

# Self-Acceptance Psychology

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"Bad behaviors" that become "diagnosable" or...



Self-Acceptance Psychology

Shame and fear are the underlying causes of "mental illnesses."

Self-Acceptance Psychology

- a powerful new paradigm to describe human behavior.
- challenges the disease model of mental disorders
- reframes emotional and behavioral problems as adaptive responses to Five Causative Factors
  - The Primal Threat Response or "Fight-or-Flight"
  - Fear of Social Exclusion
  - Shame as an Attempt to Prevent Social Exclusion
  - Complex Trauma
  - Attachment Status

## Linking Causes and Interventions

*If shame is the cause,  
self-acceptance is the answer.*



## My Journey



## What is Shame?

- pro-social emotion
- helps shape human social behavior by encouraging compliance and social cooperation
- powerful in triggering fear of rejection and exclusion
- healthy shame based on self-acceptance
  - feelings of guilt and embarrassment are experiences that allow us to adjust our behavior and repair relationships through accountability, contrition and reconciliation.
- improves relationships by expressing vulnerability, admit imperfection
  - leads to "tend and befriend"

## Shame Gone Wrong

- poorly tolerated shame is a major source of difficulty in relationships.
  - a withdrawing/hiding/secret experience for the individual
  - leads to lack of accountability, lying, angry accusations, escalating fights
  - disconnects us from human interaction in painful and harmful ways
  - Love brings connection and closeness, while unhealthy levels of shame can lead to distance and disconnection.
  - accountability is a vulnerable response
  - SHAME IS DESIGNED TO HEAL, BUT WHEN POORLY TOLERATED CAN HARM

## Shame and the DSM

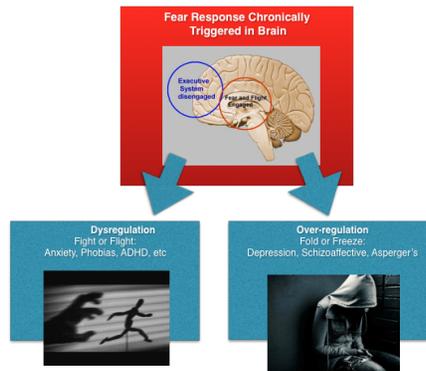
- Poor shame tolerance
  - is the cause of most relationship problems
  - cause of 'personality disorders'
  - causes problems in the relationship with the self
- Ignored by DSM

## Five Causative Factors

- Primal Threat/Fear Response
- Fear of Social Exclusion
- Shame
- Trauma
- Attachment or Complex Trauma



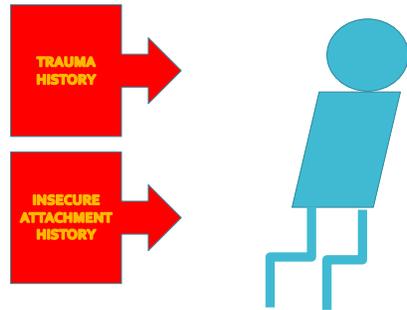
## Fear is Not "Disease"



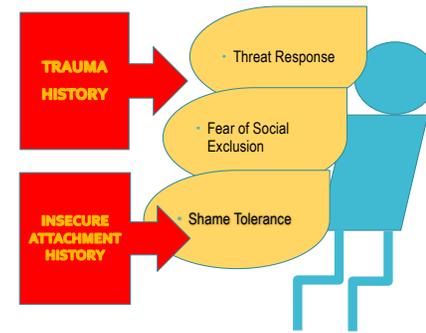
## NORMAL: A Healthy Backpack of Emotional Responses



## Self-Acceptance Psychology Connects the Five Causative Factors



## Hyper-sensitivity to threat, exclusion and shame



## DSM on Shame and Five Factors?

- Privileges "intrapsychic" problems and ignores relationships and attachment
- Ignores emotional contagion and toxic relationships with abusers and narcissists
- Ignores complex or attachment trauma as an influence on view of self and other

## Shame and Relationships

- Unlike the DSM, Self-Acceptance Psychology and its Five Causative Factors directly integrates relationships in its framework for understanding emotional health.
  - Five Causative Factors lead to an inability to handle shame in healthy ways
  - Leads to fearful responses (dysregulated/over-regulated)
  - Usually in response to real or perceived rejection (attachment distress)

## Blame-Shifting Strategies

- “Mental disorders” are actually shame intolerance disorders that cause the adoption of Blame-Shifting Strategies:
  - Self-Blaming: “It’s always my fault.”
    - “Anxiety,” “Depression,” “Social Anxiety,” “OCD,” over-achieving, perfectionism, passivity, etc.
  - Other-Blaming: “It’s not my fault.”
    - Narcissistic PD, Antisocial PD, Borderline PD
  - Blame Avoiding: “It’s nobody’s fault, and let’s not talk about it.”
    - Avoidant PD
- Assessment: How does the person handle criticism?
- Adaptive in Childhood, Toxic in Adulthood
- Relationship Destroyers

