Shame-proneness and its correlates in couples

Tomaž Erzar¹, Matej Torkar² and Katarina Kompan Erzar³
¹University of Ljubljana, Faculty of Theology, Franciscan Family Institute, Ljubljana, Slovenia
²Franciscan Family Institute, Ljubljana, Slovenia

Abstract: The study assessed the relationships between three TOSCA-3 (Test of Self-Conscious Affect; Tangney, 1990) subscales (shame-proneness, guilt-proneness, and externalization), and the following variables: stress, anxiety, depression, fear of intimacy, and attachment style in a sample of 68 heterosexual couples in committed relationships. Within-subject and within-dyad correlations were computed. Results confirmed a low to moderate connection for depression, anxiety, fear of intimacy and secure attachment. Shame-proneness, externalization, and guilt-proneness were not correlated within couples. The findings also provided further evidence for a differential understanding for some of the variables in each gender.

Key words: shame, heterosexual couples, connectedness, dyadic effects

Občutljivost za sram in njeni korelati pri parih

Tomaž Erzar¹, Matej Torkar² in Katarina Kompan Erzar³
¹Univerza v Ljubljani, Teološka fakulteta, Frančiškanski družinski inštitut, Ljubljana.
²Frančiškanski družinski inštitut, Ljubljana.

Povzetek: Raziskava preučuje povezanost med tremi lestvicami instrumenta TOSCA-3 (občutljivost za sram, občutljivost za krivdo ter eksternalizacija) ter stresom, depresivnostjo, strahom pred intimom in stilom navezanosti pri 68 heteroseksualnih parih v trajnih zvezech. Izračunane so bile korelacije za posameznike po spolu ter za par kot enoto. Čeprav so rezultati potrdili šibke do zmerne povezave za depresivnost, tesnobo, strah pred intimom ter verni stil navezanosti pri posameznikih, niso potrdili povezav med občutljivostjo za sram, občutljivostjo za krivdo in eksternalizacijo pri parih. Rezultati so med drugim pokazali, da moramo pri preučevanju nekaterih povezav upoštevati različno razumevanje teh vsebin pri ženskah in moških.

Ključne besede: sram, heteroseksualni pari, povezanost, diadični učinki

CC = 2360

¹Naslov / Address: Tomaž Erzar, Frančiškanski družinski inštitut, Prešernov trg 4, 1000 Ljubljana, tel: 01 200 6760, Fax: 01 200 6766, e-mail: tomaz.erzar@guest.arnes.si
In the last 20 years, research on excessive shame-proneness in adults has revealed numerous positive associations between this emotion and various forms of maladaptive behavior and mild to severe psychopathology (Tangney & Dearing, 2002). Studies have confirmed the relationship between shame and depression (Tangney, Wagner & Gramzow, 1992), shame and fear of intimacy (Lutwak, Panish, & Ferrari, 2003), shame and self-concealment (Pineles, Street, & Koenen, 2006), shame and poor conflict-resolution skills (Lopez et al., 2005), shame and loneliness, low self-image, submissiveness, co-dependency, and insecure attachment style (Wells, Glickauf-Hughes & Jones, 1999). Despite the considerable impact the proneness to shame has on intimate relationships, this role has so far been underinvestigated. One of the reasons this might be so is the elusive nature of this emotion and the fact that each gender uses different strategies to cope with and express shame. Our study explored differential relationships of shame-proneness, guilt-proneness, and externalization to stress, anxiety, depression, fear of intimacy, and styles of attachment in committed couples.

Shame: the basic emotion of connectedness

Research on shame in interpersonal contexts stems from the hypothesis that shame (including the entire family of emotions connected with shame, such as embarrassment, humiliation, discomfort, shyness, dishonor, mortification, and degradation) represents the core affect of human relatedness and the basic social emotion (Scheff, 1997, 2000). Avoiding shame, checking the image one fears may arise in others, and concealing one’s true self behind a mask of compliance, submissiveness, and conformity – all of these forms of social behavior point to the tight relation between concerns related to connectedness and maintenance of relationships, and the deepest experience of one’s own self as acceptable, lovable, and desired, or unacceptable, undesired, and unloved.

Historically, attachment research has explored in detail how a child’s perception of self reflected the way parents perceived and behaved towards the child (Bowlby, 1988; Main, Kaplan & Cassidy, 1985). Whereas securely attached individuals believe they are lovable and desired and have a positive view of both themselves and others, insecurely attached individuals constantly seek reassurance, fear they might be abandoned, and have a negative view of themselves and/or others. Subsequent research on adult attachment patterns established the value of early attachment bonds with parents for romantic relationships (Hazan & Shaver, 1987). Attachment patterns influence people’s mental wellbeing and personal growth through stable internalized schemes or internal working models and the level of intimacy and confidence established in current adult romantic relationships (Pielage, Luteijn & Arrindell, 2005).

