Contextualizing Shame: The Importance of Culture and Discrimination in the Study of Self-Conscious Emotions

by

Fanie Collardeau
B.A., American University of Paris, 2013
M.Sc., University of Victoria, 2016

A Dissertation Submitted in Partial Fulfillment of the
Requirements for the Degree of

DOCTOR OF PHILOSOPHY

in the Department of Psychology

Supervisory Committee

Contextualizing Shame: The Importance of Culture and Discrimination in the Study of Self-Conscious Emotions

by

Fanie Collardeau
B.A., American University of Paris, 2013
M.Sc., University of Victoria, 2016

Supervisory Committee

Dr. Erica Woodin (Department of Psychology)
Supervisor

Dr. Catherine Costigan (Department of Psychology)
Departmental Member

Dr. Toni Schmader (University of British Columbia, Department of Psychology)
Outside Member

Dr. John Sakaluk (Western University, Department of Psychology)
Outside Member

Supervisory Committee

Dr. Erica Woodin (Department of Psychology)
Supervisor

Dr. Catherine Costigan (Department of Psychology)
Departmental Member

Dr. Toni Schmader (University of British Columbia, Department of Psychology)
Outside Member

Dr. John Sakaluk (Western University, Department of Psychology)
Outside Member

ABSTRACT

Within Western psychology, shame is often seen as a maladaptive and hard to regulate self-conscious emotion. Yet, there is some emerging evidence that our knowledge of shame, and the emotion itself, are deeply influenced by cultural assumptions. I first start by providing a critical review of the literature on shame, highlighting differing, culturally-informed conceptualizations of shame in the West and in China and Taiwan. This review also highlights the potential role of social threats and discrimination in the social construction of shame for individuals. Study One then qualitatively explores the beliefs about shame and coping strategies used by Pakistani immigrants to Canada, without imposing a Western lens. Study Two tests two common assumptions about shame (i.e., shame and guilt are two distinct, separate emotions; past experiences of discrimination do not need to be systematically included) present in Western psychology in a Canadian (i.e., Western) sample. While shame is an innate emotional experience, findings suggest that shame and guilt may not be two fully distinct and separate emotions, and that past experiences of discrimination are positively associated with feelings of inferiority present in state shame.

Keywords: shame, guilt, cross-cultural, discrimination

Table of Contents

List of Tables

List of Figures

Acknowledgements

The opportunity to study at the University of Victoria and the completion of this degree would not have been possible without the unseen work and support of family, friends, mentors and strangers. Thus, this acknowledgment is only a small recognition of my indebtedness to everyone who made it possible and will undoubtedly miss many who deserve to be named. I would like to give my deepest thanks to:

My grandfather who worked tirelessly so that my work mattered more than his did,

My grandmother who defined for me values that would carry me through,

My mother who early on prioritized learning and shared her love for studies,

Patients at the Dialectic and Behavioral Therapy (DBT) program in Victoria who shared with me their struggles and whose shame prompted me to start researching self-conscious emotions,

Dr. Hallam who supported me through the DBT practicum and encouraged my burgeoning interest,

Dr. Woodin who acted as a secure base in the world of research,

Dr. Sakaluk who made statistics come alive and showed me how statistical analyses could also become tools to answer questions about meaning-making,

To my fellow companions in the clinical psychology program, and especially Joelle Taknint, Debra Torok and Sheliza Ali.

Most importantly, I would like to especially acknowledge my husband, Muhammad Usama Bin Aftab, without whom the dissertation in his current form would have never existed. I would like to thank him for being my companion in life and in dissertation, for the long chats challenging how we (Western psychologists) know what we know, for early on pointing out the

ways in which Western definitions of shame partially erased the experiences Pakistanis and other cultural groups had with self-conscious emotions. I would like to thank him for the small joys of life that allows one to keep going in the dissertation process (no acknowledgement would be complete without mentioning the weekly waffles!), and for his generosity and steadfastness.

Like more accomplished Muslims have said before me,

All the credit is due to Allah, only the mistakes have been mine.

(بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ) In the name of Allah, the most generous, the most merciful.

Dedication

I would like to dedicate this dissertation to the two Ferminas of my life, my grandmother, Lucia Fermina Maroto, and my first born, Nuria Fermina Khan:

To my grandmother, for teaching me that courage and a strength of steel can be wrapped within the utmost gentleness, and that a life of principles is a life well lived.

To my first born, only your birth and your early years could shake me in a way that would build me back up stronger, one step closer to the version of myself I was always meant to be but lacked the foresight to dream. I thought I would be your teacher, but you were always meant to be mine - lifting the veil of this world to find oneself in awe of God's creation and wisdom.

Chapter One

General Introduction

"Moderately painful feelings of guilt about specific behaviors motivate people to behave in a moral, caring, socially responsible manner. In contrast, intensely painful feelings of shame do not appear to steer people in a constructive moral direction. Such intense moral pain about the self cuts to our core, exacting a heavy "penance" perhaps. But rather than motivating reparative action, shame often motivates denial, defensive anger, and aggression" p2 (Tangney & Dearing, 2002).

This quote by Tangney, one of the most influential researchers on self-conscious emotions, summarizes the primary discourse held by Western psychology on shame and guilt. Shame is seen as an intense, hard to regulate and largely maladaptive emotion characterized by cognitions about the global self (e.g., I am a bad person). Guilt is, on the other hand, shame's more beloved cousin. It is seen as an emotion prompting individuals to engage in prosocial behaviors, make amends and it is characterized by cognitions about behaviors (e.g., this behavior I engaged in was wrong; Tangney, 1996; Tangney et al., 2007). State emotions, such as state shame, refer to time-limited affective experiences that occur at a specific point in time. In contrast, dispositional or trait emotions, such as trait shame, refer to an individual's proneness or propensity to feel the emotion (Tangney et al., 2007). Trait shame has been regularly associated with negative mental health outcomes (e.g., Kim et al., 2011), aggression (e.g., Velotti et al., 2014) and decreased pro-social orientation (e.g., Tignor & Colvin, 2017). Trait guilt, on the other hand, has been associated with increased prosocial orientation (e.g., Tignor & Colvin, 2017), but also with some negative mental health outcomes (e.g., Candea et al, 2018). Yet, self-conscious emotions continue to resist straightforward, simplistic definitions and narratives about their role and outcomes. Indeed, trait guilt's association to increased pro-social orientation is reliant on the

partialling out of its commonality with shame and the use of scenario measures (i.e., participants asked to predict their expected emotional reaction to specific scenarios) as opposed to checklist measures (i.e., reports of overall frequency of past emotional experiences; Tignor & Colvin, 2017). On the other hand, shame tends to be associated with adaptive inter and intra-personal outcomes (e.g. empathy, self-improvement) when it is measured as a *state* (e.g. De Hooge, 2013; Lickel et al., 2014), when individuals take responsibility for their actions (even for *trait* shame; e.g. Tangney et al, 2014) and when attempts to repair one's self-image are likely to be met with success (De Hooge, 2013; De Hooge et al., 2011; Leach & Cidam, 2015). Recent meta-analyses suggest shame and guilt may have more similar outcomes than had been initially theorized (Leach & Cidam, 2015; Leach et al, 2023).

When trying to review the existing literature on self-conscious emotions, researchers are faced with conceptual, methodological, and statistical challenges. Conceptually, there is a plethora of differing and overlapping definitions. For example, Tilghman-Osborne et al (2010) identified 23 competing definitions of guilt. Those definitions did not conceptually converge on a similar construct and a few contained elements generally attributed solely to shame (Tilghman-Osborne et al, 2010). While Tangney's elegant distinction between shame (about the self) and guilt (about behavior) and the measures she created are widely used, alternative definitions and measurements are also available (e.g., Gausel & Leach, 2011; Tilghman-Osborne et al, 2010; Tignor & Colvin, 2017). Debates have ensued about the most accurate definition for shame and guilt and about what emotion(s) widely used measures actually assess (e.g., Tangney, 1996; Giner-Sorolla et al, 2011). Additionally, some scholars have commented on the limitations of widely used definitions of shame and guilt in Western psychology, when assessing self-conscious emotions in other cultures (e.g., Shi-xu, 2009; Ho et al., 2004; Mao-jin & Jing-jing,

2009). In many cultures (e.g., China, Taiwan, Pakistan), shame is valued and hyper-cognised, leading to a large vocabulary to distinguish between different nuances of shame (Ho et al, 2004). For example, in Taiwan, “dui lian” expresses the concept of losing one’s face (self-respect) when others know that the individual is failing to live up to their social role. “Can kui,” on the other hand, is a subtype of shame that can be translated as prompting people to be their best possible self (Bedford, 2004). Western definitions are unlikely to encompass the full range and nuances present in self-conscious emotions across all cultural groups.

To conceptual and measurement difficulties are added the challenges of determining the best way of theorizing and statistically taking care of the moderate to high correlation of the two most frequently assessed self-conscious emotions: shame and guilt (Leach & Cidam, 2015; Leach et al, 2023; Tignor & Colvin, 2017). Based on the assumptions that shame and guilt have oppositive behavioral outcomes, researchers have used statistical approaches (e.g., regression, partialling out shame from guilt and vice versa) designed to reveal their opposite outcomes. Those approaches have, however, failed to adequately account for the correlation between shame and guilt, and may have led shame and guilt’s outcomes to appear as more different than they are (Leach et al, 2023).

Similarly to others researching self-conscious emotions, I see the heterogeneity of definitions, methodologies and findings as a call to re-examine what we know about self-conscious emotions. Namely, it begs us to re-examine: What are key assumptions present in the literature? Where do those assumptions come from? Are they shaped by a specific social and cultural context shared by researchers? If yes, do different cultural or social contexts lead to different assumptions and, ultimately, different findings?

Objectives and Content Overview

This dissertation aims to answer the following overarching questions:

A. How does culture influence shame and guilt, and their study?
B. Does social context, and more specifically discrimination, matter in the study of shame and guilt?

Those two questions are explored first through a critical review of the literature. The literature review aims to (a) provide an overview of key assumptions and challenges present in the study of shame and guilt through a Western lens, (b) offer an exploration of an alternate cultural framework for understanding self-conscious emotions, (c) bring attention to the potential importance of social threats and discrimination for self-conscious emotions. It also briefly highlights measurement invariance as an underutilized way to measure the impact of social construction.

Those questions are then explored through one qualitative and one quantitative study. The qualitative study aims to explore how shame is defined and coped with in an under-studied, non-Western cultural group, by exploring Pakistani immigrants' beliefs about shame and their coping strategies. Centering participants as the experts, Pakistani immigrants to Canada were asked to reflect on their understanding of shame (and briefly guilt), as well as their own reactions and coping strategies when experiencing shame. Finally, two key assumptions about self-conscious emotions are investigated.

Using a Western sample mainly composed of university students, the quantitative study investigates (a) whether shame and guilt are discrete, distinct emotional experiences and (b) the influence of lifetime discrimination on self-conscious emotions and their behavioral outcomes.

The following questions guided the literature review (paper 1):

1. Are widely used definitions of shame and guilt culturally located?

2. What are their assumptions? How do they influence findings and translate into conceptual and methodological challenges?
3. What may be underutilised methods of investigating the social construction of emotions?
4. Is social context, and specifically discrimination, important for self-conscious emotions?

This manuscript was published in the journal *Canadian Psychology/Psychologie Canadienne*.

The following questions guided the qualitative study (paper 2):

1. What is the purpose of shame, if any, according to Pakistani immigrants to Canada?
2. How do they make sense of and regulate this emotional experience?
3. Do they feel their understanding of shame or coping with shame was influenced by their immigration to Canada?

This manuscript was published in the journal *International Perspectives in Psychology: Research, Practice, Consultation.*

The following questions guided the quantitative study (paper 3)[1]:

1. Are state shame and guilt, as defined by Tangney (i.e., most widely used definition in Western psychology) truly two discrete, distinct emotions?
2. What is the best measurement model for state shame and guilt? How does the selection of a measurement model influence results?
3. Does lifetime discrimination influence state shame and guilt and their behavioral outcomes?

---

[1] Originally, I had aimed to replicate the quantitative study in a sample of Pakistani immigrants, and to use measurement invariance as a way to explore quantitatively cultural differences. However, the impact of the Covid-19 pandemic, repeated stressful events for the Pakistani community in Canada, and feedback from participants that the quantitative design did not work for them led to an extremely slow recruitment and ultimately the decision to limit the scope of this last study.

This dissertation received support from the Society for the Psychological Study of Social Issues through a Grant-In-Aid.

Chapter Two

The Role of Culture and Social Threats in Constructing Shame

Shaping much of the existing research, Western scholars have focused mainly on the maladaptive, painful aspects of shame in the context of a self viewed as largely invariant and mainly self-interested (Nathanson, 1992; Tangney et al., 2007). While Western approaches have shed light on some universal components of shame (Tracy, 2014), the ability to meaningfully explore culturally-specific ways of understanding, expressing and regulating shame has been limited by Western definitions. For example, contrary to Western researchers, Chinese scholars have emphasized the nuanced and adaptive aspects of shame in the context of a more malleable and other-oriented self (Ho et al., 2004; Mao-jin & Jing-jing, 2009).

In this article, we will provide an overview of competing definitions of shame and their assumptions, while highlighting the foundational influence of culture on the experience (e.g., cognitions, appraisal of physical sensations, action tendencies) and regulation of shame. Then, we will consider how chronic social threats such as discrimination may also play a role in the social construction of shame. The current research emphasizes the drawbacks of focusing on universality and generalizability at the expense of culturally-diverse, indigenous definitions, and the limitations of employing Western-centric definitions and measures of shame in non-Western settings (Shi-xu, 2009). We conclude with a call to action for researchers studying shame and guilt to move away from a Western lens towards more contextualized, ecologically valid conceptualizations of shame emerging from varied social and cultural contexts.

Competing Definitions of Shame

State emotions, such as state shame, refer to time-limited affective experiences which occur at a specific point in time. In contrast, dispositional or trait emotions, such as trait shame,

refer to an individual's proneness or propensity to feel the emotion. Emotions such as shame can be anticipatory, and act as predictors of our reactions to our potential future behaviors, or consequential, and provide feedback on past behaviors (Tangney et al., 2007).

Western Definitions of Shame

Although far from a unified field, the large body of psychology research on shame emanating from North American and European perspectives provides several important insights. From this approach, shame is typically viewed as a painful emotional experience whose focus, by definition, is on the full (e.g., "I am a horrible person") or partial self (e.g., "This aspect of myself is horrible/unacceptable") (De Hooge, 2013; Gilbert, 2006; Leach & Cidam, 2015; Lewis, 1971; Tangney et al., 2007; Tracy & Robins, 2004). Feelings of shame can signal one's undesirability to the self and/or in the eyes of potential others (De Hooge, 2013; Gilbert, 2006; Leary, 2007; Tangney et al., 2007) or one's lower social rank (Weisfeld & Dillon, 2012). Shame provides feedback on anticipated, occurring or past behaviors by inhibiting approach behaviors in potentially dangerous situations (Nathanson, 1992; Tomkins & McCarter, 1964) or signaling the unacceptability of current behaviors to motivate for self-improvement (De Hooge, 2013; Leach & Cidam, 2015).

Many influential theories and widely used measures have conceptualized shame as a mostly maladaptive emotion (Nathanson, 1992; Tangney, 1995; Tracy & Robins, 2004). Yet, few theories have been as influential as the deceptively simple distinction made between shame and guilt by Tangney (1995) and Lewis (1971). According to this distinction, shame involves a focus on the self, whereby the individual perceives his or her *global* self as flawed. Shame is considered mostly maladaptive and associated with a *desire to avoid and hide*. On the other hand, guilt is considered mostly adaptive and involves a focus on a specific behavior or mistake

(e.g., “I did something wrong”). Guilt is considered to be associated with a desire to repair the relationship, and with approach rather than avoidance behaviors (Lewis, 1971; Tangney, 1995).

This shame-guilt distinction is deeply embedded within and informed by relatively recent cultural shifts in the United States and other Western countries. For instance, historical texts from the United States illustrate that before the 19th century, shame was frequently imposed upon others through public shaming (Stearns, 2016). Shame was associated with clear, socially agreed upon and explicit steps for repair and seeking reintegration into society. Throughout the 19th century, shame became increasingly thought of as a more internal, psychological, and individual experience that is disliked and hidden, and that is no longer associated with clear steps for repair and reintegration. In parallel, guilt became the favored emotion (i.e., the emotion considered to be more adaptive and thus valued) within Western, and especially North American, public discourse (Stearns, 2016). Lewis (1971), and Tangney's (1995) guilt-shame distinction similarly views shame as an internal, painful experience with no clear steps for reparation, whereas guilt is viewed as more transient and fixable, thus echoing cultural beliefs held in the United States from which their work emerges.

The elegant simplicity and clarity of Lewis (1971) and Tangney's (1995) guilt-shame distinction has stimulated the creation of multiple self-report measures (e.g., Marschall et al., 1994; Tangney et al., 2000) and led to a renewed interest in shame and guilt (e.g., Kim, et al., 2011; Rüsch et al., 2007). Yet, the distinction has also prompted Western theorists to place a disproportionate focus on maladaptive aspects of shame (e.g. Nathanson, 1992; Weisfeld & Dillon, 2012), including in the way self-report instruments of shame and guilt have been created. Out of the eight most frequently used (as per the number of citations on PsycINFO) self-report measures of shame cited in Tignor and Colvin (2017) and Robins et al. (2007), four include only

cognitions about the global self (e.g., "I see myself as being very small and insignificant"). Further, three measures include items assessing negative behavioral actions rather than urges (thus conflating negative behavioral urges and negative coping, e.g., "have you avoided people") and no measure includes items tapping into adaptive components of shame (e.g., "urge to improve the self"). Thus, the most routinely used self-report measures of shame make it difficult to assess less intense and potentially better regulated experiences of shame.

The overreliance on *trait* shame to draw conclusions about shame bolstered the dominance of research on the maladaptive aspects of shame. Systematic reviews and meta-analyses have reported that (*mainly trait*) shame is associated with increased grief intensity for bereaved parents (Duncan & Cacciatore, 2015), depressive symptoms (Kim et al., 2011), short-term substance use (Luoma et al., 2019), non-suicidal self-injury (Sheehy et al., 2019), and decreased pro-social orientation (Tignor & Colvin, 2017). Literature reviews have also highlighted the association between (mainly trait) shame and aggression (Velotti et al., 2014), eating disorders (Gross & Allan, 2009), post-traumatic stress disorder in military veterans (Gaudet et al., 2016), and between intense shame stemming from childhood sexual assault and psychological distress, social disconnection, and trauma symptoms (MacGinley et al., 2019). Multiple meta-analyses and reviews, however, do not differentiate between state and trait shame in their findings despite their inclusion of a majority of studies assessing trait shame (Duncan & Cacciatore, 2015; Kim et al., 2011; MacGinley et al., 2019). One study even used the term state shame to characterize findings from a checklist scenario measure of trait shame (Sheehy et al., 2019). Overall, the majority of reviews rely heavily on research conducted on trait shame.

The overreliance on trait shame research to draw conclusions about shame generally, and state shame in particular, is problematic (De Hooge, 2013). Preliminary evidence suggests that

state shame and trait shame are associated with different outcomes (Rüsch et al., 2007). Furthermore, definitions of trait shame imply a greater propensity to feel shame, whether in specific scenarios, globally or about a particular self-concept (Tangney et al., 2007). Thus, a focus on trait shame naturally leads researchers to investigate the influence of recurrent, chronic feelings of shame, again leading to a focus on maladaptive aspects of shame or dysregulated shame. It is thus difficult to generalize findings from this body of research to state shame (De Hooge, 2013), which concerns time-limited experiences of shame during specific events, and which is likely less detrimental to long term functioning.

At a theoretical level, the Western emphasis on the global or core self as the object of shame (De Hooge, 2013; Tangney et al., 2007; Tracy & Robins, 2004), *in a cultural context where the self is mostly seen as stable or largely invariant* (Nathanson, 1992; Tangney et al., 2007) also partially accounts for the disproportionate focus on maladaptive shame. While Gilbert (2006) and Gausel and Leach (2011) have argued that shame occurs about more circumscribed aspects of the self (e.g., "with my best friend, I am not as honest a person as I should be"), a large number of studies and research designs do not reflect their views. The narrow focus on the global self of the most well-accepted Western definition of shame (Tangney et al., 2007) implies that *only* the most intense, hard to regulate and painful experiences of shame are of interest. In turn, more intense experiences of shame (e.g., about the global self) will most likely be harder to repair than less intense experiences of shame (e.g., about a specific aspect of the self) and will lead to more negative outcomes. In contrast, conceptualizing shame on a continuum would allow for the inclusion of a wider range of experiences of shame and lead to further insights into successful regulation strategies.

Additionally, a sole focus on the global self ignores individuals' multiplicity of identities and the possibility that multiple self-concepts may co-exist and be differentially impacted by experiences (Linville, 1987; Watcher et al., 2015), including shameful experiences. Thus, it is possible that specific self-concepts are damaged or become the focus of shame (e.g., "I am a horrible friend") while others remain intact and accessible (e.g., "but I am still a good parent/co-worker/etc."). The continued accessibility of multiple additional positive aspects of the self while one aspect is the target of shame may lead to greater capacity to regulate shameful experiences. However, these nuances are rarely accounted for in Western research on shame.

Despite the historical Western focus on maladaptive aspects of shame, evidence in favor of an adaptive aspect of shame, even in Western contexts, has been emerging (Leach & Cidam, 2015). For example, state shame is predictive of an increased desire to change the self, which is *not* the case for similar emotional experiences such as state guilt (De Hooge, 2013; Lickel et al., 2014). This desire then translates into pro-social behaviors if the attempt to repair one's self image is likely to be met with success (De Hooge et al., 2011; Leach & Cidam, 2015). However, if the risk of failure is high, shame protects the self from further damage by motivating withdrawal and other avoidance behaviors (De Hooge et al., 2011; De Hooge, 2013). In addition, a study of jail inmates demonstrated that trait shame predicted lower criminal recidivism (Tangney et al., 2014), suggesting that even more chronic experiences of shame can promote positive behavior change in some circumstances. Indeed, shame proneness was associated with increased recidivism only when inmates blamed external factors for their behaviors rather than taking responsibility for their wrongdoing (Tangney et al., 2014).

While the likelihood of successful repair of an individual's self-image in their environment (De Hooge et al., 2011; Leach & Cidam, 2015) may be determined by the nature of

the transgression or opportunities for repair, it may also be influenced by social expectations or norms. Evolutionary theorists have long recognized that feelings of shame frequently occur within complex social hierarchies (Weisfeld & Dillon, 2012) and serve to bring individuals' attention to the perceived judgements of others (Leary, 2007; Sznycer et al., 2016). Gilbert (2007) went so far as to posit that the core source of shame is rooted in social unsafety and threats to the individual (e.g., discrimination).

However, even when they consider social contexts and culture, the majority of Western authors hypothesize that contexts define only moral standards, that is, the activities that constitute shameful behavior (Gilbert, 2003; Tangney et al., 2007), the co-occurrence of other basic emotions with shame (Gilbert, 2007; Tomkins & McCarter, 1964), the frequency of shame experiences, especially for experiences of shame triggered by experiences of discrimination, stigma or a social threat (Gilbert, 2006; Tracy & Robins, 2004) and/or the adaptability of specific behaviors, such as avoidance (De Hooge, 2013; Tracy & Robins, 2004; Weisfeld & Dillon, 2012). With many scholars aiming to uncover universal truths about emotions (Sheikh, 2014; Tracy, 2014), there is a risk of underestimating the role of culture and social context in shaping emotional responses. The existence of innate components of shame and similarities across environments does not preclude the possibility that the experience of shame is in part socially constructed (Parkinson, 2012).

Considering Shame Through a Non-Western Lens

Western researchers do not operate independently of cultural influences. Their work may have wide ranging consequences in other cultures, particularly by re-affirming Western norms and values (Shi-xu, 2009). Chinese and Japanese scholars have criticized the Western-centric nature of current theories of shame (e.g., Shi-xu, 2009) and instead often view shame as a

cultural emotion based on socially shared scripts that include cultural norms, ideals and values (Hong, 2004; Kitayama & Masuda, 1995; Shi-xu, 2009). While non-Western definitions of shame are rare, Chinese and Taiwanese scholars have conducted in-depth explorations of historically important philosophical and religious texts (e.g., Ho et al., 2004; Mao-jin & Jing-jing, 2009) as well as historical contexts (Chen, 2002), that have shaped how shame is viewed, expressed, and coped with in present day China and Taiwan.

In contrast to many Western theories, shame is a nuanced and valued emotional experience in China and Taiwan (Bedford, 2004; Ho, et al., 2004). The Chinese language contains about 150 words related to shame (Ho, et al., 2004), which attests to the emotion's significance and social function (Li et al., 2004). The emotion is thus hypercognized and is associated with a complex and detailed vocabulary which allows for a more refined and nuanced understanding of instances of shame. While some types of shame stem from immoral acts, others are a reaction to the negative appraisal of close others (Li et al., 2004) or indicate shame can be an opportunity to improve the self (Bedford, 2004). For example, "dui lian" expresses the concept of losing one's face (self-respect) *when others know* that the individual is failing to live up to their social role. "Can kui", on the other hand, is a subtype of shame that can be translated as prompting people to be their best possible self (Bedford, 2004).

In addition to linguistic differences, the work of Chinese scholars further highlights crucial differences between Chinese and Western conceptions (Bedford & Hwang, 2003; Ho et al., 2004; Mao-jin et al., 2009). First, in Confucianism, the self is not defined as a fixed or stable entity but rather continually and naturally experiences changes over time (Wong & Tsai, 2007). The possibility of changing the self is reflected in and reinforced by social discourses emphasizing that shame can lead to self-transformation. This is in sharp contrast to the mainly

invariant and stable self that is assumed by Western scholars (Nathanson, 1992; Tangney et al., 2007). Rather than debate the validity of either position, we believe a more fruitful exploration may lie in understanding how different beliefs about the self influence meaning making, coping, and ultimately the actual malleability of the self after a shameful experience. When an individual experiences shame, it may be more daunting to attempt to transform a self that is perceived to be invariant and immutable than to adjust a self that is perceived to be naturally flexible and changing.

Second, family is core to one's conception of the self in Chinese culture (Bedford & Hwang, 2003; Maojin, & Jing-jing, 2009). The greater self includes at least two family generations. Further, due to the focus on group harmony and relationships, external motivations are seen as equally desirable as internal motivations (Wong & Tsai, 2007) and group-oriented (including family-oriented) behaviors are more important than individual goals (Bedford & Hwang, 2003). During shameful experiences, both first- and second-generation Asian-Americans identify not only a shamed actor and an audience, but also a shamed other (i.e., close other experiencing vicarious shame due to the individual's action; Liem, 1997). The presence of the shamed other may increase the shamed actor's motivation to change the self or to repair relationships, as well as to minimize negative outcomes for the shamed other. Thus, shame is less likely to be only self-focused in Chinese culture. Additionally, if family members have been historically supportive, they may be seen as natural allies who also have a vested interest in helping the individual to repair the situation after a shameful event (Liem, 1997; Fung, 1999).

Within and outside of the family, the experience and expression of shame in Chinese culture is a function of one's socially defined role in specific relationships (Ho et al., 2004). Duties vary based on individuals' respective social status relative to who is present at a given

time. Additionally, Confucianism has guidelines for mandatory proscriptive (i.e., "should not") and prescriptive (i.e., "should") duties (Bedford & Hwang, 2003). In the West, prescriptive duties are mostly optional (e.g., giving charity (Sheikh & Janoff-Bulman, 2010) and thus more rarely associated with negative emotions. However, prescriptive duties are mandatory in Confucianism. Individuals with a higher social position (e.g., parents, wealthier friends) will experience shame if they fail to fulfill their relationship-specific responsibilities (Hong, 2004) and will navigate relationship-specific norms about the expression of shame (e.g., appropriate intensity of facial expressions; Ho et al., 2004). Additionally, individuals' relative status within a relationship will influence their experience of vicarious shame. Thus, an individual would experience more intense shame if their father, rather than their son, lost face and acted inappropriately (Ho et al., 2004). Shame (including its triggering event, expression, and repair) is thus considered to be deeply relational and contextual, and is not considered a fully private experience (Ho et al., 2004; Hong, 2004; Kitayama & Masuda, 1995).

