, and as a result, its presence and impact on lived experience are often underestimated or remain unacknowledged in phenomenological accounts of affect and embodiment.

5. Living with shame as an ‘affective attunement’

When considering the experience of living with chronic shame, and how this may take on a decidedly gendered nature, it is important to keep in mind that shame is not experienced in the same manner by all subjects. In fact, the propensity to shame, and its consequences, is very much dependent on one’s position within a social group. Shame, as Northrop remarks, is “most often experienced by those who occupy positions lacking social authority, those who find themselves in social situations where the parameters of shame are determined, not by themselves, but by a more powerful other” (Northrop 2012, 128). Shame experienced by members of subordinated groups is, in fact, different in nature from, and, in addition, more pernicious than, the shame experienced by socially privileged or dominant individuals. Those wielding higher levels of social power are not only less likely to be susceptible to shame, both acute and chronic, but are in a better position to inflict it on others. Cheshire Calhoun notes, “the power to shame is likely to be concentrated in the hands of those whose interpretations are socially authoritative” (Calhoun 2004, 143).
Those with social power, who constitute and ratify the normative values which carve out the parameters for shame within a social group, are certainly not immune to shame; however, they are more likely to experience shame as an minor, and fleeting, disturbance. For these socially powerful individuals, shame is more often acute, rather than chronic. Shame is a “blip across the face of an otherwise undisturbed consciousness,” to use Bartky’s formulation (Bartky 1990, 97). Ullalina Lehtinen, commenting on Bartky’s account, calls this shame of the “aristocrat’s kind”; she writes, “white European or North American, middle-class, academically trained men. The only shame they themselves knew, had experienced, was (...) a painful episode, a sudden unexpected change in the state of things, an occasion for moral reaffirmation” (Lehtinen 1998, 63). Acute shame of this sort has didactic potential: One is able to learn from one’s transgression and then adjust or regulate their behaviour accordingly. As Bartky comments, the “experience of shame can be salutary for such a person because he is not systematically impoverished by the moral economy he is compelled to inhabit” (Bartky 1990, 97). A typically socially privileged subject (usually characterized as white, Western, educated, male in feminist accounts) does not experience the same affective landscape from which hierarchies of race, class, sexuality and gender, for example, arise and are sustained. The continuous recurrence of shame for women (along with other subordinated or marginalized groups) arises because of, but also perpetuates, their subordination.

Jean-Paul Sartre’s existential reflections on the role of emotions can be helpful here. Sartre reflects on how emotions are not merely cognitive events, but instead are embodied experiences that create a context or situation in which meaning, sense and one’s lived experience are shaped (see also Chapter 13 in this volume). As such, an emotion is an active and embodied response to a situation and discloses not only the self, but, in addition, the quality of one’s life-world. An emotion, such as anger, guilt, jealousy or shame, can evoke, as Sartre argues, a “total alteration of the world” (Sartre 2002, 47). Consider, for example, the jealousy experienced by the voyeur kneeling at the keyhole spying on his lover, in Sartre’s well-known vignette from *Being and Nothingness*. Jealousy organizes his world, shaping his actions, responses and experience within a particular situation. When the voyeur hears footsteps in the hallway behind him, he is overcome with shame, as he feels he has been caught transgressing a social norm—that it is wrong to spy on strangers.

While this vignette is illustrative of an episode of acute shame, it also reveals the world-organizing nature of emotion or affect. Jealousy, in this example, is not merely a cognitive event that can be contemplated; instead, Sartre writes, “I am this jealousy; I do not know it” (Sartre 2003, 283). The world constituted by jealousy is one of suspicion and anger. The door and the keyhole that the voyeur encounters are not merely objective objects in a neutral space, but a landscape of betrayal, obstacle and embittered curiosity. Jealousy not only colours his intentional relation to the physical realm, but also shrinks his world and its concerns. The voyeur’s preoccupations, attentions and desires spiral in a tight circle around his jealousy.

