

The Primacy of the Self in Shame: Can Shame be Benevolent?

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Abstract

Mainstream psychology views shame as a unitary construct that is conclusively pathogenic. In the present research a tentative theoretical framework that encompasses adaptive and maladaptive forms of shame based on the interface between shame and different forms of self-esteem was developed. A qualitative study was conducted to investigate shame-inducing situations in the Malay context and the role of different self-conceptions in steering multiple forms of shame and their corresponding behavioural outcomes. The results indicated that though shame was engendered by a broad range of situations, the most common situational determinant of shame was negative evaluation. An unexpected inducer of shame that appeared in the analysis reflected a generalised state of shame. Coding analysis yielded to a number of self-conceptions. An adaptive form of shame was evoked as a result of private feelings of self-discrepancy. Maladaptive forms of shame were elicited as a result of feeling persistently deficient, a concern with others evaluation of the self, and an adopted self (rigid and immune). Behavioural outcomes varied by virtue of different self-conceptions from anticipatory to reactive on the one hand and from genuinely (e.g., self-improvement) to maliciously motivated (e.g., self-protection, and self-enhancement) on the other. Discussion focused on interpreting the findings in light of self-discrepancy theories and the cultural self-perspective.

Keywords: shame, self, self-enhancement, self-improvement, culture

Introduction

The conception of shame as a depressogenic emotion that should be extirpated from the person's emotional repertoire (H. B. Lewis, 1971) has a strong sway in mainstream psychology. To most psychologists, shame appears to be a clinical phenomenon (Resnick, 1997) *par excellence* because it is implicated in a constellation of psychological disorders like depression (H.B. Lewis, 1987), chronic anger (Harder, Culter, & Rockart, 1992), eating disorders (Swan & Andrews, 2003), anxiety, and destructive responses to anger (Gramzow & Tangney, 1992).

The association of shame with psychopathology stems from the central involvement of the self in its experience as opposed to guilt in which the self is peripherally implicated (Tangney & Dearing, 2002). H. B. Lewis (1971) has presented an astute distinction between shame and guilt. From her perspective, in shame the focus of the individual is on the self (how bad *I* am), whereas in guilt, the emphasis is on the behaviour (How could I have *done* that bad thing) (Tangney & Dearing, 2002). This differential emphasis leads to very dissimilar phenomenological experiences and behavioural outcomes (Tangney & Dearing, 2002). That is, whereas, shame is a tormenting painful emotion that is accompanied by a sense of shrinking, being worthless, powerless, and often leads to a desire to hide, guilt, though is also painful, leads to reparative actions (Tangney & Dearing, 2002).

A Critique of Tangney's Conception of Shame

Despite the discord on the adaptiveness of the emotion of guilt among researchers, in Tangney's theorizing (e.g., Tangney, Burggraf & Wagner, 1995), it is shame that is unequivocally *ugly* and pathogenic in contrast to the good and healthful emotion of guilt (Tangney, 1991). The reasoning behind stigmatising shame lies in the acutely painful nature of this emotion and its passive behavioural outcomes like withdrawal after a transgression/failure.

Some other researchers, however, did not share Tangney's views. Attempts to evince the adaptive aspects of shame among Western psychologists are on the rise. The crux of their arguments revolves around several points:

- (i) benign shame can have several adaptive psychological functions (e.g., Barrett, 1995; Hibbard, 1994; Izard, 1977; Lindsay-Hartz, De Rivera, & Mascolo, 1995; Schneider, 1987);
- (ii) cultural research, likewise, regards shame as an engaging emotion (e.g., Kitayama, Markus, & Matsumoto, 1995) that is moral and virtuous (Li, Wang, & Fischer, 2004);
- (iii) the associations of shame with indices of psychopathology are found because shame has been theoretically conceptualised by Tangney and her colleagues as a maladaptive affect (e.g., Luyten, Fontaine, & Corveleyn, 2002); and
- (iv) the validity of a clear cut distinction between shame and guilt has been questioned (e.g., Sabini & Silver, 1998).

However, these attempts were not powerful enough to dislodge the predominant view of an ugly shame mainly because shame is conceived as a unitary construct when gleaning its adaptive functions. More specifically, while accentuating the adaptive functions of shame, these perspectives merely based their conceptions of an adaptive shame on the déjà available conceptualisations of shame which unanimously assent on its pathological nature. Shame was not seen in multiple forms in which an adaptive form was extracted; instead, the long-standing view of a unitary pathological shame was undergirding these attempts. Most functional approaches of shame also were merely conjectural without empirical moorings.

Unlike shame, guilt which is the closest sibling of shame (Ferguson & Stegge, 1998) was treated differently. That is, guilt has been conceptualised in opposed but strong theoretical positions that resulted in concerted empirical research. Guilt has been viewed as a maladaptive emotion (e.g., Harder, 1995; Harder & Zalma, 1990; Harder et al., 1992; Jones & Kugler, 1993); but it has also been forcefully viewed as adaptive (e.g., Baumeister, Stillwell, & Heatherton, 1994; Leith & Baumeister, 1998; Tangney et al., 1995) and both approaches have proliferated a spate of empirical evidence.

Additionally, one foremost yardstick against which the adaptiveness of guilt and the maladaptiveness of shame were evaluated is the different behavioural outcomes accompanying both emotions. That is, guilt is believed to be adaptive because it motivates reparation and undoing while shame is maladaptive because it leads to hiding and withdrawing. Two particular caveats, however, deserve mention. First, the contention that shame motivates withdrawal still eludes consensus (e.g., Barrett, 1995; Gilbert, 1997; Lindsay-Hartz et al., 1995) and attempts to show that shame leads to reparation were merely tentative. Second, some researchers have suggested that the accompaniment of withdrawal and hiding from others to the experience of shame seems to contradict the tendency of shame-prone individuals to externalize blame and become angry and aggressive towards others (e.g., Baumeister, Smart, & Boden, 1996). Baumeister et al. (1996) rendered this seeming disparity to individual differences in self-views. The uniformity of behavioural outcomes of shame thus seems contentious and behoves the question of whether shame can have multiple forms if endogenous constructs to its experience are reckoned with.