Unsurprisingly, cultural beliefs about shame might lead to different individual and interpersonal coping strategies and behavioral outcomes. For example, in the Chinese culture, more intense shame is positively predictive of individuals' learning from failure (Wang et al., 2018). Shame also tends to increase relationship building efforts and is used in work settings to resolve conflict (Wong & Tsai, 2007). Furthermore, those outcomes may be culturally facilitated and encouraged. Indeed, while in the United States, friends of an ashamed individual often reorient their attention away from the individuals' mistakes, or blame others (Kitayama & Masuda, 1995), friends may be less likely to do so within a Chinese context.

Contrasting Chinese and Western accounts suggest that, despite their efforts to uncover universal truths about shame, Western definitions of shame have been deeply shaped by their

historical and cultural contexts. Research in the social construction of shame, highlighted in the sections below, further points to the need to first delve into the many understandings of and ways of coping with shame in different cultures, before pursuing the identification of universal aspects of shame.

Contextualizing Shame: Social Construction and Culture

The work of social construction theorists also highlight the myriad of ways in which culture deeply informs and builds experiences of shame (Boiger & Mesquita, 2012; Mesquita et al., 2017) and offers suggestions regarding how to further explore culturally diverse, indigenous understandings of shame.

Cultural Construction of Shame

We would like to emphasize again that, for us, similar to (Parkinson, 2012), innate mechanisms and social construction processes are *not* mutually exclusionary but rather working in tandem over time. In addition, culture is an ever-changing and constantly re-negotiated, yet partially stable, environment (Chen, 2002; Hong, 2004; Parkinson, 2012). Thus, we can expect some meaningful differences in individuals' beliefs about, experience of, and coping strategies for shame to emerge over the course of decades and centuries within the same culture (see Parkinson, 2012). Finally, the consideration of long-term epigenetic modifications through norms influencing partner selection may point to the role of cultural environments in influencing gene selections – thus further blurring the lines between what is innate and what is cultural (Parkinson, 2012; Zachar, 2012).

Theories and empirical studies of the social construction of emotions offer opportunities to explore culturally-situated emotional responses. Their focus has often been on developmental processes, including how interactions between caregivers and an active infant/child lead to the

child internalizing cultural values, the meanings of important events and emotions, and norms about emotions and their associated (and appropriate) actions (Boiger & Mesquita, 2012; Mascolo, 1994). However, Boiger and Mesquita (2012) extend this to consider the interactional, moment to moment construction of emotional processes in adulthood (see also Mesquita et al., 2017). Culture guides attentional and meaning-making processes in interpersonal situations, as well as cultural norms about how one becomes or acts as a good person. For example, shame is more likely to be attended to by the ashamed individual if the cultural context highlights its benefits or promotes values, such as social harmony and interdependence (e.g., Japan), in line with the role played by the emotion. Furthermore, culturally-defined cues may also influence one's interpretation of a situation and resulting emotional experience. Contrary to most Western contexts, an individual's emotion in Japan is assessed based on their facial expression *and* the facial expression of surrounding others. Others, in turn, have a stronger role to play in the emotion-regulation process. The responses of Japanese participants to shame, but not of German participants, are highly reliant on and shaped by their partner's responses (Boiger & Mesquita, 2012; Mesquita et al., 2017).

Qualitative studies (Gergen et al., 2015), scenario-based tasks, observation of real-time interactions, and cross-cultural diary studies (among others, see Boiger & Mesquita, 2012; Boiger et al., 2018; Mesquita et al., 2017) are all helpful in investigating processes of social construction and suggest that individuals from different cultural backgrounds may hold different meta-emotion philosophies about shame. Meta-emotion philosophies, and meta-emotions, refer to individuals' beliefs (e.g., belief that shame is valuable or to be avoided at all cost) about and secondary emotional reactions (e.g., feeling ashamed about feeling ashamed) to emotions (Gottman et al., 1996; Norman & Furnes, 2016). Meta-emotions are hypothesized to influence

the regulation strategies (including motivation and action tendencies) and the meaning of the original emotion through meta-emotional experiences, knowledge, and strategies (see Norman & Furnes, 2016 for more details). To date, only one quantitative study has explored the role of a meta-cognition, the level of doubt about appraisals of blame (i.e., "who is to blame?"), during experiences of shame (Tong et al., 2014).

Yet, some qualitative studies indicate the existence of a wide range of meta-cognitions associated with shame in different cultures. For example, ethnographic research conducted in Java suggest that shame is understood as a desirable, socially-defined indicator of psychological well-being and recovery after a psychotic illness (Subandi & Good, 2018). A healthy person is defined by their internalization of morality, their self-control, and their capacity to exhibit shame at the culturally appropriate times (Subandi & Good, 2018). In a qualitative study exploring the meaning of shame for Pakistani immigrants to Canada, participants understood shame as both an emotional feedback signalling potentially wrongful behaviors to allow for self-improvement and an emotion used within hierarchical relationships by those with more social status to enforce specific behaviors (Collardeau et al, 2021). Depending on the situation, participants then had nuanced coping strategies to regulate their feelings of shame (Collardeau et al, 2021). Future studies of personal and culturally-shared meta-emotion philosophies about shame may be a fruitful avenue to explore culturally diverse, indigenous understandings of shame. Findings could lead to broader definitions of shame (i.e., cognitions, physical sensations, action tendencies). They could also lead to the identification of, for example, the ways in which different meta-emotion philosophies of and beliefs about shame are associated with more varied action tendencies during a shameful event, or with more or less adaptive regulation strategies.

Ultimately, contextualizing shame within the specific relationships and cultural contexts in which it occurs leads us to ask: How differently do individuals in different situational and cultural contexts construe and experience shame? For example, would a Chinese individual experience and report on their shame in the same way as a North American individual of European descent? Experiences of shame may be influenced by culture at the level of cognitions, action tendencies, or physical sensations. At the level of cognitions, individuals from societies where the emotion is hypercognized (e.g., China) may have more variable and nuanced shame cognitions than individuals from societies where it is not (e.g., the United States). Culture may further influence individuals' most frequent and attended to cognitions about shame (e.g., the shame being about a partial aspect of the self or the global self), or about the degree of perceived reparability of an ashamed self. Within societies where shame is seen as providing an opportunity to improve the self, feelings of shame may be associated with relief (e.g., in so far as they signal within one's cultural context that one is a moral and good person) and thus be altered by action tendencies associated with positive emotions (e.g., approach behaviors). For example, despite the strong association theorised and observed between high intensity shame and anger in the United States, those findings were not replicated in a Japanese context (Kirchner et al., 2018). When it comes to physical sensations, individuals may consider different thresholds for what constitutes the mildest form of shame and what constitutes high or unbearable shame. Considerable work has been done to argue for specific definitions of shame (e.g., Gausel & Leach, 2011; Tangney et al., 2007). However, trying to determine the "true" definition of shame may not be as fruitful as exploring how different, culturally-embedded definitions of shame (i.e., cognitions, physical and affective elements, behavioral tendencies) impact shame's regulation and outcomes.

Measurement Models: Under-utilized Tests of Social Construction?

Potential qualitative differences in meaning-making can be explored through the creation of measures more closely tailored to the idiosyncrasies of specific groups (e.g., reflecting the nuanced attributions idiosyncratic to one language and cultural group) or through the creation of scenarios more relevant to the culture of interest (Boiger et al., 2018). Additionally, differences in meaning-making may translate to variations in the latent structure of self-report measures or differing psychometric properties of individual items (see Chen, 2008; Sakaluk, 2019; Vandenberg & Lance, 2000 for an introduction to measurement models). Variability in measurement models (e.g., detected by invariance testing of factor structures or differential item functioning) across groups is most often considered a problem to be eliminated. However, those quantitative indicators may signal processes of social constructions and the presence of meaning-making differences (Sakaluk, 2019). The common practice of systematically removing items behaving differently across groups creates again a focus on similarities across groups or "universal, generalizable" findings, which in turn may result in diminished opportunities to study more culturally specific processes. We posit that research on shame would benefit from asking questions related to invariance testing. For example, do cultural differences translate into differences in meanings for participants' ratings on existing or new self-report measures? In other words, if individuals from culture A and B are both endorsing a 5 on a 5-point Likert scale, are they actually reporting on experiences of a similar or different quality or intensity? Will a participant coming from a cultural background where shame is highly valued and signals the presence of morality understand the item "I felt I am a bad person" similarly to someone who comes from a cultural context where shame is viewed only as a maladaptive emotion? If participants from two different cultural groups do not understand some items in the same way,

can we understand the origin of those differences and how they may influence participants' coping with shame?

The examination of measurement invariance in the study of shame is recent, and mainly considers variations in measurement models or psychometric properties of items to be problematic (e.g., Di Sarno, et al., 2019; Watson et al., 2017). Rather, we would like to argue that *both* continuities and discontinuities in cross-cultural experiences of shame are worthy of study. To date, nine studies tested the measurement variance of five self-report measures of shame across gender (Di Sarno et al., 2019; Garcia et al., 2017; Shahnawaz & Malik, 2017; Vagos et al., 2016; Vagos et al., 2019; Watson et al., 2017) cultures (Furukawa et al., 2012) or social contexts (Vagos et al., 2016; Vagos et al., 2019). As a group, the studies point toward the existence of both continuities and discontinuities in the experience of shame across genders and cultures. A recent meta-analyses of gender differences in self-conscious emotions further suggests that gender differences on reports of self-conscious emotions were greater for White samples compared to other samples (Else-Quest et al., 2012).

Further, measurement models should be explored by creating culturally specific items reflecting the cultural idiosyncrasies of each group under study (Boiger et al., 2013). Items and scenarios need to be, as much as possible, ecologically valid and meaningful for the cultural group of interest. For example, not only do situations involving shame occur more frequently in Japan than in the USA, but also situations encompassing central cultural concerns (e.g., loss of public face in Japan) increase the intensity of feelings of shame compared to situations which do not (i.e., situations more relevant to the USA; Boiger et al., 2013). Thus, the choice of scenarios and items in cross-cultural research should reflect each group's culturally-specific ways of conceptualizing shame and not solely reflect cultural concerns from the dominant group, most

frequently the USA. Then, measurement invariance, among other methods, could be used to investigate to what extent individuals in different cultural groups understand and respond differently to the scenarios and items more specific to members of another group.

Extending Social Construction: A Note on the Shame-Guilt Distinction

The shame-guilt distinction introduced by (Lewis, 1971; Tangney et al., 2007) has made it almost impossible to talk about shame without mentioning guilt. Many Western scholars see shame and guilt as two separate, but related, cognition-dependent emotions (Tangney et al., 2007; Tracy & Robins, 2004). The literature points to the conceptual benefits of differentiating guilt and shame cognitions and of using a 2-factor measurement model, at least in the West (e.g., Tangney et al., 2007; Tracy & Robins, 2004). Yet, the nature of the underlying affect(s) in Western conceptualizations of guilt and shame, as well as the primacy of cognitions versus affect in shame and guilt more generally, continue to be open questions. For example, it is unclear what combination of basic emotions are present when an individual feels guilty. Additionally, the debate continues as to whether shame is a basic emotion, such as fear or disgust (Elison, 2005; Izard, 2007; Kemeny et al., 2004; Widen et al., 2011). If shame is a basic emotion, it may then be one of the basic emotions present during an experience of guilt. If it is not, it is unclear what combination of basic emotions are present during an experience of shame. It is also unclear how the multiple types of guilt and shame within Chinese culture (Bedford, 2004; Mao-jin, & Jing-jing, 2009) fit within the Western shame-guilt distinction, or whether they would be better represented with a larger number of factors (and thus a different measurement model).

To complicate matters further, within sociology, and to a lesser extent psychology, some scholars consider shame and guilt or even shame and pride to be on the same continuum (e.g., Li, et al., 2004; Scheff, 2003; Tomkins & McCarter, 1964; Weisfeld & Dillon, 2012). Tomkins and

McCarter (1964) posit that embarrassment, guilt, and humiliation are all part of the shame continuum. According to them, shame is a basic emotion, which is triggered by the partial reduction of enjoyment or interest (e.g., something in the environment signals that an enjoyable behavior or interaction is undesirable) and, at the beginning of life, has no associations to specific cognitions (i.e., whether or not one has the capacity to think about the self is irrelevant to the experience of shame). In this approach, guilt and humiliation are considered to be affective experiences, with different cognitions, along the shame continuum.

Rather than treating the shame-guilt distinction as a given, it may be more fruitful to consider how those different meta-emotion philosophies (e.g., the belief that shame and guilt are variants of the same emotion or two different emotions; beliefs about different types of shame and guilt) may be shaped by cultural factors and may influence coping strategies. For example, is it possible that individuals who consider shame and guilt to be variants of the same emotion have more opportunities to build their confidence in dealing with shame (i.e., they view past experiences in coping successfully with guilt as a testament to their capacity to cope with the stronger feelings of shame)? Or may they feel more overwhelmed by feelings of guilt and appraise them as dangerous?

Chronic Social Threats and Shame

In addition to culture, chronic social threats (such as discrimination) may also have a role in the social construction of shame. Sociologists have long theorized the relationship between shame, stigma, and power imbalances in society (Goffman, 1963; Scheff, 2003; Tyler & Slater, 2018). Goffman (1963) views stigma as a social relation where the defining characteristic(s) (e.g., race, religion, illness) of an individual is/are found wanting, unsatisfactory or immoral by their society. As a result, the stigmatized individual is constantly at risk of rejection from the

social space and shame becomes an ever-present possibility and frequent occurrence (Goffman, 1963; Scheff, 2003). Further, contrary to instances where shame acts as a signal to improve the self and repair one's social standing or relationship (e.g., committing to be more truthful), this stigma-related shame has no or little possible or desirable avenue of repair within society at large. Stigma-related shame is a reaction to systems of power and social control (Scheff, 2003; Tyler & Slater, 2018). The increasing framing of shame as an *internal* (rather than social) emotion, and its increased invisibility and rejection in Western Psychology, has obscured how shame can act as a signal for individuals' risk of social alienation (Scheff, 2003; Scheff, 2014). Further, apolitical and decontextualized accounts of stigma within sociology (e.g., Goffman, 1963) have missed how stigma can maintain and justify systemic unequal, and unfair access to political and economic resources (See Tyler & Slater, 2018; Tyler, 2018 for a more detailed explanation). While stigma at the individual level includes hostile attitudes and cognitions towards members of stigmatized groups, it also functions within society and institutions to maintain and justify specific unequal social hierarchies by portraying the stigmatized groups as less deserving of equal social standing (Tyler & Slater, 2018; Tyler, 2018). Stigma, thus, is deeply influenced by political and historical factors, and how those change over time (Tyler, 2018).

The shame-stigma-power relationship has further been explored and illuminated in other cultural contexts through qualitative studies from sociology, anthropology, and cultural psychology. For instance, in-depth interviews with South Africans revealed both cultural differences between racial groups and the lasting influence of racial segregation during Apartheid on individuals' experiences of shame (Ivey & Sonn, 2019; Mayer & Viviers, 2017). Contrary to white South Africans, most South Africans of color considered shame essential to

maintain social harmony and cultural norms *within their community* (Mayer & Viviers, 2017). Participants' narratives from both racial groups also highlighted how whiteness both sometimes offered protection from shame within the larger community (Mayer & Viviers, 2017) and made white South Africans the frequent subject of moral blame for having historically benefitted at the expense of people of color (Ivey & Sonn, 2019; Mayer & Viviers, 2017). Similarly, in-depth interviews with other minority groups further emphasize how shame can become a marker of power imbalances within a society (Ho & Goh, 2017; Mirdal, 2006; Treloar et al., 2016). Physical illnesses, such as Hepatitis C and HIV, may take on socially constructed negative meanings, which then justify in the eyes of the society the alienation or loss of social status of the infected individual (Ho & Goh, 2017; Treloar et al., 2016). For example, HIV is viewed as a disease of sexual promiscuity in Singapore (Ho & Goh, 2017), and Hepatitis C is viewed in Australia as a disease associated with drug use and sexual promiscuity, especially if those with the illness are Indigenous, as negative stereotypes provide further justification for their stigmatization (Treloar et al., 2016). Both illnesses then act as markers of (imagined) immoral behaviors and individuals experience feelings of shame due to their lesser social standing (Ho & Goh, 2017; Treloar et al., 2016).

The existing research on stigma in psychology provides ample evidence that shame can be, in multiple cultures, a frequent emotional reaction to stigma against, but not limited to, one's ethnicity (Schmader & Lickel, 2006; Schmader et al., 2015), physical illness (Heggeness et al., 2017; Li et al., 2007), mental illness (Keen et al., 2017; Luoma et al., 2014; Wood & Irons, 2017; Zhou et al., 2018), weight (Westermann et al., 2015), religion (Rodriguez Mosquera, 2018), poverty (Chase & Walker, 2013), or experiences of intimate partner violence (Kennedy & Prock, 2018). Stigma-related shame can be triggered by experiences of social rejection or

discrimination, and by witnessing a member of one's stigmatized group engage in actions deemed stereotypical (Schmader & Lickel, 2006). Stigma about one's experiences may be further exacerbated by other sources of stigma (Kennedy & Prock, 2018). Stigma is associated with high levels of stigma-related shame (e.g., Heggeness et al., 2017), state shame in experimental conditions (e.g., Schmader et al., 2015; Westermann et al., 2015), trait shame (e.g., Luoma et al., 2014; Zhou et al., 2018) and external shame (e.g., Keen et al., 2017). Stigma-related shame (e.g., HIV-related shame) is even sometimes included in measures of stigma (Heggeness et al., 2017). Nevertheless, stigma-related shame and stigma are not interchangeable constructs. When stigma and shame are measured simultaneously, stigma (but not shame) predicts some negative outcomes which otherwise may have been misattributed to shame (e.g., longer stay in residential treatment, avoidance of STI-testing; Fortenberry et al., 2002; Luoma et al., 2014).

Not only can stigma be a recurring and painful experience, but stigma and imbalances in social status and/or power are also frequently associated with feelings of shame with no clear or easy way to re-establish equality or gain acceptance within the larger social group. Just like with culture, contextualizing shame within systems of power in the society and individuals' experiences of stigma leads to asking: How do individuals who frequently experience stigma-related shame construe and experience shame compared to individuals who do not? Could repeated occurrences of stigma-related shame lead to different meta-cognitions and meta-emotional reactions to shame or to different attributions, interpretations of physical sensations or behavioral urges? Are some behaviors usually considered negatively, like avoidance, adaptive responses to stigma-related shame? To date, those questions are still awaiting answers.

Unfortunately, stigma-related shame has been largely ignored in the general research on shame. Shame has largely been treated as an *internal* emotion (De Hooge, 2013; Tangney et al., 2007; Tracy & Robins, 2004), whose regulation and outcomes can be evaluated without attention to participants' social context. The majority of trait shame or trait shame and guilt self-report measures do not contextualize participants' responses to increase their ecologically validity (Lickel et al., 2014) and even scenario measures do not assess benign, ambiguous, stigmatizing or unusual situations. As a result, trait shame self-report measures do not assess or differentiate, for example, between chronic shame stemming from repeated engagement in immoral and hurtful behavior (e.g., perpetrator of domestic abuse), chronic shame due to poor emotion regulation, and chronic shame experienced as a result of on-going discrimination. The degree to which trait shame is stable outside of fairly stable environmental factors, such as on-going stigma or discrimination, is unclear (Leeming & Boyle, 2004). Decontextualizing trait shame further obscures how social settings may increase the likelihood of behaviors such as attempts to avoid a largely discriminatory social environment to protect the self or anger following stigma-related shame (Leeming & Boyle, 2004). Similarly, measurements of state shame are dependent on the experimental situation or study design (e.g., situations or events participants are asked to recall), and it is unusual for those studies to control for stigma. Thus, most study designs are likely to miss whether state and trait shame are consequences of stigma (Luoma et al., 2017). Framing shame as a purely individual issue renders invisible the social role of shame and *its capacity to act as an alarm signal in the presence of social threats*. Framing shame as an individual issue may also, at times, falsely attribute negative outcomes to shame, rather than attributing them to oppressive social practices or systems. Thus, decontextualized accounts of shame, just like decontextualized accounts of stigma, can miss how the emotion operates within

systemic and unfair access to social safety and political and economic resources. We would like to urge researchers studying shame to systematically include measures of stigma or discrimination when working with vulnerable, and frequently stigmatized, groups (e.g., immigrants, individuals suffering from mental illness, etc.). Additionally, it is crucial for *any* research study on shame to include a measure of discrimination or stigma (e.g., the Intersectional Discrimination Index; Scheim & Bauer, 2019), in order to avoid mistaking differences in participants' social environment for differences in personality or internal propensity to shame. Indeed, it seems very problematic to assume any sample includes only individuals beyond the influence of stigma. Lastly, culture and stigma may work in tandem. Once the influence of each is better understood, it may be fruitful to explore how cultural differences influence individuals' reactions to stigma-related shame.

A Call to Action

To date, Tangney's (1995) and Lewis' (1971) theories have led to a proliferation of research on shame and guilt in Western psychology and by Western researchers. Shame and guilt have been most frequently studied in other cultures using a Western lens, to the point of limiting the recognition afforded to culturally-diverse, indigenous understandings different from the Western definitions and/or theories of those two emotions (Shi-xu, 2009). Additionally, research from Western Educated Industrialized Rich Democratic (WEIRD) contexts is bolstered by the political and financial power of the institutions (in North America, Western Europe, Australia) from which it originates, and its findings may not be as generalizable to other cultures as routinely assumed, especially in areas such as moral reasoning (Henrich et al, 2010). Indeed, the existing research on shame and guilt suggests that relying on Western theories not only risks the erasure and dismissal of other cultures' ways of conceptualizing and coping with shame, but

also risks underplaying the role of cultural and social contexts. By limiting researchers' and studies' sensitivity to cultural differences, the search for universality – as it is done currently by testing theories made by and for the West in other cultural contexts – risks decreasing the overall quality of our knowledge base on self-conscious emotions. Far from being superficial influences, culture and chronic social threats may inform individuals' sense of self and deeply influence the social construction of shame. The experience, expression, regulation, and outcomes of shame cannot be divorced from cultural, social, and historical contexts that shape individuals' beliefs about shame and the self, interpersonal interactions, norms about, for example, reintegrating into the group after a shameful event, and the safety or lack thereof of one's social environment.

Thus, we would like to conclude the current article with a set of recommendations and potential research avenues, in hope to foster more inclusive and diverse research on shame. First, we would like to encourage researchers to refrain from making broad claims of generalizability (e.g. assuming findings based on Western theories and/or samples are generalizable to other cultural groups) and to avoid proposing a single theory on shame and guilt at this point in time. Similar to Stanley Sue and colleagues (2011), we would like to encourage researchers to first develop definitions and theories of shame (and guilt) reflecting understandings from diverse cultures, without applying a Western lens. This will ensure more divergent viewpoints will be included, rather than culturally specific conceptualizations being excluded on the basis that they do not fit operational definitions or theories created for WEIRD contexts. The evidence gathered through this process will decide whether we can develop a "universal" theory of shame that includes culture as a component or whether we need separate theories for each cultural group.

Secondly, researchers should strive to use methodologies and designs sensitive to local contexts, such as, but not limited to, qualitative research methods, research on meta-beliefs about

shame, measurement variance, and other designs used by social constructionist researchers. Furthermore, researchers might benefit from taking a stance of intersectional cultural humility (Buchanan et al, 2020). Intersectional cultural humility asks researchers to become aware of their own positionality (i.e., multiple identities, privileges and experiences of oppression which may influence their research questions, designs and interactions with participants). It conceptualizes cultures as ever changing through individual actions and the influence of social institutions and it posits that cultural differences cannot simply be reduced to observable traits and behaviors.

Thirdly, a recognition of cultural contexts and power differentials leads to the need to acknowledge the highly contextual and cultural (North American) underpinnings of Tangney (1995) and Lewis (1971)'s theories. While those (Western) theories and their findings are presented as "objective and a-cultural", they stem, as discussed in this article, from a specific North American context. All studies need to systematically recognize the cultural context informing their theoretical perspective and highlight the match or mismatch between the theory they are testing and the local understanding of the emotion in their population of interest.

Fourth, given the social role of shame as an alarm signal in the presence of social threats, it is important for researchers to systematically assess participants' past and current experiences of discrimination when investigating trait shame (i.e. the tendency to feel shame or chronicity of feelings of shame). Otherwise, we run the risk of falsely attributing negative behaviours such as avoidance to shame, rather than attributing them to oppressive social practices or systems. Decontextualized accounts of shame risk missing how shame exists and needs to be understood within contexts of systemic and unfair access to social safety and political and economic

resources. We also encourage greater exploration of contextual factors (i.e., a welcoming versus a discriminatory environment) when examining state shame.

Lastly, the following topics may be worthy of future consideration and vary across different cultural and social contexts: (a) changing definitions of the self (i.e., transient versus stable, inclusion or exclusion of the family in the sense of self), (b) differences in the richness of the vocabulary surrounding shameful experiences (i.e., hypercognized or undercognized), (c) meta-emotion philosophies (e.g., degree of acceptance of the emotion, belief that it preserves a key cultural value such as social harmony), and (d) changes in cultural norms and goals over longer periods of time (e.g., decades), in a context of increased transnational travel and exchange (Van Oudenhoven & Ward, 2013) and remote acculturation (e.g., acculturation to North American culture without leaving one's home country, Ferguson et al., 2017) may influence experiences of shame. We encourage scholars to approach the study of shame and its outcomes with an explicit and continual attunement to cultural factors and social structures/mechanisms (at a minimum) and to historical shifts in cultural factors within and across generations (ideally). It may be especially useful to explore adaptive aspects of shame and cultural factors which support the successful regulation of the emotion.

Approaching the study of shame with a greater attention to cultural and social factors might not only help to produce better science and develop a deeper understanding of the emotion, it may also help us identify or create new cultural scripts and coping strategies to regulate shame. Indeed, attending to differences in cultural scripts may allow for an identification and reformulation of toxic cultural scripts or the development of alternative coping strategies.

Chapter Three

Pakistani Immigrants' Nuanced Beliefs About Shame and Its Regulation

As of 2016, Pakistani-born individuals represent one of the top 10 largest groups of foreign-born individuals in Canada. Between 2011 and 2016, Pakistan was the fifth largest contributor (even surpassing the United States) of immigrants to Canada and accounted for just over 40,000 immigrants in these 5 years alone (Statistics Canada, 2017). Furthermore, 9.3% of South Asians, the largest visible minority group in Canada, reported being of Pakistani heritage in 2011 (Statistics Canada, 2011). Pakistani immigrants to Canada are faced with multiple challenges, including loss of status and social support, significant economic hardships, culture shock, and discrimination (Jibeen & Khalid, 2010a, 2010b; Khan & Watson, 2005). They frequently live in social contexts where multiple aspects of their identities (i.e., nationality and religion) are devalued and may be openly rejected by the majority (Jamil, 2014; Rousseau & Jamil, 2008). This puts them at higher risk of experiencing feelings of inferiority (Jamil, 2014; Rousseau & Jamil, 2008) and stigma-related shame. Indeed, shame can occur as a reaction to frequent experiences of social rejection or stigma against one's ethnicity (Schmader et al., 2015; Schmader & Lickel, 2006) or religion (Rodriguez Mosquera, 2018). Thus, a more culturally sensitive and in-depth understanding of how Pakistani immigrants to Canada understand and regulate experiences of shame – whether those are related to experiences of discrimination or not – may allow us to identify protective factors present for the Pakistani immigrant community and additional regulation strategies.