Research tapping into intergenerational risk factors for shame has found strong links between shame-proneness in adulthood, codependent behavior in
intimate relationships, and parentification in early childhood, which represents a serious form of family dysfunction (Wells, Glickauf-Hughes & Jones, 1999; Wells & Jones, 2000). Several authors vividly described how living in a shame-based family (families with alcohol dependence, families with maltreatment and abuse, families with narcissistically wounded, rejecting parents, with family secrets, etc.) affects the adult potentials of children and leads to retraumatization, longstanding loss of contact with one’s own emotions, emotional emptiness and rigidity, dependent behavior, pathological perfectionism, eating disorders, personality disorders, violence and criminal activity, and difficulties with affect regulation and maintaining stable intimate relationships (Bradshaw, 1988; Earley & Cushway, 2002; Golomb, 1992; Mills, 2005; Nathanson, 1987).

Overt and hidden shame in couples

Social contexts and interpersonal relationships in which individuals experience rejection and unwantedness cause them to feel more shame and, consequently, more distress and insecurity (Gruenewald, Kemeny, Aziz & Fahey, 2004). Recent studies have found that the level of cortisol in blood peaks in situations in which people fear negative evaluation from others or expect to feel ashamed (Dickerson, Mycek & Zaldivar, 2008). For those that tend to make negative attributions to themselves, such situations may be exacerbated to the point where they cannot recognize whether negative feelings were evoked by some external source, or by some internal source, usually the pervasive sense of being a failure and ruminative thoughts about their inner value (Tracy & Robins, 2006). Due to constant avoidance of shame and excessive shame-proneness, these individuals experience their intimate relationships as permanent sources of danger, which in turn fuels their sense of loneliness, social isolation, non-acceptance, and rejection.

In order to prevent these feelings from being too frequent and unpleasant, shame-prone individuals start ignoring and avoiding them. In her seminal book on shame, H. B. Lewis (1971) distinguished between overt and covert shame, indicating that overt shame encompasses behavior such as flushing, excessive or inappropriate laughter, touching or covering the face, gaze aversion, and rapid or barely audible talking, which all tend to hide and protect the person from the gaze and evaluation of others. In contrast, covert shame reveals itself only through subtle cues such as biting lips, sustained, tense laughter, rapid talking or stuttering, and a motionless face, which all tend to control outer signs of inner psychic states and redirect attention from these states. These differences can be traced at the verbal level as well: whereas the statement “I feel ashamed” clearly reflects overt shame, the statement “I feel uncomfortable” usually indicates covert or unrecognized shame. In addition, shame is very often covered by expressions of guilt.

In couples the problem arises when unacknowledged shame in one partner through seemingly shame-free interaction induces shame in the other partner, who
starts to feel shame and cannot hide it (Balcom, Lee & Tager, 1995). In this way the interpersonal bond or connection between partners becomes an arena of recurring shame cycles in which the experience of shame is strengthened and imprinted onto the couple’s identity (Kaufman, 1980), regardless of whether shame is experienced by both partners or by one partner alone. Shame-based couples are characterized by intolerance toward changes and differences, lack of separation and differentiation, constant blaming, negative attributions, chronic conflicts, never-ending fights for emotional survival, use of collusive defenses, global mistrust, and manipulative rendering of past events (Rhodewalt & Eddings, 2002).

Because of this mutual dynamic, researchers assume that dysfunctional couples develop some sort of common negative identity as a result of insufficient self-differentiation, individual proneness to shame, and the ongoing dynamic of blaming (Harper & Hoopes, 1990). Theoretical underpinning for this idea was found in the intergenerational theory of Murray Bowen (1978), which states that individuals find mates that are at the same level of differentiation from their families of origin. Another promising starting point for investigating couple’s conflictual dynamic is the concept of shame-proneness because it taps into what makes people seek or avoid proximity.

**Design and hypotheses**

Despite the frequent use of self-report instruments such as the TOSCA (Test of Self-Conscious Affect; Tangney, 1990) for measuring self-conscious emotions, to date no study has explored shame-proneness in couples. The first aim of our study was thus to examine associations between shame-proneness and other subscales of the TOSCA instrument in couples. We expected to find in couples a similar susceptibility to shame (Hypothesis 1).