Self and Shame

The affinity between shame and the self has been postulated theoretically (e.g., Kinston, 1987; H. B. Lewis, 1987; Morrison, 1989; Tracy & Robins, 2004, 2007a, 2007b) and substantiated empirically (e.g., Brown & Dutton, 1995; Brown & Marshall, 2001; Harter & Jackson, 1993; Hibbard, 1994). The role of the self in shame in the present study is posited to steer shame differently from the way it has been usually approached by most researchers (e.g., Tracy & Robins, 2004). Three assumptions have guided the formulation of a tentative theoretical framework that proposes the role of three forms of self-esteem in the experience of three corresponding forms of shame. First, shame can have multiple forms (e.g., Hibbard, 1994; Gilbert, 1997; Nussbaum, 2004); second, self-esteem predisposes the individual to the experience of shame (e.g., Brown & Dutton, 1995; Brown & Marshall, 2001; Kristjánsson, 2010) and determines its behavioural responses (e.g., Baumeister et al., 1996; Harter & Jackson, 1993; Izard, Ackerman, Schoff, & Fine, 2000); and third, shame has a healthful kind (e.g., Nussbaum, 2004) that is attached to a healthy self (e.g., Hibbard, 1994).

The three forms of self-esteem were gleaned from (i) a distinction between two forms of self-esteem (Kernis, 2003), namely, fragile self-esteem with its self-enhancement tendencies, and four forms of secure self-esteem considered as markers of an optimal self-esteem and an authentic self with its components of accurate awareness and unbiased processing (Kernis, 2003; Kernis & Goldman, 2006); (ii) self-concept clarity (Campbell, 1990; Campbell, Trapnell, Heine, Katz, Lavallee, & Lehman, 1996) with its self-protective strategies (e.g., Baumeister, Tice, &

Hutton, 1989); and (iii) sociometer theory of self-esteem (Leary & Baumeister, 2000; Leary & Downs, 1995) with its suggested terminology of three forms of sensitivities to interpersonal rejection, namely, optimal sensitivity, hypersensitivity, and hyposensitivity to interpersonal rejection. The three forms of self-esteem consist of the following: fragile high self-esteem characterized by an illusioned awareness, biased processing, and hyposensitivity to interpersonal rejection (Kernis, 2003);

Optimal self-esteem characterized by an accurate awareness, unbiased processing (Kernis, 2003), and optimal sensitivity to interpersonal rejection; and low self-esteem is characterized by confused awareness, protective processing, and hypersensitivity to interpersonal rejection. Fragile self-esteem predisposes the individual to an unacknowledged shame that is transfused into anger or a state of shamelessness. An optimal self-esteem predisposes the individual to a painful shame that is discharged through reparative behaviours. Low self-esteem characterized by a confused self-concept leads to experiencing an excessive and painful form of shame that is accompanied by hiding and withdrawal.

Research on Shame in the Malay Context

Malu (shame) in the Malay context is broad and important (Swift, 1965). Because Malaysia is a collectivistic culture (Tafarodi, Lang, & Smith, 1999) in which communal values like *adat* (the code of behaviour) (Mahathir, 1970) are pervasive, the emotion of *malu* seems paramount in fostering conformity (Kuchiba, Tsubouchi, & Maeda, 1979). In contrast to the negative connotations shame has in individualistic societies, *malu* is regarded as a good socially-engaging emotion that is similar to a sense of propriety (Goddard, 1996).

Goddard (1996, 1997) considered *malu* as a vaguer concept than any comparable term in the English language that encompasses a variety of words like *shame*, *shyness*, and *embarrassment* and it is defined as a negative inhibiting reaction that is felt as a result of revealing some undesired personal information (self or family). According to Goddard (1996), *malu* motivates a desire to hide or withdraw from others, a reaction tendency reflected in a frequently stated expression:

Aku malu. Tak tahu mana nak letak muka ini (I am so ashamed. Don't know where I can put [hide] my face) (p. 434).

Malu is closely related to other concepts like *maruah* (dignity, self-respect, pride), *harga diri* (self-esteem), and *nama baik* (one's good name) as *malu* is induced because others could think badly about the individual and his or her *maruah* and *harga diri* are jeopardized as a result (Goddard, 1996).

Malu is also closely related to *segan* which means being *reluctant* to undertake some actions (Goddard, 1996). *Segan* is viewed as an anticipatory version of *malu*. The difference between the two, however, is that *segan* is not itself an unpleasant feeling as *malu* is. The experience of *segan* is merely *feeling something* not necessarily *feeling something bad* (Goddard, 1996). The present study confines itself to the study of the emotion of *malu* as it implies shame rather than *segan*.

A Qualitative Study on Shame in the Malay Context

The present study sought to examine (i) shame-eliciting situations in the Malay context; (ii) the role of different self-conceptions in provoking different forms of shame; and (iii) the behavioural outcomes of shame and the role of the self in determining them.

Method

Participants

The sample consisted of 146 Malay students attending four Malaysian universities. 54 participants (37.0%) were from the International Islamic University (IIUM), 31 (21.2%) from the University of Malaya (UM), 32 (21.9%) from University Kebangsaan Malaysia (UKM), and 29 (19.9%) from University Putra Malaysia (UPM). Their age ranged from 19 to 40 years old with a mean of 21.45 (SD = 2.19) and 95 (65.1%) of them were females.

Procedure

Participants were asked to describe in detail two incidents in which they experienced shame and relate their feeling, thinking, and reactions. The collected raw data were translated into English and back-translated to Malay. As *malu* includes the three meanings of shame, shyness, and embarrassment, the translation of *malu* in the transcripts into "I was ashamed,"

“I was shy,” or “I was embarrassed” was not adopted; instead determining the meaning of *malu* in the scenario was based on the nuanced distinction past research has made among the three constructs (e.g., Buss, 1980; Miller, 1992).

Data analysis: Coding and Developing Themes

The present research utilised a hybrid approach of *thematic analysis* (Boyatzis, 1998; Crabtree & Miller, 1999; Fereday, 2004; Fereday & Muir-Cochrane, 2006) that included both inductive and deductive methods.

As *malu* incorporates the meaning of the three terms of shame, shyness, and embarrassment (Goddard, 1996, 1997), a priori deductive coding (Fereday, 2004) that was based on Miller's (1992) themes of embarrassment and Buss's (1980) definition of shyness was used to differentiate shame from embarrassment and shyness.

Results

Three themes were extracted. The first theme concerned the situations in which shame occurred while the other two were related to the role of distinct self-conceptions in evoking different forms of shame and their respective behavioural outcomes.

Theme 1: Shame-Provoking Situations

This theme was a cluster of shame-inducing situations in the Malay context. Participants' descriptions of shame included a broad range of situations. Table 1 shows that negative evaluations top the list, with 92 (35.0%) of the 263 scenarios describing feelings of shame in response to being negatively evaluated. Negative evaluation was differentiated into two sub-themes, “You shouldn't do that to me” consisting of 76 (28.9%) scenarios and “Contemptuously looked down on” with 6 (2.3%) scenarios. The remaining 10 (3.8%) scenarios comprised situations that implied negative evaluation but could not be categorised into the previous sub-themes.