While the challenges associated with Pakistanis immigrating to Western countries have been documented (Jibeen & Khalid, 2010b; Khan & Watson, 2005), little is known about how Pakistani immigrants residing in Canada view and understand emotional experiences such as

shame. Beliefs about emotional experiences, including shame, emerge within individuals' social and cultural contexts (Bastian, 2013). Socially and culturally situated discourses about emotional experiences may influence beliefs or metacognitions about emotions held by members of a cultural group (Bastian, 2013). Metacognitions, along with metaemotions, refer to individuals' knowledge and beliefs about emotions as well as secondary emotional reactions to emotions (Gottman et al., 1996; Norman & Furnes, 2016). Individuals might view emotions generally or specific emotions, such as shame, positively (e.g., emotions as helpful signals, confidence in own capacity to regulate emotions; Beer & Moneta, 2012) or negatively (e.g., emotions are unhelpful, invalid; Manser et al., 2012). Those metacognitions may include beliefs about the emotion's helpfulness or role, as well as beliefs in one's capacity to tolerate or regulate the emotion. In Western populations, preliminary evidence suggests that beliefs about emotions may be predictive of emotion-regulation strategies (Lane et al., 2011). For example, athletes holding beliefs about the beneficial impact of anxiety and anger on performance not only reported higher anger and/or anxiety intensity before a performance but also used strategies to increase those emotions (Lane et al., 2011). Thus, shared sociocultural beliefs about shame may have important implications for individuals' strategies to regulate this emotion.

In Pakistan, sharam is one of the possible words used to refer to shame. However, anthropological research suggests that sharam can take a multiplicity of meanings, including shame, concealment, modesty, or embodied self-control, depending on the context (Alvi, 2013). Sharam is at least linguistically directly embedded within notions of morality and appropriate behaviors. Additionally, in Islam, which is the main religion in Pakistan with more than 90% of the population being either Sunni (majority) or Shi'a Muslims (Naeem et al., 2015), the self is perceived as being inherently good, and faith helps to reconnect with one's pure or better self

(Qulsoom, 2005). Remorse and shame act as signals to understand one's mistakes and repent and ultimately improve the self (Qulsoom, 2005). Acting in accordance with the Quran is seen as an individually desirable goal and may provide individuals with an increase in their social status independent of their wealth (Maqsood, 2017). In so far as one's morality partially determines social status, it is possible that culturally appropriate displays of shame and repentance may also work as indicators of one's respect for cultural norms and morality and hence as indicators of social standing.

The acceptability of specific behaviors is influenced by both prescriptive ("should," e.g., praying five times a day) and proscriptive ("should not," e.g., not eating pork) rules within Islam. The acceptability of specific behaviors is further informed by gendered norms, age (with elders having a higher social status), family traditions, and conflicting perspectives on religious guidelines both in Pakistan and in the Muslim diaspora (e.g., Bush et al., 2003; Maqsood, 2017; Stodolska & Livengood, 2006). It is likely that the experience of shame is also influenced by individuals' location within the larger Pakistani cultural norms.

Additionally, Pakistani immigrants to Canada are in the unique position of having to reconcile Pakistani conceptualization of shame and Canadian beliefs about shame. Indeed, social constructionist researchers have provided preliminary evidence that, due to ongoing interpersonal interactions with members of the majority culture, immigrants' emotional reactions to specific situations may become, over time, more concordant with the emotions experienced by members of the new culture (De Leersnyder et al., 2011; Mirdal, 2006). It is thus possible that, over time, Pakistani immigrants' beliefs about shame change due to their immigration experience and that they may begin to incorporate some Canadian beliefs. To our knowledge, no study has explored the beliefs about shame held by Pakistanis or Pakistani immigrants, without imposing

the most frequently used Western conceptualization of shame that views the emotion as solely painful and maladaptive (Tangney, 1996; Tangney et al., 2007).

Qualitative approaches can allow researchers to explore individuals' metacognitions or beliefs about shame without imposing Western norms and in a culturally sensitive way. They may lead to a broader or more nuanced understanding of experiences of shame within specific cultural and social contexts. For instance, in a recent ethnographic study, Subandi and Good (2018) explored beliefs about shame held by families of Javanese individuals who experienced their first psychotic illness. Their work recognizes the complexity of Javanese conceptualizations of shame, and its role as a potential marker for seemingly unrelated processes (e.g., recovery from a psychotic illness). Participants perceived shame to be an important marker of good mental health and recovery from psychotic illness. The expression and experience of shame in culturally appropriate ways signaled individuals' awareness and respect of social norm, while mental illness interfered with individuals' capacity to act appropriately and to demonstrate their morality and respect for norms (Subandi & Good, 2018). These findings paint a rich picture of shame that is qualitatively different from majority of Western conceptualizations.

The Current Study

The current study uses qualitative interviews and grounded theory to explore how Pakistani immigrants to Canada understand and make sense of their experiences of shame, without imposing a Western framework or definition of the emotion. Thus, our research aims to address the following questions:

a. What is the purpose of shame, if any, according to Pakistani immigrants to Canada?
b. How do they make sense of and regulate this emotional experience?

c. Do they feel their understanding of shame or coping with shame was influenced by their immigration to Canada?

Methods

Participants

To be eligible, participants had to be born and raised in Pakistan and to have immigrated to Canada after their 19th birthday, but within the last 8 years (Table 1). Seven women and 11 men across Canada participated. The interviews were conducted in English (14 participants, 77.8%), Urdu (three participants, 16.7%) with the help of a translator, or in both languages (one participant, 5.6%) in the presence of a translator. More than half (55.6%, 10 participants) of the participants completed the interview over the phone. Seven participants (38.9%) completed the interview by e-mail. Finally, one participant started the interview by e-mail and decided to finish over the phone. One participant, who elected to respond over e-mail, stopped responding partway through the interview in the context of COVID-19.

Table 1. Demographic information

Demographic Information	Mean, SD & Percentages	
Age	M=35.50, SD=8.74 (range= 24.5 to 61 years-old)	
Age at immigration	M=31.89, SD=7.48 (range=22 to 53 years-old)	
Time Since Immigration	Less than one year:	16.7% (3)
	1-2 years:	27.8% (5)
	3-4 years:	16.7% (3)
	4-6 years:	16.7% (3)
	7-8 years:	22.2% (4)

Number of migrations	Canada only:	83.3% (15)
	Canada + another country:	11.1% (2)
	Canada + 2 other countries:	5.6% (1)
Current Province (Canada)	Alberta:	22.2% (4)
	British Columbia:	22.2% (4)
	Ontario:	50.0% (9)
	Saskatchewan:	5.6 (1)
Province of Origin (Pakistan)	Sindh:	55.6% (10)
	Punjab:	44.4% (8)
Cultural Background	Punjabi:	50.0% (9)
	Mahajir:	38.9% (7)
	Memon:	5.6% (1)
	Urdu Speaking:	5.6% (1)
Religion	Atheist:	11.1% (2)
	Muslim – not further specified:	38.9% (7)
	Sunni Muslim:	33.3% (6)
	Hanafi Sunni Muslim:	11.1% (2)
	Shia Muslim:	5.6% (1)
Occupation	Full-time employment:	72.2% (13)
	Part-time employment:	5.6% (1)
	Student + part-time job:	5.6% (1)
	Stay-at-home parent:	11.1% (2)
	Retired:	5.6% (1)
Language currently spoken at home	Urdu:	55.6% (10)
	Punjabi:	5.6% (1)
	Urdu & Punjabi:	5.6% (1)
	Urdu & English:	33.3% (6)

Note. Please note that we did not collect information on immigration status or socioeconomic status. M = mean; SD = standard deviation.

Researchers

As the first author, I (Fanie Collardeau) was the principal investigator for the study, which was completed as a part of my PhD dissertation in Clinical Psychology at the University of Victoria. My undergraduate and MA theses provided me with many opportunities to hone my training in qualitative methodologies, and more specifically grounded theory. My work as a researcher is also located within my personal experience. I grew up in France, in a family of Spanish origins. I moved to Canada in 2013 and now have ties to the immigrant Pakistani community through marriage and friendships. Furthermore, I am a white, cisgender woman of Muslim faith. My formal education and background put me in multiple positions of power. I am both a Western outsider and a partial insider due to close personal ties with the community. Rapport building with participants was approached keeping my multiple identities and privileges in mind (described below). Some participants' narratives suggested they considered me as a partial insider (e.g., calling me sister-inlaw, assuming I would know certain traditions), while others seemed to consider me as more of an outsider (e.g., defining simple Urdu words). I received direct and ongoing supervision, direction and support from my supervisor, supervisory committee, and team members, including the study's consultant, Dr. Tahira Jibeen.

Muhammad Usama Bin Aftab was a translator and second coder for the study. He received training on qualitative interviewing and data analysis from the first author. He is fluent in Urdu and English and is a Pakistani immigrant to Canada. He was involved at all stages of the study.

Dr. Tahira Jibeen was a consultant for this study. She previously conducted research with Pakistani immigrants to Canada and has expertise in quantitative and qualitative methods.

Dr. Erica Woodin is the PhD supervisor of Fanie Collardeau and has expertise in metaemotion philosophies and qualitative interviewing methodologies.

Procedure

The Institutional Review Board at the University of Victoria (British Columbia, Canada) approved the study.

Recruitment and Interview

Participants were recruited through word of mouth, online forums, and Facebook. Participants were invited to share the study's poster with their networks. Participants completed a short online demographics questionnaire to sign up for the study. Participant consent was obtained as part of the online survey prior to interviews. Eligible participants completed a qualitative and open-ended interview by e-mail or telephone. E-mail interviews were completed over the course of 3 weeks to 3 months. Telephone interviews were 45 minutes to 1 hour in duration and were audiotaped and then transcribed by the first author. The interview explored participants' beliefs about the role and regulation of shame and how their beliefs may have changed over time and after immigrating to Canada, as well as common beliefs about shame in Pakistan. Any identifying information was deleted to protect participants' anonymity.

Participants were given the choice to participate through telephone or e-mail to increase ease of participation. To build rapport with participants, the interviewer (first author) took some time to informally chat with participants before the telephone interview started, responded to some personal questions (e.g., question about her faith or about whether she had visited

Pakistan), and, when appropriate, demonstrated her basic knowledge of Urdu (e.g., helping participants translate Urdu words she knew during interviews in English). E-mail interviews are a relatively new medium for qualitative interviews with hard to reach or understudied populations (Neville et al., 2016). Multiple studies have shown that data collected in e-mail interviews are of equivalent quality to data collected in face-to-face or telephone interviews (e.g., Coderre et al., 2004; McCoyd & Kerson, 2006). Key concerns about e-mail interviews mainly focus on the risk of data fraud (Hamilton & Bowers, 2006), the lack of nonverbal cues (Cook, 2012; McCoyd & Kerson, 2006), and privacy/anonymity (James & Busher, 2006). Yet, e-mail interviews also offer multiple advantages including longer periods of reflection for both the researcher and the participant, which can increase the richness and quality of the data collected (e.g., Cook, 2012; McCoyd & Kerson, 2006; Neville et al., 2016), and lead to higher satisfaction and control reported by participants (e.g., Egan et al., 2006; Neville et al., 2016) and higher disclosure of sensitive information (e.g., Cook, 2012; Egan et al., 2006). To include immigrants who might be less acculturated, participants could complete the interview in English or Urdu. After all interviews were completed and analyzed, participants were sent the preliminary theory derived from the study and invited to provide feedback, which further informed the theory.

Ensuring Quality and Data Analyses

The interviews were analyzed using constructivist grounded theory (Charmaz, 2014, 2017). Grounded theory allows for systematic data collection and analysis, and is well suited to topics for which previous research is limited (Charmaz, 2014; Chenitz & Swanson, 1986). Constructivist grounded theory recognizes the co-construction of narratives by participants and researchers. It aims to illuminate meanings held by individuals through dialogs and analyses.

In grounded theory, data collection and analyses occur concurrently. The co-occurrence of data collection and analyses allows for a responsive approach to data collection, in which interview questions are added to clarify emerging themes. It also allows for theoretical sampling, whereby recruitment in the current study targeted increased participation by women once a gendered component of shame emerged in the initial analyses. Initially, interviews were coded line-by-line, meaning that codes were generated for each line of text. Those initial codes were grouped to form preliminary conceptual categories and themes. The relationships between the emerging categories and their integration into a grounded theory emerged through axial coding and selective coding strategies (Charmaz, 2014). Due to the simultaneous nature of data collection and analyses, two questions were added to the interview to clarify emerging categories. New data were compared with the existing concepts and emerging theory (Charmaz, 2014). Data analysis began after the first interview in August 2019 and continued until July 2020.

Multiple standard steps were taken to improve the quality, credibility, trustworthiness, and rigor of this qualitative study. First, the first author engaged in an ongoing reflexive process to explore her beliefs, biases, and personal experiences and documented her reflections (Charmaz & Thornberg, 2020; Finlay, 2002; Williams & Morrow, 2009). She was careful not to presume she understood participants' experiences and strove to stay close to the data. Second, two research assistants, one of whom is a Pakistani immigrant to Canada, were invited to each code 3 interview transcripts using the first author's codebook. All research assistants were encouraged to keep a reflexive journal during their involvement in the study. Differences in coding and instances where research assistants identified missing codes were discussed. When needed, the first author and research assistants engaged in additional line-by-line coding to incorporate

emerging insights into the theory. Third, participants were sent a narrative summary of the theory and invited to provide feedback on whether the theory resonated and provided a useful framework (Madill et al., 2000). Finally, memos were kept at all stages of the research (Birks et al., 2008; Charmaz & Thornberg, 2020). Those measures allowed us to reflect more deeply on the meanings ascribed to the interviews and to enhance the credibility and trustworthiness of the study.

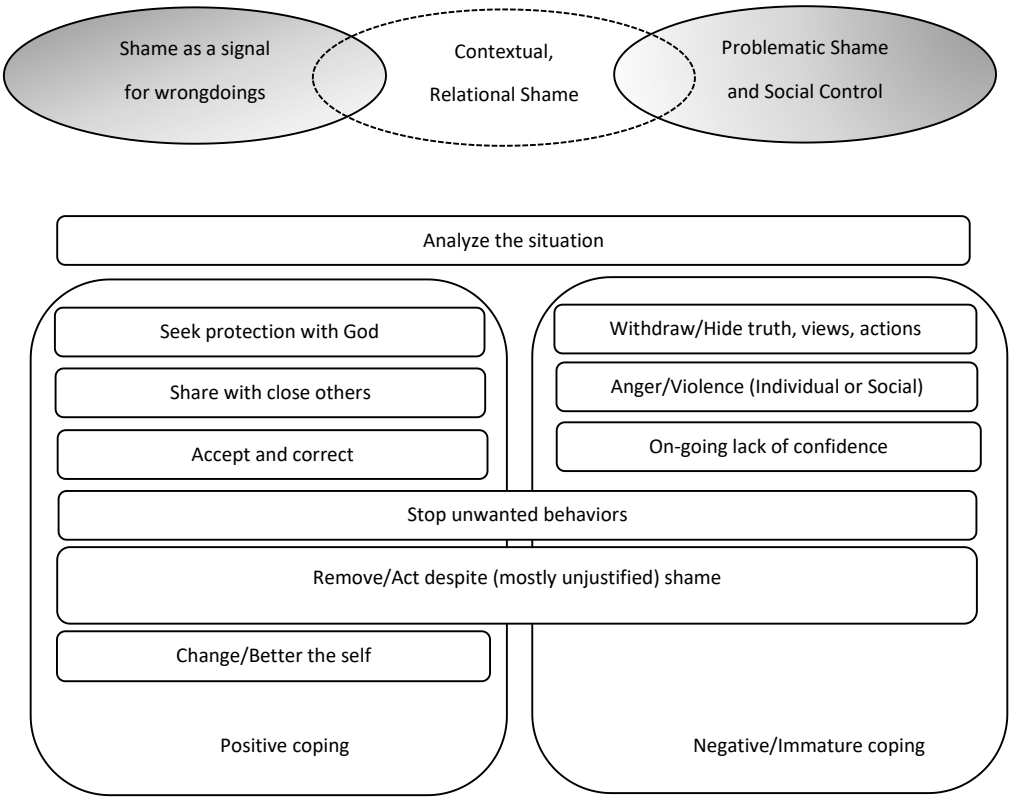
Results

Participants identified 20 words, including *sharam, zillat, haya,* and *baizati*, that they could use to describe feelings of shame. Their descriptions of the emotion included physical sensations (e.g., "sinking feeling"), urges (e.g., "strong and immediate impulse to withdraw"), and thoughts (e.g., "it made me feel like I was just not good enough"), which have been frequently associated with shame within the Western literature. While a few participants endorsed the shame-guilt distinction common in the Western literature (Tangney, 1996; Tangney et al., 2007), most saw shame and guilt as occurring on a continuum ranging, at its most, from embarrassment to humiliation.

The main themes and coping strategies are presented in Figure 1. Shame was thought about and understood within a rich, culturally embedded system of meaning-making. Specifically, participants articulated how shame could act as a signal for wrongdoing or emerge as a result of social control, while in both instances being shaped by and informing complex relational and social contexts. Most participants balanced a belief in the positive individual and social benefits of shame (endorsed by all) with a critique of problematic socially endorsed uses of shame within the Pakistani society (endorsed by most). Compared to men, women tended to be more critical of how shame could be used to prompt obedience and reported more instances

where they were shamed. Furthermore, participants' beliefs about shame allowed them to access a wide range of coping behaviors when feeling ashamed and led most participants to prioritize coping strategies which included others or focused on self-improvement. Most positively perceived coping strategies were viewed to lead to selfchange and self-improvement; thus, both reinforcing and illustrating how shame could act as a beneficial signal of wrongdoing. Some participants reflected on the benefits of taking an Islamic approach to understanding and dealing with shame.

Figure 1. Theoretical Model of Pakistani Immigrants to Canada's Conceptualization and Regulation of Shame



Shame as a Signal for Wrongdoing

Most participants endorsed the view that shame's main purpose is to differentiate right from wrong. Shame occurs within specific cultural and religious value systems and allows

individuals to recognize the moral implications of their behaviors. As one participant stated, “I feel sharam is a blessed feeling, it tells you [the] person is afraid to do wrong things which are prohibited [by religion] and encourage him, her to talk about [it].”

Thus, shame signals that a specific action will bring feelings of shame (i.e., is not acceptable for the person or society) or if the action was already taken that this action is undesirable and has negative consequences. Some participants defined wrongdoings as an action that goes against group norms and keeps the individual within the culturally defined boundaries or limits of one’s group. One participant even ascribed to an understanding of shame purely motivated by cultural norms: “[in Canada] So, I mean, and what I found that in men’s room they, it is pretty normal to change one’s clothes in front of tens or hundreds of people, you know? So it is kind of a do-as-the-Romans-do kind of feeling thing.” The salience of cultural norms explained changes in sources of shame experienced by some participants (e.g., experiencing shame while wearing traditional clothes outside, but no longer feeling ashamed in the men’s room at the gym) postimmigration.

On the other hand, others implied the superiority of one’s own moral compass over social norms and saw shame as an internal and personal signal for undesirable behaviors. For example, a participant explained, “As a person develops self-awareness and begins to consider their emotional responses more mindfully, the assumption is that they would be able to separate socially indoctrinated shame from a more critically considered sense of right and wrong. In that case, shame can indicate to a person that their behavior conflicts with their moral compass. If nothing else, it exposes our own biases about ‘good behaviour’ and ‘bad behaviour’ to us.” For a number of participants, religious rulings were not perceived as external sources defining moral behavior. Instead, they viewed religion and religious teaching as forming part of their personal,

introspective sense of morality. For women, religious rulings were at times framed in opposition to unwanted cultural norms and used to justify behaviors not approved by the collective but allowed by Islam.

Relational and Contextual Shame

Most participants reported that their current understanding of shame had been significantly shaped by their parents. Shame was described as occurring within different social contexts and competing norms (e.g., religion might allow one thing that culture does not, and family and friends may have different norms) in the Pakistani context, which meant both shame and wrongdoings are highly contextualized events. The following excerpt highlights multiple elements of the theme: "The shame is one emotion that. . . that you learn from people around you and your society, it doesn't, it doesn't, it doesn't come with you from your mother's womb, right? You just learn it. Like cry is kind of, it is a natural thing for people to cry. But shame I think it has to do a lot with people you live with, and society and expectations from people [. . .] I think in Canada people, they think. . . The meaning for shame is different than in Pakistan. Pakistan, everything, you are connected with everybody, and if you do anything you will bring shame to your family, to the whole community and you have to. . . you have to present best of yourself in Pakistan. There are a lot of expectations from you. People are expecting a lot from you. In Canada, people, they. . . if it doesn't affect them directly, they don't care."

Thus, shame is not only shaped over time by the social context, but it may also be a shared experience among a family or community, based on the behavior of one of the group's members. This shared experience of shame is often accompanied by a shared sense of responsibility, which may lead other members of the group to act to repair the effects of the individual's shameful behavior. Participants had diverging opinions about the helpfulness of

others' actions, in part due to the variety of responses from fellow family or group members. While others could be supportive and problem-solve ways to positively resolve the situation, they could also fail to protect the individual from unfounded accusations or could even react aggressively.

Some participants, in addition, commented on the ways in which hierarchies within families could alter processes of reconciliation. For example, a participant explained apologizing to his elder after the latter had acted negatively toward him in public and made sense of the situation in the following way: "with social sharam [note: as opposed to sharam based on one's personal compass], its mostly societal pressure that would force reconciliation, based on the idea that family has a certain claim over the person and said claim comes with a pass for transgression which are chalked up to 'they only say/do this because they care' attitude."

Nevertheless, all participants underlined the importance of having supportive others one could turn to when experiencing shame. Supportive others could be family members, friends, or God. Supportive others provided advice and trusted in the shamed person's ability to successfully overcome the situation they are in (if appropriate shame) or provided reassurance and explained the person is not at fault (if inappropriate shame). If the person had done something wrong, they reported others, including parents, may engage in "a kind of consoling: I you have done this thing wrong today, next time you have to do this way, or don't do it, or improve yourself this way." Participants also reported wishing to be this supportive person: "If the person is my age, then I can be a little more friendly about it and share my own experiences as well, to make the person comfortable. If there is a kid then, I will treat him like a kid and tell him to be ok, it happens, next time you can handle this situation like this. you could do this next time etc." When mentioned, God was a forgiving, merciful other, whose mercy was certain if

one expressed true repentance for a wrongdoing: "And even if that shame is justified, in our religion, as long as you feel bad about it afterwards, and you say that you will not do it again – although of course you may still do it again, you never know – so even then as long. . . we are told you see by Allah as long as you repent to him for forgiveness, if you are sincere in that then you are forgiven."

Thus, family is viewed as an integral medium in which the experience of shame occurs. This relational aspect of shame can then be extended to the importance of the larger group (society) acting as an audience (imagined or very much real when others inform family members of one's own undesirable actions). As the participant cited above emphasized, within the Pakistani context: "everything, you are connected with everybody, and if you do anything you will bring shame to your family, to the whole community and you have to. . . you have to present best of yourself in Pakistan. There are a lot of expectations from you. People are expecting a lot from you. In Canada, people, they. . . if it doesn't affect them directly, they don't care." The lesser relational nature of shame in Canada was mentioned by a few participants to explain the decreased frequency of feelings of shame related to others (e.g., feeling shame due to someone else's action and causing shame to others) since their immigration.

Problematic Shame and Social Control

Simultaneous with reports of supportive and well-meaning others, a number of participants felt very negatively about others enforcing social and cultural norms. They reported that feelings of shame can be initiated through exposing and calling out someone else's actual or imagined wrongdoing, or by people's use of their superior social standing. Shaming thus is used as a way to maintain or force adherence to appropriate behaviors:

"Shame is a means of social control in Pakistani society. The emotion has always seemed to exist in conjunction with social norms but in Pakistan it has been coopted to the point where shame has become a quasi-social institution rather than an emotion. It is not a feeling anymore, it is an experience. An experience that can be brought onto others and can be used as a threat to compel certain actions."

Participants also understood shame to occur within social hierarchies, such as socioeconomic status, gender, skin color, or education, whereby "if someone is superior, they will try to burdenize the inferiors, so that, [they] make them feel shame." For many women and one atheist participant, shame was frequently discussed in contexts where others had a high likelihood of being unsupportive or critical and where others used shame to enforce what they considered appropriate behaviors or beliefs. For example, one woman explained, "So you know this is again now, we come to that filter [for right and wrong] that every person has. I think the Pakistani males have a filter you know that has bigger holes than females. So you know a lot of things that are not acceptable in society they would do it and get away just because they are a male, they would get away with that. And they don't even feel ashamed about it because they feel that they are males and they are superior, and they can do it." At the same time, the majority of women participants mentioned the disconnect between some cultural norms and religious rulings.

While religion informs gendered interactions (e.g., modest dressing), women felt that the religion did not discriminate against them. Culture, rather than religion, gave women a lesser social status and led to more frequent experiences of shame for women than men. While culture was described as at times incorrectly using religion to justify women's inferior social status, some women criticized and pushed back on cultural priorities using religious norms: "A husband

would worry more of his wife talking to a male colleague rather than worrying more about that she prays 5 times a day. For example, if his wife is not praying five times a day, it is maybe not very much a problem for him. It is not a very shameful thing. I don't think he will make her accountable for that. But it is a big sin if you are not praying, but it is okay for her husband. But if she talks a lot or she hangs out with his male colleagues or male friends, his husband would let her feel shame about it! This is the thing, yeah."

Social control can be exercised by both acquaintances and family members. Indeed, some parents "somehow think it is their fault too that the child behaved in a certain manner that is shameful and to please elders/friends/peers they join those people in making the child feel bad." Outside of the family, the social control is reinforced by the negative social consequences associated with the shamed behavior (e.g., not being invited to some family events and more difficulty getting married). A few participants mentioned violent reactions from family members and the violent social sanctions present in some (rural) parts of the country. Participants felt those sanctions and reactions reflected less mature and undesirable ways of dealing with shameful events that resulted in a family's perceived loss of honor.

Analyze the Situation

Some participants explicitly mentioned the need to analyze the situation, while others simply engaged in a detailed analysis when recounting an event during which they felt ashamed. This participant commented on the need to analyze the situation for the shameful event: "First of all I will adopt a proactive approach. For example, it depends. If, you know, it was a willful contribution, I will definitely have a 360-degree review of why I did that. Can I live without that? And you know I will take a different route. And if it was not willful, it was a forceful then to some extent you don't have a control on that. Maybe you have to do it again for your

survival." Just like him, a subset of participants explicitly commented on the need to understand whether themselves or others had been forced by circumstances to commit a wrongdoing. Participants' analyses seemed to focus on (a) whether the shame was due to a wrongdoing and (b) the context in which the incident occurred (e.g., in the presence of elders or others with more/less social status). They then devised a course of action based on their analyses. In that sense, how one deals with shame is not predefined and is a flexible and thoughtful reaction: "Obviously as you age you mature as a person you take more time to think about the situations and not just react on a whim." Shame becomes a signal that stimulates analysis and self-reflection, and responses to shame are framed within a specific and often complex social world.

Positive Coping Strategies

Participants commented on a number of positive coping strategies. The following four strategies were endorsed by the majority of participants: change/better the self, stop unwanted behaviors, share with close others, and accept and correct. A minority of participants specifically mentioned seeking protection with God (which was coded separately from repenting to God) and remove/act despite (mostly unjustified) shame. Most positively perceived coping strategies seemed to lead to self-change and self-improvement; thus, both reinforcing and illustrating how shame could act as a beneficial signal of wrongdoing.

Changing or bettering the self was used most frequently by participants after realizing they engaged in a wrongdoing. It was described as a potentially long and thought-out process and as a benefit or outcome of shame if coped with successfully. While it could be as simple as making reparations to become like one wants to be, it more frequently occurred after a major transgression that required more time to be overcome (e.g., failing in university): "So I couldn't really do anything else at that time to make others around me feel better so it was good in a sense

that it got me thinking on what I needed to do to fix things in my life. So there was regret as well as some feelings of I don't know uske liye thik word kia hoga [what word is the right word]. I just wanted to do something right. Although it took me 4 or 5 months to do it right but I had this feeling of wanting to do something." Some participants mentioned coming back "to the straight path," meaning following one's religious standards, and thus also implied a bettering of the self. One participant even reported using this coping strategy in the context of shame due to discrimination: "So it somewhere stuck in my mind that I am black, and it somewhere stuck in my mind that I am fat, oh my god, I look ugly. But I chose to be a better person instead! I worked hard, I studied hard. Today I am a mechanical engineer, all those people they are just wandering on streets and doing nothing. So it brought out the best in me."

