The ability to go about without shame: missing data on SHAME AND HUMILIATION
Why is this relevant?

- Absolute poverty has both material and social dimensions; shame and humiliation are particularly strong relational impoverishment dimensions.

- The importance of these dimensions is deemed so central by some that it has been argued that the lack of humiliation, for example, is the CORE component of a Decent Society; or that absolute deprivation, while including hunger, also includes “being ashamed to appear in public.”

- The stigma of poverty is a recurring theme among the poor: The Voices of the Poor study conducted in 60 countries found that people often trying to conceal their poverty to avoid humiliation and shame.
Why is this relevant?

• Can affect many aspects of social life, such as:
  – not being able to do what is customary in society,
  – practice of social control,
  – Discrimination,
  – numerous forms of oppression,
  – and international conflict.

• They have also been related to a myriad of psychosocial maladies:
  – low self-esteem,
  – poor interpersonal relations,
  – school-related difficulties,
  – delinquency,
  – social phobia,
  – anxiety,
  – depression,
  – paranoia,
  – marital discord,
  – domestic violence,
  – rape,
  – other forms of violence,
  – serial murder, torture, and suicide.
The ability to go about without shame

Motivation

• We can increase our understanding regarding:
  – If shame is an aspect of absolute poverty.
  – If it is linked to other aspects of multidimensional poverty.
  – If lower economic levels and shame-proneness are related.
  – If shame increases if poverty worsens, or vice versa, over time.
  – If the stigma of poverty is related to shame-proneness.
  – If ashamed people are less likely to take actions to change their lives.
Shame and Humiliation

Definition

Shame:

• Shame: is a “...global, painful, and devastating experience in which the self, not just behavior, is painfully scrutinized and negatively evaluated.

• ... is often accompanied by a sense of shrinking and being small, and by a sense of worthlessness and powerlessness.

• ... [it] is likely to be accompanied by a desire to hide or escape from the interpersonal situation in question. ...” (Tagney).

  – Is a moral emotion (in the sense that acts as an evaluator of self).

  – Is linked to the self in relation to others (as actions by others or our perception of their judgment may affect our sense of shame).
Humiliation:

- Humiliation refers to two different forms of experiences: an act (to humiliate someone or feeling humiliated) or a feeling:
  - An act (an external event): “humiliation means the enforced lowering of a person or group, a process of subjugation that damages or strips away their pride, honor or dignity” (Lindner).
  - The feeling (an internal event): “the deep dysphoric feeling associated with being, or perceiving oneself as being, unjustly degraded, ridiculed, or put down--in particular, one’s identity has been demeaned or devalued” (Hartling and Luchetta).
# Shame and Humiliation

## Differences

<table>
<thead>
<tr>
<th>Shame</th>
<th>Humiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shame emphasises an individualistic evaluation, the idea that one has failed its own standards.</td>
<td>Humiliation is inherently interactional.</td>
</tr>
<tr>
<td>Shame is the result of a personal judgement of failure (involves the belief that one deserves the shame).</td>
<td>Involves the belief that one does not deserve the treatment he or she is getting.</td>
</tr>
<tr>
<td>Response: sink into the ground.</td>
<td>Response: anger and desire for revenge.</td>
</tr>
<tr>
<td>One can feel ashamed of being humiliated.</td>
<td>It may entail feeling ashamed or not: one can feel humiliated without having failed its own standards.</td>
</tr>
</tbody>
</table>
HIV/AIDS-Related Stigma

- Important efforts for developing quantitative indicators of HIV/AIDS-related stigma in the last 10 years.

- Stigma refers to attributes that are “deeply discrediting” (Goffman 1963) which are “applied by society and borne or possessed by groups and individuals. […] may be associated with specific acts, such as adultery or criminal behavior, with inherent qualities such as sex or skin color, or with quasi-inherent qualities such as religion or nationality…[.] some diseases and other health conditions. In addition, stigma is sometimes associated with social stereotypes – sometimes positive, sometimes negative, short-hand images that we all use to identify strangers and which determine our reaction to them. Stigma is a means of social control, defining social norms and punishing those who deviate from the norm” (Pan American Health Organization 2003).
HIV/AIDS-Related Stigma

- There is evidence that HIV/AIDS-related stigma is far less varied and context-specific than previously assumed (qualitative data collected in Ethiopia, Tanzania, Vietnam, and Zambia from 2001-2004).