Table 1: Frequencies and Percentages of Shame-eliciting Situations

Content of Shame Situations	Frequencies	%
Negative evaluation	92	35.0
You shouldn't do that to me	76	28.9
Contemptuously looked down on	6	2.3
Negative evaluation	10	3.8
Failure	68	25.9
Immoral deeds	27	10.3
Embarrassment	19	7.2
Physical pratfalls	10	3.8
Cognitive shortcomings	8	3.0
Losing control over body	1	0.4
Hurting others	17	6.5
Religious shame	13	4.9
Generalized shame	12	4.6
Shyness	8	3.0
Rejected love	5	1.9
Secrets revealed	2	0.8

Other shame-eliciting situations included scholastic and athletic failures 68 (25.9%), immoral deeds like cheating and lying 27 (10.3%), hurting others 17 (6.5%), religious shame like omitting religious obligations or committing sins 13 (4.9%), rejected love 5 (1.9%), and secrets revealed 2 (0.8%). Unexpectedly, when analysing data, a number of scenarios were not specific to any particular situation.

Participants described feeling ashamed as a general state or a recurrent problem that constantly reappeared in response to some specific or a variety of different situations. Generalized shame comprised 12 (4.6%) of the 263 reported scenarios. 19 (7.2%) situations elicited embarrassment with 10 (3.8%) categorised under physical pratfalls, 8 (3.0%) under cognitive shortcomings, and 1 (0.4%) under losing control over body. Shyness constituted 8 (3.0%) of the 263 scenarios.

Self-Conceptions, Shame, and Behavioural Outcomes: A Preamble

As Table 2 shows, the findings of this study indicated that different self-conceptions provoked distinct forms of shame. Table 2 indicates that the behavioural outcomes of shame varied by virtue of different self-conceptions from anticipatory to reactive on the one hand, and from genuinely (e.g., self-improvement) to spuriously motivated (e.g., self-protection/self-enhancement) on the other.

Table 2: Self-Conceptions as Elicitors of Different Forms of Shame and Distinct Behavioural Outcomes

Self-Conceptions and Different Forms of Shame	Behavioural Reactions of Shame	Motivations Underlying Shame Behavioural Reactions
Shame evoked from discrepancy		
Discrepancy during behaviour	Discontinue the behaviour	Self-ideal consistency
Discrepancy after behaviour	Effective repairing	Relationship improvement
Shame evoked out of a concern with others' evaluation	Damage control	Shame avoidance/Self-protection
Shame as a result of being persistently deficient	Deconstructing negative self-views and rejection anticipation, triumphant feelings	Shame avoidance/Self-protection
Shame evoked from adopted positive self		
Fragile adopted self	Deconstructing negative self-views, damage control, rejection anticipation	Shame avoidance/Self-protection
Immune adopted self	Deconstruction of others' appraisal of the self, triumphant feelings	Self-enhancement

Theme 2: The Role of Different Self-Conceptions in Provoking Different Forms of Shame

This overarching theme comprised a cluster of four themes. Both themes of "shame provoked as a result of actual-ideal discrepancies" and "shame evoked as a result of positive self-conceptions" included two sub-themes each. The present study found that the majority of shame scenarios described shame-eliciting situations without relating how the self was viewed. More specifically, out of the 263 scenarios, only 83 (31.55%) seemed to implicate self-perceptions in shame descriptions. Table 3 shows frequencies and percentages of the different self-conceptions inferred from the shame scenarios.

The theme of "shame elicited as a result of self-discrepancies" heads the list. 37 (44.57%) of the 83 shame scenarios appeared to experience shame as a result of actual-ideal discrepancies, with 10 (12.04%) for the sub-theme of "discrepancy felt during engaging in the undesirable behaviour" and 27 (32.53%) for the sub-theme of "discrepancy felt after engaging in the behaviour." 21 (25.30%) scenarios related the evocation of shame to a "concern with others' evaluation," 13 (15.65%) scenarios described shame as the result of an "adopted self" with 8 (9.63%) for the sub-theme of "fragile adopted self" and 5 (6.02%) for the sub-theme of "immune adopted self." "Persistently deficient" theme covered 12 (14.5%) scenarios out of the 83 coded as implicating self-conceptions.

Table 3: Frequencies and Percentages of Coded Self-Conceptions

Self-Conceptions	Frequencies	%
Discrepancy		
Discrepancy during Behaviour	10	12.04
Discrepancy after Behaviour	27	32.53
Concern with Others' Evaluation	21	25.30
The Adopted Self		
Fragile Adopted Self	8	6.02
Immune Adopted Self	5	9.63
Persistently Deficient	12	14.45

Shame provoked as a result of actual-ideal self-discrepancies. Participants under this theme reported experiencing discrepancies between their actual and wished-for states. Some respondents described feeling discrepant while engaging in the undesirable behaviour while others reported discrepancy feelings only after acting on it.

Discrepancy felt when engaging in the behaviour. Participants reported the feelings of shame while enduring an actual-ideal self-discrepancy. An internal discomfort is experienced, which in turn, instigated continuous questioning or pondering on the perceived self-discrepancies. This state is demonstrated in the statement below:

The most embarrassing moment was when I was 13 years old, I prayed with no sincerity. Soon I started asking myself why I prayed. What would I benefit if I continue to pray that way? Solah (prayer) is the religious foundation. How would the bases be if the foundation is weak? How can I face Allah with my action, praying without sincerity?

It appeared that what instigated this awareness of a discrepancy was the strength of one's ideals. That is, this respondent at the outset felt a dim discrepancy that reached its peak when she was exposed to religious teaching as she stated below:

As I grew older, I became more mature and knowledgeable of the religion's tenets. I learnt so much as I attended a religious school. What I would like to share here is that at that time, only Allah knows how regretful I was for what I had done. I cried and was so ashamed of myself and especially to Allah. I am very grateful to Allah for giving me the chance to change for the good and realize what I had done.

There were, however, instances where one's awareness of these actual-ideal self-discrepancies and, thus, shame were instigated by external provocateurs like upward comparison, discrepancy between how one appeared to others and how one actually was, and misfortunes perceived as consequences of being incongruent with one's standards of correctness. The following statement shows the role of upward comparison in the activation of the awareness of self-discrepancy and thereby shame:

There was a time that whenever I went out with friends, I never performed my prayers even though they did. I felt ashamed because they followed Allah's orders but I didn't. I felt so guilty.