In order to compare shame-proneness with other indices of interpersonal malfunctioning and personal stress, we used several additional measures: the DASS (Depression, Stress Anxiety Scales; Lovibond & Lovibond, 1995), FIS (Fear-of-Intimacy Scale; Descutner & Thelen, 1991), and RQ (Relationship Questionnaire; Bartholomew & Horowitz, 1991). We expected to find moderate to high within-subject correlations between proneness to shame and the DASS and FIS measures (Hypothesis 2), and low to moderate within-dyad correlations on all DASS measures and the FIS measure (Hypothesis 3).

We further assumed that in couples the shame-proneness of the TOSCA measure would correlate with a negative view of self and others, implicated in the fearful avoidant attachment styles (Type B) of the RQ measure, and that externalization of the TOSCA measure would correlate with the dismissing avoidant attachment style (Type D), which includes a negative view of others and a positive view of self (Hypotheses 4 and 5).

In order to explore cross-relationships between attachment styles, shame-
proneness, and fear of intimacy in couples, we classified couples into three groups according to their self-reported attachment style – namely, secure-secure (S-S), insecure-secure (I-S), and insecure-insecure (I-I) – with an additional subgroup formed by distinguishing between secure (wife)–insecure (husband) and secure (husband)–insecure (wife) dyads (S-I). One-way ANOVA and a post-hoc test were computed for these groups with shame-proneness and fear of intimacy as the between-group factor. We predicted that there would be significant differences between groups, with both secure pairs scoring low, both insecure pairs scoring high, and insecure-secure pairs scoring in between (Hypothesis 6).

**Method**

**Participants**

The participants in the study were 68 heterosexual couples in permanent relationships. They were recruited from several couple-support groups and via personal acquaintance, with relationships lasting from approximately one year to 40 years ($M = 9.4$). The age range for females was 21-60 years, mean 34.5, and for males 23-67 years, mean 37.6.

**Instruments**

The Tests of Self-Conscious Affect (TOSCA-3) consist of 16 brief scenarios (11 negative and 5 positive) depicting commonplace life situations. Respondents are asked to rate a series of associated responses on a 5-point rating scale ranging from 1 (not likely) to 5 (very likely), including descriptions of affective, cognitive, and behavioral features associated with shame and guilt. For example, “I’m inconsiderate” would be a shame-prone response to realizing you stood a friend up for an appointment, whereas “You would try to make it up to him as soon as possible” would be the associated guilt-prone response. Thus, items designed to assess the construct of shame focus on negative evaluation of the entire self, whereas items assessing guilt focus on specific behaviors. The latent factors underlying these scales are: shame, guilt, externalization, alpha pride, and beta pride.

The $\alpha$ internal reliabilities in the current study were in the acceptable range for this instrument: .80 for shame, .73 for guilt, and .72 for externalization. Subscales with alpha coefficients under .70 were omitted from further analysis.

The Depression, Anxiety, Stress Scales (DASS) is an instrument with 42 items measuring symptoms of depression, anxiety, and stress as experienced by respondents in the last week (Lovibond & Lovibond, 1995). Each scale corresponds to 14 items. Respondents answer on a 4-point scale (0 - Did not apply to me at all, 1 - Applied to
me to some degree, or some of the time, 2 - Applied to me to a considerable degree, or a good part of time, 3 - Applied to me very much, or most of the time). The Slovenian version of the DASS shows reliabilities of .91 for the depression scale, .85 for the anxiety scale, and .87 for the stress scale. The intercorrelations between the scales are: depression-anxiety $r = .65$; anxiety-stress $r = .73$; and depression-stress $r = .492$. Principal component analysis shows that three factors explain 45.3% of variance (Erzar & Torkar, 2007).

The Fear of Intimacy Scale (FIS) is a 35-item self-report inventory that measures individuals’ anxiety about close, dating relationships (Descutner & Thelen, 1991; Doi & Thelen, 1993). Items are rated on a 5-point Likert-type scale, ranging from 1 (not at all characteristic of me) to 5 (extremely characteristic of me). Approximately one half of the items are reverse scored to mitigate response bias. Higher scores are indicative of greater fears. The reliability of the Slovenian version of the test is .94 (Erzar & Torkar, 2007).