Sartre’s insights on the world-organizing nature of emotions provide a useful framework through which we can articulate the affects and consequences of chronic shame, especially when considering chronic shame’s link to social and political subordination, as Bartky postulates in the case of women’s experience. Shame becomes a “form of cultural politics” that is “world making,” to quote Sara Ahmed (Ahmed 2004, 9, 12). Instead of a discrete disturbance of an otherwise untroubled consciousness, living with chronic shame has profound and on-going consequences for one’s subjectivity, both personally and politically. In addition to shaping the contours of one’s world, shame becomes characteristic of one’s *way of being* in the world. As the shame theorist and counsellor John Bradshaw writes, “When internalized an emotion stops functioning in the manner of an emotion and becomes a
characterological style … The person doesn’t have anger or melancholy, she is anger and melancholy” (Bradshaw 1988, 10–11). Living with chronic shame means that shame comes to colour most, if not all, situations, interactions and actions.

In these cases, even when shame is not felt directly, it is permanently anticipated as one’s identity is spoiled in the first instance. Individuals who experience chronic shame are described as “shame-bound,” “shame-prone” (Pattison 2000, 83), a “shame subjectivity” (Berlant et al. 2008), and often experience “shame as a state of being” (Bradshaw 1988, vii). Crucially, this frequently occurs as a result of a set of structural social relations that create hierarchies of social worth, such as the gender inequalities that persist within traditionally patriarchal societies.

Living with chronic shame can mean that one’s experience is characterized by “experiences that induce a sense of persistent inferiority, worthlessness, (…) stigmatisation, unlovability and social exclusion” (Pattison 2000, 108). In short, the consequences of living with chronic shame are far from trivial. As Lehtinen points out, the experiences arising from the chronic shame of a socially subordinated individual “often breed a stagnant self-obsession, they are unconstructive and self-destructive; and they function as confirmations of what the agent knew all along—that he or she was a person of lesser worth” (Lehtinen 1998, 62). Chronic shame can be profoundly disempowering and damaging affecting one’s global sense of self and, as a result, the expression of one’s intentionality and agency in the world and with others.

Living as a shame, subjectivity does not entail merely having internalized ideas about one’s inferior social status. Instead, this inferiority is literally embodied. The hesitation and withdrawal that characterize acute shame experiences become an enduring feature of one’s body schema and this may result in a “(psychophysical) inferiority complex” (Weiss 1999, 27–28). One’s posture may become stooped, one’s motor actions subdued, one’s gestures hesitant or faltering. Perpetually feeling oneself to be a person of lesser worth has concrete consequences in terms of how one comports oneself and this, of course, has consequences for one’s life chances. In general, the effect of chronic shame is negative, and sometimes even “toxic” (Bradshaw 1988, 10–11). As a result, chronic shame is closely correlated with depression, low self-esteem, suicide, anxiety, poor health, sexual assault, violence, bullying, addiction and eating disorders. Furthermore, it has been posited that chronic shame has been linked to a variety of mood disorders and pathologies such as alcoholism, anti-social personality disorder, borderline personality, pathological narcissism, psychoanalytic neuroses and social anxiety disorder (Bradshaw 1988).

Even if chronic shame doesn’t result in pathological states as serious as mood disorders or in behaviours as damaging as addiction, in its on-going landscape of self-reference and self-consciousness, chronic shame can lead to a psychic ‘binding’ which is not only emotional but cognitive as well, and this is profoundly disempowering. Empirical research has demonstrated that performance in cognitive tasks, such as mathematics, diminishes when one is made to feel self-conscious or ashamed, especially when these experiences are centred on the body and attention is directed to appearance management and fear of social judgement (Fredrickson et al. 1998).

Beyond its significance for individual health and well-being, chronic shame has significant social and political consequences. In fact, the sort of subjectivity that is constituted in light of the experience of chronic shame is one that is politically and socially compromised, leading to a state of profound disempowerment. It does not lead to the sort of “lucid” agent of moral philosophy, who can supposedly clearly discern between right and wrong, and exert agency in ethical and political contexts (Woodward 2000, 225). There is an extensive
literature which links the systematic shaming of certain individuals to political strategies of exclusion and marginalization, arguing that chronic forms of shame, which are induced by certain societal power relations, play a key role in the establishment and sustaining of social inequalities. Thus, also when considered as an aspect of social and political relations, chronic shame can have serious consequences. The continuous binding effects of chronic shame hinder empathy, responsibility and active political engagement, while encouraging a toxic self-centredness and self-interest (cf. Locke 2016; Probyn 2005). As Pattison and his colleagues write:

Shame (…) is a curiously premoral or amoral state in which the self is inwardly engaged and preoccupied, paralysed either temporarily or permanently, and unable to engage in taking responsibility and judgement for its own actions; a failed, defiled, unwanted self cannot act as a responsive and responsible agent. Perhaps it is not surprising that a shamed person often feels speechless—they fall out of the community of human discourse and responsibility.

