

African Shame

Keetie Roelen of the Institute of Development Studies writes of the relationship between shame and poverty in the IDS Blog. She emphasises the inextricable link between shame and poverty, pointing to work undertaken in great depth by Robert Walker and colleagues of the Oxford University Department of Social Policy and Intervention, in countries across the globe (<http://povertyshamedignity.spi.ox.ac.uk/home.html>).

Roelen cites examples of the ways in which policy decisions aimed at improving living conditions can break poverty induced shame. One of these studies was related to cash transfers in four specific locations on the African Continent.¹ Another, based in South Africa, investigated similar issues in relation to social security and lone mothers.² A further example is provided by Community-Led Total Sanitation (CLTS) which works in, among other place around the globe, Eastern and Southern Africa, in an article entitled “The 'shame question' in CLTS,” which explores the dynamics of shame relating to human sanitation.³

“Laela Adamson from UCL Institute of Education provided a salient case study of the negative impact of shame based on research in schools in Tanzania. She found that limited engagement of secondary school students in the classroom was often the result of the fear of being shamed or feeling shame when being unable to express themselves properly in English. ... Many pupils lack strong English language skills and the confidence to express themselves in English following a bilingual language system with a strong use of Swahili in primary schools before shifting to English as main language of instruction in secondary schools. Laela poignantly pointed at the ‘silencing impact’ of shame with the fear of shame ultimately limiting the capability to learn.”⁴

Roelen continues: “shame is not without consequences. ... Secondary school students in Tanzania choose to stay silent in face of the experience of shame, which ultimately undermines their learning outcomes and prospects for life. In India, women being treated harshly by health workers chose to stay away, damaging their own health and that of their children. Farmers in India opted for negative coping mechanisms such as substance abuse and in extreme cases to suicide in response to the shame attached to living in poverty. ... While the links between poverty and shame are increasingly laid bare, understandings about the interface between shame, shaming, policy and social change are

¹ Ramlatu Attah, Valentina Barca, Andrew Kardan, Ian MacAuslan, Fred Merttens, and Luca Pellerano; *Cash transfers and psychosocial well-being: evidence from four African countries*; (IPC-UNDP One Pager 333: http://www.ipc-undp.org/pub/eng/OP333_Cash_transfers_and_psychosocial_well_being.pdf, September 2016) retrieved 6th November 2017.

² Gemma Wright, Michael Noble, Phakama Ntshongwana, David Neves and Helen Barnes; *Social security and the dignity of lone mothers in South Africa*; (http://saspri.org/wp-content/uploads/Docs/TWP3_Lone_Mothers_in_SA.pdf; 2014), retrieved 6th November 2017

³ Philip Otieno; *The 'shame question' in CLTS*; CLTS Blog: <http://www.communityledtotalsanitation.org/blog/shame-question-clts>; 24th April 2012), retrieved 6th November 2017.

⁴ Keetie Roelen; *Is there such a thing as 'good shame' or 'positive shaming'?*; (IDS Blog: <https://www.ids.ac.uk/opinion/is-there-such-a-thing-as-good-shame-or-positive-shaming>, September 2017), retrieved 5th November 2017; cf., Laela Adamson; *What it is like to carry out research in rural Tanzania*; <https://www.educationdevelopmenttrust.com/en-GB/news-and-blogs/blogs/2015/laela-adamson>, 7th September 2015), retrieved 6th November 2017.

relatively scarce. Emerging evidence does suggest that shame and shaming can have negative impacts with strong adverse consequences for individuals and communities as a whole.”⁵

South Africa

Resources are greater in South Africa than they generally are on the majority of the continent, so it is not unreasonable that relevant research into ‘Shame’ is more likely to take place in South Africa.

Shame in the South African Workplace was addressed by Mayer and Tonelli⁶ in their paper in “The Value of Shame: Exploring a Health Resource in Cultural Contexts” edited by Vanderheiden and Mayer.

The abstract for their chapter of this book emphasises that ‘Shame’ is a concept widely researched in psychology and which has been contextualised across racial groups, cultures, nationalities and gender. In the sub-Saharan African context, shame has been studied particularly with regard to HIV/AIDS and cultural traditions. However, it seems that most of the studies conducted do not focus on, firstly, the work context or, secondly, shame as a possible health resource, but rather as a construct that is related to negatively perceived concepts, such as guilt, embarrassment or stigma.