The Relationship Questionnaire (RQ) is a single-item measure made up of four short paragraphs, each describing a prototypical attachment pattern as it applies in close adult romantic relationships. Participants are asked to rate their degree of correspondence to each prototype on a 7-point scale (Bartholomew & Horowitz, 1991). Despite its initial prototypical approach, the RQ is based on a two-dimensional construct of adult attachment implicating a model of the self and a model of others. Thus Type A attachment style (secure) is defined as representing a positive model of self and a positive model of others, Type B (preoccupied) as representing a negative model of self, combined with a positive model of others, Type C (fearful avoidant) as representing a negative model of self and a negative model of others, and Type D (dismissing avoidant) as representing a positive model of self and a negative model of others.

The RQ, a widely used measure of adult attachment, shows adequate reliability with observer-based ratings of behavioral and personality characteristics (Bartholomew & Horowitz, 1991; Griffin & Bartholomew, 1994).

Results

Table 1 presents the means, $SD$, and $t$-tests by gender on the three TOSCA subscales, and all of the DASS, RQ, and FIS scales. As found in other studies, females scored significantly higher on measures of shame-proneness and guilt-proneness, whereas males scored higher on dismissive attachment style.

Table 2 presents the correlations by gender of the three TOSCA subscales (shame-proneness, guilt-proneness, and externalization) with the DASS, FIS, and RQ measures. The correlations appear to be moderate to low and gender-specific. Hypothesis 2 was confirmed for both genders regarding the relationship between
shame-proneness and all of the DASS measures, but was disconfirmed regarding fear of intimacy. Type B attachment style (fearfulness, negative view of self and others) was found to be positively correlated with shame-proneness only in males (Hypothesis 4 partially confirmed). Type D attachment style (dismissiveness, positive view of self, and negative view of others) was positively correlated with externalization in females and negatively correlated with externalization in males (Hypothesis 5 also partially confirmed).

Table 1. Descriptive statistics and t-tests for couples

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<tr>
<th></th>
<th>Males</th>
<th>Males</th>
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<th>Females</th>
<th>Females</th>
<th>SD</th>
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* p < .05, ** p < .01, *** p < .001

Table 3 presents within-dyad correlations of all the subscales used previously. Contrary to our Hypothesis 1, shame-proneness was not positively correlated within pairs. On the other hand, the results confirmed low but significant correlations on measures of anxiety, depression, fear of intimacy, and secure attachment style, as predicted in Hypothesis 3.

Figure 1 presents the scores of the TOSCA shame-proneness and fear of intimacy subscales for the four groups of pairs combined according to their attachment style. As hypothesized, both secure pairs (S-S) had the lowest scores on both measures. However, both insecure pairs (I-I) scored the highest only on fear of intimacy. Surprisingly, on the measure of shame-proneness insecure (male)—secure (female) (I-S) couples outsored both other groups (Hypothesis 6 only partially confirmed).
Table 2. Correlations between shame and other variables for males and females

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<th>anxiety</th>
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<th>fear of intimacy</th>
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Note: m = male, f = female

* p < .05, ** p < .01, *** p < .001
The ANOVA confirmed a significant group effect on both subscales (shame-proneness: $F(3, 63) = 2.868, p < .05$, fear of intimacy: $F(3, 63) = 3.754, p < .05$) with post-hoc differences between the S-S and I-S group for shame-proneness, and the S-S group and I-I group for fear of intimacy ($p < .05$).

Table 3. Paired samples correlations for couples

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<th>N</th>
<th>r</th>
<th>p</th>
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<tr>
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</tbody>
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Figure 1. Means plots for shame-proneness and fear of intimacy in couples, grouped into attachment style combinations ($N_{ss} = 16, N_{si} = 10, N_{is} = 15, N_{ii} = 25$).

The ANOVA confirmed a significant group effect on both subscales (shame-proneness: $F(3, 63) = 2.868, p < .05$, fear of intimacy: $F(3, 63) = 3.754, p < .05$) with post-hoc differences between the S-S and I-S group for shame-proneness, and the S-S group and I-I group for fear of intimacy ($p < .05$).
Discussion

The results of our study show that females in intimate relationships report higher levels of shame, guilt and externalization than their male partners (Table 1). This has also been the case in other studies that involved samples of unpaired men and women and used either the TOSCA or another similar measure. Historically, it has been alleged that excessive shame-proneness and its correlates, including depression, are qualities more female than male. Recently, studies have revealed that this discrepancy may be the result of gender-biased research paradigms (Benetti-McQuoid & Bursik, 2005) and that both genders intensively experience shame, although in different contexts, mostly depending on gender-role stress and other sources of unwanted identities (Ferguson, Eyre & Ashbaker, 2000). For example, Mullins-Nelson, Salekin, and Leistico (2006) found that proneness to shame for women was associated with interpersonal sensitivity and accurate recognition of facial emotions, whereas for men shame-proneness was negatively related to stress immunity, fearlessness, social potency, and cold-heartedness. Similarly, Gross and Hansen (2000) suggests that, whereas women express more shame and guilt and more often report these emotions, this gender difference may be totally accounted for by women’s higher level of investment in relatedness. However, we still do not know what role may play in this equation different strategies of shame-avoidance in men and women.