Participants reported another positive outcome of shame was to inhibit unwanted behaviors in the short term (immediately when feeling ashamed) or long term (once the individual finds themselves again in a similar situation). It encourages individuals to avoid actions detrimental to others, the group, their spiritual growth, or to their standing within the group. This is qualitatively different than the urge to withdraw usually described in the Western literature. While withdrawal has been mainly construed in negative terms in Western contexts, participants in the current study saw something positive in shame inhibiting or stopping in their tracks undesirable behaviors: "This emotion can be good if it prevents a person to do wrong thing." They only felt negatively about this coping strategy when it occurred due to problematic shame stemming from social control.

While participants could take individual actions after feeling ashamed, many participants reported sharing their feelings of shame with family members, close friends, or God. Many participants felt that it was a normal part of their family culture or friend group to discuss

shameful events. Others commented that they learned to share those events with others after marriage or after immigrating to Canada. A few still only shared those experiences with God. When doing so, participants elected to talk with supportive others who could act as allies, or who would benefit from learning about the outcomes of a particular behavior. For example, two participants commented, “Yes, I believe people can easily tell [that I feel ashamed]. Also, I feel comfortable explicitly talking about my faults with almost anyone,” and “Yes, I will speak with someone who is really close to me. Definitely I will speak because I would like this not to be happening in the future. So I will definitely discuss this in order to get a good advice.” Sharing was seen as a potential step toward bettering the self or helping other better themselves.

Frequently, participants grouped together two strategies to overcome feelings of shame after a wrongdoing: accept and correct. While for some participants the effect was entirely prosocial (i.e., directed at improving the relationship with the other who was negatively impacted by one’s mistake), others only or almost exclusively accepted and repented their mistakes in the presence of God. The acceptance of one’s mistake appeared to be a prerequisite for repenting or repairing. From participants’ accounts, both culture and religion “tell us to repent whole heartedly, feel and say sorry if you wronged someone and promise to never repeat it again.”

A subset of participants highlighted the important role played by God in their coping. A participant recited a verse to seek protection from others’ wrongdoings: “In those time, it is religious teaching that you recite a sentence. If you wanna know I can tell you “lahaulo wala quwata illa billa aliyulazeem” [There is no power nor strength except by Allah].” Others turned to God in repentance after their own acts of wrongdoing or followed the guidelines imparted by Islam to deal with shame (e.g., to seek protection with God and apologize).

Finally, a number of participants also reflected on the need to at times remove feelings of shame or act despite them. Participants could act despite the shame if the intensity of the emotion was low or if they felt the shame was not justified (e.g., felt due to social norms the participant disagreed with). In the latter case, participants conceptualized their behavior as a positive form of shamelessness challenging unwanted social rules. For women, it could mean acting outside of appropriate gendered behavior or challenging Canadian norms they disagreed with: "I think that's where you have to get out of that feeling, of feeling that if something is labelled wrong or right and you feel that it is not [right]. If it is unjustified than you should stand up against it."

Negative Coping Strategies

Most participants felt that withdrawing or hiding truth, or one's views or actions was a negative coping strategy. Some participants also mentioned and consistently assessed negatively instances where individuals or society dealt with shame using anger or violence. Last but not least, they felt an inability to regulate shame could result in lack of confidence.

For most participants, withdrawing or hiding the truth or one's views or actions due to shame was qualitatively different from descriptions of stopping unwanted behaviors. While the latter was assessed positively, withdrawing/hiding was accompanied with a sense of helplessness and occurred due to individuals becoming overwhelmed with their feelings of shame. Furthermore, rather than being preventative or holding the possibility to reduce future harm (like stopping unwanted behaviors), the harm has already been done to the person's self-esteem or social standing. In the words of a participant, "I think in our community, like. . . to be. . . if you got cheated or you do something that would bring shame to your family, lot of people they won't. . . just try to hide that thing for a long time." This action was frequently presented both as a commonly occurring reaction and a way of coping with the emotion which led to negative

outcomes, such as isolation, and preventing a bettering of the self or society. For example, "People stop sharing, they keep things to themselves, they stop asking for help."

A little less than half of the participants mentioned instances related to anger or violence. This includes when they were angry (majority of instances) or were/wished to be physically violent (during their teenage years) after feeling ashamed, or instances in which families or communities, particularly in rural areas, may use (sometimes extreme) physical violence as a result of familial shame due to loss of honor. Participants felt the use of violence signaled more immature and undesirable coping: "[as a teenager], Yeah I got angry, I would lash out. That is what I would do, but now I understand things differently and I react differently." Participants reported growing out of this response to shame as they aged and wished families no longer used violence in response to shame.

Finally, a subset of participants mentioned that shame could also lead to an ongoing lack of confidence, if it was too present in the person's life: "Shame deprives people from speaking the truth because they are scared how society will react if they are honest about an act they did or their views about something, it harms self-confidence and is source of oppression." Thus, some participants spoke about how reoccurring experiences of shame in certain contexts (e.g., lack of supportive others) could lead to a lack of confidence in oneself over time.

Immigration

As previously mentioned, slightly more than half of participants reported a decrease in the frequency of feelings of shame related to others since moving to Canada. Participants attributed this change to differences in cultural norms as well as the less relational and more individualistic context present in Canada. Additionally, four participants mentioned that they developed a better understanding of shame after immigration due to the opportunities provided in

comparing different cultural norms and ways of experiencing and dealing with shame. One-third (N = 6) of participants reported no change in how frequently they experienced shame or in their understanding of shame after immigration.

Discussion

The aim of the present study was to explore the beliefs about shame and coping strategies used by Pakistani immigrants to Canada. Participants' accounts revealed a complex and nuanced understanding of the emotion and its relational and social context. Importantly, shame acted as a powerful signal to evaluate one's action and the situation and assess whether one has been engaged in wrongdoings. Shame was thus intimately tied to morality and, for some participants, Islamic morality specifically. Shame acted as a motivator to better the self, sometimes over long periods of time, both through and in tandem with additional coping strategies including accepting one's errors and correcting oneself or the situation, seeking protection with God, or sharing the incident with friends. Participants' beliefs about shame allowed them to access a wide range of coping behaviors when feeling ashamed and led most participants to prioritize coping strategies which positively included others or focused on self-improvement. Participants also mentioned that shame could be handled negatively and named negative coping strategies such as withdrawing and hiding, as well as anger and aggression. Participants explained that shame could also result in an ongoing lack of self-confidence in some contexts. If, once the self-analysis was completed, shame was deemed to be due to unwanted social pressures, participants understood shame as existing within specific social hierarchies and a negative by-product of social control or having a lesser social standing.

By exploring narratives about shame of Pakistani immigrants to Canada, without relying on Western definitions and theories of shame, this study expands our understanding of culturally

situated discourses and metacognitions about shame. Indeed, within Western psychology, shame is mostly viewed as a painful, maladaptive emotion about the global self (e.g., "I am a horrible person"; Tangney, 1996; Tracy & Robins, 2004). While Western psychology mainly aims to identify innate and/or highly generalizable characteristics of shame experiences and their regulation (Tracy & Robins, 2004), its definition of shame and the associated distinction between shame and guilt (Tangney, 1996) echoes widely held beliefs in United States culture (Stearns, 2016). The self is mostly seen as stable or largely invariant (Nathanson, 1992). The multiplicity of identities held by every individual (Linville, 1987; Watcher et al., 2015) is largely ignored when studying shame, and the focus on shame as maladaptive has led to a very limited assessment of its adaptive features (de Hooge et al., 2011; de Hooge, 2013). While Western conceptualizations and measurement of shame have been used with other cultural groups, including Pakistanis (Shahnawaz & Malik, 2017; Taihara & Malik, 2016), they are likely to miss opportunities to explore culturally situated understandings of this emotion due to their narrow assumptions and focus (Shi-xu, 2009). Indeed, if we had uncritically applied Western theories, definitions, and measures of shame to Pakistani immigrants to Canada, it is unlikely we would have both explored and highlighted the complexity, contextual nature, and nuance of beliefs about shame held by Pakistani immigrants to Canada.

Culture can profoundly shape emotional experiences through ongoing interpersonal interactions, as well as cultural norms about emotional experiences and desirable behaviors (Boiger & Mesquita, 2012; Mesquita et al., 2017). For example, shame is more likely to be attended to by the ashamed individuals and coregulated with close others in Japan, where the emotion is socially valued, compared to the United States or Germany, where shame is typically associated with isolation and withdrawal (Boiger & Mesquita, 2012; Mesquita et al., 2017).

Similar to accounts of Pakistani immigrants to Canada, shame is a painful yet socially valued emotional experience in China (Ho et al., 2004) and Taiwan (Wong & Tsai, 2007). The emotion benefits from a rich vocabulary (about 150 words are related to shame in China and Taiwan), some of which indicate shame can provide opportunities to improve the self (Bedford, 2004; Ho et al., 2004). It exists within culturally specific moral rules dependent on individuals' relationships and status within those specific relationships (Hong, 2004; Mao-jin & Jing-jing, 2009). Furthermore, in China and Taiwan, it is predictive of individuals' learning after failure (Wang et al., 2018) and of increased relationship building efforts (Wong & Tsai, 2007). Multiple non-Western groups thus not only hold more relational, nuanced, and positive evaluations of shame but also tend to positively engage with the emotion rather than withdrawing. The research findings of this study are important in contributing to the expansion of culturally sensitive research on shame and the regulation of shame both in different cultural groups and in immigrant populations.

The findings from this study, in conjunction with the existing research on shame in China, Taiwan and Japan, have multiple theoretical implications. First, despite the multitude of scales measuring the emotion of shame, the most commonly used scales rely on Western definitions of shame which provide a very limited assessment of the emotion's adaptive features and largely ignore relational and spiritual contexts (de Hooge et al., 2011; de Hooge, 2013; Collardeau et al., 2020). Recognizing the influence of culture on shame's frequency or triggering event only (e.g., Tangney et al., 2007; Tracy & Robins, 2004) rather than on the wider experience of shame (i.e., cognitions, expression, and emotion regulation strategies) is limiting. The search for highly generalizable and parsimonious measures and theories may miss meaningful and important qualitative differences in emotional experiences and assumes (without

checking empirically) that participants with different cultural backgrounds and life experiences will interpret items in the same way. Indeed, should we expect a Pakistani immigrant to Canada to understand and rate a Western scale's items in the same way as a Canadian of European descent? Or should we ask Pakistani immigrants to Canada to ignore part of their beliefs and experiences with shame to respond to items not generated to be culturally sensitive to their cultural background? Even quantitative studies done in the West should strive for a greater attention to cultural, relational, and spiritual factors. This may be done through, for example, a greater attention to metacognitions and religious beliefs or through statistical analyses, such as measurement invariance analyses (Sakaluk, 2019), to quantitatively illuminate qualitative differences in meaning-making. Second, Pakistani immigrants in our study possessed a high level of awareness regarding the role of shame in perpetuating social and cultural norms, as well as social hierarchies. This needs to be further examined for both Pakistani immigrants to Canada and other immigrant groups, as it may influence how individuals negotiate conflicting social norms between the majority culture and their own cultural background and make sense of discrimination, microaggression, and other messages devaluing their own cultural traditions.

The findings of this study have important implications for practitioners in their work with Pakistani immigrants to Canada, as well as other groups who may not hold Western beliefs about shame. It is important for practitioners to work from a place of cultural humility (Buchanan et al., 2020; Case, 2015; Tervalon & Murray-Garc´ıa, 1998), especially when helping clients' process negative and painful emotions like shame. Therapists should be aware of and curious about beliefs about shame which differ from the usual mainstream Western definition of shame present in the literature and be open to the possibility that other understandings of the emotion may result in more positive coping strategies and even self-improvement. While Pakistani

immigrants to Canada also discussed maladaptive aspects of the emotion, when it came to social control, it was balanced with a belief in the helpful and adaptive nature of shame and its role in helping individuals become moral members of their community. Pakistani immigrants to Canada's positive beliefs about shame and proactive stance toward the regulation of shame are likely to be protective factors in their immigration journey. More specifically, their awareness of power imbalances in relationships and society may be helpful in making sense and dealing with the discrimination they experience in Canada. Thus, therapists should be careful not to shut down some helpful coping strategies, including reaching out to close others to get advice on one's action or a situation which triggered shame. It is important to honor clients' cultural and religious knowledge about the emotion. It may be especially harmful for clients with a nuanced and complex understanding of shame to have their therapist overly focus on the distinction between shame and guilt or imply a narrow view of the emotion as being only maladaptive. We would also like to encourage therapists to be open to discussing sources of shame (e.g., personal vs. imposed by others) and systemic, structural inequalities which may be important in explaining individuals' emotional experience. For our participants, problematic shame was very much conceptualized as a result of social inequalities due to aspects of identity such as gender or socioeconomic status.

Despite the valuable insights into beliefs about shame and coping strategies used by Pakistani immigrants to Canada, this study has some limitations. First, Pakistanis and the Pakistani diaspora in Canada are culturally, linguistically, and economically diverse. While participants' interviews suggest some diversity in social status (including participants from rural areas of Pakistan) both before and after immigration, it is not information that was collected in detail as part of the study. This study represents the experiences of some, but not all, Pakistani

immigrants to Canada. It is also important to note that, just like with any other group, wide differences in beliefs about shame and coping strategies are likely to exist for individuals who are Pakistani immigrants to Canada. Although generalizations should be approached with caution, this study still achieved a deeper and more culturally specific understanding of shame from the perspective of Pakistani immigrants to Canada. Second, this study is limited in its exploration of context, both relational and structural, that would inform how Pakistani immigrants to Canada understand and deal with experiences of shame in their daily life postimmigration. A greater exploration of contextual factors would be beneficial to understand what helps or hinders the regulation of shame both before and after immigration.

Additional research is necessary to expand current definitions of shame to render them more inclusive of non-Western worldviews and honor the diversity in metacognitions or beliefs about shame present in different groups (Collardeau et al., 2020). With Pakistani immigrants to Canada specifically, it may be especially fruitful to explore gender differences in the experience of shame, as well as to further explore how context, relationships, and social status influence both the meaning given to situations and individuals' coping strategies.

The findings from this study provide a more nuanced and culturally sensitive understanding of how Pakistani immigrants to Canada think about and cope with shame. It also highlights the need to decolonize the study of emotions and emotion regulation more generally to move toward research designs that do not exclusively rely on Western definitions and measurements and that allow for a more holistic, culturally sensitive study of emotions.

Chapter Four

Revisiting Key Assumptions about State Shame and Guilt: Measurement Models and Contextual Factors

The numerous debates about how to define and measure shame and guilt in the North-American context (e.g. Izzard, 1977a, 1977b; Leach & Cindam, 2015; Tangney, 1996; Tignor & Colvin, 2017; Wicker et al, 1983) and the emerging evidence on cultural variations in the understanding of self-conscious emotions and related constructs (e.g. the self; Collardeau et al, 2022; Kirmayer, 2007) are a testament to the difficulty of researching self-conscious emotions. Self-conscious emotions occur when we reflect on and evaluate ourselves, our actions and/or how we are perceived by others around us. They include, for example, shame, guilt, pride, and embarrassment. Similar to other emotional experiences, they can be studied as a state or trait. State emotions refer to time-limited affective experiences that occur at a specific time and in a specific situation. Trait emotions refer to an individual's tendency to experience the emotion across several situations or in a chronic way (Tangney et al, 2007).

Western Definitions of Shame and Guilt

Recent scholarship in Western psychology heavily relies on the definitions of shame and guilt proposed by Tangney (1996) and stemming from the North-American cultural context and European tradition (Elison, 2005; Stearns, 2016). Shame is seen as a maladaptive, painful and hard-to-regulate emotion that is focused on the global self and leads to avoidance (Tangney, 1996; Tracy & Robins, 2004). The focus is placed on the more intense and maladaptive aspects of the emotion to the detriment of more manageable experiences of shame (Collardeau et al, 2022). Guilt on the other hand is seen as a less intense, adaptive emotion that is

focused on one's specific action and is associated with urges to repair the situation (Tangney et al, 2007).

Despite the frequently endorsed view that shame is maladaptive and guilt is adaptive, there is a great heterogeneity of findings linking shame (Leach & Cidam, 2015) and guilt (Tignor & Colvin, 2017) to both increased and decreased pro-social orientation and adaptive interpersonal functioning. The heterogeneity is partly explained by differing construct definitions, statistical decisions, and study designs (for more in-depth reviews see the two following meta-analyses: Leach & Cidam, 2015; Tignor & Colvin, 2017). Furthermore, research on *trait* shame and guilt does not generalize well to *state* shame and guilt (Rüsch et al, 2007; De Hooge, 2013), adding further heterogeneity. Shame is more likely to appear as adaptive and linked to adaptive inter and intra-personal outcomes (e.g. empathy, self-improvement) when it is measured as a *state* (e.g. De Hooge, 2013; Lickel et al., 2014), individuals take responsibility for their actions (even for *trait* shame; e.g. Tangney et al, 2014) and attempts to repair one's self-image are likely to be met with success (De Hooge, 2013; De Hooge et al., 2011; Leach & Cidam, 2015). Trait guilt is more likely to appear as adaptive when measured through scenario measures (i.e., participants asked to predict their expected emotional reaction to specific scenarios) as opposed to checklist measures (i.e., reports of overall frequency of past emotional experiences) and when semi-partial correlations (further discussed below) are used (Tignor & Colvin, 2017).

Revisiting Our Assumptions

The multiple definitions of shame and guilt and the heterogeneity in findings may also be indications that it is time to revisit two early, but infrequently addressed, assumptions. First, most definitions present shame and guilt as two distinct emotions (i.e., make the assumption that they

both are similar emotional experiences that can be compared like one would compare fear and anger). Second, those definitions and most research studies assume that participants' social contexts, and more specifically discrimination and social threats, do not need to be systematically included.

Shame and Guilt: Two Distinct Emotions?

There is some indication shame and guilt may not be equivalent emotional experiences. Basic emotions – like fear or anger – are not determined by linguistic distinctions and are distinct adaptations to the environment. There is a limited, set number of basic emotions which emerged through evolution (Elison, 2005; Izzard, 1977b). They have innate, universal components (e.g., facial or body postures, behavioral urges) and have distinct functions (e.g. fear activates the body in times of danger; Elison, 2005; Izzard, 1977b; Tracy, 2014). On the other hand, "affective-cognitive structures" (p386, Izzard, 1977b) or "affective states" (p8, Elison, 2005) are emotional experiences constituted of multiple basic emotions and higher-level cognitions. Affective-cognitive structures contain (potentially contradictory) behavioral urges and other innate components of different basic emotions at the same time. Contrary to basic emotions, affective-cognitive structures show wide variations across cultures, are theoretically unlimited in number, and are influenced by linguistic distinctions (Elison, 2005; Tomkins, 1981). Tangney (1996)'s distinction between shame and guilt mainly relies on distinguishing higher-level cognitions and does *not* consider them to be different types of emotional experiences (i.e., basic emotion versus affective-cognitive structure).

Shame is a basic emotion that triggers specific biologically innate changes in facial and body posture (i.e., averted gaze, turning head down, hunched shoulders; Kemeny et al, 2004; Izzard, 1977b; Tomkins, 1963). Indeed, shame's facial and body postures are both present across

cultures and displayed by congenially blind athletes upon failure (Elison, 2005; Tracy & Matsumoto, 2008). Shame exists on a continuum of varying intensity (Elison, 2005; De Hooge, 2013), including feeling shameful about part of the self or the full self (De Hooge, 2013; Leach & Cidam, 2015; Tangney, 1996; Tracy & Robins, 2004). While not all emotion theorists agree that cognitions are necessary for one to experience shame (Izzard, 1977b; Tomkins, 1963), cognitions may play a greater role for shame than for other basic emotions (Tracy & Robins, 2004).

Guilt on the other hand is not a basic emotion (Elison, 2005; Izzard, 1977a, 1977b; Kemeny et al, 2004; Tomkins, 1963) and is best described as an affective-cognitive structure (Elison, 2005; Izzard, 1977a, 1977b). Contrary to shame, guilt does not have a unique facial and body posture common across cultural groups (Elison, 2005; Tracy & Robins, 2004). It is comprised of specific cognitions (e.g., "I feel guilty", "this behavior was bad"; Tangney, 1996) and at the affective level, may contain multiple basic emotions including shame, fear and disgust (Elison, 2005; Izzard, 1977a, 1977b). The literature on guilt seems to be plagued by the multiplicity of competing constructs for guilt (e.g. Tignor & Colvin, 2017; Tilghman-Osborne et al, 2010). Tilghman-Osborne et al (2010) identified 23 competing definitions of guilt, that did not seem to conceptually converge on a similar construct. The main point of agreement between the differing definitions (19 out of 23 definitions) was that guilt involves some sort of perceived moral or social transgression. Multiple definitions also included elements (e.g., focus on or involvement of the self) that have been marked as being specific to shame within the frequently used definition of Tangney (1996). Finally, measures of guilt frequently contained items seemingly assessing other constructs (e.g., anxiety, sadness; Tilghman-Osborne et al, 2010). The

difficulty of defining guilt could potentially be both an indication and a by-product of guilt being an affective-cognitive structure rather than a basic emotion.

Implications for Measurement Models. Whether shame and guilt are equivalent emotional experiences is not only a matter for theoretical debate. There is wide recognition within the existing literature that shame and guilt not only frequently co-occur, but also are highly correlated (Tignor & Colvin, 2017; Leach & Cidam, 2015; Leach & Cidam, 2023). This situation has led to the use of different statistical tools. Perhaps the most common one is semi-partial correlations or the partialling out of shame from guilt and guilt from shame, thus creating "shame-free guilt" and "guilt-free shame" variables to be used for regressions (Tangney, 1996; Tignor & Colvin, 2017). Some researchers (e.g., Tangney, 1996) have advocated for the use of partialling out or semi-partial correlations based on the theory that shame and guilt are acting as mutual suppressors. Partialling out shame from guilt (and vice versa) usually increases any zero-order correlations between emotions and outcomes and, in the case of guilt, sometimes reverses the direction of the effect (Tignor & Colvin, 2017).

Semi-partial correlations may remove too much variance or decrease the ecological validity of the research (Tignor & Colvin, 2017). More troublesome, if shame is indeed a basic emotion and guilt is an affective cognitive structure containing shame (as well as other cognitions and basic emotions), semi-partial correlations may also artificially remove a key component (i.e., shame as a basic emotion) from guilt. On the contrary, creating a "guilt-free shame" would only remove some guilt-like higher-level cognitions that may have been present in the experience of shame. Thus, removing the basic emotion of shame from the affective cognitive structure of guilt runs the risk of inaccurate and flawed findings about guilt. It also potentially fails to consider the degree to which behavioral outcomes are a result of different

blends of basic emotions and higher-level cognitions co-occurring with the basic emotion of shame (i.e., rather than being the outcome of two distinct and different emotions).

Some researchers, on the other hand, simply enter shame and guilt as two separate variables in multiple regressions (Leach et al, 2023; Tignor & Colvin, 2017). Multiple regression of shame and guilt does not allow researchers to assess for a common shared component between shame and guilt and to separate what behavioral outcomes may be driven by it (if present). For example, multiple regression would not allow us to disentangle what are the effects of the common basic emotion of shame, as well as the effects of cognitions related to guilt versus cognitions related to Tangney (1996)'s definition of shame (i.e., shame about the global self). If shame and guilt are truly distinct and separate emotional experiences, their high level of collinearity might lead to results that exaggerate the difference in outcomes found between predictors when using multiple regressions (Leach et al, 2023).

Both multiple regressions and "partialling out" approaches fail to empirically test the assumption that shame and guilt are two distinct and separate emotional experiences. Similarly to Leach et al (2023), we believe the collinearity between shame and guilt needs both a better theoretical explanation and better measurement models. Complex statistical tools that can model different theoretical assumptions about the relationship between shame and guilt exists, thus allowing us to test some of theoretical assumptions present in the literature. First, taxometric analyses have now allowed researchers to ask whether emotional experiences can be partitioned into discrete natural kinds (e.g., like reptiles and birds are two discrete natural kinds of animals) or vary within the same affective continuum. For example, Haslam and Bornstein (1996) have found evidence for the discreteness of envy and jealousy. If emotional episodes or parts of emotional episodes exist in nature in the shame or guilt category, shame and guilt are truly

distinct, discrete emotional experiences that co-occur and have discrete adaptive functions. On the contrary, if shame and guilt are part of the same affective continuum, they will be varying only to a matter of degrees on one or more dimension.

Second, should shame and guilt be part of the same affective continuum, bi-factor models may be better representations of negative self-conscious emotions when shame and guilt are measured at the same time, if the basic emotion of shame is indeed one of the basic emotions present in experiences of guilt. A common factor could be used to represent the shared negative self-conscious emotion (i.e., basic emotion of shame) present in both emotional experiences, while additional factors may represent the different affective-cognitive structures of guilt and of shame about the global self.

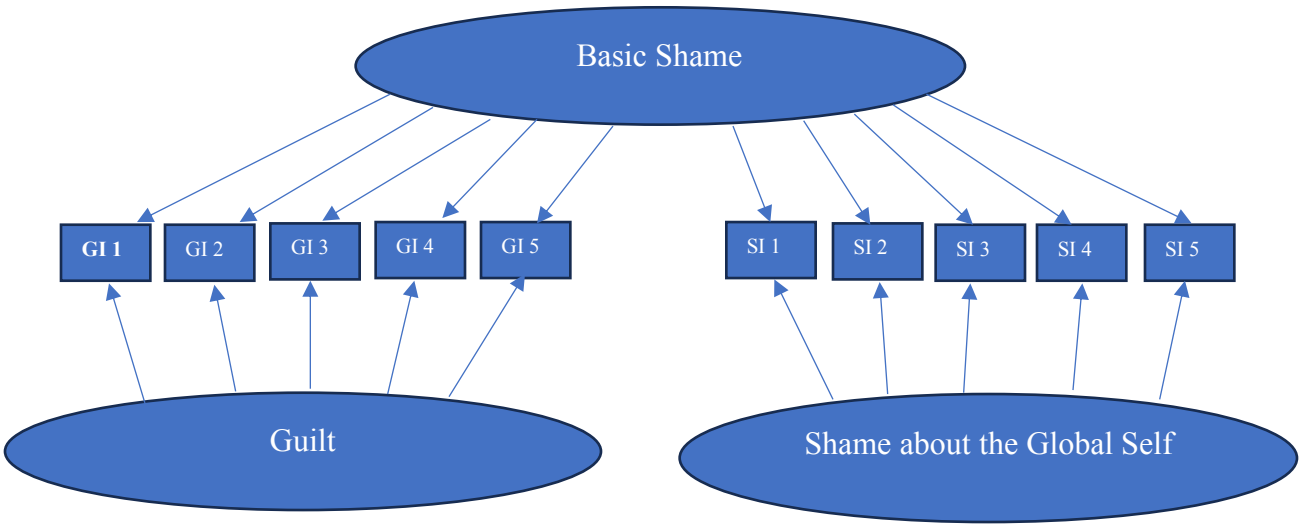


Figure 1. Bi-factor model

Note: GI represent items measuring guilt, SI represent items measuring shame about the global self

Social Context: Discrimination, Social Threats and Shame

The social and cultural context within which emotions are embedded may impact the phenomenology of individuals' emotional experiences and the translation of emotions into action

(Collardeau et al, 2022; Bou Zeineddine & Leach, 2021). The challenge for psychology, then, is to identify social and cultural structures relevant to the study of specific emotions or specific behavioral outcomes (see e.g., Bou Zeineddine & Leach, 2021; Leach, 2016). Considering social and cultural systems implicated in our emotional responses (and their translation into actions) also implies a move away from unidirectional cause and effects. It prompts to ask under what situations and social or cultural conditions are emotions associated with specific behavioral tendencies and/or translating into particular actions (Bou Zeineddine & Leach, 2021). It also recognizes that individuals may pursue multiple regulation strategies and actions in response to single emotional experiences (Ford et al, 2019).