(Sanders et al. 2011, 85)

In short, chronic has a largely negative and destructive potential, personally, socially and politically. Chronic shame seems to lack the positive potential for moral edification and social development that it is often discussed with relation to acute shame.

6. Conclusion

The attunement to body shame that women experience is so pervasive and indeterminate that it is often beyond the reach of reflective consciousness. Women may not even realize that they are experiencing shame, or the threat of shame, and that they are exerting inordinate efforts to avoid shameful exposure. Instead, they become preoccupied with cultivating pride which hinges on the other side of the emotional dialectic which accompanies the narcissistic concern of the body as spectacle (Bartky 1990, 84). Or, if shame does, in fact, enter conscious awareness, it is seen as a result of one’s own inadequacies and, in particular, as one’s own fault. Personal efforts must be made in order to eliminate it. For women, chronic shame, particularly shame that is centred on embodiment, can shrink one’s world, disrupting ongoing activities and life projects as the self turns attention inward on itself. This may result in compromising one’s confidence and ability to fully engage with others and with projects in the world. Or perhaps it evokes an inhibited style of bodily movement, rendering one fragile, insecure, timid and emotionally vulnerable. Or it may inhibit empathy or ethical concern for others, as Pattison and his colleagues suggest.

However, as shame is such an integrated part of female identity and preying on this shame such a central part of our cultural discourse and the machinations of neoliberal consumerism (e.g., Jansen and Wehrle 2018), it is easily overlooked or ignored. There is an abiding cultural reluctance to confront the pernicious and ubiquitous shame that infects women’s day-to-day lived experience. It has become so thoroughly integrated into our social, cultural and political landscape as to be rendered invisible. It is precisely for this reason that any account of women’s shame must look not only at its phenomenology, or how it is experienced by the subject, but also at the structures of shame that result in the fact it is often not experienced. In its chronic form, shame is frequently anticipated but often not realized. In other words, a subjectivity can be structured by shame, and the ongoing strategies to avoid shame, without shame necessarily entering into conscious awareness or being an explicit part of the way
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one self-identifies one’s experience. When considering women and their embodiment, it is evident that shame has the power to subtend all one’s experience and to form one’s world and the consequences of this can be far-reaching.

Notes

1 Of course, many material conditions such as gender pay gaps, poor parental leave benefits, inadequate or expensive childcare, among many others, are instrumental in ensuring that women are disproportionately affected by poverty and the burden of care work (for children or elderly parents, for example) falls on women’s shoulders.

2 When considering the conditions of certain social groups or identity categories, it is important to be able to generalize without universalizing. It is certain that there are some women for whom this analysis will not apply, and likewise it is certain there are some men or others with for whom this analysis will seem pertinent. However, as there are certain patterns in social structures which persist in marking out certain types of differences between genders, it is reasonable to make general claims based on repeated and enduring conditions which shape the types of lived experiences which are largely available to women and men.

3 Many of the ideas in this chapter appear in more extended form in Chapters 4 and 5 of my monograph, Dolezal 2015.

4 For more on shame see Zahavi’s and Montes Sánchez’s chapters in this volume, as well as Schölßberger’s discussion of shame in Scheler in this volume.

5 Here Weiss’s arguments about the body schema are applied to racial identity, and the “construction of a racially-coded corporeal schema,” as she puts it. However, the same case can be made for gender and other subordinated identities.

6 For instance, the ‘minority stress’ literature in psychology. See, for example, Hatzenbuehler and Pachankis 2016. Within political theory, considering the example of racial inequalities, see Harris-Perry 2011.

References


Young, Iris Marion (1980). Throwing Like a Girl: A Phenomenology of Feminine Bodily Comportment, Motility and Spatiality. Human Studies 3(2), 137–156.

Further reading