A prototypical example of a statement of hypocrisy activating awareness of self-discrepancies and shame is: People think I am a good person, but only Allah knows my true colours. What I did was very dishonourable if people were to find out. They would never believe that I was the one who did it.

Furthermore, awareness of self-discrepancies and thereby shame were activated when an individual failed after behaving inconsistently with his or her ideals. The respondent was more likely to attribute failure to being discrepant from ideals. The following statement demonstrates this point:

I felt so ashamed because I was careless about my prayers and all that mattered to me was videogames. One day, I missed the Asr, Maghrib, Isya', and Fajr prayers. Entertainment made me forget my studies and *ibadah* (religious rituals). Nevertheless, Allah is *adil* (fair). He promised that there is a punishment for every mistake. My exam results for semester 1 were good. However, my results deteriorated in the next semester and my CGPA decreased badly. How Allah is so *adil*!

Attributing failure to being punished for not acting according to one's ideals was another indication that while engaging in the undesired behaviour, the participant experienced a dim state of shame that culminated in a heightened awareness of self-disparities and shame after failing. More specifically, while engaging in the undesired behaviour (e.g., playing videogames or neglecting prayers), this participant seemed to experience a feeble internal discomfort that looked like a covert ready-to-be-activated shame. It was failure that triggered the pre-existing inactive self-discrepancies and led the dormant shame to reach its apex of volatility.

Shame under this theme was an internal private state that was not provoked as a result of others' knowledge of one's reprehensible behaviour. This was expressed by the following participant:

Things have to come to an end. Eventually, I became ashamed of myself, ashamed of them, and before Allah subhanahu wa taalah. Fortunately, my family did not know about it.

Discrepancy felt after engaging in the behaviour. Feelings of intraself discrepancies and, accordingly, shame were felt only after the behaviour was enacted. As a result, the participant started reflecting on why she or he acted indecorously. This was expressed by a participant who used to steal his mother's money and reported feeling discrepant only after some time from stopping the behaviour:

I used to steal my mother's money from her purse...I don't understand why this happened. ...One day, my mother noticed that her money was missing.

But she couldn't guess who had done that...I don't understand what made me do that. Until now, I didn't admit my mistake. I am confused when I think back, why I did this. At that time, my regret was not as bad as now.

In this theme, moreover, the participant showed concerns for the effects of his or her behaviour on others as indicated by this same participant:

I felt that I had betrayed my mother's trust. I should have bought her groceries from the shop, but instead I dented her car. I really regretted it when my father had to fork out RM1000 to repair the car when the money could have been used for my brother's school fees.

Furthermore, participants reported identifying with the suffering they subjected others to, as seen in the following excerpt:

Later, father became so sad and it was crystal clear from the sound of his voice as he was trying to control the deepest sadness. I felt so ashamed when I thought of it. How could I do something to make my mother and father cry? How very shameful of me.

Shame in this theme was the ramification of being discrepant from one's ideals. An internal discomfort erupts not because one's disgraceful behaviour was revealed to others; instead, this private shame stemmed primarily from feelings of self-disparities, assessing the damage done to others, and identifying with the pain others were subjected to as a result of one's improper behaviour.

Shame evoked out of a concern with others' knowledge of one's improper behaviour. Unlike the previous theme in which participants endured an internal state of shame; these participants were externally oriented as they did not feel they did anything wrong and tried to justify their deeds even after admitting to others that they were at fault. This denotes that these participants were mainly preoccupied with others' negative appraisal of the self. For instance, the following participant cheated in the moral exam and did not feel ashamed until her friends knew about her cheating. Only then she was ashamed, realised her mistake, but still tried to justify her action:

...Then, my good friend cynically criticized me as a cheat. Suddenly, my face went red as I could feel myself small and ashamed...I was also ashamed every time I look at my friends as all of them knew that I had cheated in the test... I started to cry as I realized my mistake. I explained to my best friend why I cheated in the test. I had to do sports training and I did not have time to study.

Shame here was merely a response to others' knowledge about one's behaviour and did not stem from perceiving one's failure to act in accordance with one's self-ideals. Participants reported feelings of shame only after their behaviour was revealed to others. The following participant lied to her friends for why she came late to the meeting but felt ashamed only after another friend told them the truth:

I told my friends that I had missed the bus as an excuse for oversleeping. They accepted the excuse. However, one of my friends who knew told them the truth after the discussion ended. I felt so ashamed.

These participants appeared to lack strong self-ideals against which to evaluate the self. Moreover, they presumably seemed unconcerned with the immorality of the enacted behaviour or to be worried by the exposed foibles to the self. Instead, they looked preoccupied with how others would change their positive appraisals of them after they discovered their real self. It was a shameless state that was devoid of an internal scanning of the new exposed self-aspects to the self.

Shame evoked as a result of being persistently deficient. Participants under this theme reported feeling deficient and though they were concerned with others' evaluation, they succumbed to the agonising effects of the blemished self-perception. Being defective can be global or specific. For a globally deficient self, the respondent persistently perceived the whole self as inept.

Shame, as a result, was not contextually determined or attached to a specific situation (e.g., failure/transgression) that was momentarily felt and subsided as soon as the triggering-situation ended to exist. Rather, it was reported as a prolonged intensified experience that overwhelmed the entire self:

I would feel ashamed while standing, walking or moving...I get nervous, shiver and look down. I take a deep breath and walk straight ahead when the feeling attacks. Eventually, the feeling slips away.

For a specific fixed attribute, the respondent reported feeling deficient in a particular self-trait, like being inarticulate in the English language or unattractive. Shame here was dormant but not inexistent until a related situation activated it. The participant, consequently, succumbed to the torment of a volatile form of shame that subsided only temporarily and awaited similar situations to burst again. The following participant succinctly reported this state:

I feel embarrassed when people around me criticize my personality, like saying I am not beautiful...I became so ashamed to the extent I couldn't see my face in the mirror. Nothing could be compared to this shame. I simply kept silent when the topic of beauty care becomes unavoidable. After that, I would avoid meeting people, hide myself in the room, and calm myself down by listening to the radio... I would fall asleep and totally forget about it the next day. I hope that the topic would not be discussed again. Usually, I would feel uncomfortable with the person who started the topic...I would feel a bit cold towards them unlike before. I wished never to meet them again.

Shame evoked as a result of positive self-conceptions: The adopted self seeing oneself through others' eyes. This theme was categorised into two sub-themes, namely, fragile and immune adopted self.