Taken globally, our results support the aforementioned view. The within-subject correlations show that shame-proneness and externalization combine with experiencing guilt, stress, anxiety and depression, fear of intimacy, and self-ascribed styles of attachment in each gender differently (Table 2). The largest difference was shown for the association between shame and guilt, and shame and externalization (both differences were significant at $p < .001$ by Fisher’s $z$-test), which indicates that for men feeling shame, blaming oneself and others, and seeking reparation go hand in hand, whereas for females feeling shame, blaming oneself and others, and feeling guilty are mostly unrelated. The same result was reported by Efthim, Kenny and Mahalik (2001). This situation could partly be explained by the idea that men, when ashamed, more often blame others than women, and more often feel guilt, regardless of the relational context. In support of this idea, we found that the feeling of guilt in wives was more pronounced when in a safe relationship, and less pronounced when more fearfully avoidant and more afraid of intimacy, which could mean that for women experiencing and expressing guilt as a sign of reparation-seeking behavior implies not only a sense of responsibility, but also relational safety (Table 2, column 2).

An interesting corollary to this finding is the opposite relationship between externalization and dismissing attachment style for each gender, which was negative for males and positive for females ($r = -.25; r = .30, p < .001$ by Fisher’s $z$-test). A possible explanation for this discrepancy could be that for women a dismissive stance towards attachment entails blaming others, whereas for men dismissiveness implies...
self-reliance, which is a source of pride. This explanation is consistent with prior findings by Banse (2004) who found several positive interaction effects for husbands’ dismissing attachment.

In general, these results point to the difference between female- and male-valued qualities. Whereas independence, self-reliance, and lack of fear usually instill pride in men, the unmet intimacy needs in women imply blaming others.

Turning to the within-dyad correlations (Table 4), we found low to moderate correlations for anxiety, depression, fear of intimacy, and secure attachment style, but no correlations for shame, guilt, externalization, and insecure styles. Whereas the first results confirm what was found in other studies (Whiffen & Aube, 1999; Whiffen, 2005), this latter finding was not expected because research and clinical experience suggest that there is a considerable reactive component in couples’ behavior and emotion. For example, Duggan (2008) reports that committed couples share not only vulnerability to interpersonal issues, such as lack of support, avoidance of closeness, and perceived unresponsiveness, but that avoidant behavior and emotional withdrawal in one partner increases the spouse’s attachment insecurity and level of depressive symptoms. However, looking at the other results in our study, the lack of relationship between couple’s level of shame-proneness should not have been surprising because these results strongly indicate the existence of two differently oriented views of self-in-relationship in men and women. It could also be interpreted as an indication of flexibility regarding defenses against shame.

This interpretation can be extended to the results of our final comparisons (Figure 1), which confirmed our hypothesis about the ranking of the groups only in the case of fear of intimacy. Regarding shame, however, it turned out that the group of insecurely attached men and securely attached women tends to experience more shame than any other group. Again, we may interpret this finding as indicating different types of investment in relationships in both genders. One may speculate that having an insecurely attached male partner promotes a woman’s sense of failure and inadequacy because they feel responsible for the well-being of their partners; hence, despite their own security, women feel more shame. On the other hand, for men, feeling insecure in an intimate relationship may also be related to a sense of failure, because they don’t feel loved and are deeply ashamed of it; hence more shame and the high compound score. In line with this interpretation, we found wives’ shame-proneness to be negatively correlated with husbands’ secure attachment style at a .001 level of significance ($r = -0.39$). This correlation was the strongest association found in our study between different variables within dyads and the only one reported in this article.

In conclusion, we should mention some limitations of this study. The sample used was relatively small and its potentially important characteristics (marital satisfaction, age, relationship duration and level of conflict) were not controlled for. Thus we still do not have a clear picture of how shame-proneness in women and men contributes to their marital dynamic and vice versa. However, we do know that this
picture is a complex one because these relationships are strongly mediated by gender. Thus, despite the negative result for our main hypothesis, studying mutually reactive aspects of shame-proneness in couples holds promise as a way of understanding how relational sources of stress and attachment insecurity contribute to individual problems and prevent their effective treatment.

References


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