Their chapter provides an overview on research about shame in sub-Saharan African contexts. It also explores shame experiences in South African workplaces and presents personal and organisational strategies to transform shame constructively. They present insights on which experiences in workplaces can lead to shame and how employees manage these experiences to overcome negative impacts of shame at individual and organisational levels.

“Culture is often overlooked in research on shame, although "shame is systemic",⁷ methodologies in the study of shame, as well as the contexts researched, are often in Westernized cultures and thus more research in other contexts is needed.”⁸

Recently, there have been incidents judged to be shameful in the South African societal context. including fraud,⁹ the killing of endangered wild animals,¹⁰ the maltreatment of domestic animals,¹¹

⁵ Keetie Roelen; *Is there such a thing as ‘good shame’ or ‘positive shaming’?*; (IDS Blog: <https://www.ids.ac.uk/opinion/is-there-such-a-thing-as-good-shame-or-positive-shaming>, September 2017), retrieved 5th November 2017.

⁶ C-H Mayer & L. Tonelli; *‘Dream on – There is No Salvation!’ Transforming Shame in the South African Workplace Through Personal and Organisational Strategies*; (Elisabeth Vanderheiden, Claude-Hélène Mayer, Ed.; *The Value of Shame: Exploring a Health Resource in Cultural Contexts*; Springer, 2017), p134-153.

⁷ Mayer and Tonelli do not provide the full reference for this comment – they refer us to “Boring 1992, p. 175” but do not include the full details in their bibliography. The sense that shame is all pervasive is something that we can all acknowledge.

⁸ Ibid: p136; c.f., D. M. T. Fessler, (2004). *Shame in two cultures: Implications for evolutionary approaches*; *Journal of Cognition and Culture*, 4(2), p262.

⁹ D. Llewellyn, *Cronje shame leaves South Africa in crisis. Match fixing scandal: Inquiry launched as captain admits accepting £10,000 from bookmaker but denies throwing games*; *The Independent*, 12th April 2000. <http://www.independent.co.uk/sport/cricket/cronje-shame-leaves-south-africa-in-crisis-280309.html>. Accessed 21st September, 2015.

¹⁰ J. Della-Ragione; *Tourists lured to South Africa to take part in shameful trophy hunts*; *Express*, 20th April 2015. <http://mg.co.za/article/2013-09-08-south-africas-ships-of-shame-under-fire>. Accessed 20th April, 2016.

¹¹ Mail & Guardian; *South Africa’s ‘ships of shame’ under fire*. 8 September 2013. <http://mg.co.za/article/2013-09-08-south-africas-ships-of-shame-under-fire>. Accessed 29th May, 2016.

the president's criminal and political offences,¹² and bullying and victimisation in schools.¹³ In addition, violence, war experiences and trauma are linked to shame in the South African context.^{14,15,16}

According to Munusamy,¹⁷ South Africa is a "place of shame, violence and disconnect" and South Africans are known for their violence which Munusamy defines as shameful. He refers particularly to recurring outbreaks of xeno-phobic violence in the country. In another article, Munusamy¹⁸ highlights another incident of shame as that of the "Marikana massacre" in which thirty-four miners were killed during strikes in the mining sector. This massacre by South African security forces was the bloodiest since the end of apartheid. However, Munusamy asserts, this concept of shame extends back into the history of the country. Baines¹⁹ emphasises that former South African Defence Force conscripts have "attempted to deal with guilt and shame by telling their stories". Shame, for them, was connected to brutality, victimisation and trauma that they experienced as members of the Defence Force during the conflict in South Africa. Baines comments that very few narrators are prepared to admit "complicity [in] upholding the apartheid system."²⁰ Baines notes that many of these conscripts would like to get rid of the "shame of being regarded as vanquished soldiers who lost the war and so ended on the wrong side of history."²¹

Mayer and Tonelli also point to the work of A. Bailey²² who refers to shame in South Africa in the context of the recent history of the country. She connects the concept of shame with race by referring to the shame of white South Africans with regard to apartheid. So called "white shame" is

¹² G. Van Susteren; *Shame on President Jacob Zuma of South Africa. Does he have no conscience?* 3rd September 2015 RDM News Wire. <http://gretawire.foxnewsinsider.com/2015/09/05/shame-on-president-jacob-zuma-of-south-africa-does-he-have-no-conscience-first-south-africa-lets-president-bashir-under-indictment-visit-south-africa-and-then-flee-like-a-rat-and-now>. Accessed 29th May, 2016.