Discrimination

- A major quantitative and qualitative study conducted in Sweden on self-reported discrimination provides important insights regarding overestimation and underestimation of reporting, variation of perceptions according to education level and ethnic group, etc.
Relevant Experiences

Values, norms and well-being

- The Personal and social well-being module for the European Social Survey, Round 3 is a particularly interesting example within this survey. This module aimed at expanding the measurement of well-being “beyond how people feel (affect and satisfaction) to incorporate also how well they function” (Huppert et al 2006: 2).
Relevant Experiences

Social Capital

- The social capital literature provides interesting insights as well for measuring subjective indicators. **Social Capital relates to interactions and relationships among individuals in a community, with group networks, norms and trust.**

- Surveys attempting to capture social capital data measure values and attitudes through perceptions of trustworthiness of other people, norms of reciprocity, self-esteem, isolation, etc.

- Some of these domains, such as perceptions of fairness or levels of self esteem, have been used to estimate levels of social trust, and are directly related to feelings of shame and humiliation.

- Some social capital questionnaires have been designed to be used alongside major household data surveys.
Psychology

- How to quantitatively measure shame, on the other hand, has been a challenge for psychologists and psychiatrists for many years (good advances in the last 10 years).

- Psychometric tests that attempt to capture aspects of shame through the use of related adjectives, statements, situations that would normally trigger the emotion, etc.

- The measurement of humiliation has been quite a neglected field. Nevertheless, some attempts to establish scales to measure this emotion provide good grounds for discussion.
Proposed Domains

Shame

1. Stigma of poverty
2. Shame proneness

Humiliation

*External experience of humiliation*

3. Respectful treatment
4. Unfair treatment
5. Discrimination

*Internal experience of humiliation*

6. Accumulated humiliation.
The ability to go about without shame

**Indicator 1. Whether respondents would feel shame if they were poor.**

The first indicator chosen to capture data on shame relates to **shame of being associated with poverty**, or what could arguably be called the **stigma of poverty**.

Shame and stigma are intrinsically linked: there are deep feelings of shame involved (feelings of worthlessness, powerlessness, feeling small, etc.) if you are stigmatised, both are concerned with personal and other’s evaluation of self, etc.

The standards for the evaluation of self when stigma is involved are defined to a larger extend by other’s evaluation rather than by the individual, emphasising the role of **social conditions** (norms, values, etc.) for the emotion.
The ability to go about without shame

Indicator 1. Whether respondents would feel shame if they were poor.

Do you agree/disagree with the following statement:

1. I would be ashamed if I was poor.
2. I would be ashamed if someone in my family was poor.
3. People living in poverty should be ashamed of themselves.
4. People who are not poor make people who are poor feel bad.

How do you think most people in your community would answer the previous questions?

5. I would be ashamed if I was poor.
6. I would be ashamed if someone in my family was poor.
7. People living in poverty should be ashamed of themselves.
8. People who are not poor make people who are poor feel bad.
The ability to go about without shame

Indicator 1. Whether respondents would feel shame if they were poor.

The indicator proposed in this paper is an adaptation of an indicator to measure shame of being associated with people living with HIV/AIDS.

This indicator belongs to the category of measures that attempt to assess values.

The indicator has been adapted and has been recommended by USAID, ICRW and the Policy project as one of 5 sound alternative indicators to measure values related to HIV/AIDS-related stigma.

This recommendation is based on a review of published and unpublished studies and the results of a specific field test in Tanzania that tried different quantitative measures for HIV/AIDS-related stigma (USAID 2005a).
The ability to go about without shame

Indicator 2. Levels of shame proneness.

The second indicator chosen to capture data on shame relates to *shame proneness*. Shame proneness refers to “the tendency to experience the emotion shame in response to specific negative events” (Tangney and Dearing 2002: 33).

The reasons behind choosing shame proneness are related both to the objective of what these indicators are aiming at, as well as to operational reasons.

Dispositional aspects of shame (shame proneness) affect “the ability to go about without shame” in a stronger manner than shame felt at a particular moment: not only is shame proneness a trait that develops from childhood and as result of interpersonal experiences (and thus, more indicative of an individual’s *history*) but it has a negative impact on interpersonal behaviour: “Shame-prone individuals appear relatively more likely to blame others (as well as themselves) for negative events, more prone to a seething, bitter, resentful kind of anger and hostility, and less able to empathize with others in general” (Tangney and Dearing 2002: 33).
The ability to go about without shame

Indicator 2. Levels of shame proneness.

