



# Blame, Shame and Substance Abuse

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## Introduction

Blame and Shame (B&S) commonly go together. Blame is associated with one being held responsible for actions purportedly under one's control. Shame implies at the very least disrespect. While B&S may help in certain contexts, the unintended consequences of B&S are often significant. B&S commonly exacerbate substance abuse and may compromise outcomes in other settings.

Despite the prominence and significant consequences of B&S, a formal scientific review of B&S was not found. Two reviewed articles discuss the neurobiological attributes and clinical correlates [1,2]. The potential complications of B&S are varied. Scapegoating and associated feelings of guilt and shame are commonly observed. These complications are discussed in descriptive psychological and sociological literature, especially as they relate to substance abuse [2-7].

Some of B&S's origins, nature, and consequences are reviewed. Potential solutions for complications from B&S follow.

## Origins of blame and shame (B&S)

Human behavior arises from many factors: health factors, financial status, cultural factors, conditioning, education, age, genetics, and more. One evolutionary explanation for B&S may be heuristics. The heuristic "shortcuts" associated with B&S consume less brain capacity and produce faster responses. The shortcuts can, however, result in essential factors being overlooked. B&S limits curiosity and when prominent contributors to behavior are overlooked, effective solutions are easily compromised.

The heuristic aspects of B&S supports its instinctive origins. B&S is also culturally induced. Humans are social animals. Basic survival depends on social support. The health benefits of adequate social support are well acknowledged. When social support is threatened, outrage and fear often follow. These feelings trigger B&S, especially in contexts where social support, conformity, and safety are threatened.



B&S are understandably reinforced through social conditioning. Paradoxically, B&S encourage social support and cohesion through threats of social ostracism. Ostracism is painful and has a long history of being used to punish. Prisons and other forms of social ostracism are widely used. With any threat of ostracization, B&S are implied.

B&S facilitate warfare through marshaling up aggression and defenses. Throughout history, enemies are inevitably the “butt” of B&S. Often diminutive, derogatory, and shaming labels are used to describe enemies.

B&S are also associated with wealth or lack thereof. Wealth is associated with the victors of wars and other competitive undertakings. Wealth facilitates access to social support and it is used as an antidote to threats regarding social support. Wealth symbolizes and promotes social acceptance and respect. Wealth’s potential benefits are likely more than a means to satisfy basic needs, material comfort, or desires. Perhaps the most prominent “pay off” from wealth is that it supports social support and safety? This in turn counters the sting of B&S. Conversely, excessive blame or toxic shame are arguably less prominent in contexts where financial factors have a limited role in ensuring social support and safety.

In addition to pavlovian principles, penalties and punishment depend on B&S to limit unacceptable behavior. Associated beliefs regarding penalties and punishment include “Spare the rod and spoil the child”. These sorts of beliefs imply that unless one punishes an offender, they will not learn to behave appropriately. It also implies that without punishment one risks remaining in a “spoiled state. To label someone as spoiled is obviously shaming.

Religious notions of purgatory and hell may contribute to cultural inclinations for B&S. Both reflect consequences of dysfunctional (sinful) behaviors and the assumed need to punish, or at least threaten punishment.

Ostracism, wars, prisons, financial incentives, religious practices, beliefs, as well as instinctive factors all reflect the potential force and breadth of B&S’s origins. For better and for worse, B&S are widely present.

### **The potential value of blaming & shaming (B&S)**

It is difficult to precisely explain what differentiates healthy B&S from unhealthy B&S. Context matters greatly. As previously discussed, blaming and shaming has potential value for social cohesion and safety. Blame can promote accountability, and accountability can promote better outcomes. Likewise, a feeling of shame reminds us that certain behaviors are immoral or not healthy.

Feelings of guilt also arise from blame. The feelings of guilt and shame can be healthy. Whether guilt and shame remain “healthy” largely depends on the response to the feelings. We may feel guilty when blamed for a mistake. This can lead to an apology or a decision to do things differently. Healthy feelings of guilt and shame are associated with a sense of responsibility and morality. Sociopathy, on the other hand, is the pathological label we give to those who seem incapable of having healthy feelings of guilt and shame.

### **Some of the untoward consequences of blame & shame (B&S)**

Like with many uncomfortable feelings, feelings of guilt and shame become unhealthy when they linger, or develop into a

constant state of personal degradation, or the feelings and behavior become devoid of any useful purpose, and even become harmful. Excessive guilt and toxic shame are terms that reflect the “toxic” potential of these feelings. When excessive or toxic, guilt and shame destroy emotional energy and can leave one feeling depressed and immobilized [1-7].

In addition to the well-appreciated emotional consequences, B&S contributes to other essential contributors being overlooked. As with substance use disorders and other mental illnesses, B&S often interfere with effective preventive and therapeutic interventions.

B&S also have untoward consequences in valued endeavors. For example, B&S is common in sports. Sporting opponents are commonly the butt of B&S. Denigration of self or others typically impairs long-term performance, let alone the fun of playing. Nonetheless, self-flagellation in sports and other daily activities is prevalent.

To acknowledge mistakes, to take steps to correct bad behavior, and to make amends represent healthy behavior. Healthy behavior does not require excessive guilt or toxic shame. Indeed, in settings where B&S is limited to avoid excessive guilt or toxic shame, the outcomes commonly improve. An example is in the airline industry where shortcomings came to be addressed primarily as system issues rather than personal negligence. As a result of the shift away from blaming and shaming individuals, both productivity and safety dramatically improved. Addressing serious substance use disorders with a more respectful and understanding approach, one that even rewards progress (contingency management) works well.