The fragile adopted self. Participants believed that others appraised them favourably. These appraisals, however, were malleable and not well-entrenched within the self-concept as they presumably were not the upshot of steadfast personal convictions. The fragility of these self-views was inferred from the tendency of these participants to succumb to others' negative appraisals by self-condemning, becoming debilitated by the fear of rejection, and expecting to lose others' respect as they anticipated that others' new negative appraisals of the self would supersede the old positive ones. This is expressed by the following participant:

...The feelings of confusion, shame, and depression weighed heavily on me. I was really frustrated, so was the teacher. It had become a source of gossip that a leader had failed in a subject that he should not have failed. What had I done wrong when such things happen? My study performance had deteriorated and I was ashamed. The situation was also a subject of conversation among the teachers in the staff room.

As these positive self-views were adopted without regard for the evidentiary bases of other' appraisals of the self, they were fragile and apt to change. More specifically, after failure, such participants rediscovered the erroneousness of a perfectly perceived self and readopted others' newly formed perceptions of the failing self as indicated by the following participant:

I used to be a debater and entered a competition in public speaking. I used to think that I had the confidence to talk fluently in front of others...People used to say that I did not look nervous whenever I delivered my speech and I really looked calm and confident. However, on one occasion when I was called to introduce myself, I became so nervous that I could not even organize my words. I guess that's what happens when one is too proud of oneself. At that time, I felt so ashamed and I felt that I didn't want to see anybody there. I was shameful to God, those people who regarded me highly and, most important of all, shameful to myself.

The immune adopted self. Participants derived their positive self-conceptions from how they thought they were perceived by others. Participants, moreover, felt respected, well-regarded, and proud of others' positive appraisal. The key difference between the "fragile adopted self" theme and this one was the certainty with which these respondents held others' views of them. One indicator of this firm certainty was the resistance these participants showed when they realised that others' positive appraisals of the self were about to change. This resistance was inferred from their tendency to derogate critical others and dissociate the self from people who were perceived as worse off than the self. The following participant succinctly reported this state. She and her friends were asked to perform in a choir. Initially they were praised by the audience then when they performed in front of some special guests they were negatively evaluated, she wrote her reactions:

I was angry with myself because I did not back out from the choir group. I did not like the instructress who liked to pester us...I also felt that my credibility was challenged because before this I was known as someone who was very active in the school. I was also annoyed with those who teased us and questioned us after that. I was ashamed as I should not be singing and joining the choir. I joined the choir as I pitied the committee members of the farewell ceremony because they did not have any performance to light up the farewell...

I was also annoyed with the instructress because she intentionally made the song terrible... maybe we were "cursed" on that day as before this our instructress had chased out my friend for trivial matters.

Theme 3: The Behavioural Outcomes of Shame: The Role of Self-Conceptions

Two clustered sub-themes were extracted. The first addressed the behavioural responses of shame while the second focused on the role of self-conceptions in defining these behavioural reactions (see Table 2).

Behavioural responses of shame. This sub-theme indicated that shame engendered a variety of behavioural reactions; some were pre-emptive while others were reactive. Pre-emptive actions were precautionary measures taken to fend-off a potentially approaching shame; reactive actions were consequential behaviours to the experience of shame. They were divided into three categories based on three undergirding self-motives, namely, actions aimed at shame avoidance, self-enhancement, or self-improvement.

Anticipatory actions: Rejection anticipation. The agony of shame predisposed some participants to anticipate its occurrence beforehand and to swiftly act to ward it off. Rejection anticipation reflected a deep fear of being externally ashamed after one's self-blemishes were exposed to the self and one is tormented, as a result, by an internal shame. Specifically, rejection expectancy involved sensitivity to how others might appraise the self once they knew about his or her perceived weaknesses. These participants prudently endeavoured to avoid external exposure by avoiding situations expected to expose the perceived shortcomings of the self, as represented by the following participant:

When I communicate with girls, I prefer to be quiet rather than being talkative to avoid shaming myself. Participants endeavoured to avoid shame and prevent others from knowing about their then-perceived foibles.

The following participant cogently represented this tendency:

I was ashamed of my results. When my friends asked about my results, I told them that I had scored like them. I was shameful to tell the truth...I was scared that if I were to tell them my results, they would laugh at me and look down on me.

Pre-emptive actions aimed at shame avoidance included unethical strategies like lying and cheating to defend the self against imminent shame. The following participant reported:

I felt ashamed when I failed in the exam...I lied when people asked about my results...Failure reduces my confidence and it would worry me much if they know about it. I wouldn't tell the truth. It will remain my big secret.

Reactive actions. Reactive actions referred to the action-tendencies of shame, some of which were enacted to avoid future similar experiences of shame after the deficient self was exposed while others aimed to enhance the misconstrued self and disconfirm the erroneousness of others' judgement. Still some behavioural responses were acted out to effectively repair the situation and be consistent with self-ideals.

For reactive shame avoidance, after being painfully subjected to shame, participants engaged in these behaviours to avoid its experience again. Two themes seemed to reflect these tendencies, namely, "*damage control*" and "*deconstructing my negative self-views and changing others' appraisals.*"

Damage control. Following the experience of shame, some participants engaged in corrective actions like apologizing, confessing and undoing. However, protective strategies, like attempts to prevent others from changing their perceptions of the self and restore their priori positive views of them appeared to underlie these seemingly reparative behaviours. These putative protective motivations were inferred from the accompaniment of inconsistent actions with genuine reparations. For instance, though some participants reported apologizing to the transgressed, concerns with the effects of their transgressions on the victim were not reported. Moreover, these apologies did not lead to relationship-enhancement as they did not stem from a firm conviction of being at fault. The following participant represented this tendency:

...After the incident, I realized I wasn't being fair to myself. I said sorry to her after the exam but there was no response from her. Nevertheless, I am still very much blessed for not losing other friends because of the *fitnah* (sedition). The truth is with me.

Other participants apologised for misbehaving but at the same time tried to justify their behaviours like the following respondent:

I explained to my best friend why I cheated in the test because I had to do sports training and I did not have time to study. I apologized to them about my mistake.

Furthermore, some respondents did not appear to be concerned with the amorality of their transgressions. They did not show any regret for misbehaving and apologized only after others knew about their transgressions as the following participant reported:

...All my friends whom I lied to knew my real results. At that time, I felt so ashamed. I don't know where to hide my embarrassment. Luckily my friends did not isolate me. They forgave me. I cried and apologized to them.