Discrimination is an important social context for the study of shame (Collardeau, 2022). Discrimination is the negative or unfair treatment of members of marginalized social groups (Godley, 2018). Discrimination (or stigma) maintains and justifies the unfair distribution of (political, financial and other) resources by society (Tyler & Slater, 2018) through the identification and devaluation of a social identity (Bennet et al, 2016). The prevalence of discrimination is difficult to establish due to the large spectrum of discriminatory events (e.g., hate crimes, major events such as being denied housing or a job, and smaller interpersonal events such as receiving poorer service and being called names), and the multiple marginalized social identities it targets (Godley, 2018). Findings from a large survey of 16,049 Canadians suggest almost 23% of Canadians may have experienced at least one interpersonal discriminatory event in their life (Godley, 2018). Furthermore, younger Canadians were more likely to report experiences of discrimination, possibly due to an increased awareness of the types of discrimination (Godley, 2018) and the number of discriminatory events reported by multiple groups has been on the rise (Cotter, 2022).

Discrimination has both psychological and behavioral impacts on members of marginalized groups through interactions between structural, social and individual factors (see for a review, Bos et al, 2013). Two impacts are especially noteworthy to shame researchers. At the behavioral level, discrimination increase the likelihood of members of marginalized group to engage in avoidance or concealment behaviors designed to (when possible) hide the stigmatized identity or protect oneself by avoiding unsafe social environments. For example, HIV stigma has been shown to impact treatment adherence when individuals are in social settings where taking their antiretroviral therapy would be equivalent to disclosing their HIV status and increase the risk of being stigmatized (Kalichman et al, 2021). Similarly, Métis women have reported not disclosing their indigenous identity when accessing healthcare, in an attempt to avoid experiencing racism from healthcare providers (Monchalin et al, 2020). Additionally, research has highlighted the relationship between greater perceived discrimination and avoidance across settings (e.g., underutilization of healthcare, withdrawal from the workplace; Burgess et al, 2008; Volpone et al, 2013).

At the psychological level, discrimination can result in members of marginalized groups applying stigmatizing beliefs to themselves and thus engaging in negative self-evaluation and devaluation of one or more of their social identities. This resulting negative self-evaluation and devaluation is termed internalized stigma (Ritzier et al, 2003; Luoma et al, 2008; Brown et al, 2015). Daily discriminatory events predict higher overall levels of internalized stigma (e.g., Wong-Padoongpatt et al, 2022), as well as within person in the moment variations in negative self-evaluation (Fazeli et al, 2017; Poon et al, 2022). While shame is not the only emotional experience present during experiences of discrimination (e.g. anger, Carter & Forsyth, 2010) and variations in negative concerns do not always lead to in the moment variations in negative affect

(Poon et al, 2022), shame has been frequently identified as a core emotion in internalized stigma (Ritzier et al, 2003; Luoma et al, 2008; Brown et al, 2015). Further attesting to the centrality of shame, many well-used measures of internalized stigma (e.g., Internalized Stigma of Mental Illness, ISMI; Ritzier et al., 2003) contain multiple items identical to items routinely used in self-report measures of trait and/or state shame (Bennet et al, 2016; Brown et al 2015). As noted by emotion theorists, in this context, shame may signal the undesirability of the self in the eyes of others, thus acting as an emotional warning for situations where the self's social rank or social acceptance is likely to be threatened (Gilbert, 2006, 2007; Kemeny et al, 2004; Leary, 2007; Weisfeld & Dillon, 2012).

A number of studies have investigated discrimination and shame and/or self-stigma (i.e., shame and internalized stigma cognitions) as competing variables explaining behavioral outcomes.

Their findings suggest that shame may offer an additional motivator to protect oneself when one's social image is at risk, whether through self-change or avoidance behaviors. Shame is positively associated with self-change, especially in cases where self-change may lead to an improved social image (e.g., smoking cessation, recovery from mental illness, Chakraborty et al., 2011; Kim et al., 2016; Brown et al., 2015) or the maintenance of one's positive social image (e.g., condom use to protect oneself from STDs or preference for in-group neighbors; Sales et al, 2017; Uzogara, 2019). On the other hand, when behaviors (e.g., disclosure) that may pose a risk to one's social image were measured, shame may be associated with avoidance behaviors (Heggeness et al., 2017; Schibalski et al., 2017; Wang et al., 2015). Yet, one study assessing discrimination and social threats more in depth (i.e., measures of experienced and perceived

discrimination as well as stigma stress) did not replicate the association between shame and avoidance (Sonik-Włodarczyk et al., 2022).

Overall, increased perceived discrimination was related to negative outcomes and behaviors. Indeed, increased perceived discrimination was associated to decreased medication adherence (Chakraborty et al., 2011), STD-testing (Cunningham et al., 2009), HIV status non-disclosure (Heggeness et al., 2017), increased tobacco dependence (Brown et al., 2015) and negative help-seeking attitudes (Kim et al, 2016). Perceived discrimination and stigma stress (but not shame or experienced discrimination) were further associated with secrecy around psychotic disorder diagnoses (Sonik-Włodarczyk et al., 2022).

Shame, thus, frequently occurs within the context of discriminatory environments. Decontextualizing shame not only renders invisible its capacity to act as an alarm signal for stigmatization (Collardeau, 2022), it also risks attributing some behavioral outcomes to poor coping with shame rather than a potentially appropriate and thought-out protective response to discriminatory environments.

Implications for Study Design. In the existing literature on shame, the majority of studies do not assess participants' experiences of past and/or current discrimination. If discrimination is indeed a key social context relevant to our understanding of shame, we may need to systematically assess individuals' prior experiences with discrimination. A strong case for the systematic inclusion of discrimination would be present if:

- Prior experiences of discrimination are associated with higher levels of reported state shame and guilt after triggering events, regardless for the reason for the individual's self-conscious affect,

- Prior experiences of discrimination are directly associated with more avoidant behaviors following state shame and guilt.

Indeed, it would provide preliminary evidence that prior experiences with discrimination may alter (a) one's quantitative experience of state shame and guilt (e.g., more intense) and (b) one's likelihood to use avoidance as a strategy to manage the potential loss of social image signaled by feelings of shame.

Current Study

In the present study, our main goal is to revisit two key assumptions usually present in the existing literature on shame. Namely, we aim to:

(a) Assess different measurement models (one factor, two-factor and bi-factor) for state shame and guilt,

(b) Investigate whether experiences of lifetime discrimination are associated with variations in state self-conscious emotions and their behavioral outcomes.

Additionally, we selected to conduct this investigation in a North American sample, requiring that both participants and their parents were born in North America. There is some evidence that the distinction between shame and guilt may not be endorsed by all cultural groups (e.g., Collardeau et al, 2021). The first step in investigating whether shame and guilt are two affective-cognitive structures sharing a common basic emotion (bi-factor model) rather than two distinct emotion (two-factor model) is to test both measurement models in a sample which shares the cultural understanding of shame and guilt predominantly found in (Western) psychology (i.e., Tangney, 1996). In other words, we are testing the current assumptions (shame and guilt as distinct emotions, two-factor model) in a sample where they are most likely to be a shared belief

between participants and the researchers (i.e., Tangney, 1996) who created the definitions of shame and guilt commonly used in psychology.

In the present study, we thus aim to investigate the following hypotheses:

No hypotheses were made for the taxometric analyses. Should the taxometric analyses find support for a dimensional structure, the following hypothesis were made:

Hypothesis one: Based on the above theoretical discussion, we hypothesized the bi-factor model (common basic emotion, two affective-cognitive structures) will perform better than the two-factor and one-factor models. In a bifactor model, the common self-conscious basic emotion is the basic emotion of shame. The two affective-cognitive structures are (a) guilt and (b) shame about the global self.

Hypothesis two: A greater history of discrimination will be directly positively associated with levels of shame and guilt and the common factor, as well as avoidance (e.g., Luoma et al, 2008; Brown et al, 2015; Heggeness et al., 2017).

Hypothesis three: Higher levels of state shame will be directly positively associated with self-improvement (e.g., Lickel et al., 2014) and avoidance (e.g., Schibalski et al., 2017; Wang et al., 2015). Higher levels of guilt are directly positively associated with reaching out for support, due to guilt frequent positive association with pro-social behavior (e.g., Tignor & Colvin, 2017). We made no hypothesis about the association between the common factor and behavioral outcomes.

Methods

Participants

Exclusion\Inclusion Criteria

All participants had to be at least 18 years-old and reside in Canada at the time of the study. In order to increase the likelihood of participants' exposures to Western beliefs about shame and guilt, participants had to be born and raised in Canada, from parents who also were born and raised in Canada.

Demographics

Three hundred and thirty two Canadians participated in the survey. Participants were, on average 22.28 years-old (SD = 6.81, range = 18-72). The majority of participants (77%) were students at the University of Victoria. Many participants were employed, either full-time (8.1%) or part-time (41.0%). Participants were mostly of European (76.2%) or Mixed (17.1%) cultural heritage. The remaining participants were of South Asian (3.0%), East Asian (2.4%), Indigenous (.6%), Caribbean (.3%) and South American (.3%) heritage.

About half (50.5%) of participants were not currently in a romantic relationship. Participants self-identified as being cisgender women (78.0%), cisgender men (21.3%) and non-binary or transgender (.6%). Half (50.9%) of our sample self-identified as being atheist or agnostic. A similar percentage of participants reported being spiritual but not affiliated with any faith tradition (20.2%) and being Christian (23.0%). Other faith traditions (e.g., Islam, Judaism, Buddhism) were only represented by a couple of participants.

Procedure

The Institutional Review Board at the University of Victoria (British Columbia, Canada) approved the study.

Participants were recruited through the SonaSystem, an online portal that allows undergraduate students in the department of psychology at the University of Victoria to receive credits when participating in research studies. Participants were also recruited through general

Facebook groups of Canadian cities. Participants provided consent online and completed an anonymous, online survey. The survey contained demographic information, open-ended questions and self-report questionnaires. At the end of the survey, participants received a debriefing form. Participants were entered into a draw to win two $50 giftcards, except if they had been compensated for their time in form of course credits.

Questionnaires

Participants were invited to provide demographic information (e.g. age, ethnicity). To induce state shame and guilt, participants were assigned at random to write for five minutes about a time when they felt guilty (50% of participants) or ashamed (50% of participants). They were asked to describe in details the situation, how they felt and how they reacted.

State Shame and Guilt Scale

Immediately after the writing exercise, participants also reported on their levels of state shame and guilt during the event on the *state shame and guilt scale* (SSGS; Marschall, Sanftner, & Tangney, 1994). The SSGS is a 15-item self-report measure of state shame, guilt and pride using a 5-point likert scale (1= *not feeling this way at all*, 5=*feeling this way very strongly*). Items include, for example, "I want to sink into the floor and disappear" for shame and "I feel bad about something I have done." For guilt. Only the items for shame (5 items) and guilt (5 items) were administered.

Past research indicates the shame and guilt scales have good internal reliability and validity (e.g., Tangney & Dearing, 2002). In the present study, the shame scale had a Cronbach alpha of $\alpha = .751$ and the guilt scale had a Cronbach alpha of $\alpha = .816$. Five studies investigated the latent structure of the SSGS and its shortened version. Three found support for a two-factor model (Cavalera et al, 2017; Frankfurt et al, 2018; Schlagintweit et al, 2017) and two for a one

factor model (Else-Quest et al, 2009: Lancaster, 2018). All studies included only shame and guilt items in their factor analyses and initially had hypothesized at two-factor model.

Behavioral Responses

Participants were asked to report on behaviors they engaged in during and after the event on a 4-point Likert scale (never, at least once, infrequently, frequently). The behaviors assessed included: reaching out to others (to receive support or for others to learn from the participants' experience; 2 items), improving oneself or aspects of oneself (2 items), and avoidance related to the event (e.g. avoiding reminders of the event, 3 items) .

Lifetime Discrimination

Participants completed the day-to-day discrimination scale and the lifetime major discriminations scale from the Intersectional Discrimination Index (InDI; Scheim & Bauer, 2019). Lifetime day-to-day discrimination items are coded as 1 for yes (versus 0 for no) and are added to form a total frequency score ranging from 0 to 9. Day-to-day discrimination items include, for example, "been called names and/or saw your identity being used as an insult" or "been treated as if others are afraid of you".

Each of 13 lifetime major discrimination items are normally coded as 0 (never), 1 (once), or 2 (more than once; or in more than one place for Item 9). However, due to an administration error, we had to code the 13 lifetime major discrimination items as 0 (never) or 1 (present), resulting in a total frequency score ranging from 0 to 13. Examples of major lifetime discrimination items include, for example, "Because of who you are, has a health care provider ever refused you care?" or "Because of who you are, have you ever been threatened with a physical or sexual attack?".

No internal reliability is reported, in accordance with Scheim and Bauer (2019)'s note that it is not a meaningful indicator for their measure. The InDI demonstrated adequate construct validity and test-retest reliability in a large bi-national sample of individuals living in the USA and Canada (Scheim & Bauer, 2019). For our study, the day-to-day discrimination total score and the major lifetime discrimination total score were added to form one overall lifetime discrimination score.

Data Analyses

Descriptive statistics were run in SPSS 29. All other statistical analyses were run in R (R CORE Team, 2019). In R, the following packages were used: *tidyverse* (version 1.2.1, Wickham et al., 2019), *psych* (version 1.8.12, Revelle, 2018), *RTaxometric* (version 2.3, Ruscio & Wang, 2017)*, lavaan* (version 0.6-3, Rosseel, 2012), *semTools* (version 0.5-1, Jorgensen et al, 2018).

Taxometric Analyses

Taxometric analyses use the latent structure between sets of indicators to make inferences about the latent structure of specific constructs. Taxonic (i.e. categorical) and dimensional structures are both hypothesized. As a result, only if the results are consistent with one hypothesis (i.e. either categorical or dimensional structure) *AND* not with the other, can the structure of the latent construct be inferred (Ruscio et al, 2012).

Indicator sets for taxometrics analyses need to be limited (i.e. 3-5 indicators) and non-redundant (Sakaluk, 2019). We thus elected to create two indicator sets, each containing 4 indicators (two items for guilt and two items for shame) and to run the taxometrics analyses on each indicator set. The appropriateness of the data for taxometric analyses was assessed by running the Checkdata() function to assess indicator skewness (acceptable <2), validity coefficients (Cohen's d <1.25) and within-group correlations (.00< r <.30; Ruscio et al, 2012).

Three taxometric analyses were used in the present study: Mean Above Minus Below a Cut (MAMBC), Latent-MODE (L-MODE) and MAXimum EIGenvalues (MAXEIG). Taxon base rate estimates were only reported if a categorical structure was found. For each analysis, model fit was assessed using simulated empirical sampling distributions and the comparison curve fit indices (CCFI). A CCFI closer to 0 signals a dimensional structure, closer to 1 a taxonic structure. A CCFI at or near .50 (.45 < CCFI < .55) indicates both dimensional and taxonic structures are equally fitting (i.e. results are ambiguous; Ruscio et al, 2012, Sakaluk, 2019).

Confirmatory Factor Analyses

Due to the dimensional nature of our constructs, confirmatory Factor Analyses (CFA) was conducted using maximum likelihood. Three models were tested: a 1-factor, a 2-factor and a bi-factor solution. Each model fit were evaluated using (a) the comparative fit index (CFI), where values of .95 or higher indicate good fit, (b) the root mean square error of approximation (RMSEA), where values of .06 or less indicate good fit, and (c) the standardized root mean square residuals (SRMR), where values less than 0.08 indicate good fit (Hu & Bentler, 1999). Recent studies have suggested that measurement quality impacts the usefulness of CFA cut-offs defined by Hu and Bentler (McNeish, Ann & Hancock, 2018). Thus, should the standardized factor loadings deviate from .70 (closer to .40 indicates poor quality and closer to .90 indicates high quality), cut-offs were to be adjusted based on McNeish et al (2018)'s recommendations.

Missing data accounted for less than 5% of our data. Our data failed to meet assumptions of multivariate normality. Assumptions of multivariate normality were investigated using the Henze-Zirkler's test, Mardia's test and Royston's test. The Anderson-Darling univariate's normality test indicated all variables were not normally distributed. Simulation studies have

shown the use of supplemental fit indices (e.g., RMSEA and SRMR) helps decrease errors when assessing model fit when assumptions of normality are violated (Li, 2016).

Structural Equation Modelling

Full information maximum likelihood estimation method was used, which is an adequate method for handling missing data. We fitted a model in which our stigma variable predicted the general and specific factors, as well as all behavioral outcomes. Additionally, general and specific factors also each predicted all behavioral outcomes.

Results

Descriptive Statistics

Means and standard deviations for all scales scores are presented in Table 1. Correlations are presented in Table 2.

Table 1. Descriptive Statistics

Variable	Mean (SD)	Range
Shame (i.e., shame about the global self)	16.30 (SD=4.93)	5-25
Guilt	19.72 (SD=4.57)	5-25
Shame (i.e., Basic emotion, common factor)	36.08 (SD=7.95)	10-50
Reaching out to others	4.37(SD=1.89)	2-8
Self-Improvement	6.19 (SD=1.89)	2-8
Avoidance	6.50 (SD=2.54)	3-12
Lifetime Daily Discrimination	5.37 (SD=2.62)	0-9
Lifetime Major Discrimination	2.54 (SD=2.59)	0-13
Total Lifetime Discrimination	7.92 (SD=4.63)	0-22

Table 2. Correlations

Variable	1	2	3	4	5	6	7	8	9
1. Shame (i.e. shame about the global self)	-								
2. Guilt	.396**	-							
3. Reaching out	.169**	.014	-						
4. Self-Improvement	.124*	.289**	.114*	-					
5. Avoidance	.268**	.037	.071	.001	-				
6. Lifetime Daily Discrimination	.204**	.044	.038	.123*	.168**	-			
7. Lifetime Major Discrimination	.177**	.107	.053	.051	.201**	.566**	-		
8. Total Lifetime Discrimination	.216**	.077	.042	.104	.217**	.886**	.884**	-	
9. Shame (i.e. Basic emotion, common factor)	.848**	.822**	.114*	.245**	.189**	.160**	.178**	.188**	-

** p<.01 *p<.05

Shameful Event

The majority (75.9%) of participants wrote about a time when they experienced shame or guilt due to their own negative behaviors (e.g., yelling, cheating, stealing, lying). Others wrote about feelings of shame or guilt prompted by being taken advantage of (6.6%), events out of the participant's control (11.4%), being at risk of or being discriminated against (2.4%) or making

difficult decisions (2.1%). Three participants did not provide a scenario and two participants reported never experiencing self-conscious emotions.

The majority of participants wrote about time-limited events (90.8%). Participants reported events that had occurred between the ages of 4.5 years-old and 69 years-old (Mean = 17.67, SD = 7.30). On average, 4.5 years (SD = 5.76, range = 0-30) had passed between the event and the participants responding to our survey. Ongoing events (9.2% of participants) consisted of, for example, chronic discrimination and being abused as a child.

Discrimination

A minority of participants reported never experiencing instances of daily discrimination (5.3%), and major discrimination (29.9%). Most commonly, participants reported being discriminated for their gender (women), body or weight, sexuality, race and mental illness. Participants reported experiencing discrimination against up to five aspects of their identity. Responses on open-ended questions indicated that a small minority of participants seemed to mistake disagreements (e.g., receiving feedback they engaged in a racist behavior), or someone pointing out their privilege (e.g., being "categorized as white") with being discriminated against.

Behavioral Urge to Avoid and Avoidance

Only forty-four (13.3%) participants did not endorse the urge to avoid (i.e., "disappear into the floor"). Yet, 36 of those participants (81.8%) engaged in avoidance behaviors. Conversely, 15.1% (43 out of 284) of participants who endorsed the urge to avoid did not engage in avoidance behaviors and 18.3% (52 out of 284) reached out to others about the shameful event respectively. Additionally, 63.3% (207) of participants both engaged in avoidance behaviors and reached out to others.

Taxometric Analyses

Our sets of indicators exhibited excellent properties overall (see Table 3), allowing us to proceed with the taxometric analyses. The majority of indicators exhibited acceptable characteristics: an acceptable level of skewness, validity coefficients with Cohen's *d* greater than 1.25, and within-taxon and within-complement correlations below .30.

The CCFI results for MAMBAC, MAXEIG and L-Mode analyses of state shame and guilt are shown in Table 4. A dimensional structure (CCFIs < .45) was unambiguously supported by all CCFI averages across analyses for one set of indicators. The other set of indicators yielded inconclusive findings. Overall, the results of our taxometrics analyses offer preliminary support for a dimensional structure for the SSGS.

Table 3. Indicators' characteristics – SSGS

Indicator	Mean	SD	Skewness	Kurtosis	Cohen's d
First indicator set – n = 326					
I felt like I am a bad person	3.76	1.33	-.77	-.63	1.71
I could not stop thinking about the thing I had done	4.00	1.19	-1.03	.10	1.45
I felt like apologizing, confessing	3.56	1.45	-.55	-1.10	1.32
I felt powerless, worthless.	2.81	1.43	.24	-1.26	1.28
Second indicator set – n = 319					
I wanted to sink into the floor and disappear.	3.51	1.39	-.49	-.98	1.85
I felt small.	3.05	1.39	-.03	-1.24	1.31

I felt tension about something I had done.	4.00	1.13	-1.09	.39	1.33
I felt bad about something I had done.	4.11	1.17	-1.17	.25	1.01

Please note that in taxometric analyses participants are excluded if they have not answered one of the selected items, hence resulting in different numbers of participants between indicator sets.

Table 4. Results of Taxometric analyses

Procedure	Within-group correlations (taxon)		Within-group correlations (complement)		Base rate estimate*	CCFI
	Mean	Range	Mean	Range		
First indicator set – n = 326						
MAMBAC	-.02	-.22:.22	-.02	-.34:.20	.585	.530
MAXEIG	-.02	-.22:.22	-.02	-.34:.20	-	.485
L-MODE	-.02	-.22:.22	-.02	-.34:.20	-	.403
Mean					-	**.462**
Second indicator set – n = 319						
MAMBAC	-.01	-.13:.22	-.06	-.40:.48	-	.349
MAXEIG	-.01	-.13:.22	-.06	-.40:.48	-	.316
L-MODE	-.01	-.13:.22	-.06	-.40:.48	-	.338
Mean					-	**.324**

Confirmatory Factor Analyses

Results are presented in Table 5. The one-factor and two-factor model were rejected based on all indices and with both types of estimators. For the one-factor model, factor loadings ranged between .445 and .762 (WLSMW) and .321 and .750 (MLMV). Most factor loadings were below .600. For the two-factor model, factor loadings ranged between .832 and .504 (WLSMW) and .319 and .773 (MLMV). Most were above .600.

The bifactor model demonstrated adequate fit and SRMR (< .08). It did not meet the RMSEA (< .06), although it came close, and the robust CFI cut-offs (>.95). All standardized factor loadings and standardized errors for the items of the bifactor model can be found in Table 6. The AIC values for each model were as follow: 9839.85 for the one-factor model, 9639.47 for the two-factor model, 9528.17 for the bifactor model. The AIC takes into account the complexity of the model as well as its fit. Lower AIC values support the superiority of the bifactor model over the first-order models. The bifactor model was selected as the best fitting model for the SEM analysis.

Table 5. Fit Statistics for the Confirmatory Factor Analytic Models – State Shame and Guilt Scale; n=314

Models	Robust χ^2	*df*	Robust RMSEA [$CI_{90\%}$]	Robust CFI	Robust SRMR
MLMV estimator					
Single factor model	255.186	35	.142 [.126:.158]	.529	.146
Two-factor model	163.694	34	.110 [.094:.127]	.723	.127
Bi-factor model	77.313	25	.082 [.061:.103]	.888	.062
WLSMV estimator					
Single factor model	437.362	35	.192 [.176:.208]	.451	.144
Two-factor model	304.346	34	.159 [.143:.176]	.631	.116
Bi-factor model	Did not converge				

Table 6. Confirmatory Factor Analysis – Standardized Factor Loadings and Standard Errors

SSGS Items	Specific Factor 1	Specific Factor 2	General Factor
I wanted to sink into the floor and disappear	.587 (.072)		.376 (.087)
I felt remorse, regret		.179 (.156)	.660 (.070)
I felt small	.696 (.074)		.293 (.089)
I felt tension about something I had done		0.163 (.144)	.618 (.071)
I felt like I am a bad person	.008 (.082)		.611 (.072)
I could not stop thinking about the thing I had done		-.034 (.091)	.797 (.076)
I felt humiliated, disgraced	.621 (.074)		.324 (.085)
I felt like apologizing, confessing		.170 (.186)	.544 (.084)
I felt powerless, worthless	.634 (.080)		.261 (.089)
I felt bad about something I had done		.946 (.568)	.642 (.093)

Looking at factor loadings of each item, the specific factor 1 seemed to tap into feelings of inferiority or smaller standing (feeling small, disappearing, humiliation, worthlessness). Interestingly, the item usually most associated with shame (i.e., I felt like I am a bad person) loaded very little on the factor 1 and was mostly loading onto the general factor. The specific factor 2 mostly had items loading poorly, aside from the cognition commonly associated with guilt (I.e., I felt bad about something I had done). The general factor had items commonly associated with shame or guilt load equally well.

Full Model: Bi-Factor Model for SSGS and Lifetime Discrimination

This model fitted the data reasonably well: χ^2 (124) = 213.16, p = .001, CFI = .94, RMSEA = .05, SRMR = .05.[1] Results of the SEM are presented in Figure 2. The general factor (or the basic emotion of shame) was positively associated with self-improvement. Feelings of inferiority were positively associated with both reaching for support and avoidance. Lifetime discrimination was associated with both feelings of inferiority and avoidance.

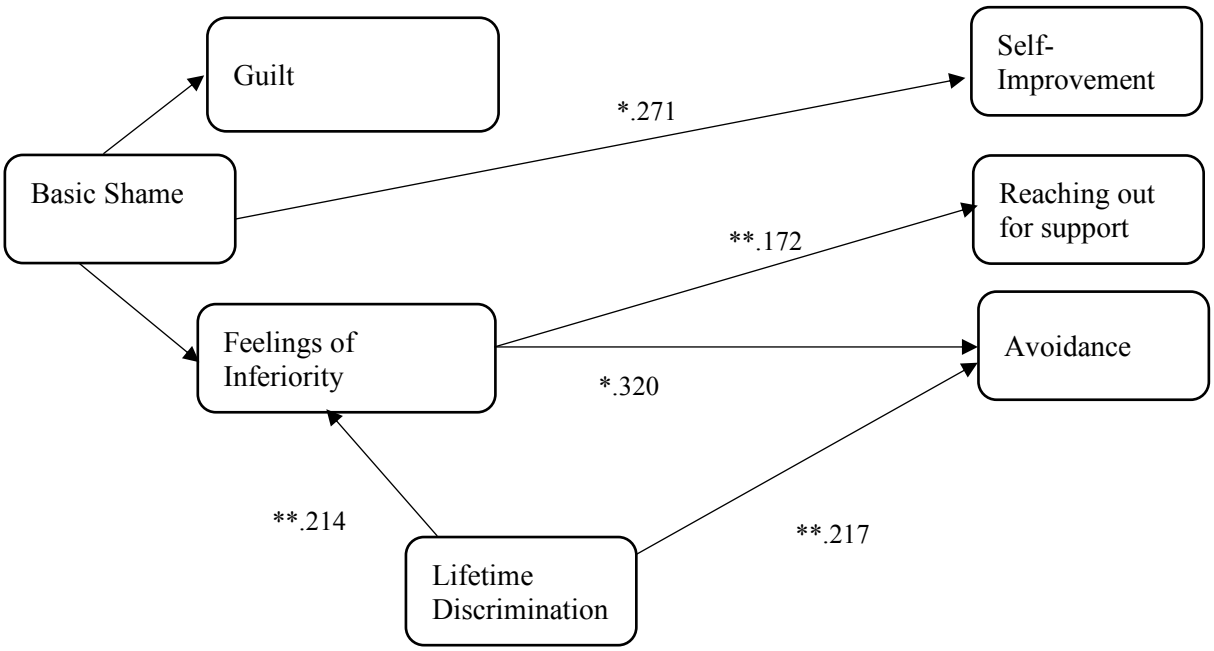


Figure 2. SEM Model of self-conscious emotions, lifetime discrimination and behavioral outcomes. Directional pathways are standardized. *p<.01, **p<.05

[1] Three covariates were added to the model : Age, Gender and Cultural Heritage. The model retained similar fit indices. All paths reported in Figure 2 remained significant, except the path between lifetime discrimination and feelings of inferiority. Three additional significant paths emerged between basic shame and avoidance, lifetime discrimination and basic shame, and guilt and self-improvement (all p<.05). Gender and cultural heritage were only significantly associated with lifetime discrimination (p<.05). Age was significantly associated with avoidance (p<.01), and lifetime discrimination (p<.01).

