

# Shame – Perception of God – What Can Shape It? How Does Perception Impact Emotional Wellness?

## Part 1 of 2 Part Series

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There is a common soul-slayer surfacing from the secret cavern in the heart of women; shame. If shame has been hiding in the heart, during the course of a woman's life-cycle it has been taking its toll. It has been debilitating, devastating and destroying emotional wholeness; it is a soul cancer, and is untreatable until it is unearthed.

Once shame has become internalized it becomes more potentially destructive because it continues to reverberate privately – even when there is no one externally present to ridicule or humiliate...Internalized shame is experienced as a seeping sense of badness, permeating the self with a toxic tide of self-censure and inferiority. (Berecz & Helm, 1998, p. 7)

The very institution where individuals seek rest for their souls, namely church, is a place where misconceptions can be bred inadvertently. Berecz and Helm (1998) support this claim, "This is probably not done knowingly or maliciously but, like surgeons of the pre-germ era, whose non-sterile instruments and unsanitary techniques infected the very patients they were trying to save, Christians sometime sabotage their own well-intended efforts to heal" (p. 6). There is a subtle pressure with idealistic expectation based upon the erroneous application of 2 Corinthians 5:17, "Therefore, if anyone is in Christ, he is a new creation; old things have passed away; behold, all things have become new" (NKJV). For some, upon religious conversion a personal striving sets in to make change within *the self* to match the perceived ideal of God's standard, yet an imposing and haunting realization of an unattainable goal undermines the psyche contributing to feelings of shame when there is not a total change in the whole person (Leffel, 2007).

One's belief system plays an important role in emotional health. Researchers have concluded that there is an increased interest in the relationship of spirituality and how it impacts individual's psychological health (Masters, Lensegrav-Benson, Kircher, & Hill, 2005). In candid discussions with women over the past 15 years, common themes have emerged; a perception of God which has either compounded shame or initiated an internal liberation of soul. It is not simply a denominational issue. This particular shame base perception of God crosses various belief systems and plagues women in general.

It is the author's presupposition that once shame is identified in an individual then the causes of shame can begin to be unearthed, thus the cognitive, emotional and spiritual healing process can begin. As the client gives voice and relates her life story in narrative form, through the therapeutic relationship which is formed in counseling, one can reframe their perspective and thus initiate a new neural network and reconstruct new schemas (Leffel, 2007). If shame goes beyond the self and is reinforced by a perception that her Deity is displeased, this belief embeds into the psyche and creates a biofeedback loop which imprisons her soul (mind, will and emotions). The varying degree in how much a client will disclose in terms of shame will determine where she is in her life-cycle and if she has come to terms that shame exists within. (Leffel, 2007). One's inner self is not always articulated explicitly in one session and it takes time for trust to build.



There are identifiable crossroads/indicators that influence a woman's perception of God; this is perpetuated by subtleties in various life circumstances and beliefs, which contribute to feelings of shame and are part of the formulation of the lies women believe about self, resulting in stunted emotional wellness.

Article continues in Part 2.

### For more information on issues of shame

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### Bibliography:

- Leffel, G. M. (2007). Emotion and transformation in the relational spirituality paradigm part 1. Prospects and prescriptions for reconstructive dialogue. *Journal of Psychology & Theology*, 35(4), 263-280.
- Masters, K. S., Lensegrav-Benson, T. L., Kircher, J. C., & Hill, R. D. (2005). Effects of religious orientation and gender on cardiovascular reactivity among older adults. *Research on Aging*, 27(2), 221-240.