For each of the following listed feelings please place a number from 0 to 4, reflecting how common the feeling is for you.

4 = you experience the feeling continuously or almost continuously
3 = you experience the feeling frequently but not continuously
2 = you experience the feeling some of the time
1 = you experience the feeling rarely
0 = you never experience the feeling

1. Embarrassment
2. Feeling ridiculous
3. Self-consciousness
4. Feeling humiliated
5. Feeling “stupid”
6. Feeling “childish”
7. Feeling helpless, paralyzed
8. Feelings of blushing
9. Feeling laughable
10. Feeling disgusting to others
Humiliation can refer to an act, and thus, an external event, or to a feeling (an internal event).

Indicators for measuring humiliation have been divided in two groups following these characteristics:

In the first group, several indicators aiming at measuring humiliation in reference to external events (to emphasise the interaction taking place) have been selected.

The second group includes an indicator that has been selected from a psychometric test and aims at measuring the internal experience of humiliation (the internal assessment of the individual in the experience of humiliation).
The ability to go about without shame

Humiliation

To measure **external humiliation**, we propose indicators drawn from different surveys that measure humiliation in reference to external events and that are being used in developing country contexts to provide comparable data.

These indicators emphasise *interaction* and refer to **respectful treatment, unfair treatment, and discrimination**. These indicators attempt, on one hand, to capture *values* affecting interactions among individuals. Both respectful treatment and unfair treatment are among them. On the other hand, these indicators aim at measuring *actions* (or the lack of it) in particular aspects of daily life that are generally associated with discrimination.
The ability to go about without shame

External experience of humiliation: respect and fair treatment.

Indicator 1. People that feel they are treated with respect.

Please circle the rating that best describes your feelings from “Not at all” (0) to “A great deal (6)”, including an option for Don’t know.

1) To what extent do you feel that people treat you with respect?

Indicator 2. People that feel they are treated unfairly.

Please circle the rating that best describes your feelings from “Not at all” (0) to “A great deal (6)”, including an option for Don’t know.

1) To what extent do you feel that people treat you unfairly?

Respect and fairness are values intrinsically linked to the quality of interactions. They are also linked to specific feelings associated with humiliation, such as unjust treatment and ridicule.
The ability to go about without shame

External experience of humiliation: discrimination.

• The proposed indicators for discrimination aim at measuring *actions* (or the lack of) in particular aspects of daily life generally associated with this term.

• To discriminate is to “perpetrate an unjust action or inaction against individuals who belong, or are perceived to belong, to a particular group, in particular stigmatized groups” (Pan American Health Organization 2003).

• Discrimination has been characterised as the “most overt form of ascriptive humiliation” (Lukes 1997: 44) and is characterised by *unequal power relations* and *actions* that affect the *dignity* and *pride* of individuals and *result in feelings of being unjustly degraded*. 
The ability to go about without shame

External experience of humiliation: discrimination.

• The sense of being discriminated against can come from different sources (relationships with individuals or groups of individuals, institutions, a law, social norms, etc.) and thus this paper proposes a set of indicators to capture this domain.

• The indicators proposed are:

• prejudicial treatment

• perception that ethnic, racial, cultural or economic background affects an individual’s chances to obtain services, jobs, education, etc.
The ability to go about without shame

External experience of humiliation: discrimination.

Indicator 3: Experiences of prejudiced treatment during the past three months due to one or more grounds for discrimination.

1. Have you been treated in a way that you felt was prejudiced during the past three months?

   (Response alternatives: No; Yes, occasionally; Yes, on several occasions)

2. Who treated you in a way that you felt was prejudiced?

   (Response alternatives: Health care services, School/work, Employment office, Police/judicial system, Social services, Social insurance office, Shops/restaurants, Bank/insurance company, Landlord/local housing office, Close relative, Unknown person in a public place, Other – open question).

3. Why were you treated in a way that you felt was prejudiced?

   (Response alternatives: Ethnic or racial background, Gender, Sexual orientation, Age, Disability, Religion, Other – open question, Don’t know)
The ability to go about without shame

Indicator 4: Whether ethnic, racial, or cultural background affect the chances of getting jobs, services and education.