Deconstructing my negative self-views and changing others' appraisal. After enduring a negative life event, some participants attempted to overcome the perceived flaw and change others' negative judgement of the self. More specifically, participants were convinced that they were flawed in some respect and attempted to deconstruct this self-perception and change it in others' minds. However, the motive underlying the process of deconstruction was not self-improvement. Rather, it was an attempt to thwart future experiences of shame. The following participant was ashamed as he was not good in English and tried to overcome this perceived deficiency in order to avoid shame in the future. He admitted that it was the experience of shame that made him endeavour to excel in English:

I had poor results in English. When I face a person who is good at English, I felt ashamed to talk. In class my mouth and mind freeze...However now, I am more confident. I read and write a lot. If I do not act from now, when else? Shame made me progress.

The following extracted theme demonstrates reactive actions aimed at enhancing the misjudged self and disconfirming the inaccuracy of others' judgement.

Deconstruction of others' appraisals of the self: I am not who you think I am. After a negative life event, some participants refused to yield to others' negative appraisals of the self and engaged in relentless self-defence. The motivation was not to avoid the experience of shame as these participants believed they were erroneously perceived but to disconfirm the inaccuracy of what others thought of them by endeavouring to prove them wrong. These participants refused to assume responsibility for what happened and rendered failure/transgression to factors beyond their control. The following is an example:

I failed to complete my assignment on time. I was commented on sarcastically by my lecturer in front of my friends. He praised them. Their assignments were far simpler than mine. Although I mentioned that I did not have enough time and I did not have the transport...I was still scolded and teased. My friends laughed at me. I was really ashamed and hurt at that time.

In their attempt to countervail others' negative appraisal, these participants engaged in disparaging others who outperformed them or negatively evaluated them. The following participant reported:

My friend said that I was the reason for the defeat. He regarded me as the weakest debater...To me, the criticism was not fair and not true at all. He was the weakest debater as he could not talk without the given text. Even then, the text was done by me.

Moreover, in order to deconstruct others' negative appraisals, participants under this theme engaged in unrelenting efforts to prove that others were utterly wrong about who they really were as reported by the following participant who was negatively evaluated for not doing well in exam:

My teacher was disappointed with me. She called me 'dumb' and 'foolish.' Those were the words that I just did not like to hear and they were just like a sharp object that had cut deep into my feelings. My esteem was belittled but I did not fight back. Then I plucked up my courage and prayed to God and at last I got good results in the following year. I had shown them that their criticism of me was not true.

Some other participants refused to yield to others' negative appraisals by discounting their failure, as depicted by the following participant:

In the final exams, I did not do well as I only did last minute revision. I had answered all the questions but I had misunderstood one question that had caused me to lose 20 marks. I cried...I got low marks for the whole paper just because of some small mistakes.

The two themes of "effective repairing" and "discontinue the behaviour" appeared to represent reactions aimed at improving the self and getting closer to self-ideals.

Effective repairing. After transgression/failure, participants attempted to repair the situation by admitting to wrongdoing and genuinely apologising. Genuine apologies were contrasted with "damage control" or apologising just to restore others' positive appraisal of the self. Specifically, effective repairing was coded when the participant reported becoming closer to the victim she or he transgressed. For instance, the following participant reported hurting her friend, apologised to her, and both became closer after that incident:

Two months later, I was determined to go to her house to apologize although I was very embarrassed to see her. Thank God, the incident has in the end brought us closer.

Repairing in this study was also regarded as genuine and effective when participants reported deep regrets for misbehaving and wished to repair the situation. The following participant felt regretful for hurting a boy who offered her a rose:

I felt very regretful for hurting his feelings. I was ashamed of myself as I was very inconsiderate and did not regard his feelings. Sometimes, I wished that I could go back to the old times and put right my wrong doings. I really felt like apologizing to him.

Discontinue the behaviour. Following the experience of shame, some participants reported discontinuing the undesirable behaviour or starting a perceived desirable one. Under this theme, only behaviours stopped out of a concern with the wrongness or amorality of the performed deeds were considered, as depicted by the following participant who gave up lying after realising her mistake:

I lied but nobody knew about it. I lied to myself about what I had done. But I did not realize it at that time...When I realized it, I repented and felt ashamed before Allah s.w.t.

Triumphant feelings. This theme seemed to corroborate the conjecture suggesting that some reparative behaviour were masked by enhancing or protective motivations. Out of 7 scenarios coded under this theme, 3 (42.9%) were from the sub-theme of "deconstruction of others' appraisal of the self" and 4 (57.1%) from "deconstructing my negative self-views and changing others' appraisals of the self" reported triumphant feelings after enacting these reparative actions. These participants were overwhelmingly proud for outperforming those who subjected them to shame after they had relentlessly endeavoured to challenge their views, prove their worthiness, and overcome feelings of inferiority and shame. For instance, a participant who was disparaged by her lecturer succeeded to prove to him she was an exceptional student wrote:

I was very ashamed when I was regarded as stupid. I was annoyed with the teacher...At the end, I got the best score in that subject and became the best student. However, the teacher still looked down on my capabilities. On the day I was called to receive my best student prize... He looked shocked and asked for my results...Proudly I told him that I had scored 4 flat...Anyway, I was relieved as I could prove to him that I was not stupid.

Another participant rejoiced over the misfortune of a friend because he had negatively evaluated him: ...I also felt ashamed...I felt relieved and proud to know that his brother did not manage to enter any public university. I felt very relieved as I got an offer to further my studies in IIUM, a far more prestigious university than where his brother is studying now...My status is far better as I am doing a degree, whereas his brother is doing a diploma. I managed to subdue my anger and hatred. In fact, I was impatient to tell him the news.

Self-conceptions determine behavioural outcomes of shame. Indeed, the contention that different self-conceptions lead to distinct behavioural outcomes after the experience of shame was supported by the data of this study.

The response to shame was mainly determined by how respondents viewed themselves. Results in Table 4 show that 7 (70%) out of the 10 scenarios which described shame as being the outcome of actual-ideal self-discrepancies while engaging in the behaviour took redemptive actions by discontinuing the undesired behaviour and engaging in behaviour consistent with self-ideals. For scenarios relating shame to self-discrepancies after engaging in the behaviour, 2 (7.4%) stopped from engaging in the reprehensible behaviour and 8 (29.6%) took actions to effectively repair and restore the situation to the status quo ante.

Table 4: Frequencies and Percentages of Behavioural Reactions of Self-Discrepancy

Self-Conceptions	Effective Repairing		Discontinue the behaviour	
	Frequency	%	Frequency	%
Discrepancy during behaviour	0	0.0	7	70.0
Discrepancy after behaviour	8	29.6	2	7.4

As Table 5 shows, 5 (100%) out of the 5 scenarios in which shame appeared to be provoked by virtue of an “immune adopted self,” described relentless engagement in actions aimed to dissuade others from changing their positive appraisals of the self. Because these participants seemed very certain of their worthiness and other people’s appraisals of them attested to their exceptionality, they importunately engaged in behaviours that disconfirmed others’ new negative judgments.