¹³ E. Ahmed, N. Harris, J. Braithwaite & V. Braithwaite; *Shame management through reintegration*. Cambridge: Cambridge University Press, 2001.

https://books.google.co.uk/books?hl=en&lr=&id=T9hI8q51bIIC&oi=fnd&pg=PR9&ots=G49Jb2q6X5&sig=n2sNsF7lZMiddGwVRFtbkGPJgJM&redir_esc=y#v=onepage&q&f=false. Accessed 13th December, 2017.

¹⁴ G. Baines; *Blame, shame or reaffirmation? White conscripts reassess the meaning of the "Border War" in post-apartheid South Africa*; *InterCulture*, Vol. 5(3), p214–227, 2008.

https://www.researchgate.net/profile/Gary_Baines/publication/242180823_Blame_Shame_or_Reaffirmation_White_Conscripts_Reassess_the_Meaning_of_the_Border_War_in_Post/links/53e318730cf2b9d0d832cb6b.pdf. Accessed 13th December, 2017.

¹⁵ R. Munusamy; *South Africa: The place of shame, violence and disconnect*; Daily Maverick. http://www.dailymaverick.co.za/article/2015-04-17-south-africa-the-place-of-shame-violence-and-disconnect/#.Vf_TCnutWag. Accessed 21st September, 2015.

¹⁶ R. Munusamy; *The Marikana massacre is a tale of utter shame for South Africa*. The Guardian; <http://www.theguardian.com/world/2015/jun/26/marikana-massacre-ramaphosa-lonmin>. Accessed 26th May, 2015.

¹⁷ R. Munusamy; *South Africa: The place of shame, violence and disconnect*; Daily Maverick. http://www.dailymaverick.co.za/article/2015-04-17-south-africa-the-place-of-shame-violence-and-disconnect/#.Vf_TCnutWag. Accessed 21st September, 2015.

¹⁸ R. Munusamy; *The Marikana massacre is a tale of utter shame for South Africa*. The Guardian; <http://www.theguardian.com/world/2015/jun/26/marikana-massacre-ramaphosa-lonmin>. Accessed 26th May, 2015.

¹⁹ G. Baines, op.cit. p211.

²⁰ Ibid. p222.

²¹ Ibid. p226.

²² A. Bailey; *On white shame and vulnerability*; *South African Journal Philosophy*, Vol. 30(4), p472–483, 2011.

connected to concepts of solidarity, penitence and vulnerability and, according to the author, an appropriate moral response to the historical context.

Mayer and Tonelli also highlight the work of L. Tessman²³ who emphasises that there are only two possibilities for white South Africans: either to live with the shame (and suffer) or to ignore the shame of the past and move on.

Other research has established that shame is also to be found in the construction of "coloured identities" ("coloureds" being historically defined as a mixed race in South Africa) and the treatment of Khoi/coloured women.^{24 25} Wicomb provides the example of the shameful treatment of Saartje Baartman, a Khoi woman who was exhibited in London and Paris from 1810 to 1815 and on whose body medical research was conducted to establish the "sexual lasciviousness" of black women.

It is interesting that Nelson Mandela, who was shamed by being declared a terrorist and by being detained for almost 27 years of his life, managed to transform his shame through his own choices. And that Mandela managed to address to some extent, if not transform, the experienced shame within society by opening up through, for example, the Truth and Reconciliation Commission and telling his own story.²⁶

Mayer and Tonelli go on to point out that besides historical-political issues of shame and race, shame has also been associated with ill-health and mental illness/depression.²⁷

An example from Tanzania is provided by Jilek-Aall.²⁸ Jilek-Aall highlights the way that epilepsy in traditional African cultures (such as is apparent in Tanzanian society) provokes "ambivalent feelings in those witnessing it" and creates "an atmosphere of fear, shame and mysticism - having mainly been interpreted as caused by ancestral or evil spirits. Epilepsy not only creates shame in the witnesses but also in the family and the epileptic person him/herself, particularly when treatment does not seem to work. The author maintains that health education about epilepsy should help to dispel feelings of shame, guilt, fear and anxiety in the individuals and families affected.