1. Do you think that someone’s ethnic, racial, or cultural background affects their chances of getting: (Response alternatives: No, Yes, I don’t know)

   a. Access to public services/infrastructure
   b. Government jobs
   c. Government contracts
   d. Private sector formal jobs
   e. Public housing
   f. Educational opportunities at the pre-university level
   g. Educational opportunities at the university level
The ability to go about without shame

Indicator 5: Whether economic conditions affect the chances of getting jobs, services and education.

1. Do you think that someone’s economic condition affects their chances of getting:

(Response alternatives: No, Yes, I don’t’ know)

a. Access to public services/infrastructure
b. Government jobs
c. Government contracts
d. Private sector formal jobs
e. Public housing
f. Educational opportunities at the pre-university level
g. Educational opportunities at the university level
The ability to go about without shame

External experience of humiliation: discrimination.

- These indicators will allow us to measure discrimination in two levels.

- The first (prejudicial treatment) involves a more open question that allows capturing multiple sources of discrimination (e.g. government offices, private companies, relatives, etc.) and multiple reasons (e.g. physical disability, sexual orientation, ethnic background, etc.).

- The second (perception of ethnic, racial, cultural or economic background affecting an individual’s chances…) emphasises specific sources (the State mainly and some private institutions) and places more emphasis on specific reasons for discrimination (ethnic, folk notions of race, cultural background or economic situation).

- There are two main methods to capture data on discrimination. The first relates to actual, or perceived, experiences of discrimination by individuals. The second is to enquire about the respondent’s opinion about specific groups or attitudes. This paper proposes to use both.
Internal experience of humiliation

Indicator 1. Levels of accumulated humiliation.

Please read each item below carefully and circle the rating that best describes your feelings from “Not at all” (1) to Extremely (5) Throughout your life how seriously have you felt harmed by being...

1) ...excluded?
2) ...put down?
3) ...ridiculed?
4) ...discounted?
5) ...cruelly criticized?
6) ...called names or referred to in derogatory terms?

The indicator to measure the internal experience of humiliation is borrowed from the Cumulative Humiliation Subscale (CHS) of the Humiliation Inventory Scale (Hartling and Luchetta 1999).
Sources

• **HIV/AIDS-Related Stigma:**
  - ICRW
  - Pan American Health Organization
  - UNAIDS
  - USAID
  - The Policy Project

• Four domains have already been identified as the core areas for measuring HIV/AIDS-related stigma: 1. fear of casual transmission and refusal of contact with people living with HIV/AIDS; 2. values – shame, blame and judgment; 3. enacted stigma or discrimination; and 4. disclosure.

• A large study conducted in Tanzania has tested a series of potential indicators and questions to measure the different dimensions of HIV/AIDS-related stigma. Based on these results, USAID, the International Center for Research on Women (ICRW), and the POLICY project, have proposed 22 indicators covering the four different domains identified above to start collecting quantitative data on HIV/AIDS-related stigma.
Sources

• Also, Kalichman et al (2005), for example, have designed a nine-item AIDS-related stigma scale with the objective of establishing a measure that can easily be administered in multiple settings and contexts in South Africa.

• **Discrimination**

• Health Discrimination Project (Sweden)
  – Questions were developed based on available international experiences, tested alongside a population survey, and then analysed and re-tested through qualitative studies.

• CRISE Perception Survey (CRISE, University of Oxford).
  – 8 different countries in Africa, Asia and Latin America

• **Values and norms**

• European and World Values Survey (carried out since 1990, implemented in 60 countries around the world and covers subjects as attitudes, cultural values, quality of life, moral judgment, values, social values, among others.) In particular: Personal and Social Well-Being Module for the European Social Survey, Round 3).
Sources

- Happy Plant Index (HPI) of the New Economic Foundation
- Poverty and Social Exclusion in Britain
- Millennium Poverty and Social Exclusion Survey
- Social Relations and Support Systems Survey
- Social Indicators Survey 1980-81 New Zealand Department of Statistics (currently Statistics New Zealand) (1980/81)
- General Social Survey - Survey on Social Engagement in Canada (Housing, Family and Social Statistics Division, Statistics Canada).
- Canadian Community Health Survey (CCHS) (Statistics Canada).