Table 5: Frequencies and Percentages of Behavioural Reactions of the Immune Adopted Self

Self-Conceptions	Deconstruction of others' Appraisals	
	Frequency	%
The Immune Adopted Self	5	100

Table 6 shows that for the “fragile adopted self,” 1 (12.5%) of the 8 scenarios described engaging in deconstructing negative self-views, 1 (12.5%) related attempts to control the damage done and 1 (12.5%) anticipated rejection. These three themes, namely, “deconstructing my negative self-views,” “damage control” and “rejection anticipation” were strategies used to avoid shame a priori or consequentially. This seemed to suggest that some participants with a fragile adopted self readily re-adopted others’ new appraisal of them and unhesitatingly recast the self in light of these new appraisals. Conceivably, this may also explain the reason for engaging in deconstructing these negative self-views and calibrating their behaviours to fit others’ perspective and accordingly avoid being ashamed again. Moreover, through damage control, participants endeavoured to prevent others from changing their judgments of them not by aggressive means but by submissively yielding to others in order to restore their priori appraisals and avoid future experiences of shame.

Table 6: Frequencies and Percentages of Behavioural Reactions of Self-Conceptions

Self-Conceptions	Deconstructing my Negative Self-Views		Damage Control		Rejection anticipation	
	Frequency	%	Frequency	%	Frequency	%
The Fragile Adopted Self	1	12.5	1	12.5	1	12.5
Concern with Others' Evaluation	0	0	6	28.6	0	0
Persistently Deficient	2	16.7	0	0	5	41.7

In 6 (28.6%) of 21 scenarios coded as mainly concerned with how others evaluated the self, participants engaged in controlling the damage done to them after enduring a negative life event.

In a somewhat different light, 2 (16.7%) of the 12 persistently deficient scenarios related endeavouring to deconstruct their negative self-views and change others’ judgments of them and 5 (41.7%) anticipated rejection.

It seemed pertinent to suggest that the two themes of “concern with others’ evaluation” and “persistently deficient” differed in how much rejection was anticipated and thus in their respective behavioural reactions. More specifically, because the self was differently conceived in the two themes, participants differed in how much they anticipated rejection and their proclivity to either act a priori to avoid potential shame or consequentially after the improper behaviour was already enacted. Participants with concerns of others’ evaluation did not anticipate rejection and accordingly did not seem to anticipate shame a priori and avoided it by not acting on the undesired behaviour beforehand, as Table 6 shows. Instead, they appeared to undo the enacted bad behaviour only after others knew about it and were externally ashamed.

This suggests that the motivation underlying these seemingly reparative actions was primarily to embellish their failing self-image and restore others’ a priori positive appraisals without showing concerns with the amorality of the behaviour or its effects on others.

On the contrary, as Table 6 shows, participants who reported being deficient globally or in some fixed self-attributes anticipated rejection, though they showed a pronounced tendency to avoid future experiences of shame after failure, primarily endeavoured to thwart the experience of shame without any prior mischief as they tended to cast the self in an unfavourable light and a priori expect others to similarly perceive them. Therefore, these participants were already devastated by their perceived ineptness and strived to cover it from being revealed to others.

Thus, while the concern with others’ evaluation was merely external and did not stem from a perceived ineptness, the theme of being persistently deficient was primarily an internal shame that constantly acted as a reminder of the inept self and steered actions to thwart the exposure of the blemished self to threatening others. The former (concern with others’ evaluation) was a shameless state while the latter (persistently deficient) was a shame-bound condition.

Discussion

The present study found that shame was engendered by a broad range of situations that included moral as well as non-moral issues. A notable elicitor of shame that unexpectedly appeared in the analysis and was refractory to categorization under any of the situational contents was a generalized state of shame. This form of shame reflected a recurrent problem that stemmed from globally or contextually viewing the self as inept. These findings also supported the central contention of the study which proposed that different kinds of self-conceptions were likely to engender distinct forms of shame. Moreover, shame responses were found to vary by virtue of different self-conceptions from anticipatory to reactive on the one hand, and from genuinely to maliciously motivated, on the other.

Considerable research has documented that shame is provoked from a broad range of situations (e.g., Keltner & Buswell, 1996; H. B. Lewis, 1971; Tangney, 1992) and the findings of this study were no exception. What was different was the preponderance of situations related to negative evaluation in shame-provocation. One plausible explanation to this is the tendency of the Malays to hypercognize shame. Wilson (1967) noted that shame is regarded as the principle disciplinary device in the upbringing of children (cf. Goddard, 1996) and one possible mechanism to socialize shame and ensure conformity to social mores is negative evaluation.

Results of this study also showed a tendency of some participants to describe shame as a generalized state without pinpointing a particular situation. This seems to dovetail with Kaufman's (1989) approach which views shame as an internalized state that overwhelms one’s global self through repeated experiences of shaming and ultimately culminates in a shame-bound personality. Additionally, the proclivity of some participants in this study to experience shame in specific domains was consistent with Andrews and colleagues’ findings of chronic shame in specific behavioural, characterological or body characteristics (e.g., Andrews, 1995; Andrews & Hunter, 1997; Andrews, Qian, & Valentine, 2002).

The findings of this study indicated that different forms of self-views lead to different forms of shame, i.e., consistent with the presumed relationship between self and shame (e.g., Brown & Marshall, 2001; Buss, 1980; H. B. Lewis, 1971; M. Lewis, 2000, 2003, 2007; M. Lewis & Sullivan, 2005). However, we have extended the contentions of these approaches by a nuanced description of the patterns of self-conceptions that engender distinct forms of shame.

Self-discrepancies as provocateurs of shame have been amply reported in the literature (Bacal, 1997; Higgins, 1987; Lansky & Morrison, 1997, H. B. Lewis, 1971; Tangney, Niedenthal, Covert & Barlow, 1998). Similarly, self-focused attention in which self-discrepancies are their inevitable ramifications (Duval & Wicklund, 1972) has been shown to have an inextricable affinity with shame (e.g., Arndt & Goldenberg 2004; Joireman 2004; Tangney & Dearing, 2002). In actuality, Izard (1977, 1981) contended that objective self-awareness state is tantamount to shame experience.

Despite this, shame was never regarded as the upshot of the two processes combined (self-focused attention and self-discrepancy) as it was axiomatically assumed that shame inevitably leads to hiding which seems to contradict the contention that self-focused attention and self-discrepancy entail actions to reduce the perceived self-disparities.