## Self-Blamers

- Internalize messages of self-criticism and self-correction
- Approval seeking, disapproval avoiding
- Perfection seeking – to silence the voice of self-reproach, freeing them from self-hate
- Conflict averse, passive, unassertive
- An attempt to feel loved by others, ends up feeling unlovable to oneself
- Anxious or “fleeing” from the unworthy self in disgust and despair (“depression”)

## Blame Avoiders

- “It’s No One’s Fault, And Let’s Not Talk About It”
- Most obvious in withdrawing and conflict avoiding behaviors in relationships
- Isolating lifestyles

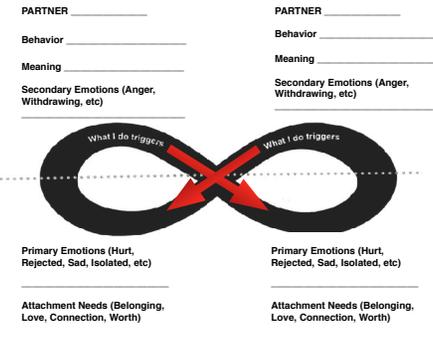
## Other-Blamers

- Key Traits: Lack of accountability, hypervigilant to and over-reactive to criticism
- Argue, make excuses, rationalize, abuse, gaslighting, etc, etc
- Immoral and character disordered
- Missed by the DSM, except for Axis II Personality Disorders and Addictions
  - Narcissistic, Sociopathic, Borderline PD
  - AND: Subclinical toxic relationships
  - Narcissistic behaviors
  - Abusive relationships
  - High-Conflict relationships
  - Harsh, blaming parenting
  - Addictive behaviors

## Other-Blamers

- Nearly ignored by DSM but toxic to others
- Abusers, criminals, addicts, under-functioning adults, oppositional children, sociopathic and narcissistic
- Lack of accountability, above the law, don't play by normal social and moral codes
- Destroy empathy, openness and vulnerability in relationships
- Worsen Self-Blaming tendencies

## EFT "Tango"



## Poorly Tolerated Shame Is a Relationship Destroyer

- Shame Influences Relationship with Others
  - Insecure attachment →
    - Lack of self-soothing skills
    - An experience of rejection
    - Fear-inducing messages of inadequacy and unworthiness
    - Hypervigilance to rejection, disconnection, loneliness
    - Belief that relationships with others are threats
    - Fear of vulnerability and interdependence
- Self-criticize to "fix" the self and earn acceptance from others and from self
- Or criticize/reject/attack/blame others to forestall criticism/shame

## Shame Influences Relationship with Self

- Poor Shame Tolerance Leads to Lack of Self-Attachment or Self-Acceptance
- Relationship with the Self is a source of threat.
- You are attacker and attacked, with no safe haven
- Lack of relationship with yourself is the ultimate loneliness

## Disease or...

- DSM diagnoses describe
  - hyper-vigilance
    - to being shamed, victimized, or rejected by others
  - hyper-reactivity
    - with fear, anger, blame-shifting (attack other), self-loathing (attack self)

## Rethinking Gavin's "Diagnosis"

- Oppositional behavior aka anger
  - = Other-Blamer lashing out
  - Tantrums: What triggers them? Fear of failure and shame
- Fears of being criticized and rejected (view of others)
  - Just being given direction by a teacher triggers shame because already primed with beliefs of unworthiness
- Fears of failure and resulting self-judgment (view of self)
- Anxiety = hypervigilance and hyper-reactivity to threat
  - Distractibility, hyperactivity ("ADHD")
  - Worry, tics, somatic issues ("Anxiety")
- Lack of ability to self-soothe and be self-accepting leads to fears of and protectiveness against future shame.
- Paranoia, Awkwardness and "Autism" in social settings = Fear of being judged by others and rejected

## CFT Model



## Evidence-based Interventions

- Compassion-Focused Therapy (Paul Gilbert, PhD)
- Mindful Self-Compassion (Kristen Neff, PhD and Christopher Germer, PhD)
- Emotionally Focused Couple Therapy (Sue Johnson, EdD)
- More in Self-Acceptance Psychology book
- See Resource List Handout

## The Good News!!!!

- We are not born to live chronically with fear, anxiety, and self-criticism.
- If shame is the problem, Self-Acceptance is the solution
- Happier, more authentic, and have improved relationships with others and with yourself.
- Real, permanent change
- Improving the quality of relationships with others and with oneself.
- Accepting our imperfections allows us to accept and tolerate shame in a healthy way without over-reacting or under-reacting.
- We can all learn these skills

*Be Kind to Yourself!*

Thank you!

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- Blog
- YouTube
- Facebook and Twitter
- Email signup for Handout on "How to Develop Self-Compassion"
- Handout: Resource list
- Handout: SAP Assessment and Case Formulation Matrix