Contingency management has overwhelming evidence for clinical efficacy but still is not widely used [11-14]. Perhaps, as with family therapy, which is even more efficacious for substance use disorders, we fail to use cost-effective modalities because we remain stuck in the B&S and its associated punitive approaches? “The War on Drugs” provides an example of B&S’s far-reaching effects. As with other wars, B&S is used against presumed foes. Both illicit and licit substances with established medical benefits were targeted and even “doses” of medications were regulated. Prescribers face criminal prosecution when governmental rules are not followed [15]. “The War on Drugs” also extended B&S toward the people who used the substances. Mass incarcerations ensued. Physicians who prescribe opioids for legitimate medical purposes, including the management of pain and opioid use disorders were prosecuted. Manufacturers, distributors, and pharmacists can all be victims of the B&S and its related punitive actions.

Untoward consequences are expected when B&S is used without concern for outcomes. The proportion of Americans incarcerated surpasses any other country. Physicians have tapered or stopped prescribing opioids and other addictive substances, even when the stop results in serious suffering, disability, criminal behavior, and even death. Disabilities, heroin overdoses, and suicides have significantly increased during the “War on Drugs” and its associated B&S. Substance abuse is arguably much worse since the start of “the War on Drugs”. Of course, the consequences are not entirely due to B&S or the “War on Drugs”. As is commonly the case, when B&S is used, other contributors fail to be addressed. Conversely, as unhealthy B&S is limited, it is expected that more cost-effective remedies will be implemented.

## Solutions for toxic blame and shame (B&S)

The context and the nature of the B&S are important for understanding and judging B&S's value. Depending on context, blame, shame, and guilt can be helpful, excessive, or toxic. Awareness and acceptance of the problems associated with B&S help limit its toxic effects.

With substance, use disorders the acceptance of one's limitations and powerlessness leads to healthier responses and better management. This paradox, incorporated in the first of twelve step approaches, mitigates toxic shame and helps redress many dysfunctional behaviors. While described as steps for spiritual growth, might the twelve steps and associated traditions also be described as effective means to mitigate toxic B&S?

Effective behavioral strategies to mitigate excessive blame or toxic shame overlap with measures that effectively address SUDs. They incorporate social, behavioral, cognitive, as well as spiritual growth. When managed effectively, SUDs are treated as incurable, chronic, relapsing disorders. In conjunction with indicated medical and behavioral care, feelings of gratitude are encouraged. The focus in recovery turns toward solutions rather than the problems. The benefits for support and outside input are emphasized. The "We" is stressed much more than other pronouns. All these principles are useful in recovery from substance use disorders. They also mitigate unhealthy consequences for all sorts of B&S. Professional interventions for Substance Use Disorders (SUDs) encourage family and friends to express radical love and acceptance, not to blame and shame. Acceptance, forgiveness, and love is to be expressed in conjunction with acknowledgement of the experienced consequences. Effective interventions end with an immediate invitation and access to professional care.

Even when effective care is provided, changes come slowly and incrementally. "Progress not perfection" is a common slogan in recovery circles. The acceptance that changes often happen slowly and incrementally mitigate toxic B&S. Slogans such as "it takes time" and "progress not perfection" are useful with most chronic conditions. Significant personal and collective efforts are needed to change "ingrained" responses. Part of a robust recovery from a SUD involves finding new approaches to handling feelings such as fear, anxiety, anger, grief, guilt, shame, and loneliness. Changing any long-term conditioned behavior is always challenging. Establishing consistent new responses to feelings and other triggers is a lifetime effort, and one worthy of ongoing support.

Twelve-step programs and their traditions are not the answer for everyone. We need varied means to mitigate the toxic potential of B&S. Approaches must respect the diversity of people, their cultures, and their individual conditioning. As already noted, acceptance paradoxically invites progress, and will arguably remain an important first step.

Across the board, socio-economic factors and other social determinants play a significant role in health outcomes. Financial resources mitigate some of the sting of B&S, for as previously mentioned, they help to antidote threats to social support and acceptance.

Cultural and associated legal changes need to emphasize prevention, effective therapies, and rehabilitation. Such measures will cost-effectively reduce substance abuse and its enormous public health consequences [8-10]

The above solutions involve recovery principles, acceptance, and socio-economic changes. Richard Rohr provides another strategy stated in his book, *The Universal Christ-How a Forgotten Reality can Change Everything we See, Hope for and Believe*, (Convergent Books 2019 p.155):

"We need images to reveal inner states. You are going to look at an image (a tender image of the crucified Jesus) of what humans deny and are most afraid of exposure, shame, vulnerability, and failure. Like a homeopathic medicine, Jesus became the problem on full display-to free us from that very problem. The cross withdraws the curtain of both denial and fear from our eyes and from our psyches. Jesus became the victim so we could stop victimizing others or playing victim ourselves."

Mature spiritual beliefs and practices mitigate toxic effects of B&S. They focus on forgiveness and acceptance, as well as compassion and love. Ironically, religious traditions commonly aggravate toxic B&S. B&S in religious traditions are often directed to anyone who does not do or believe in an "orthodox" fashion. Even worse, some faith traditions convey a message that some people are less suited or deserving of social support, care, and compassion. Despite the dark sides of faith traditions, sound spiritual and religious practices help rectify dysfunctional behavior.

Acknowledgement Leads to fuller acceptance. In turn, acceptance invites recovery and transformation. Furthermore, the feelings associated with soulful and spiritual experiences are arguably the strongest antidotes for excessive guilt or toxic shame.

### Summary

Recovery regarding B&S's toxic prevalence will involve finding new ways to address our fears and anxiety, particularly as they relate to social acceptance and support. Faith traditions and other means of spiritual growth help. We also need to change our laws and cultural practices to promote rehabilitation and social support, rather than the longstanding and undue emphasis on punitive and shaming approaches.

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