HIV/AIDS is also strongly connected to shame in African contexts.²⁹ Kalichman et al measured AIDS related stigma and shame in South Africa and highlight the prevalence of both stigma and shame associated with the disease.³⁰

²³ L. Tessman; *Do the wicked flourish? Virtue ethics and unjust social privilege*. APA Newsletter on Feminism and Philosophy, Vol. 1(2), p59–64, 2001.

²⁴ Z. Wicomb; *Shame and identity: The case of the coloured in South Africa*; In D. Attridge (Ed.), *Writing South Africa: Literature, apartheid and democracy*; p1970–1995. Cambridge: Cambridge University Press, 1998.

²⁵ *Ibid.*, p91.

²⁶ E. Ahmed, N. Harris, J. Braithwaite & V. Braithwaite, *op.cit.*, p13-15.

²⁷ H. Lauer; *Cashing in on shame: How the popular "tradition vs. modernity" dualism contributes to the "HIV/AIDS crisis" in Africa*; Review of Radical Political Economics, Vol. 38(1), p90–138, 2006; J. S. L. Brown, S. J. Casey, A. J. Bishop, M. Prytys, N. Whittinger & J. Weinman, *How black African and white British women perceive depression and help-seeking: A pilot vignette study*. International Journal of Social Psychiatry, Vol. 57(4), p274–362, 2010; L. Jilek-Aall; *Morbus Sacer in Africa: Some religious aspects of epilepsy in traditional cultures*; Epilepsia, Vol. 40(3), p382–386, 1999.

²⁸ L. Jilek-Aall, *op.cit.*, p382.

²⁹ H. Lauer, *op.cit.*

³⁰ S. C. Kalichman, L. C. Simbayi, S. Jooste, Y. Toefy, D. Cain, C. Cherry, et al.; *Development of a brief scale to measure AIDS-related stigma in South Africa*; AIDS and Behaviour, Vol. 9(2), p135–143, 2005.

In addition to AIDS/HIV, shame has been associated as well with rape and domestic violence.³¹ Jewkes and Abrahams found that a high number of cases of rape, sexual harassment, sexual exploitation and sexual coercion are not reported publicly in South Africa, which could relate to feelings of shame, as well as other highly complex socio-economic circumstances.³²

In addition, Mayer and Tonelli highlight other studies researching into shame, gender and female body image in patriarchal contexts in South Africa by Murry,³³ Mitchell³⁴ and Subramaney et al.³⁵ Those studies suggest a displacement of shame onto women and an undue apportionment of blame to women in particular relation to childcare, breast-feeding and pregnancy termination.

HIV/AIDS and Shame/Stigma

Mbonu et al undertook a survey of the stigma and shame associated with HIV/AIDS in Africa.³⁶ They carefully reviewed 45 different texts, primarily academic papers and books. Their paper has 76 different references all with relevance to this issue. They comment in their conclusions that “despite the current progress of good prognostic health outcomes for HIV/AIDS, the Sub-Saharan African response still stands at a crossroads. ... Cultural constructions of HIV/AIDS, based on beliefs about contamination, sexuality and religion, play a crucial role and contribute to the strength of distancing reactions and discrimination in Sub-Saharan Africa by enhancing inequality. The public denial of HIV/AIDS is real, ... although denial on its own can be relative because it can be a way of coping with the disease while still acknowledging its existence.”³⁷

People living with HIV/AIDS experience shame and stigma throughout their lifetime and that stigma “prevents the delivery of effective social and medical care, enhances the number of HIV-infections and diminishes the public health effects of [Antiviral Retro Treatment] because [people living with HIV/AIDS] are not able to interact with their families and the communities.”³⁸

³¹ World Health Organisation; *Putting women's safety first: Ethical and safety recommendations for research on domestic violence against women*. Geneva: World Health Organisation, <http://www.who.int/gender/violence/womenfirtseng.pdf>, 1999. Accessed 13th December 2017.