Discussion

This study's main goal was to revisit two commonly found assumptions in the literature: (a) the assumption and statistical modelling of shame and guilt being two distinct and equivalent emotional experiences, and (b) the almost systematic absence of measures of discrimination and social threats in studies investigating the behavioral outcomes of shame and guilt. Additionally, this study yielded some further findings relevant to the study of behavioral outcomes of shame and guilt.

State Shame and Guilt: Not Discrete Emotions?

Our taxometric analyses provided preliminary evidence for a dimensional structure of shame and guilt. Evidence of a categorical latent structure would have suggested a difference in kind between shame and guilt (i.e., shame and guilt being two discrete experiences, similarly to how birds and reptiles are two discrete natural categories in the animal world or how anger and disgust are two discrete emotional experiences). On the contrary, a dimensional latent structure suggests shame and guilt may vary in terms of degree on one or more dimensions, but do not constitute two discrete categories. They are two emotional states which are part of the same continuous affective domain. The lack of discrete categories for shame and guilt is especially telling in light of preliminary evidence pointing to the existence of discrete categories between some emotion states such as envy and jealousy (Haslam & Bornstein, 1996). Indeed, while some emotions may be part of different discrete categories (i.e., qualitative difference in kind), shame and guilt may be part of the same category (i.e., will exhibit differences in degree on the same affective continuum). Haslam and Bornstein (1996) hypothesized that the presence of discrete categories may signal that emotion states possess discrete adaptive functions. If their hypothesis is correct, it may mean shame and guilt possess similar adaptive functions that get activated

differently to a matter of degree depending on the situation, rather than having truly discrete and different adaptive functions. Our findings may provide an additional potential explanation of the similarity in outcomes between shame and guilt uncovered by meta-analyses taking into account the high level of correlation between those two emotional experiences (e.g., Leach et al, 2023).

SSGS: Measuring Shame, Guilt and Feelings of Inferiority

Contrary to previous studies (e.g., Cavalera et al, 2017; Else-Quest et al, 2009), the one-factor and two-factor models were rejected based on all indices and with both types of estimators. The bifactor model was selected as the model with the best (although on the verge of acceptable) fit indices. The SEM analyses with the bifactor model yielded better and acceptable fit indices.

Bifactor models have become increasingly used in psychology. As pointed out by Eik and al (2017), numerous studies reporting on bifactor models see the occurrence of weak factor loadings onto one of the specific factor and a high degree of heterogeneity of factor loadings for bifactor models compared to first-order factor models. This pattern of results led them to identify the need for a two-level sampling process (i.e., not only are individuals sampled randomly, but they are also given equivalent but different situations) to ensure factors in a bifactor model can be meaningful. Provided they conceptualize study designs where individuals are responding to items in different situations or occasion of measurement as a two-level sampling process, our study design (random assignment to shame or guilt + participants' selection of the specific situation they report on) fulfills this criteria and is appropriate for testing a bifactor model (Eik et al, 2017). It could nevertheless be improved to restrict the type of situations participants reported on, to better ensure those situations can be considered interchangeable, and by including additional self-conscious negative emotional experiences (e.g., embarrassment).

A strength of bi-factor models is their helpfulness in differentiating the relations between outcomes and, general and specific factors (e.g., Chen et al, 2006). Looking at the items' loadings, the bi-factor model allowed us to model (a) the basic emotion of shame as the general factor and (b) guilt cognitions and feelings of inferiority as specific factors. The factor loadings of one specific factor suggested it tapped into feelings of inferiority, rather than what we hypothesized (i.e., feelings of shame about the global self). Interestingly, the cognition "I am a bad person" frequently used as THE shame cognition only loaded highly on the general factor, alongside items frequently associated with both guilt and shame. This item did not load onto the specific factor of feelings of inferiority. Additionally, only the cognition "I feel bad about something I had done" commonly associated with guilt had a strong factor loading onto the specific guilt factor. All other items commonly associated with guilt had weak factor loadings. Those results may be in line with our hypothesis that guilt does not exist as a separate and discrete emotion from shame and is most likely to be an affective-cognitive hybrid including the basic emotion of shame and cognitions such as "I feel bad about something I had done".

Definitions of shame frequently include many appraisals and experiences within a single concept. Gausel and Leach (2011) had identified both shame and feelings of inferiority as emotional reactions to moral failure that impacted one's self-image. While no other study investigated bi-factor models, mixed findings on the factor structure of the SSGS provide further incentive to investigate alternative models across different samples. Additionally, the appropriateness of one-factor models for some samples (i.e., Else-Quest et al, 2009: Lancaster, 2018) and the frequently high collinearity between state shame and guilt (Leach et al, 2023) provide additional impetus to further consider whether state shame and guilt are two emotional experiences sharing the same affective continuum. Taken together, our analyses suggest

researchers should approach adding the items of the SSGS scales into shame and guilt scales with caution. There may be value in modelling the commonality between shame and guilt, and questioning whether those emotions are truly two discrete emotions and/or whether the SSGS is truly successful at measuring state shame and guilt. While results from the taxometric analyses and bifactor model provide preliminary evidence that the basic emotion of shame may be underlying emotional experiences of both state shame and guilt as defined by Tangney (1996), bifactor models are not sufficient to prove an underlying structure in psychology and additional evidence from neuroscience and other related fields are necessary (Bonifay et al, 2017).

The general factor (or the basic emotion of shame) was positively associated with self-improvement. Feelings of inferiority but not basic shame (i.e., the general factor) were positively associated with avoidance (which has been frequently described as a consequence of feelings of shame as defined by Tangney). Our SEM findings are in line with previous research that has uncovered the link between state shame and the motivation to improve the self (e.g., Lickel et al, 2014). While Gausel and Leach (2011) saw shame and feelings of inferiority as separate emotional reactions rather than nested emotional reactions (whereby feelings of inferiority would be a facet of the basic emotion of shame), the behavioral reactions they hypothesized for both shame and feelings of inferiority are in line with the findings of the present study. Feelings of inferiority were paradoxically also associated with reaching out to others for help. It may be that individuals avoided others who would reinforce those feelings of inferiority but reached out to close supports, although this cannot be confirmed for our sample.

Social Context: Discrimination and Self-Conscious Emotions

Our sample was constituted primarily of undergraduate and graduate students at a Canadian university and of individuals of European descent (both a little above 75%). Thus, our

sample was very similar to convenience samples very frequently used in psychology. Participants' reports on the lifetime discrimination measure in our study emphasizes discrimination may be a crucial life experience to assess in all samples when studying shame. Indeed, only a minority of participants reported never experiencing instances of daily discrimination (5.3%), and major discrimination (29.9%). Participants reported experiencing discrimination against up to five aspects of their identity. A previous and much larger survey of 16, 049 Canadians had estimated a prevalence of lifetime interpersonal discrimination of 23% (Godley, 2018). The much higher prevalence in our sample could be due to the nature of our measure (i.e., items assessing daily and major discrimination events across all social identities). It may also be influenced by the composition of our sample, in terms of gender (women) and age (early 20s), as many participants reported being discriminated against due to their youth and gender. Additionally, the higher prevalence in our sample may be influenced by a more general trend whereby the number of discriminatory events reported by multiple groups has been on the rise (Cotter, 2022).

Our findings on the relationship between discrimination and, emotional experiences and behavioral outcomes further make a case for the need to systematically assess participants' experiences of being discriminated. Most participants (approx. 75%) chose to report on events in which their experiences of shame and/or guilt were triggered by their own negative behaviors (e.g., lying, stealing). Yet, experiencing higher levels of lifetime daily and major discrimination was associated with both higher feelings of inferiority and higher avoidance. Contrary to our hypothesis, it was not, however, related to the basic emotion of shame or the affective-cognitive structure of guilt.

Thus, lifetime experiences of discrimination seem to at the psychological level intensify feelings of inferiority, and at the behavioral level render more likely avoidance behaviors. Previous research has established the link between discrimination and internalized stigma (Ritzier et al, 2003; Luoma et al, 2008; Wong-Padoongpatt et al, 2022). It is possible that internalized stigma about part of one's identity may increase the likelihood of and intensify global negative self-evaluations and feelings of inferiority even in situations where discrimination is not present. Feelings of inferiority, in turn, lead to more avoidance behaviors. Additionally, members of minority groups have frequently reported using avoidance to hide their stigmatized identity and protect themselves (Kalichman et al, 2021; Monchalin et al, 2020). Hiding one's stigmatized identity allows the momentary protection of one's positive social image in the specific situation. Similarly, avoidance behaviors after one's negative behaviors allow for the momentary protection of one's positive social image.

Adding to the Complexity

In line with Ford et al's (2019) theory, participants pursued multiple regulation strategies in response to experiencing shame and/or guilt. Most participants reported having used regulation strategies that may appear to be contradictory. For example, most participants (63.3%) both engaged in avoidance behaviors and reached out to others. Furthermore, our findings suggest a more complex picture between urges and behaviors. Indeed, a high number of participants (81.8%) who did not report experiencing the urge to avoid engaged in avoidance behaviors, while a subset of participants (18.3%) who experienced the urge to avoid reached out to others about the event. Participants' behaviors are likely to stem from a complex decision-making process, both in the moment and over time, of which urges associated with specific emotions are only one component. The use of some avoidance behaviors by participants who

reported no urges to avoid further suggests that avoidance may be selected for additional or other reasons than the emotion's action tendencies. Further research is needed to further explore: (a) how behavioral urges are coped with and weighted against competing information, and (b) decision-making used to engage in avoidance behaviors following experiencing of shame and/or guilt.

Limitations

This study has several limitations. It is a cross-sectional study reliant on participants' recall of an event eliciting shame or guilt. Findings should be viewed as preliminary and subject to confirmation in daily diary studies or other studies using longitudinal designs. No model we tested had all fit indices within the usually required cut-off, although the bifactor model was deemed satisfactory and the best fitting model. Our analyses point to a need to further investigate the SSGS' psychometric properties and the structure of self-conscious emotions. Instruments assessing multidimensional constructs may benefit from different sampling procedures or model specifications (Eik et al, 2017). They may alternatively benefit from approaches that are more flexible than confirmatory factor analyses such as bifactor exploratory SEM models for confirmatory purposes (Morin et al, 2016). Future studies also need to continue investigating the role of feelings of inferiority, their relationship to shame and guilt as well as whether shame and guilt are truly two discrete emotions. Given the association between feelings of inferiority and lifetime discrimination, it may be useful to confirm measurement invariance of the SSGS across groups of individuals who have experienced low versus high levels of discrimination within their lifetime. The present study also does not account for the time elapsed between participants' behaviors and the recalled event. It also includes only a limited number of behavioral outcomes and does not investigate the reasons for participants' choice to engage in each behavior (e.g.,

previous coping strategy was not successful in reducing self-conscious affect). Furthermore, the study sample was selected to share the cultural background of the main theorists about shame and guilt in psychology (Western) and was limited in terms of its inclusion of older and less educated participants. Findings should be reproduced in samples with greater social (e.g., socio-economic status, etc.) and cultural variability. Additional work needs to be done on affective cognitive structures in other cultures and on their associated measures and measurement models.

Overall conclusion

Our findings point to the need to further revisit key assumptions in the study of self-conscious emotions. First, state shame and guilt, as frequently defined in Western psychology, may not be equivalent and discrete emotional experiences. Rather, those emotional experiences may consist of a common affective continuum (basic emotion of shame) through which two affective-cognitive structures (feelings of inferiority and guilt) are expressed to different degrees. Second, lifetime discrimination should be systematically included in the study of self-conscious emotions, due to its influence on feelings of inferiority and avoidance behaviors. Finally, additional research is needed to really address the complexity of participants' behavioral responses and their selection.

Chapter Five

General Conclusion

Shame is a powerful emotion focusing on (at least part of) the self and present across cultures. Shame is characterized by innate changes in facial and body posture (i.e., averted gaze, turning head down, hunched shoulders; Kemeny et al, 2004; Izzard, 1977b; Tomkins, 1963) and is frequently associated with an urge to withdraw (e.g., Tangney, 1996). It serves as an immediate, strong indicator of one's undesirability in the eyes of oneself or others (De Hooge, 2013) and may further provide information about unwanted variations in one's social rank within a group or society (Weisfeld & Dillon, 2012) or about one's risk of rejection (Gilbert, 2006). Despite being an internal state, shame's function is thus deeply relational.

While social constructionist accounts are frequently presented as being in opposition to the existence of innate processes, cultural and social influences are more likely to interact with and shape (e.g., constrain, increase) innate processes (Parkinson, 2012). Culture may deeply shape emotional experiences and their resolution through, for example, informing attentional processes, interpretation of bodily sensations and situations, the desirability and appropriateness of facial and bodily displays of emotions, action selection as well as both the nature and importance of other individuals' input (Boiger & Mesquita, 2012; Mesquita et al, 2017). Regardless of one's choice of methodology (i.e., quantitative or qualitative), culture is equally likely to deeply influence what researchers chose to focus on and the research process itself. Lewis (1971) and Tangney's (1995) guilt-shame distinction echoes cultural beliefs held in the United States (US) at the time of their work. Similarly, Chinese and Taiwanese authors' understanding of shame frequently reflects their own cultural frameworks (see earlier).

In much the same way, this dissertation would not have been possible in its current form without my own specific cultural locations. When it comes to shame, subtle differences already start to emerge between, for example, the US and Belgium or Spain. While shame is an unequivocally disliked and devalued emotional experience in the US (e.g., Tangney & Dearing, 2002), it is to some extent valued in Belgium (Belgian individualism emphasizes compromise, maintenance of interpersonal relations, and self-restraint, e.g., Boiger et al, 2018). Spanish culture emphasizes social connectedness, the respect of elders and traditions, and humility. Thus, Spanish individuals' understanding of shame may be influenced by those cultural goals. They are more likely to share feelings of shame, be attuned to the emotion's social impact and hold positive beliefs about the emotion (Fischer et al, 1999). The difference become even more striking between the US and Eastern cultures, or the US and Islam's view of the function and usefulness of shame. I found myself at the confluence of multiple narratives about shame. Being a francophone, born and raised in France – close to the Belgium border for the majority of my teenage years – in a Spanish family, who married a Pakistani immigrant and converted to Islam, the ways in which only one specific cultural lens took most of the space on the academic landscape became, over time, impossible to ignore. The most frequently cited (North American) literature on shame just seemed to, more often than not, miss or fail to be curious towards some aspects of emotional experience of shame that myself and those close to me were experiencing. The desire to argue for the "most right" definition of shame, though, faded over time to make way for another series of broader questions – questions that stopped pitting one culture against the other. Namely, I started to wonder whether we could better grasp the nuances between different conceptualizations of shame (and other self-conscious emotions such as guilt) and understand the benefits and drawbacks each may bring. What might we learn if we develop

nuanced, deep knowledge of culturally-embedded understandings of shame rather than always striving for the identification of the universal aspects of this emotional experience?

Shame: Innate and Socially Constructed

Shame, aside from its innate facial and bodily displays, seemed to share a unique function across cultural groups. Namely, shame provides individuals with feedback about how some behaviors, decisions or characteristics impacted the desirability of their identity (whether desirability for themselves, God or others). Shame is an emotion that shapes meaning-making processes when interpreting the potential long-lasting consequences of having or adopting specific characteristics. If put into questions, shame asks: what does it mean (within my own cultural and social context) for who I am to possess a specific quality? Or what does it mean (within my own cultural and social context) to engage in specific actions should they mean something about who I am?

However, different cultural groups have great variations in terms of how valuable they deem those questions to be, the degree to which they believe self-change is intrinsically possible and how one goes about repairing one's self or one's self-image. Paper one and two of this dissertation suggest that the degree to which shame is culturally valued has the potential to deeply influence individuals' understanding and processing of shame. In some cultures, the emotion is thought to fulfill an important role at the social and individual level. This translates in many ways. An example is how English offers only a limited number of words and concepts to describe shameful experiences, while individuals from China, Taiwan and Pakistan have a wider range of words and concepts to describe and classify types of shameful experiences. Pakistani immigrants to Canada had readily available, culturally defined, and nuanced conceptualizations of different types of shameful experiences (e.g., shame as way for self-improvement, shame as a

part of social control) they could immediately draw on when answering questions during the interview. It allowed them to more easily classify and assess their shameful experiences and respond to them (in so far as different coping strategies had also been culturally reinforced as the best way to respond for each type of shame). Strikingly, while some mentioned how painful feelings of shame can be, all participants emphasized the need to, when feeling ashamed, do a complete assessment of the situation (their actions, who was present, the actions of others, etc.) and not simply rely on how one feels. Shame was, thus, not only valued and worth looking into, it was also an emotional experience one could understand, assess and classify into different (culturally created) categories. Paper three suggests that the distinction between shame and guilt may be one of those, albeit Western, culturally created categories used to classify different instances of the basic emotion of shame. While the slightly different cognitions between shame and guilt have been heavily emphasized in the literature, there is preliminary evidence that they may share the same affective core when measured as states (i.e., in the moment emotional experiences).

Different concepts of the self may also deeply affect the meaning given to and processing of feelings of shame. Within the West, feelings of shame are usually understood and processed in the context of a self who is largely invariant, individualistic and hard (or at the very least takes work) to change. The self is not seen as being good or bad in and of itself. In China or Taiwan, individuals are more likely to understand the self as including others (e.g., immediate family), and naturally variable. Individuals are also more likely to put a greater value on group (over individual) success and extrinsic motivation. In Pakistan, individuals are also more likely to understand the self as including others, and – when ascribing to the Islamic faith – as needing to

be improved but intrinsically good. Shame due to its significance for and emphasis on the self cannot function without being impacted by culturally driven understandings of the self.

The inclusion of close others into one's sense of self not only potentially renders experiences of shame less solitary, it might influence how others respond to the ashamed individuals, who feels responsible to help the individual change themselves and how and to whom reparations should be made. Paper one and paper two both suggest that feelings of shame may become shared amongst family members and, when well regulated, lead close others to feel a sense of responsibility in helping the shamed individual make amends, restore a positive social image or more generally improve themselves. Thus, the ashamed individual may find natural allies to help with both emotion regulation and repairing the situation. Shame, in many cultures, is an experience located and understood within relationships (close others, social hierarchies, relationship to the divine). Those relationships deeply influence the meaning given to the situation and one's emotional reactions as well as coping strategies used. They may even provide the environment for shame to become a more consistently prosocial force.

A Muslim Pakistani immigrant to Canada who sees not only shame as valuable and understandable but also the self as intrinsically good and always reparable is likely to experience very different meta-cognitions and meta-emotions than a North-American individual of European descent who sees shame as unhelpful, maladaptive and hard to regulate and the self as hard to change. One may experience gratefulness (in so far as shame is a useful signal to become a more moral actor) in addition to feelings of shame while the other experiences despair or shame about their feelings of shame. Those emotions about emotions may come with additional behavioral urges, physical sensations and cognitions that significantly alter how feelings of shame are processed and their ultimate outcomes. Similarly, chronically experiencing

discrimination are likely to lead to differences in assessing the emotion, situation and potential behavioral responses.

Cultural and social contexts may also influence the likelihood of reparations successfully re-establishing a more positive social image. Stigma can powerfully influence the degree to which an individual is able to establish or re-establish a positive or desirable social image in society. As a result, stigma and discrimination may have an important role to play in individuals' experiences of and with feelings of shame. Paper three suggests that having experienced higher levels of discrimination was associated with increased feelings of inferiority even when shame is not triggered by discrimination. Discrimination was additionally positively associated with individuals engaging in avoidance behaviors.

Implications

There is already a growing chorus of voices urging for more complex, contextually richer studies in the field of emotion and emotion regulation (e.g., Boiger & Mesquita, 2012; Bou Zeineddine & Leach, 2021; Ford et al, 2019; Hoemann & Barrett, 2019; Parkinson, 2012). Constructionist researchers (e.g., Boiger & Mesquita, 2012; Hoemann & Barrett, 2019; Parkinson, 2012) have provided ample evidence about the ways in which cultural practices may influence partner selection, DNA transcription and expression (e.g., Parkinson, 2012), development and moment-to-moment interactions for adults and children (e.g., Boiger & Mesquita, 2012; Hoemann & Barrett, 2019). Innate and cultural processes, far from being easily distinguishable, are emmeshed and deeply influencing one another. Additional authors have also urged the field of emotion research to increasingly consider the messiness and variability of human experience. At the individual level, Ford et al (2019) outlined the importance of understanding polyregulation (i.e., the use of multiple regulation goals present and strategies

used in a single emotional episode). At the system level, Bou Zeineddine and Leach (2021) also urged researchers to increasingly select research designs that allow the study of emergent, bidirectional associations and non-linear changes across differing levels of analyses (e.g., individuals, institutions, culture). Variations, rather than being seen as unwanted noise, need to acknowledge as meaningful cues and worthy of being included in theories (Boiger et al, 2018; Hoemann & Barrett, 2019). Embracing the study of heterogeneity is likely to ultimately result in both researchers and practitioners being increasingly capable of making sense and interpreting the heterogeneity inherent in our multicultural societies (Boiger et al, 2018).

Psychology has been deeply influenced by a search for universalisms and the need to produce reproducible research findings may at times lead to a narrowing of definitions and hypotheses. Cultures are partially stable and partially emergent processes (Buchanan et al, 2020). They evolve over time in sometimes dramatic ways, which may profoundly change what is being studied. Rather than an endpoint, I see the findings from this dissertation as an invitation to balance the search for universal truths with an exploration of unique qualitative (and potentially quantitative) differences between different cultural groups (and within cultural groups over time). Qualitative differences in worldviews (such as differences in definitions of the self, etc.) may lead to meaningful variations in individuals' emotional experiences, and their associated coping strategies and outcomes. Even variations present in only one cultural group may be informative and lead to a more nuanced understanding of shame and how social and cultural shifts may support or impair better regulation strategies.

References

Alvi, A. (2013). Concealment and revealment. *Current Anthropology*, 54(2), 177–199. https://doi.org/10.1086/669732

Bastian, B. (2013). Normative influences on secondary disturbance: The role of social expectancies. *Australian Psychologist*, 48(2), 85–93. https://doi.org/10.1111/ap.12005

Bedford, O. A. (2004). The individual experience of guilt and shame in Chinese culture. *Culture and Psychology*, 10(1), 29–52. https://doi.org/10.1177/1354067X04040929

Bedford, O., & Hwang, K. (2003). Guilt and shame in Chinese culture: A cross-cultural framework from the perspective of morality and identity. *Journal for the Theory of Social Behaviour*, 33(2), 127-144. https://doi.org/10.1111/1468-5914.00210

Bennett, D. S., Traub, K., Mace, L., Juarascio, A., & O'Hayer, C. V. (2016). Shame among people living with HIV: A literature review. *AIDS Care*, *28*(1), 87–91. https://doi-org/10.1080/09540121.2015.1066749

Beer, N., & Moneta, G. B. (2012). Coping and perceived stress as a function of positive metacognitions and positive metaemotions. *Individual Differences Research*, 10(2), 105–116.

Birks, M., Chapman, Y., & Francis, K. (2008). Memoing in qualitative research. *Journal of Research in Nursing*, 13(1), 68–75. https://doi.org/10.1177/1744987107081254

Bonifay, W., Lane, S. P., & Reise, S. P. (2017). Three Concerns With Applying a Bifactor Model as a Structure of Psychopathology. *Clinical Psychological Science*, 5(1), 184–186. https://doi.org/10.1177/2167702616657069

Boiger, M., Ceulemans, E., De Leersnyder, J., Uchida, Y., Norasakkunkit, V., & Mesquita, B. (2018). Beyond essentialism: Cultural differences in emotions revisited. *Emotion*, 18(8), 1142-1162. https://doi.org/10.1037/emo0000390

Boiger, M., & Mesquita, B. (2012). The construction of emotion in interactions, relationships, and cultures. *Emotion Review*, 4(3), 221–229. https://doi.org/10.1177/1754073912439765

Boiger, M., Mesquita, B., Uchida, Y., & Feldman Barrett, L. (2013). Condoned or condemned: The situational affordance of anger and shame in the United States and Japan. *Personality and Social Psychology Bulletin*, 39(4), 540-553. https://doi.org/10.1177/0146167213478201

Bos, A. E. R., Pryor, J. B., Reeder, G. D., & Stutterheim, S. E. (2013). Stigma: Advances in Theory and Research. *Basic and Applied Social Psychology*, 35(1), 1–9. https://doi.org/10.1080/01973533.2012.746147

Bou Zeineddine, F., & Leach, C. W. (2021). Feeling and thought in collective action on social issues: Toward a systems perspective. *Social and Personality Psychology Compass*, 15(7). https://doi.org/10.1111/spc3.12622

Buchanan, N. T., Rios, D., & Case, K. A. (2020). Intersectional cultural humility: Aligning critical inquiry with critical praxis in psychology. *Women & Therapy*, 43(3-4), 235-243. https://doi.org/10.1080/02703149.2020.1729469

Burgess, D. J., Ding, Y., Hargreaves, M., Ryn, M. V., & Phelan, S. (2008). The Association between Perceived Discrimination and Underutilization of Needed Medical and Mental Health Care in a Multi-Ethnic Community Sample. *Journal of Health Care for the Poor and Underserved*, 19(3), 894–911. https://doi.org/10.1353/hpu.0.0063

Bush, J., White, M., Kai, J., Rankin, J., & Bhopal, R. (2003). Understanding influences on smoking in Bangladeshi and Pakistani adults: Community based, qualitative study. *BMJ*, 326(7396), 962. https://doi.org/10.1136/bmj.326.7396.962

Brown, J. C. G., Cataldo, J. K., Orozco, N., Lisha, N. E., Hickman, N. J., III, & Prochaska, J. J. (2015). Validity and reliability of the Internalized Stigma of Smoking Inventory: An exploration of shame, isolation, and discrimination in smokers with mental health diagnoses. *The American Journal on Addictions*, 24(5), 410–418. https://doi-org/10.1111/ajad.12215

Cândea, D.-M., & Szentagotai-Tăta, A. (2018). Shame-proneness, guilt-proneness and anxiety symptoms: A meta-analysis. *Journal of Anxiety Disorders*, 58, 78–106. https://doi-org.ezproxy.library.uvic.ca/10.1016/j.janxdis.2018.07.005

Carter, R. T., & Forsyth, J. (2010). Reactions to racial discrimination: Emotional stress and help-seeking behaviors. *Psychological Trauma: Theory, Research, Practice, and Policy*, 2(3), 183–191. https://doi-org/10.1037/a0020102

Case, K. A. (2015). White practitioners in therapeutic ally-ance: An intersectional privilege awareness training Model. *Women & Therapy*, 38(3–4), 263–278. https://doi.org/1059209

Cavalera, C., Pepe, A., Zurloni, V., Diana, B., & Realdon, O. (2017). A short version of the State Shame and Guilt Scale (SSGS-8). *TPM-Testing, Psychometrics, Methodology in Applied Psychology*, 24(1), 99–106.

Chakraborty, A., King, M., Leavey, G., & McKenzie, K. (2011). Perceived racism, medication adherence, and hospital admission in African-Caribbean patients with psychosis in the United Kingdom. *Social Psychiatry and Psychiatric Epidemiology: The International*

Journal for Research in Social and Genetic Epidemiology and Mental Health Services, 46(9), 915–923. https://doi-org/10.1007/s00127-010-0261-8

Charmaz, K. (2014). *Constructing grounded theory* (2nd ed). Sage.