**Social Capital**

Social capital surveys have been used in different cultural settings (Canada, Australia, New Zealand, United Kingdom, USA, Albania, Nigeria, Uganda, Tanzania, etc.) and there is an emerging consensus on a core set of questions to collect data.
Sources

- Measuring Social Capital: An Integrated Questionnaire (World Bank)
- The Social Capital Community Benchmark (Harvard).
- Measuring Social Capital in Five Communities in New South Wales - A Practitioner's Guide (Sydney, Centre for Australian Community Organisations and Management, University of Technology).
- Global Social Capital Survey (Narayan, D. PREM, World Bank)
- Social Capital Harmonised Question Set (Social and Vital Statistics Division, United Kingdom Office of National Statistics (ONS)).
The ability to go about without shame

Sources

Psychology

• The most developed and widely used measures of shame used in psychology assess dispositions (e.g. shame proneness) rather than emotional states (shame in a particular moment). They generally take the form of global adjective-rating scales or scenario-based measures (Tangney and Dearing 2002).

• ASGS
• Personal Feelings Questionnaire-2 (PFQ2)
• The Internalized Shame Scale
• Experience of Shame Scale
• Test of Self-Conscious Affect-2 (TOSCA)
• Humiliation Inventory Scale

• The controversies surrounding measurements of shame revolve around the definition and the design of instruments to accurately capture what has been defined as shame.
The ability to go about without shame

Sources

Psychology

• Most of the controversy regarding the definition concerns the relationship between shame and guilt.
  
  – Guilt tends to be associated with less intense feelings and a *particular* behaviour (and thus, the situation in which the emotion occurs becomes extremely relevant)
  
  – Shame relates to a more global assessment of self and more painful feelings.
The ability to go about without shame

Sources

• The design of instruments to measure shame is deeply influenced by the abovementioned controversy. This has resulted in several contentions:

  – including whether the survey questions confound shame and guilt (the discriminant validity of the specific questions);

  – if situations are specific to one emotion only, or if respondents are able to experience shame or guilt, or both, in connection to the same situation

  – if an individual is capable of distinguishing between the terms guilt and shame in an abstract context, or if situation-specific descriptions of shame and guilt are more appropriate;

  – if relying on the terms to formulate questions invite defensive denial from some participants given the emotionally charged connotation of shame and guilt, or not; etc.
Sources

Scales measuring shame proneness are better established and more options are available than scales developed to measure emotional states.

The questions informing this indicator come from the PFQ2 scale, one of the best established measures of guilt and/or shame proneness.

The PFQ2 is a global adjective-rating type of scale that has several advantages.

First, it clearly separates questions attempting to capture aspects of shame from those of guilt, preventing confounding both emotions.

Second, it is easy to administer and short in time requirements to be completed, especially in comparison with scenario-based shame scales. Furthermore, questions exclusively related to shame can be selected and thus, a shorter version of the scale can be used without compromising its reliability.
The ability to go about without shame

Sources

Third, although the use of adjectives present formidable challenges for translation, their use is still preferable to the alternative option (scenario-based scales are lengthier and have the added complication that culturally-equivalent scenarios must be found). On the downside, the use of adjectives invites defensive denial attitudes from the respondent, which might have some effects on the results.

These types of scales have never been used in large surveys and testing has been undertaken mainly among college population, making its current consistency and test-retest stability prone to significant variation.

Finally, although the language used in the PFQ2 is less complex than similar scales, the use of accurate terms that respondents are familiar with may still be quite challenging.
Sources

• The proposed indicators for respectful treatment and unfair treatment are single item measures.

• The question related to unfair treatment is an adaptation of Antonovsky’s Sense of Coherence Scale, which has the advantage of having being “consciously formulated in terms which are thought to be applicable crossculturally” (Antonovsky 1993: 725).

• Question regarding respect has been designed specially for the Personal and Social Well-Being Module of the European Social Survey, Round 3. This survey is currently in progress and results are expected by the end of 2007.

• Questions related to fair treatment have been used in social capital surveys (e.g. Uganda), in social policy surveys with reference to the provision of health services and the design of the tax system (New Zealand Department of Statistics 1987), and crime surveys (British Crime Survey 2001) in the context of freedoms and basic individual rights.
The indicator to measure the internal experience of humiliation is borrowed from the Cumulative Humiliation Subscale (CHS) of the Humiliation Inventory Scale (Hartling and Luchetta 1999).

- The CHS is designed to capture the cumulative impact of past humiliation.
- The six items with the greatest explanatory power have been selected (the full subscale has 12 items).
- The orientation in time of the CHS (from the past to the present) is relevant for our purposes.
- Alternative is to measure Fear of Humiliation (20 items scale)