³² R. Jewkes and N. Abrahams; *The epidemiology of rape and sexual coercion in South Africa: An overview*; Social Science and Medicine, Vol. 55, p1231–1244, 2002.

³³ J. Murray; *It left shame in me, lodged in my body”: Representations of shame, gender, and female bodies in selected contemporary South African short stories*; The Journal of Commonwealth Literature, p1–15. 2014 doi:[10.1177/0021989414538868](https://doi.org/10.1177/0021989414538868).

³⁴ K. Mitchell; *Cleaving to the scene of shame: Stigmatized childhoods in the end of alice and two girls*; Fat and Thin. Contemporary Women's Writing, Vol. 7(3), p1–19, 2012.

³⁵ U. Subramaney, G. E. Wyatt and J. K. Williams; (2015). Of ambivalence, shame and guilt: Perceptions regarding termination of pregnancy among South African women. *South African Medical Journal*, Vol. 105(4), 283–284, 2015.

³⁶ N. C. Mbonu, B. van den Borne, and N. K. De Vries; *Stigma of People with HIV/AIDS in Sub-Saharan Africa: A Literature Review*; Journal of Tropical Medicine, Hindawi Publishing Corporation, Vol. 2009, <https://www.hindawi.com/journals/jtm/2009/145891/abs>. Accessed 14th December 2017.

³⁷ Ibid., p11.

³⁸ Ibid., p11.

Intersex Shame on the African Continent

The very public debates over the sexuality of Caster Semenya in the context of the Olympics³⁹ brought into the public arena an issue which has often been treated as shameful and kept hidden, particularly in an African context. In Kenya, more than a third of people are born outside of a hospital, mostly in rural areas and often delivered by midwives who have no knowledge of intersex. A cultural mixture of shame, taboo, and a lack of awareness has meant that many of Kenya's intersex people have found out about their condition only after they pass puberty.⁴⁰

"The majority of adults [with an intersex condition] I have worked with, they didn't know what it was," said Gathoni Muchomba, an intersex advocate with the group GAMAfrica. "You don't realize you have a problem because you're not able to talk about it."⁴¹

"It is a taboo in African traditions -- we don't talk about our sexuality, especially when we have abnormality," said Muchomba. "[Many people] believe if you are intersex you are a bad omen and that interacting with you [is] a bad omen."⁴²

In Uganda, for example, there is a real need for advocacy and medical and psychological support for intersex people. Julius Kaggwa speaks with conviction about the issues involved:⁴³

"Thousands of intersex children and youth are faced with double marginalization, having to deal with both intersex stigma and extreme poverty. ... In Uganda, the traditional way of dealing with perceived sex development differences, often perceived as "abnormalities", has largely been staying silent – and wishing them away through various kinds of traditional rituals, which often meant killing the intersex infants in question. This was, for decades, considered to be both the best and normal way to handle intersex births."

He says elsewhere that, "the church doesn't have a problem with intersex, nor does the government really, they just don't understand what it means. They think it's a disease or a curse. We also don't have any reliable figures for how many people are intersex, because stigma stops people revealing themselves. Across the country people are misinformed."⁴⁴

These experiences will be common for intersex people across the continent.

³⁹ See, for example, J Longman; Understanding the Controversy Over Caster Semenya; New York Times 18th August 2016, <https://www.nytimes.com/2016/08/20/sports/caster-semenya-800-meters.html>. Accessed 13th December 2017.

⁴⁰ Briana Duggan, *Shame, taboo, ignorance: Growing up intersex in Kenya*; (CNN: <http://edition.cnn.com/2017/01/05/health/growing-up-intersex-in-kenya/index.html>, 5th January 2017), retrieved on 8th November 2017.

⁴¹ Ibid.

⁴² Ibid.

⁴³ J. Kaggwa: *Understanding intersex stigma in Uganda*; Support Initiative for People with atypical sex Development (SIPD Uganda); <http://intersexday.org/en/understanding-stigma-uganda>, 2016. Accessed 14th December 2017.

⁴⁴ J. Kaggwa: *I'm an intersex Ugandan – life has never felt more dangerous*; Guardian Africa Network, <https://www.theguardian.com/world/2016/sep/16/intersex-ugandan-lgbt-gay-rights-life-never-felt-more-dangerous>, 16th September 2016. Accessed 13th December 2017.