Charmaz, K. (2017). Constructivist grounded theory. *The Journal of Positive Psychology*, 12(3), 299–300. https://doi.org/10.1080/17439760.2016.1262612

Charmaz, K., & Thornberg, R. (2020). The pursuit of quality in grounded theory. *Qualitative Research in Psychology*, 1–23. https://doi.org/10.1080/14780887.2020.1780357

Chase, E., & Walker, R. (2013). The co-construction of shame in the context of poverty: Beyond a threat to the social bond. *Sociology*, 47(4), 739-754. https://doi.org/10.1177/0038038512453796

Chen, F. F. (2008). What happens if we compare chopsticks with forks? the impact of making inappropriate comparisons in cross-cultural research. *Journal of Personality and Social Psychology*, 95(5), 1005-1018. https://doi.org/10.1037/a0013193

Chen, F. F., West, S. G., & Sousa, K. H. (2006). A Comparison of Bifactor and Second-Order Models of Quality of Life. Multivariate Behavioral Research, 41(2), 189–225. https://doi-org.ezproxy.library.uvic.ca/10.1207/s15327906mbr4102_5

Chen, X. (2002). Social control in China: Applications of the labeling theory and the reintegrative shaming theory. *International Journal of Offender Therapy and Comparative Criminology*, 46(1), 45-63. https://doi.org/10.1177/0306624X02461004

Chenitz, W. C., & Swanson, J. M. (1986). Qualitative research using grounded theory. In W. C. Chenitz & J. M. Swanson (Eds.), *From practice to grounded theory* (pp. 3–15). Addison-Wesley.

Coderre, F., Mathieu, A., & St-Laurent, N. (2004). Comparison of the quality of qualitative data obtained through telephone, postal and email surveys. *International Journal of Market Research*, 46(3), 349–357. https://doi.org/10.1177/147078530404600303

Collardeau, F., Bin Aftab, M. U., Jibeen, T., & Woodin, E. (2021). Pakistani immigrants' nuanced beliefs about shame and its regulation. *International Perspectives in Psychology : Research, Practice, Consultation*, 10(1), 25–38. https://doi.org/10.1027/2157-3891/a000004

Collardeau, F., Dupuis, H. E., & Woodin, E. (2022). The role of culture and social threats in constructing shame: Moving beyond a western lens. *Canadian Psychology = Psychologie Canadienne*. https://doi.org/10.1037/cap0000329

Cook, C. (2012). Email interviewing: Generating data with a vulnerable population. *Journal of Advanced Nursing*, 68(6), 1330–1339. https://doi.org/10.1111/j.1365-2648.2011.05843.x

Cotter, A. (2022). Experiences of discrimination among the Black and Indigenous populations in Canada, 2019. *Juristat*, 1–14.

Cunningham, S. D., Kerrigan, D. L., Jennings, J. M., & Ellen, J. M. (2009). Relationships between perceived STD-related stigma, STD-related shame and STD screening among a household sample of adolescents. *Perspectives on Sexual and Reproductive Health*, 41(4), 225–230. https://doi.org/10.1363/4122509

De Hooge, I. E., Zeelenberg, M., & Breugelmans, S. M. (2011). A functionalist account of shame-induced behaviour. *Cognition and Emotion*, 25(5), 939–946. https://doi.org/10.1080/02699931.2010.516909

De Hooge, I. E. (2013). Moral emotions and prosocial behaviour: It may be time to change our view of shame and guilt. InC. Mohiyeddini, M. Eysenck, & S. Bauer (Eds.), *Handbook of*

psychology of emotions: Recent theoretical perspectives and novel empirical findings (Vol. 2, pp. 255–275). Nova Science Publishers.

de Hooge, I. E., Zeelenberg, M., & Breugelmans, S. M. (2011). A functionalist account of shame-induced behaviour. *Cognition and Emotion,* 25(5), 939–946. https://doi.org/10.1080/02699931.2010.516909

De Leersnyder, J., Mesquita, B., & Kim, H. S. (2011). Where do my emotions belong? A study of immigrants' emotional acculturation. *Personality & Social Psychology Bulletin*, 37(4), 451–463. https://doi.org/10.1177/0146167211399103

De Rivera, J. (2012). Emotions as transformational structures. *Emotion Review*, 4(3), 301-302. https://doi.org/10.1177/1754073912439780

Di Sarno, M., Di Pierro, R., & Madeddu, F. (2019). Shame- and guilt-proneness in an italian sample: Latent structure and gender invariance of the personal feelings questionnaire-2 (pfq-2). *Current Psychology: A Journal for Diverse Perspectives on Diverse Psychological Issues*. https://doi.org/10.1007/s12144-019-00570-w

Duncan, C., & Cacciatore, J. (2015). A systematic review of the peer-reviewed literature on self-blame, guilt, and shame. *Journal of Death and Dying*, 71(4), 312-342. https://doi.org/10.1177/0030222815572604

Egan, J., Chenoweth, L., & McAuliffe, D. (2006). Email-facilitated qualitative interviews with traumatic brain injury survivors: A new and accessible method. *Brain Injury*, 20(12), 1283–1294. https://doi.org/10.1080/02699050601049692

Eid, M., Geiser, C., Koch, T., & Heene, M. (2017). Anomalous Results in G-Factor Models: Explanations and Alternatives. *Psychological Methods*, 22(3), 541–562. https://doi.org/10.1037/met0000083

Elison, J. (2005). Shame and guilt: A hundred years of apples and oranges. *New Ideas in Psychology*, 23(1), 5–32. https://doi.org/10.1016/j.newideapsych.2005.07.001

Else-Quest, N. M., LoConte, N. K., Schiller, J. H., & Hyde, J. S. (2009). Perceived stigma, self-blame, and adjustment among lung, breast and prostate cancer patients. *Psychology & Health*, 24(8), 949–964. https://doi-org/10.1080/08870440802074664

Fazeli, P. L., Turan, J. M., Budhwani, H., Smith, W., Raper, J. L., Mugavero, M. J., & Turan, B. (2017). Moment-to-moment within-person associations between acts of discrimination and internalized stigma in people living with HIV: An experience sampling study. *Stigma and Health*, 2(3), 216–228. https://doi-org/10.1037/sah0000051

Ferguson, Y. L., Ferguson, K. T., & Ferguson, G. M. (2017). I am AmeriBritSouthAfrican-Zambian: Multidimensional remote acculturation and well-being among urban zambian adolescents. *International Journal of Psychology*, 52(1), 67-76. https://doi.org/10.1002/ijop.12191

Finlay, L. (2002). Negotiating the swamp: The opportunity and challenge of reflexivity in research practice. *Qualitative Research*, 2(2), 209–230. https://doi.org/10.1177/146879410200200205

Fischer, A. H., Manstead, A. S. R, & Rodriguez Mosquera, P. M. (1999). The role of honour-related vs. individualistic values in conceptualizing pride, shame, and anger: Spanish and Dutch cultural prototypes. *Cognition and Emotion*, 13(2), 149-179.

Ford, B. Q., Gross, J. J., & Gruber, J. (2019). Broadening Our Field of View: The Role of Emotion Polyregulation. *Emotion Review*, 11(3), 197–208. https://doi.org/10.1177/1754073919850314

Fortenberry, J. D., McFarlane, M., Bleakley, A., Bull, S., Fishbein, M., Grimley, D. M., Malotte, C.K., & Stoner, B. P. (2002). Relationships of stigma and shame to gonorrhea and HIV screening. *American Journal of Public Health*, 92(3), 378-381. https://doi.org/10.2105/AJPH.92.3.378

Frankfurt, S. B., DeBeer, B. B., Morissette, S. B., Kimbrel, N. A., La Bash, H., & Meyer, E. C. (2018). Mechanisms of moral injury following military sexual trauma and combat in post-9/11 US war veterans. *Frontiers in Psychiatry*, 9. https://doi-org/10.3389/fpsyt.2018.00520

Fung, H. (1999). Becoming a moral child: The socialization of shame among young chinese children. *Ethos*, 27(2), 180-209. https://doi.org/10.1525/eth.1999.27.2.180

Furukawa, E., Tangney, J., & Higashibara, F. (2012). Cross-cultural continuities and discontinuities in shame, guilt, and pride: A study of children residing in japan, korea and the USA. *Self and Identity*, 11(1), 90-113. https://doi.org/10.1080/15298868.2010.512748

Garcia, A. F., Acosta, M., Pirani, S., Edwards, D., & Osman, A. (2017). Factor structure, factorial invariance, and validity of the multidimensional shame-related response inventory-21 (MSRI-21). *Journal of Counseling Psychology*, 64(2), 233-246. https://doi.org/10.1037/cou0000192

Gaudet, C. M., Sowers, K. M., Nugent, W. R., & Boriskin, J. A. (2016). A review of PTSD and shame in military veterans. *Behavior in the Social Environment*, 26(1), 56-68. https://doi.org/10.1080/10911359.2015.1059168

Gausel, N., & Leach, C. W. (2011). Concern for self-image and social image in the management of moral failure: Rethinking shame. *European Journal of Social Psychology*, 41(4), 468–478. https://doi.org/10.1002/ejsp.803

Gergen, K. J., Josselson, R., & Freeman, M. (2015). The promises of qualitative inquiry. *The American Psychologist*, 70(1), 1-9. https://doi.org/10.1037/a0038597

Gilbert, P. (2003). Evolution, social roles, and the differences in shame and guilt. *Social Research*, 70(4), 1205-1230.

Gilbert, P. (2006). A biopsychosocial and evolutionary approach to formulation with a special focus on shame. In N. Tarrier (Ed.), *Case formulation in cognitive behavior therapy: The treatment of challenging and complex cases* (pp. 81–112). Routledge.

Gilbert, P. (2007). The evolution of shame as a marker for relationship security: A biopsychosocial approach. In J. L. Tracy, R. W. Robins,& J. P. Tangney (Eds.), *The self-conscious emotions: Theory and research* (pp. 283–309). Guillford Press.

Giner-Sorolla, R., Piazza, J., & Espinosa, P. (2011). What do the TOSCA guilt and shame scales really measure: Affect or action? *Personality and Individual Differences*, 51(4), 445–450. https://doi.org/10.1016/j.paid.2011.04.010

Godley, J. (2018). Everyday Discrimination in Canada: Prevalence and Patterns. *Canadian Journal of Sociology*, 43(2), 111–142. https://doi.org/10.29173/cjs29346

Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Englewood Cliffs, N.J: Prentice-Hall.

Gottman, J., Katz, L., & Hooven, C. (1996). Parental meta-emotion philosophy and the emotional life of families: Theoretical models and preliminary data. *Journal of Family Psychology*, 10(3), 243-268. https://doi.org/10.1037//0893-3200.10.3.243

Gross, K., & Allan, S. (2009). Shame, pride and eating disorders. *Clinical Psychology and Psychotherapy*, 16, 303-316. https://doi.org/10.1002/cpp.627

Hamilton, R. J., & Bowers, B. J. (2006). Internet recruitment and e-mail interviews in qualitative studies. *Qualitative Health Research*, 16(6), 821–835. https://doi.org/10.1177/1049732306287599

Haslam, N., & Bornstein, B. H. (1996). Envy and jealousy as discrete emotions: A taxometric analysis. *Motivation and Emotion*, 20(3), 255–272. https://doi.org/10.1007/BF02251889

Heggeness, L. F., Brandt, C. P., Paulus, D. J., Lemaire, C., & Zvolensky, M. J. (2017). Stigma and disease disclosure among HIV+ individuals: The moderating role of emotion dysregulation. *AIDS Care*, 29(2), 168–176. https://doi.org/10.1080/09540121.2016.1204419

Henrich, J., Heine, S. J., & Norenzayan, A. (2010). The weirdest people in the world? *Behavioral and Brain Sciences*, 33(2–3), 61–83. https://doi.org/10.1017/S0140525X0999152X

Ho, D. Y., Fu, W., & Ng, S. M. (2004). Guilt, shame and embarrassment: Revelations of face and self. *Culture and Psychology*, 10(1), 64–84. https://doi.org/10.1177/1354067X04044166

Ho, P., & Goh, E. C. L. (2017). How HIV patients construct liveable identities in a shame based culture: The case of Singapore. *International Journal of Qualitative Studies on Health and Well-Being*, 12(1). https://doi.org/10.1080/17482631.2017.1333899

Hoemann, K., & Feldman Barrett, L. (2019). Concepts dissolve artificial boundaries in the study of emotion and cognition, uniting body, brain, and mind. *Cognition and Emotion*, 33(1), 67–76. https://doi.org/10.1080/02699931.2018.1535428

Hong, G. (2004). Emotions in culturally-constituted relational worlds. *Culture & Psychology*, 10(1), 53-63. https://doi.org/10.1177/1354067X04044165

Hu, L. & Bentler, P.M. (1999). Cutoff criteria for fir indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling: A Multidisciplinary Journal*, 6, 1-55. doi:10.1080/10705519909540118

Ivey, G., & Sonn, C. (2019). A psychosocial study of guilt and shame in white South African migrants to Australia. *Qualitative Psychology*, 7(1), 114-130. https://doi.org/10.1037/qup0000133

Izard, C. E. (2007). Basic emotions, natural kinds, emotion schemas, and a new paradigm. *Perspectives on Psychological Science*, 2(3), 260-280. https://doi.org/10.1111/j.1745-6916.2007.00044.x

Izard, C.E. (1977a). Guilt, Conscience, and Morality. In: *Human Emotions. Emotions, Personality, and Psychotherapy*. Springer, Boston, MA. https://doi.org/10.1007/978-1-4899-2209-0_16

Izard, C.E. (1977b). Shame and Shyness. In: *Human Emotions. Emotions, Personality, and Psychotherapy.* Springer, Boston, MA. https://doi.org/10.1007/978-1-4899-2209-0_15

James, N., & Busher, H. (2006). Credibility, authenticity and voice: Dilemmas in online interviewing. *Qualitative Research*, 6(3), 403–420. https://doi.org/10.1177/1468794106065010

Jamil, U. (2014). National minority and racialized minorities: The case of Pakistanis in Quebec. *Ethnic and Racial Studies*, 37(13), 2322–2339. https://doi.org/10.1080/01419870.2013.814801

Jibeen, T., & Khalid, R. (2010a). Development and preliminary validation of multidimensional acculturative stress scale for Pakistani immigrants in Toronto, Canada. *International*

Journal of Intercultural Relations, 34(3), 233–243. https://doi.org/10.1016/j.ijintrel.2009.09.006

Jibeen, T., & Khalid, R. (2010b). Predictors of psychological wellbeing of Pakistani immigrants in Toronto, Canada. *International Journal of Intercultural Relations*, 34(5), 452–464. https://doi.org/10.1016/j.ijintrel.2010.04.010

Jorgensen, T.D., Pornprasertmanit, S., Schoemann, A.M., & Rosseel, Y. (2018) *Sem tools.* R Package version 0.5-1

Kalichman, S., Mathews, C., El-Krab, R., Banas, E., & Kalichman, M. (2021). Forgoing antiretroviral therapy to evade stigma among people living with HIV, Cape Town, South Africa. *Journal of Behavioral Medicine*, 44(5), 653–661. https://doi-org/10.1007/s10865-021-00212-2

Keen, N., George, D., Scragg, P., & Peters, E. (2017). The role of shame in people with a diagnosis of schizophrenia. *British Journal of Clinical Psychology*, 56(2), 115-129. https://doi.org/10.1111/bjc.12125

Kemeny, M. E., Gruenewald, T. L. & Dickerson, S. S. (2004). Shame as the Emotional Response to Threat to the Social Self: Implications for Behavior, Physiology, and Health. *Psychological Inquiry*, 15(2), 153–160.

Kennedy, A. C., & Prock, K. A. (2018). "I still feel like I am not normal": A review of the role of stigma and stigmatization among female survivors of child sexual abuse, sexual assault, and intimate partner violence. *Trauma, Violence, & Abuse*, 19(5), 512-527. https://doi.org/10.1177/1524838016673601

Khan, S., & Watson, J. C. (2005). The Canadian immigration experiences of Pakistani women: Dreams confront reality. *Counselling Psychology Quarterly*, 18(4), 307–317. https://doi.org/10.1080/09515070500386026

Kim, P. Y., Kendall, D. L., & Chang, E. S. (2016). Emotional self-control, interpersonal shame, and racism as predictors of help-seeking attitudes among Asian Americans: An application of the intrapersonal-interpersonal-sociocultural framework. *Asian American Journal of Psychology*, 7(1), 15–24. https://doi.org/10.1037/aap0000032

Kim, S., Thibodeau, R., & Jorgensen, R. S. (2011). Shame, guilt, and depressive symptoms: A meta-analytic review. *Psychological Bulletin*, 137(1), 68–96. https://doi.org/10.1037/a0021466

Kirchner, A., Boiger, M., Boiger, M., Uchida, Y., Norasakkunkit, V., Verduyn, P., & Mesquita, B. (2018). Humiliated fury is not universal: The co-occurrence of anger and shame in the United States and Japan. *Cognition and Emotion*, 32(6), 1317-1328. https://doi.org/10.1080/02699931.2017.1414686

Kirmayer, L. J. (2007). Psychotherapy and the Cultural Concept of the Person. *Transcultural Psychiatry*, 44(2), 232–257. https://doi.org/10.1177/1363461506070794

Kitayama, S., & Masuda, T. (1995). Reappraising cognitive appraisal from a cultural perspective. *Psychological Inquiry*, 6(3), 217-223. https://doi.org/10.1207/s15327965pli0603_6

Lancaster, S. L. (2018). Negative outcomes after morally injurious experiences: A replication and extension. *Psychological Trauma: Theory, Research, Practice, and Policy*, 10(4), 456–462. https://doi-org/10.1037/tra0000341

Lane, A. M., Beedie, C. J., Devonport, T. J., & Stanley, D. M. (2011). Instrumental emotion regulation in sport: Relationships between beliefs about emotion and emotion regulation strategies used by athletes. *Scandinavian Journal of Medicine & Science in Sports*, 21(6), e445–e451. https://doi.org/10.1111/j.1600-0838.2011.01364.x

Leach, C. W., & Cidam, A. (2015). When is shame linked to constructive approach orientation? A meta-analysis. *Journal of Personality and Social Psychology*, 109(6), 983–1002. https://doi.org/10.1037/pspa0000037

Leach, C. W. (2016). The Meta-Theory of Examining Emotion in Social Relationships. *Psychological Inquiry*, 27(2), 113–116. https://doi.org/10.1080/1047840X.2016.1162129

Leach, C.W., Kee, K., Kenny, D.A., & Cidam, A. (2023) Difficulties in distinguishing correlated constructs: The example of guilt and shame. *Unpublished Manuscript*

Leary, M. R. (2007). How the self became involved in affective experience: Three sources of self-reflective emotions. In J. L. Tracy, R. W. Robins, & J. P. Tangney (Eds.), *The self-conscious emotions: Theory and research* (pp. 38–52). Guilford Press.

Leeming, D., & Boyle, M. (2004). Shame as a social phenomenon: A critical analysis of the concept of dispositional shame. *Psychology and Psychotherapy: Theory, Research and Practice*, 77(Pt 3), 375–396. https://doi.org/10.1348/1476083041839312

Lewis, H. B. (1971). *Shame and guilt in neurosis*. New York: International Universities Press.

Li, J., Wang, L., & Fischer, K. (2004). The organisation of Chinese shame concepts? *Cognition & Emotion*, 18(6), 767-797. https://doi.org/10.1080/02699930341000202

Li, L., Lin, C., Wu, Z., Wu, S., Rotheram-Borus, M. J., Detels, R., & Jia, M. (2007). Stigmatization and shame: Consequences of caring for HIV/AIDS patients in China. *AIDS Care*, 19(2), 258-263. https://doi.org/10.1080/09540120600828473

Li, C.-H. (2016). Confirmatory factor analysis with ordinal data: Comparing robust maximum likelihood and diagonally weighted least squares. *Behavior Research Methods*, 48(3), 936–949. https://doi.org/10.3758/s13428-015-0619-7

Li, C.-H. (2021). Statistical estimation of structural equation models with a mixture of continuous and categorical observed variables. *Behavior Research Methods*, 53(5), 2191–2213. https://doi.org/10.3758/s13428-021-01547-z

Lickel, B., Kushlev, K., Savalei, V., Matta, S., & Schmader, T. (2014). Shame and the motivation to change the self. *Emotion*, 14(6), 1049–1061. https://doi.org/10.1037/a0038235

Liem, R. (1997). Shame and guilt among first-and second-generation Asian Americans and European Americans. *Journal of Cross-Cultural Psychology*, 28(4), 365-392. https://doi.org/10.1177/0022022197284001

Linville, P. W. (1987). Self-complexity as a cognitive buffer against stress-related illness and depression. *Journal of Personality and Social Psychology*, 52(4), 663-676. https://doi.org/0022-35 M/87/S00.7J

Luoma, J. B., Chwyl, C., & Kaplan, J. (2019). Substance use and shame: A systematic and meta-analytic review. *Clinical Psychology Review*, 70, 1-12. https://doi.org/10.1016/j.cpr.2019.03.002

Luoma, J. B., Kulesza, M., Hayes, S. C., Kohlenberg, B., & Larimer, M. (2014). Stigma predicts residential treatment length for substance use disorder. *The American Journal of Drug and Alcohol Abuse*, 40(3), 206-212. https://doi.org/10.3109/00952990.2014.901337

Luoma, J., Guinther, P., Potter, J., & Cheslock, M. (2017). Experienced-based versus scenario-based assessments of shame and guilt and their relationship to alcohol consumption and

problems. *Substance use & Misuse*, 52(13), 1692-1700. https://doi.org/10.1080/10826084.2017.1305416

Luoma, J. B., Kohlenberg, B. S., Hayes, S. C., Bunting, K., & Rye, A. K. (2008). Reducing self-stigma in substance abuse through acceptance and commitment therapy: Model, manual development, and pilot outcomes. *Addiction Research & Theory*, 16(2), 149–165. https://doi.org/10.1080/16066350701850295

MacGinley, M., Breckenridge, J., & Mowll, J. (2019). A scoping review of adult survivors' experiences of shame following sexual abuse in childhood. *Health & Social Care in the Community*, 27(5), 1135-1146. https://doi.org/10.1111/hsc.12771

Madill, A., Jordan, A., & Shirley, C. (2000). Objectivity and reliability in qualitative analysis: Realist, contextualist and radical constructionist epistemologies. *British Journal of Psychology*, 91(1), 1–20. https://doi.org/10.1348/000712600161646

Manser, R., Cooper, M., & Trefusis, J. (2012). Beliefs about emotions as a metacognitive construct: Initial development of a selfreport questionnaire measure and preliminary investigation in relation to emotion regulation. *Clinical Psychology and Psychotherapy*, 19(3), 235–246. https://doi.org/10.1002/cpp.745

Mao-jin, W., & Jing-jing, D. (2009). Cultural norms informing other-conscious selfhood in Chinese relational worlds. *Culture & Psychology*, 15(1), 41-72. https://doi.org/10.1177/1354067X08096513

Maqsood, A. (2017). *The new Pakistani middle class.* Harvard University Press.

Marschall, D., Sanftner, J., & Tangney, J. P. (1994). *The State Shame and Guilt Scale.* Fairfax, VA: George Mason University

Mascolo, M. F. (1994). Toward a social constructivist psychology: The case of self-evaluative emotional development. *Journal of Constructivist Psychology*, 7(2), 87-106. https://doi.org/10.1080/10720539408405071

Mayer, C. H., & Viviers, R. (2017). Experiences of shame by race and culture: An exploratory study. *Journal of Psychology in Africa*, 27(4), 362-366. https://doi.org/10.1080/14330237.2017.1347759

McCoyd, J. L. M., & Kerson, T. S. (2006). Conducting intensive interviews using email. *Qualitative Social Work*, 5(3), 389–406. https://doi.org/10.1177/1473325006067367

McNeish, D., An, J., & Hancock, G. R. (2018). The thorny relation between measurement quality and fit index cutoffs in latent variable models. *Journal of Personality Assessment*, 100, 43-52. doi:10.1080/00223891.2017é1281286

Mesquita, D., Boiger, M., & De Leersnyder, J. (2017). Doing emotions: The role of culture in everyday emotions. *European Review of Social Psychology*, 28(1), 95-133. https://doi.org/10.1080/10463283.2017.1329107

Minkov, M., & Hofstede, G. (2012). Is national culture a meaningful concept?: Cultural values delineate homogeneous national clusters of in-country regions. *Cross-Cultural Research*, 46(2), 133-159. https://doi.org/10.1177/1069397111427262

Mirdal, G. M. (2006). Changing idioms of shame: Expressions of disgrace and dishonor in the narratives of Turkish women living in Denmark. *Culture & Psychology*, 12(4), 395-414. https://doi.org/10.1177/1354067X06067142

Monchalin, R., Smylie, J., & Nowgesic, E. (2020). “I Guess I Shouldn’t Come Back Here”: Racism and Discrimination as a Barrier to Accessing Health and Social Services for

Urban Métis Women in Toronto, Canada. *Journal of Racial and Ethnic Health Disparities*, 7(2), 251–261. https://doi.org/10.1007/s40615-019-00653-1

Morin, A. J. S., Arens, A. K., & Marsh, H. W. (2016). A Bifactor Exploratory Structural Equation Modeling Framework for the Identification of Distinct Sources of Construct-Relevant Psychometric Multidimensionality. *Structural Equation Modeling*, 23(1), 116–139. https://doi.org/10.1080/10705511.2014.961800

Naeem, F., Phiri, P., Munshi, T., Rathod, S., Ayub, M., Gobbi, M., & Kingdon, D. (2015). Using cognitive behaviour therapy with South Asian Muslims: Findings from the culturally sensitive CBT project. *International Review of Psychiatry*, 27(3), 233–246. https://doi.org/10.3109/09540261.2015.1067598

Neville, S., Adams, J., & Cook, C. (2016). Using internet-based approaches to collect qualitative data from vulnerable groups: Reflections from the field. *Contemporary Nurse*, 52(6), 657–668. https://doi.org/10.1080/10376178.2015.1095056

Nathanson, D. L. (1992). *Shame and pride: Affect, sex and the birth of the self*. New York: W.W. Norton & Company.

Norman, E., & Furnes, B. (2016). The concept of "Metaemotion": What is there to learn from research on metacognition? *Emotion Review*, 8(2), 187-193. https://doi.org/10.1177/1754073914552913

Parkinson, B. (2012). Piecing together emotion: Sites and time-scales for social construction. *Emotion Review*, 4(3), 291–298. https://doi.org/10.1177/1754073912439764

Poon, J. A., Panza, E. A., Selby, E., & Feinstein, B. A. (2022). Lifetime and daily weight stigma among higher weight sexual minority women: Links to daily weight-based concerns, avoidance, and negative affect. *Stigma and Health.* https://doi-org/10.1037/sah0000421

Qulsoom, I. (2005). The Islamic concept of the self. *Counselling Psychology Review*, 20(3), 2–10.

R Core Team (2019). *R: A Language and Environment for Statistical Computing*. R Foundation for Statistical Computing, Austria. https://www.R-project.org/

Revelle, W. (2018). *psych: Procedures for Psychological, Psychometric, and Personality Research*. Northwestern University, Evanston, Illinois. R package version 1.8.12, https://CRAN.R-project.org/package=psych.

Ritsher, J.B., Otilingam, P. G., & Grajales, M. (2003). Internalized stigma of mental illness: Psychometric properties of a new measure. *Psychiatry Research*, 121(1), 31–49. https://doi.org/10.1016/j.psychres.2003.08.008

Rodriguez Mosquera, P. M. (2018). Honor and harmed social-image Muslims' anger and shame about the cartoon controversy. *Cognition and Emotion*, 32(6), 1205-1219. https://doi.org/10.1080/02699931.2017.1394270

Rosseel, Y. (2012). lavaan: An R Package for Structural Equation Modeling. *Journal of Statistical Software*, 48(2), 1–36. http://www.jstatsoft.org/v48/i02/

Rousseau, C., & Jamil, U. (2008). Meaning of 9/11 for two Pakistani communities: From external intruders to the internalisation of a negative self-image. *Anthropology & Medicine*, 15(3), 163–174. https://doi.org/10.1080/13648470802355467

Rüsch, N., Corrigan, P. W., Bohus, M., Jacob, G. A., Brueck, R., & Lieb, K. (2007). Measuring shame and guilt by self-report questionnaires: A validation study. *Psychiatry Research*, 150(3), 313–325. https://doi.org/10.1016/j.psychres.2006.04.018

Ruscio, J., & Wang, S. B. (2017). *RTaxometrics: Taxometric analysis*. R package version 2.3.

Ruscio, J., Haslam, N., & Ruscio, A. M. (2012). *Introduction to the taxometric method: A practical guide.* Mahwah, NJ: Lawrence Erlbaum Associates.

Sakaluk, J. K. (2019). Expanding statistical frontiers in sexual science: Taxometric, invariance, and equivalence testing. *Journal of Sex Research*, 56(4-5), 475-510. doi:10.1080/00224499.2019.1568377

Sales, J. M., DiClemente, R. J., Rose, E. S., Wingood, G. M., Klein, J. D., & Woods, E. R. (2007). Relationship of STD-related shame and stigma to female adolescents' condom-protected intercourse. *Journal of Adolescent Health*, 40(6), 573.e1–573.e6. https://doi.org/10.1016/j.jadohealth.2007.01.007

Scheff, T. J. (2003). Shame in self and society. *Symbolic Interaction*, 26(2), 239-262. https://doi.org/10.1525/si.2003.26.2.239

Scheff, T. J. (2014). The ubiquity of hidden shame in modernity. *Cultural Sociology*, 8(2), 129-141. https://doi.org/10.1177/1749975513507244

Scheim, A. I., & Bauer, G. R. (2019). The intersectional discrimination index: Development and validation of measures of self-reported enacted and anticipated discrimination for intercategorical analysis. *Social Science & Medicine*, 226, 225-235. https://doi.org/10.1016/j.socscimed.2018.12.016

Schibalski, J., Müller, M., Ajdacic-Gross, V., Vetter, S., Rodgers, S., Oexle, N., Corrigan, P., Rössler, W., & Rüsch, N. (2017). Stigma-related stress, shame and avoidant coping reactions among members of the general population with elevated symptom levels. *Comprehensive Psychiatry*, 74, 224–230. https://doi.org/10.1016/j.comppsych.2017.02.001

Schlagintweit, H. E., Thompson, K., Goldstein, A. L., & Stewart, S. H. (2017). An investigation of the association between shame and problem gambling: The mediating role of maladaptive coping motives. *Journal of Gambling Studies*, 33(4), 1067–1079. https://doi-org/10.1007/s10899-017-9674-6

Schmader, T., Block, K., & Lickel, B. (2015). Social identity threat in response to stereotypic film portrayals: Effects on Self-Conscious emotion and implicit ingroup attitudes. *Journal of Social Issues*, 71(1), 54-72. https://doi.org/10.1111/josi.12096

Schmader, T., & Lickel, B. (2006). Stigma and shame: Emotional responses to the stereotypic actions of one's ethnic ingroup. In S. Levin, & C. van Laar (Eds.), *Stigma and group inequality: Social psychological perspectives* (pp. 261-285) Lawrence Erlbaum Associates Publishers.

Shahnawaz, S., & Malik, J. A. (2017). Assessing shame and guilt in adolescents: Translation and adaptation of test of self-conscious affect for adolescents (TOSCA-A). *Pakistan Journal of Psychological Research*, 32(1), 97.

Sheehy, K., Noureen, A., Khaliq, A., Dhingra, K., Husain, N., Pontin, E. E., Cawley, R., & Taylor, P. J. (2019). An examination of the relationship between shame, guilt and self-harm: A systematic review and meta-analysis. *Clinical Psychology Review*, 73. https://doi.org/10.1016/j.cpr.2019.101779

Sheikh, S. (2014). Cultural variations in shame's responses: A dynamic perspective. *Personality and Social Psychology Review*, 18(4), 387-403. https://doi.org/10.1177/1088868314540810

Sheikh, S., & Janoff-Bulman, R. (2010). The "shoulds" and "should nots" of moral emotions: A self-regulatory perspective on shame and guilt. *Personality and Social Psychology Bulletin*, 36(2), 213-224. https://doi.org/10.1177/0146167209356788

Shi-xu, S. (2009). Emotions of guilt and shame: Towards historical and intercultural perspectives on cultural psychology. *Culture and Psychology*, 15(3), 363–371. https://doi.org/10.1177/1354067X09337870

Sinha, M. (2017). Shame and psychotherapy: Theory, method and practice. In E. Vanderheiden, & C. Mayer (Eds.), *The value of shame: Exploring a health resource in cultural contexts* (pp. 251-275). Cham, Switzerland: Springer International Publishing.

Sonik-Włodarczyk, J., Grygiel, P., Anczewska, M., & Świtaj, P. (2022). How are various aspects of personal stigma related to secrecy about mental health problems among people diagnosed with psychotic disorders? A cross-sectional analysis. *Psychiatric Rehabilitation Journal*, 45(4), 336–342. https://doi.org/10.1037/prj0000530

Statistics Canada. (2011). *Immigration and ethnocultural diversity in Canada* (No. 99-010-X). https://www12.statcan.gc.ca/nhs-enm/2011/as-sa/99-010-x/99-010-x2011001-eng.cfm

Statistics Canada. (2017). *Focus on geography series, 2016 census.* (Statistics Canada Catalogue No. 98-404-X2016001). https://www12.statcan.gc.ca/census-recensement/2016/as-sa/fogsspg/Facts-can-eng.cfm?Lang=Eng&GK=CAN&GC=01&TOPIC=7

Stearns, P. N. (2016). Shame, and a challenge for emotions history. *Emotion Review*, 8(3), 197–206. https://doi.org/10.1177/1754073915588981

Stodolska, M., & Livengood, J. S. (2006). The influence of religion on the leisure behavior of immigrant Muslims in the United States. *Journal of Leisure Research*, 38(3), 293–320. https://doi.org/10.1080/00222216.2006.11950080

Subandi, M. A., & Good, B. J. (2018). Shame as a cultural index of illness and recovery from psychotic illness in java. *Asian Journal of Psychiatry*, 34, 33–37. https://doi.org/10.1016/j.ajp.2018.04.005

Sue, S., Cheng, J. K. Y., & Sue, L. (2011). Problems in generalizing research to other cultures. In J. C. Thomas & M. Hersen (Eds.), *Understanding research in clinical and counseling psychology* (pp. 355–376). Routledge/Taylor & Francis Group.

Sznycer, D., Tooby, J., Cosmides, L., Porat, R., Shalvi, S., & Halperin, E. (2016). Shame closely tracks the threat of devaluation by others, even across cultures. *Proceedings of the National Academy of Sciences*, 113(10), 2625-2630. https://doi.org/10.1073/pnas.1514699113

Taihara, Q., & Malik, J. A. (2016). Is it adaptive or maladaptive? Elaborating conditional role of shame and guilt in development of psychopathologies. *Psychological Studies*, 61(4), 331–339. https://doi.org/10.1007/s12646-016-0381-7

Tangney, J. P. (1996). Conceptual and methodological issues in the assessment of shame and guilt. *Behaviour Research and Therapy*, 34(9), 741–754. https://doi.org/10.1016/0005-7967(96)00034-4

Tangney, J. P. (1995). Shame and guilt in interpersonal relationships. In J. P. Tangney, & K. W. Fischer (Eds.), *Self-conscious emotions: The psychology of shame, guilt, embarrassment, and pride* (pp. 114-142). New York: The Guilford Press.

Tangney, J. P., Dearing, R. L., Wagner, P. E., & Gramzow, R. (2000). *The test of self-conscious affect-3 (TOSCA-3).* Fairfax, VA: George Mason University.

Tangney, J. P., and Dearing. R. L. (2002) *Shame and Guilt*, Guilford Publications. http://ebookcentral.proquest.com/lib/uvic/detail.action?docID=330591

Tangney, J. P., Stuewig, J., & Martinez, A. G. (2014). Two faces of shame: The roles of shame and guilt in predicting recidivism. *Psychological Science*, 25(3), 799–805. https://doi.org/10.1177/0956797613508790

Tangney, J. P., Stuewig, J., & Mashek, D. J. (2007). Moral emotions and moral behavior. *Annual Review of Psychology*, 58, 345–372. https://doi.org/10.1146/annurev.psych.56.091103.070145

Tangney, J. P., Stuewig, J., & Mashek, D. J. (2007). What's moral about the self-conscious emotions? In J. L. Tracy, R. W. Robins, & J. P. Tangney (Eds.), *The self-conscious emotions: Theory and research* (pp. 21–37). Guilford Press.

Tervalon, M., & Murray-Garc´ıa, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9(2), 117–125. https://doi.org/2010.023310.1353/hpu.2010.0233

Tignor, S. M., & Colvin, C. R. (2017). The interpersonal adaptiveness of dispositional guilt and shame: A meta-analytic investigation. *Journal of Personality*, 85(3), 341–363. https://doi.org/10.1111/jopy.12244

Tilghman-Osborne, C., Cole, D. A., & Felton, J. W. (2010). Definition and measurement of guilt: Implications for clinical research and practice. *Clinical Psychology Review*, 30(5), 536–546. https://doi-org.ezproxy.library.uvic.ca/10.1016/j.cpr.2010.03.007

Tomkins, S. S. (1981). The quest for primary motives: Biography and autobiography of an idea. *Journal of Personality and Social Psychology*, 41, 306–329.

Tong, E. M. W., Teo, A. Q. H., & Chia, D. Y. S. (2014). Ain't sure who to blame: Metacognitive influences on appraisal–emotion processes. *Motivation and Emotion*, 38(5), 673-686. https://doi.org/10.1007/s11031-014-9405-6

Tracy, J. L., & Matsumoto, D. (2008). The spontaneous expression of pride and shame: Evidence for biologically innate nonverbal displays. *Proceedings of the National Academy of Sciences*, 105, 11655–11660.

Tracy, J. L., & Robins, R. W. (2004). Putting the self into self-conscious emotions: A theoretical model. *Psychological Inquiry*, 15(2), 103–125. https://doi.org/10.1207/s15327965pli1502_01

Tracy, J. L. (2014). An evolutionary approach to understanding distinct emotions. *Emotion Review*, 6(4), 308–312. https://doi-org/10.1177/1754073914534478

Treloar, C., Jackson, L. C., Gray, R., Newland, J., Wilson, H., Saunders, V., Brener, L. (2016). Multiple stigmas, shame and historical trauma compound the experience of aboriginal australians living with hepatitis C. *Health Sociology Review*, 25(1), 18-32. https://doi.org/10.1080/14461242.2015.1126187

Tyler, I. (2018). Resituating Erving Goffman: From stigma power to black power. *The Sociological Review*, 66(4), 744-765. https://doi.org/10.1177/0038026118777450

Tyler, I., & Slater, T. (2018). Rethinking the sociology of stigma. *The Sociological Review*, 66(4), 721–743. https://doi.org/10.1177/0038026118777425

Uzogara, E. E. (2019). Who desires in-group neighbors? Associations of skin tone biases and discrimination with Latinas' segregation preferences. *Group Processes & Intergroup Relations*, 22(8), 1196–1214. https://doi.org/10.1177/1368430218788154

Vagos, P., Ribeiro da Silva, D., Brazão, N., Rijo, D., & Elison, J. (2019). Psychometric properties of the compass of shame scale: Testing for measurement invariance across community boys and boys in foster care and juvenile detentions facilities. *Child & Youth Care Forum,* 48(1), 93-110. https://doi.org/10.1007/s10566-018-9474-x

Vagos, P., Ribeiro da Silva, D., Brazão, N., Rijo, D., & Gilbert, P. (2016). Dimensionality and measurement invariance of the other as shamer scale across diverse adolescent samples. *Personality and Individual Differences*, 98, 289-296. https://doi.org/10.1016/j.paid.2016.04.046

Van Oudenhoven, J. P., & Ward, C. (2013). Fading majority cultures: The implications of transnationalism and demographic changes for immigrant acculturation. *Journal of Community & Applied Social Psychology*, 23(2), 81-97. https://doi.org/10.1002/casp.2132

Vandenberg, R. J., & Lance, C. E. (2000). A review and synthesis of the measurement invariance literature: Suggestions, practices, and recommendations for organizational research. *Organizational Research Methods,* 3(1), 4-70. https://doi.org/10.1177/109442810031002

Velotti, P., Elison, J., & Garofalo, C. (2014). Shame and aggression: Different trajectories and implications. *Aggression and Violent Behavior*, 19(4), 454–461. https://doi.org/10.1016/j.avb.2014.04.011

Volpone, S. D., & Avery, D. R. (2013). It's self defense: How perceived discrimination promotes employee withdrawal. *Journal of Occupational Health Psychology*, 18(4), 430–448. https://doi-org/10.1037/a0034016

Wang, W., Wang, B., Yang, K., Yang, C., Yuan, W., & Song, S. (2018). When project commitment leads to learning from failure: The roles of perceived shame and personal control. *Frontiers in Psychology*, 9. https://doi.org/10.3389/fpsyg.2018.00086

Wang, C., Li, J., Wan, X., Wang, X., Kane, R. L., & Wang, K. (2015). Effects of stigma on Chinese women's attitudes towards seeking treatment for urinary incontinence. *Journal of Clinical Nursing*, 24(7-8), 1112–1121. https://doi.org/10.1111/jocn.12729

Watcher, M., Ventriglio, A., & Bhugra, D. (2015). Micro-identities, adjustment and stigma. *International Journal of Social Psychiatry*, 61(5), 436-437. https://doi.org/10.1177/0020764015590080

Watson, S., Gomez, R., & Gullone, E. (2017). The shame and guilt scales of the test of self-conscious Affect–Adolescent (TOSCA-A): Factor structure, concurrent and discriminant validity, and measurement and structural invariance across ratings of males and females. *Assessment*, 24(4), 517-527. https://doi.org/10.1177/1073191115608942

Weisfeld, G. E., & Dillon, L. M. (2012). Applying the dominance hierarchy model to pride and shame, and related behaviors. *Journal of Evolutionary Psychology*, 10(1), 15–41. https://doi.org/10.1556/JEP.10.2012.1.2

Westermann, S., Rief, W., Euteneuer, F., & Kohlmann, S. (2015). Social exclusion and shame in obesity. *Eating Behaviors*, 17, 74-76. https://doi.org/10.1016/j.eatbeh.2015.01.001

Widen, S. C., Christy, A. M., Hewett, K., & Russell, J. A. (2011). Do proposed facial expressions of contempt, shame, embarrassment, and compassion communicate the predicted emotion? *Cognition & Emotion*, 25(5), 898-906. https://doi.org/10.1080/02699931.2010.508270

Wickham, H., Averick, M., Bryan, J., Chang, W., McGowan, L., François, R., Grolemund, G., Hayes, A., Henry, L., Hester, J., Kuhn, M., Pedersen, T., Miller, E., Bache, S., Müller, K., Ooms, J., Robinson, D., Seidel, D., Spinu, V., Takahashi, K., Vaughan, D., Wilke, C., Woo, K., & Yutani, H. (2019). Welcome to the tidyverse. *Journal of Open Source Software*, 4(43), 1686.

Wicker, F. W., Payne, G. C., & Morgan, R. D. (1983). Participant descriptions of guilt and shame. *Motivation and Emotion*, 7(1), 25–39. https://doi.org/10.1007/BF00992963

Williams, E. N., & Morrow, S. L. (2009). Achieving trustworthiness in qualitative research: A pan-paradigmatic perspective. *Psychotherapy Research*, 19(4–5), 576–582. https://doi.org/10.1080/10503300802702113

Wong, Y., & Tsai, J. (2007). Cultural models of shame and guilt. In J. L. Tracy, R. W. Robins & J. P. Tangney (Eds.), *The self-conscious emotions: Theory and research*. (pp. 283-309). New York: Guilford Press.

Wong-Padoongpatt, G., Barrita, A., & King, A. (2022). Perceived Everyday Discrimination Explains Internalized Racism during the COVID-19 Pandemic among Asians. *Behavioral Medicine*, 48(2), 109–119. https://doi.org/10.1080/08964289.2021.2015277

Wood, L., & Irons, C. (2017). Experienced stigma and its impacts in psychosis: The role of social rank and external shame. *Psychology and Psychotherapy: Theory, Research and Practice*, 90(3), 419-431. https://doi.org/10.1111/papt.12127

Zachar, P. (2012). A partial (and speculative) reconstruction of the biological basis of emotionality. *Emotion Review*, 4(3), 249-250. https://doi.org/10.1177/1754073912439783

Zhou, T., Wang, Y., & Yi, C. (2018). Affiliate stigma and depression in caregivers of children with autism spectrum disorders in china: Effects of self-esteem, shame and family functioning. *Psychiatry Research*, 264, 260-265. https://doi.org/10.1016/j.psychres.2018.03.071

Appendices

Qualitative Study

I would like to ask you some questions about how YOU feel and think about shame and the norms and beliefs about shame in Pakistan. Every country has a somewhat different understanding of shame, and there is even variability between families. So, there is really no right or wrong answer to any of the questions. You are welcome to answer the questions in any way that feels right for you and you are also welcome to digress (e.g. explain your answer by giving an example) and make comments – the questions are really like stepping stones to get a process started and to provide me with a bit of a framework. You can think of your responses to my questions like small essays – the more details you provide, the more I will be able to understand what you think about shame and what you are trying to say.

To ensure a higher protection of your data's confidentiality, please answer the questions within this word document (i.e. not directly in the email).

1. What word(s) do you use in your mother tongue to talk about shame?
    a. _____
    b. Please provide all the possible meanings of the word(s) used for shame in your mother tongue.
    c. How would you define shame, if you think about the meaning it has in your mother tongue and culture?
2. What, in your opinion, is the role of shame, if any?
3. Please describe a time when you or someone close to you experienced shame.
    a. Please discuss the reasons for feeling ashamed

   b. how it felt physically & your thoughts //how you think the person felt physically and their thoughts.
   c. how you/the person reacted
   d. what you/the person did next.
   e. Thinking back on it, is there anything you are interpreting differently now

4. What actions do you take if you are experiencing shame?
   a. During or immediately after experiencing the emotion, if any
   b. After some time has passed, if any
   c. Do people know you are feeling ashamed when you are experiencing this emotion? If yes, who knows?

SECOND SET OF QUESTIONS

5. You said the role of shame is_____. How do you know, if someone is using shame successfully, for example the next time that person is in the same situation?
6. What makes you feel ashamed?
7. Who would you talk to if you are feeling ashamed? Please elaborate on the reasons you would talk to them and what it would be like to discuss this experience with them.
   a. Can you tell someone close (e.g. partner, family member)?
   b. Can you tell someone you are not too familiar with (e.g. a counsellor, a new friend)?
8. If someone tells you they are feeling ashamed, how will you react?

THIRD SET OF QUESTIONS

9. What was your experience with shame when you were growing up? In general, how did your family react to shame?
10. How did your parents/parental figures react when you felt ashamed? When one of your parents/parental figure felt ashamed?
11. Do you think it is possible for someone to experience shame if someone has not done something wrong or is not acting against their value?
    a. If it is not shame, how would you call and describe what they are feeling?
12. Is there another emotion which is similar to shame (in how it feels or its outcome)? If yes, describe.

FOURTH SET OF QUESTIONS

13. Compared to now, did you experience shame and regulate it differently or similarly when you were younger (e.g. teenage years)? Please describe with a possible situation or examples.
14. What factors influence or explain how you think about shame today?
15. Did your immigration to Canada change how you understand shame? If yes, in what way?

Follow-up questions

(To be sent with the preliminary summary of findings)

Thank you so much again for participating in this study! It has been a pleasure to talk with you and get to know your thoughts and beliefs about shame. We are nearing the completion of the study and would like to get your thoughts about our findings. What fits for you? What does not fit? What would you say differently or modify?

[Summary of findings]

Question1: Email interviewing is a fairly new way to do an interview. What do you think of this way to do an interview?

Question2: Do you think you would have given the same answers in a face-to-face interview as in an email interview?

Quantitative Study

SSGS

The following are some statements which may or may not describe how you are feeling **right now**. Please rate each statement using the 5-point scale below. Remember to rate each statement based on how you are feeling **right at this moment**.

	Not feeling this way at all	Feeling this way somewhat	Feeling this way very strongly
1. I feel good about myself.	1 ------- 2 ------- 3 ------- 4 ------- 5		
2. I want to sink into the floor and disappear.	1 ------- 2 ------- 3 ------- 4 ------- 5		
3. I feel remorse, regret.	1 ------- 2 ------- 3 ------- 4 ------- 5		
4. I feel worthwhile, valuable.	1 ------- 2 ------- 3 ------- 4 ------- 5		
5. I feel small.	1 ------- 2 ------- 3 ------- 4 ------- 5		
6. I feel tension about something I have done.	1 ------- 2 ------- 3 ------- 4 ------- 5		
7. I feel capable, useful.	1 ------- 2 ------- 3 ------- 4 ------- 5		
8. I feel like I am a bad person.	1 ------- 2 ------- 3 ------- 4 ------- 5		
9. I cannot stop thinking about something bad I have done.	1 ------- 2 ------- 3 ------- 4 ------- 5		
10. I feel proud.	1 ------- 2 ------- 3 ------- 4 ------- 5		
11. I feel humiliated, disgraced.	1 ------- 2 ------- 3 ------- 4 ------- 5		
12. I feel like apologizing, confessing.	1 ------- 2 ------- 3 ------- 4 ------- 5		
13. I feel pleased about something I have done.	1 ------- 2 ------- 3 ------- 4 ------- 5		
14. I feel worthless, powerless.	1 ------- 2 ------- 3 ------- 4 ------- 5		
15. I feel bad about something I have done.	1 ------- 2 ------- 3 ------- 4 ------- 5		

Marschall, D. E., Sanftner, J. L., & Tangney, J. P. (1994)
The State Shame and Guilt Scale

Behavioral Outcomes

Please rate how frequently you engaged in the following behaviors, related to the situation you described above.

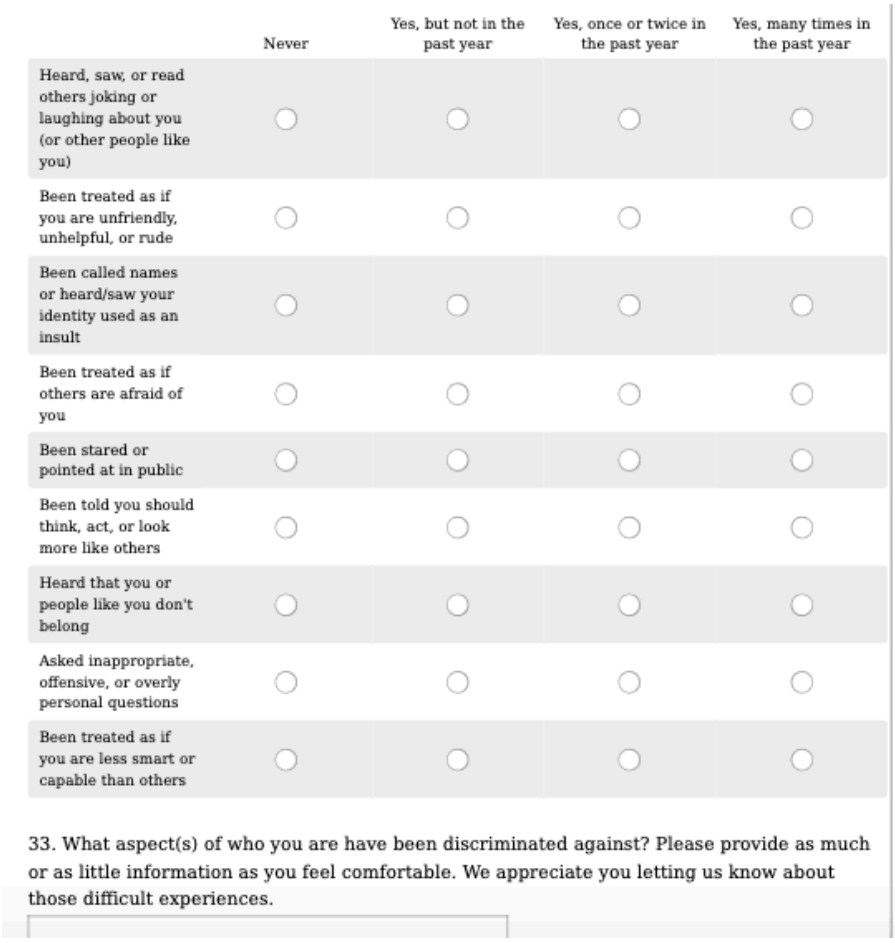
	1- Never	2- At least once	3- Infrequently	4 - Frequently
I talked to friends or family members to receive support and/or help	○	○	○	○
I talked to friends or family members so that they learn from my experience.	○	○	○	○
I apologized for what happened.	○	○	○	○
I worked on changing myself to become a better person.	○	○	○	○
I worked on improving certain aspects of myself so that it does not happen again.	○	○	○	○
I distanced myself as much as possible from the event.	○	○	○	○
I changed the topic of conversation when someone would talk about the event.	○	○	○	○

*Please note the item “I apologized for what happened” was not used in this conversation.

International Discrimination Index

Scheim, A. I., & Bauer, G. R. (2019). The intersectional discrimination index: Development and validation of measures of self-reported enacted and anticipated discrimination for intercategorical analysis. *Social Science & Medicine*, 226, 225-235. https://doi.org/10.1016/j.socscimed.2018.12.016

These questions are about experiences related to who you are. This includes both how you describe yourself and how others might describe you. For example, your skin color, ancestry, nationality, religion, gender, sexuality, age, weight, disability or mental health issue, and income. Because of who you are, have you...



	Never	Yes, but not in the past year	Yes, once or twice in the past year	Yes, many times in the past year
Heard, saw, or read others joking or laughing about you (or other people like you)	○	○	○	○
Been treated as if you are unfriendly, unhelpful, or rude	○	○	○	○
Been called names or heard/saw your identity used as an insult	○	○	○	○
Been treated as if others are afraid of you	○	○	○	○
Been stared or pointed at in public	○	○	○	○
Been told you should think, act, or look more like others	○	○	○	○
Heard that you or people like you don't belong	○	○	○	○
Asked inappropriate, offensive, or overly personal questions	○	○	○	○
Been treated as if you are less smart or capable than others	○	○	○	○

33. What aspect(s) of who you are have been discriminated against? Please provide as much or as little information as you feel comfortable. We appreciate you letting us know about those difficult experiences.

As a reminder, we are interested in experiences related to who you are. This includes both how you describe yourself and how others might describe you. For example, your skin color, ancestry, nationality, religion, gender, sexuality, age, weight, disability or mental health issue, and income.

Please select all that applies.

	Never	Once	More than once	It has happened in the last 12 months
Because of who you are, has a health care provider ever refused you care?	☐	☐	☐	☐
Because of who you are, have you ever been fired or dismissed from a job, or been turned down for a job that you interviewed for?	☐	☐	☐	☐
Because of who you are, have you ever been evicted or denied housing?	☐	☐	☐	☐
Because of who you are, have you ever been unreasonably stopped and questioned, searched, or arrested by police or security?	☐	☐	☐	☐
Because of who you are, have you ever been unreasonably expelled or suspended from school?	☐	☐	☐	☐
Because of who you are, have you ever been unable to open a bank account, cash a cheque, or get a loan?	☐	☐	☐	☐
Because of who you are, have you ever had to move to another neighborhood, town, city, state, province	☐	☐	☐	☐

or country?				
Because of who you are, have you ever lost a close relationship (e.g. with a family member, friend or partner)?	☐	☐	☐	☐
Because of who you are, have you ever been repeatedly harrassed at work or school, where you live, or when accessing services?	☐	☐	☐	☐
Because of who you are, have you ever been threatened with a physical or sexual attack?	☐	☐	☐	☐
Because of who you are, have you ever been physically attacked (e.g., spit on, had objects thrown at you, hit, punched, pushed or grabbed, beaten)?	☐	☐	☐	☐
Because of who you are, have you ever been made to engage in sexual activity, or been touched in a sexual way, that you didn't want?	☐	☐	☐	☐
Because of who you are, have you ever had someone take, damage, or vandalize your property?	☐	☐	☐	☐

37. What aspect(s) of who you are have been discriminated against in the ways described above? Please provide as much or as little information as you feel comfortable. We appreciate you letting us know about those difficult experiences.