Hidden Shame

One reason why shame is less apparent in an African context may be that there is a reluctance to use the term 'shame' in literature. Scheff and Mateo have undertaken a survey of literature which deals with shame issues but which makes little or no use of shame terms and few if any citations from the shame literature. One example they cite is some work by Charlotte Warren, et al, who published an article about respectful maternity care in Kenya. Their note about keywords in their article includes the words, 'disrespect' and 'abuse', but there is, in the article, no reference to 'shame', and only very minimal reference to 'shame' and 'shaming' in the cited reference material. They say: "An important, but little understood component of the poor quality of care experienced by women during childbirth in facilities is disrespectful and abusive behavior by health workers and other facility staff."⁴⁵

"Due to financial and geographical barriers, access to skilled birth attendants is rare in developing countries, particularly in Sub-Saharan Africa; therefore, it comes as no surprise pregnancy and childbirth are the leading causes of death for women of reproductive age in these disadvantaged areas. As a result of inexperienced birth attendants, disrespect and abuse is common and may take several forms: physical abuse, non-consented care, non-confidential care, and non-dignified care, and discrimination, abandonment of care and detention of facilities. Additionally, little is being done about the issue though policy makers, program staff, civil society groups and community members are well aware of these behaviors."⁴⁶

Although this study had not yet taken place at the time Scheff and Mateo were writing their article in 2016 and the paper by Warren, et al, is only a protocol, "the proposal implies the many manifestations of disrespect and abuse, ranging from neglect of dignity to physical violence, create an strong enough impact in female clients that it may play a critical part in the birthing process, aside from limited staff and little knowledge of health rights, in health care facilities of developing countries."⁴⁷

A further example is work by Mtetwa, et al, who research reasons for sex workers in Zimbabwe not accessing anti-retroviral drugs. "Although generally affected by HIV, and regardless of the existence of proper health care services targeting specifically female sex workers, sex workers in Zimbabwe are refusing in persisting to seek antiretroviral treatment (ART). ... At the end of their study, Mtetwa, et al, concluded these women resisted seeking available care due to several reasons: the fear of being humiliated, which reflected a broader stigma surrounding their work, competing time

⁴⁵ T. Scheff & S. Mateo: op.cit., p4; cf., Charlotte Warren, Rebecca NjukiEmail author, Timothy Abuya, Charity Ndwiga, Grace Maingi, Jane Serwanga, Faith Mbehero, Louisa Muteti, Anne Njeru, Joseph Karanja, Joyce Olenja, Lucy Gitonga, Chris Rakuom & Ben Bellows; Study Protocol for Promoting Respectful Maternity Care Initiative to Assess, Measure and Design Interventions to Reduce Disrespect and Abuse during Childbirth in Kenya." (BMC: Pregnancy and Childbirth, www.biomedcentral.com, 24th January 2013), retrieved on 11th November 2017; cf., R. Jewkes & A. Murcott; *Community representatives: representing the "community"?*; (Social Science & Medicine Vol. 46 No.7, 1998) p843-858.

⁴⁶ T. Scheff & S. Mateo: op.cit., p4.

⁴⁷ Ibid., p4.

commitments or simply socio-economic difficulties.”⁴⁸ In this paper there are only two references to ‘shame’ and none in the citations.

There is quite a lot of research on shame-related issues within African-American sub-culture but less in the African context. However, shame is a factor recognised by many authors. It is important in various different contexts we have already noted some of those key areas, but there is more!

Examples include:

Literacy: one particular study of African-American Adults⁴⁹ has shown that of the 58 patients who had low functional health literacy and admitted having trouble reading, 67.2% had never told their spouses, and 53.4% had never told their children of their difficulties reading. Nineteen percent of patients had never disclosed their difficulty reading to anyone. Many patients with reading problems are ashamed and hide their inability to read. Shame is a deeply harboured emotion that plays an important role in understanding how low literate patients interact with health care providers. Further research is needed to understand how providers should deal with the shame associated with low literacy.

Poverty: programmes designed to help people and alleviate poverty can themselves generate shame. Research has been undertaken by Oxford University Department of Social Policy and Intervention on the likelihood that well-meaning programmes may indeed result in the shaming of those they are designed to help. In Uganda they sponsored research by Professor Grace Bantebya Kyomuhendo and Mr. Amon Ashaba Mwiine from the School of Women and Gender Studies (Makerere University).⁵⁰ That research considered as its final element the framing, shaping and delivery of poverty alleviation policies. In this research, programmes in Uganda were examined to consider the extent to which they are likely to create avenues for shaming people living in poverty. However, the research started by analysing Ugandan literature and oral traditions.

The earlier oral traditions seem not to see poverty as shameful.

The later literature portrays a very different perspective: “textual insights portray poverty and shaming as strongly linked. Shame is portrayed as an insidious evil of poverty; evil in the sense that it evokes feelings of inadequacy, despair, inferiority, indignity, stigma, worthlessness and hopelessness due to the inability of the impoverished individual to attain his/her material and social aspirations both at household and community level. This is in stark contrast to the early and pre-colonial society

⁴⁸ Ibid., p4; cf., Sibongile Mtetwa, Joanna Busza, Samson Chidiya, Stanley Mungofa & Frances Cowan; ‘You Are Wasting Our Drugs’: Health Service Barriers to HIV Treatment for Sex Workers in Zimbabwe; BMC: Public Health: <https://bmcpublihealth.biomedcentral.com/articles/10.1186/1471-2458-13-6982013>, 31st July 2013) retrieved on 11th November 2017.

⁴⁹ Nina S.Parikh, Ruth M.Parker, Joanne R.Nurss, David W.Baker, Mark V.Williams; *Shame and health literacy: the unspoken connection*; Patient Education and Counseling Vol. 27(1), January 1996, p33-39

⁵⁰ G. Bantebya Kyomuhendo and A Ashaba Mwiine; *Portrayals of poverty and shame in literary and oral traditions in Uganda; how poverty shaming evolved*; <http://povertyshamedignity.spi.ox.ac.uk/fileadmin/documents/PDF/WP1CulturalconceptionsUganda.pdf>, Oxford, 2012. Accessed 14th December 2017. (The authors published a series of draft papers in 2012).

where, as shown by the traditional proverbs, poverty was an accepted way of life—a form of sub culture characterized by its unique language; the language of poverty.”⁵¹

In another study which heard from many people across a wide range of countries across the globe undertaken by Robert Walker and Elaine Chase,⁵² poverty is identified as a significant shaming factor. They learnt from those interviewed in Uganda that a sense of personal shame was likely to be magnified by the opprobrium exerted by the community. Indeed, “in Uganda, classic shame (okuhemuka) arising from the failure to provide basic necessities can only be suffered by husbands - the de facto household heads and breadwinners. But, equally, the mother confronted by a child that she cannot afford to feed, to clothe appropriately or to send on school outings similarly feels inadequate, so much of a failure as to cause respondents in a number of countries to consider suicide. The children themselves often have complex emotions; seeing their parents making great sacrifices for them and yet still being the root cause of their poverty. In the Ugandan context, for example, children were often ashamed of their homes and of their parents, blaming their parents’ illiteracy and lack of skills for the poverty that the family experienced.”⁵³

They comment that “The prevalence of poverty-related shame is perhaps less surprising than the limited attention that it has previously attracted. Shame, sociologists and social psychologists opine, is a fundamental social element that regulates individual behaviour and defends social institutions. While shame is understated to the point of invisibility, individuals nevertheless generally choose to conform rather than to risk shame that would make them social outcasts. Shame is a tool of the powerful for exerting control over the less powerful.”⁵⁴

Elaine Chase collaborated with Grace Bantebya-Kyomuhendo as editors of “Poverty and Shame: Global Experiences.”⁵⁵ Robert Walker comments in the preface to that book that one “consequence of poverty is shame. ... Oral traditions in Uganda and India reveal traces of shame that are similarly reflected in the classic literatures of each country and more recently in the medium of film. It is also possible that shame associated with poverty is increasingly intensifying as cultures worldwide become more individualistic, and conspicuous consumerism comes to be the dominant expression of social status.”⁵⁶

Cross-ethnic relationships: research shows that within the counselling relationship, shame can play a significant part. This is exaggerated when racial and cultural divides are involved. Sally Swartz “suggests that struggles with empathic attunement in racialized contexts are often deeply affected by shame. This is associated with visceral experience of the social body, positioned by race and

⁵¹ Ibid., p45

⁵² Robert Walker and Elaine Chase; *Shame, stigma and policy effectiveness*; Oxford Institute for Social Policy, University of Oxford, Oxford; http://www.rdw-conference.org/uploads/submission/full_paper/84/ShameWalkerChase.pdf, 2015. Accessed 14th December 2017.

⁵³ Ibid., p5-6.

⁵⁴ Ibid., p11

⁵⁵ E. Chase and G. Bantebya-Kyomuhendo; *Poverty and Shame: Global Experiences*; Oxford University Press, Oxford, 2015.

⁵⁶ Robert Walker; *Preface*; E. Chase and G. Bantebya-Kyomuhendo; *Poverty and Shame: Global Experiences*; Oxford University Press, Oxford, 2015, pX.

gender. Understanding the roots of shame experienced in therapies across racial and cultural divides marks the beginning of shared subjectivity and mutual regulation.”⁵⁷

Sex Talk: in certain African countries, questions about sex are either forbidden or strictly discouraged. Such questions are viewed as immoral and embarrassing. For instance, in Kenya, HIV prevalence among teenage boys is 3.8 per cent, while that of teenage girls is nearly 10 per cent. That's more than double what it is for the boys. The spread of HIV and Aids could be more easily prevented if adequate sex education was provided in schools.⁵⁸ Ask Without Shame has developed a mobile app which has been developed to circumvent the sense of shame engendered by raising sexual matters in conversation. Ask Without Shame's current goal is to reach one million young people in East Africa.

Abortion: Wolf Bleek writes about hidden shame or avoiding shame in relation to abortion in Ghana.⁵⁹ He says that “induced abortion is considered reprehensible by Akan people in Ghana when it causes medical accidents or becomes publicly known. Ab secret and successful abortion, on the other had, is approved of. This paradoxical view proves logical if we see how it is related to shame. Both childbirth and abortion are potentially shameful, but the shame of the latter can be hidden and thus avoided. The shame of an unwanted child birth, however, will always be visible. A smooth abortion, therefore takes away the shame of both.”⁶⁰

Bleek also notes that “honor and respect are mentioned by the Akan themselves as two of the most important values, both in proverbs and publications by contemporary authors⁶¹ (Sarpong 1974:p65-66) ... Honor is only given to someone as a result of visible deeds and attributes. ... The importance of honor and respect in daily life is revealed in many social phenomena. Funerals, for example, are used by the participants to demonstrate their important position in the community. ... Speaking and greeting is stringly influenced by the hierarchical character of social relationships. An important criteria ... is age. The junior has to show respect to the senior. Another criterion is sex: a woman has to show respect to a man. It is a rule, for instance, that a woman gives her seat to a man, that she does not eat with her husband, and carries heavy loads for him. ... Women often make clever use of the male concern about outward respect. In public they show deference but behind the scenes they exercise power over men.”⁶²

Bleek also asserts that fear of shame influences human behaviour in two ways. “It stops people doing things which make them ashamed, or it encourages them to perform such ‘shameful’ activities

⁵⁷ S. Schwartz; *The Broken Mirror: Difference and Shame in South African Psychotherapy*; International Journal of Psychoanalytic Self Psychology, Vol. 7 (2), *Cultural Transformations of Self Psychology in Theory and Practice*, (Abstract) 2012.

⁵⁸ Ask Without Shame: Combating the taboo of sex-talk in Africa; (<https://www.sharednation.org/products/ask-without-shame>) (<http://askwithoutshame.com>) retrieved on 11th November 2017.

⁵⁹ W. Bleek; *Avoiding Shame: The Ethical Context of Abortion in Ghana*; Anthropological Quarterly; The George Washington University Institute for Ethnographic Research, Vol. 54 (4) October 1981, p203-209.

⁶⁰ Ibid., p203.

⁶¹ P. Saporong; Ghana in retrospect: some aspects of Ghanaian culture; Ghana Publishing Corporation, Accra/Tema, 1974, p65-66

⁶² W. Bleek; op. cit., p206

in secret. What is seen by nobody brings about neither shame nor honor; it is withdrawn from the ethical domain as it were.”⁶³

⁶³ Ibid., p206