Contrary to these self-evident assumptions on the maladaptiveness of shame, the findings of the present study showed that shame evoked out of self-discrepancies is a benign shame that motivated reparative behaviours.

The yardstick against which shame was constantly evaluated as a pathogenic affect is its accompaniment with hiding instead of repairing. Findings indicated to the extent that shame was evoked from self-discrepancies, reparative actions would be the ensuing outcomes. However, these latter findings apparently stand at odd with empirical evidence and theoretical assertions contending that self-disparities are the primary precursors of pathogenic shame (e.g., Bacal, 1997). H. B. Lewis (1971) maintained that the more one is discrepant from ideals the more he or she is prone to shame and neuroticism. Resolving the seeming paradox requires a closer look at self-discrepancy theories. Self-discrepancy approaches can be divided into self-discrepancy theory (SD; Higgins, 1987, 1996) and objective self-awareness theory (OSA; Duval & Wicklund, 1972).

Self-discrepancy theory (Higgins, 1987, 1996) states that a combination between the domains of the self (actual, ideal and ought) and each of the standpoints on the self (one's own/significant others' standpoint) yields distinct types of self-state representations. Higgins (1987) proposed that different types of chronic discrepancies between the self-concept and different self-guides predict different emotional responses.

Most germane to this study is the distinction between one's own standpoint and the standpoint of others because it presumably defines what kind of shame experience will ensue. More specifically, a closer look at self-conception (and therefore shame-patterns) themes with their relations to behavioural reactions, one observes that one's own personal standpoint versus others' standpoint do indeed determine the trajectory of shame. That is, for the theme of "I am persistently deficient," perceived discrepancies between one's current states and what one hopes to achieve as well as what others hope one should attain could be inferred from the associations this theme had with "rejection anticipation" and reactive actions aimed at shame avoidance like "deconstructing my negative self-views and changing others' appraisals." The perceived discrepancy between the current self-state with the hoped-for state stemmed from the participant's standpoint as he or she reported being internally ashamed and fell short of she or he personal standards. The standpoint of others for this theme could be deduced from the fear these participants have of external shame and their attempt to avoid shame a priori as they knew they did not measure up to others' standards of competence, worthiness and attractiveness.

For the theme of "concern with others' evaluation" and "the fragile adopted self," participants seemed to lack adherence to specific personal values and appeared to adopt others' values of what was proper to be or do. These participants are best described as having confused self-conceptions because they did not have specific personal standards along which they evaluated themselves and they seemed to readily adopt others' evaluation of them and engaged in changing their behaviours to restore others' positive appraisals and avoid scorn. Put it differently, they merely experienced external shame but internally they were shameless as they did not feel they were discrepant only after their improper behaviours were revealed to others. The portrayal of these participants seems to be in line with Brockner's (1983) conception of *low self-esteem plasticity* and Campbell's (1990) conception of self-concept clarity. For the theme of "the rigid adopted self," these individuals seemed to have strong personal standards and show little concern for others' hopes for them as they think they were not discrepant. They react not to test the validity of their self-attributes but to confirm their positivity and provide the evidentiary bases for their claims to prove others wrong about their worthiness. For the theme of "shame evoked as a result of discrepancy," respondents seemed to have strong personal standards since they strived to attain self-ideal congruence.

However, confining the interpretation of the current results solely to self-discrepancy theory is insufficient to account for the presumed adaptiveness of this form of shame as Higgins (1987) posited that specific types of self-discrepancies are differentially linked to emotional discomfort. It is worth pointing out that Higgins's (1987) theory of self-discrepancy provides no account of actions oriented to reduce the perceived discrepancy which leaves out the behavioural outcomes of shame found in the current research unaccounted for. The theory of objective self-awareness (Duval & Wicklund, 1972) with its embellished revisions (e.g., Carver & Scheier, 1981, 1998; Pyszczynski & Greenberg, 1987) seem indispensable for explaining the associations of the different self-conceptions with the distinct forms of shame and their behavioural responses.

Objective self-awareness theory (Duval & Wicklund, 1972) proposes that when attention is focused on the self, an inevitable automatic comparison of the self with standards of correctness will be conducive to a perceived disparity and self-evaluation to the extent that the self is different from the mental representation. The greater the discrepancy, the more negative one's self-evaluation and affect will be (Duval & Wicklund, 1972).

This motivates changing the self in order to be congruous with the mental representation of standards of correctness. The present study posits that the activation of the different self-conceptions found was not possible without an inward focus on the self and that this self-focus, as previous research has reported (e.g., Arndt & Goldenberg, 2004; Joireman, 2004; Izard, 1971; Kauffman, 1989; H. B. Lewis, 1971; Tangney & Dearing, 2002; Tracy & Robins, 2004), engendered shame.

Of relevance to the present study is self-regulatory preservation theory (Pyszczynski & Greenberg, 1987) that has reconciled between findings indicating differential relations of self-focus attention to psychopathology. Pyszczynski and Greenberg proposed that self-focused attention is adaptively functioning when it activates the self-regulatory cycle, facilitating thereby goal pursuit. It becomes problematic, however, when the individual suffers a loss that is central to his or her identity and is stuck in focusing on an irreducible discrepancy that he or she is unable or unwilling to abandon. These irreducible discrepancies lead to a firmly entrenched negative self-image. The findings of the present study indicated that, indeed, fixed self-attributes as in the theme of "I am persistently deficient" proved to be detrimental as the person saw no avenues for discrepancy reduction or ways to exit self-focused attention. Two perpetual immovable states of deficiency can be felt.

One is global; the other is contextual. In the former, the individual succumbed to a dispositional persistent form of shame that impeded him or her from overcoming feelings of worthlessness. The individual was conscious of his or her ineptness and by virtue of a ruminative style of self-focus, attention was gravitated to this blemished self that, in turn, exacerbated and intensified shame. For the latter, following an awareness-triggering situation, the individual was subjected to a volatile state of shame that impaled against any reparative behaviour as the discrepancy was irreducible. Shame attached to a fixed context was likely to momentarily subside but to reappear again when similar situations were encountered.

Carver and Scheier's (1981, 1998) self-regulation theory, a derivative of objective self-awareness, proposed that people are not always motivated to attain particular ends. They sometimes want to move away or escape particular ends; they want to *not* be in specific ways (Carver & Scheier, 1998), a process Carver and Scheier (1998) called *discrepancy-enlarging*. Carver and Scheier's (1981, 1998) self-regulation theory seems to account for the behavioural responses of the theme of "the rigid adopted self." Individuals under this theme do not feel any discrepancy at all as they thought that the actual self surpassed the ideal self but it was others who have misconstrued the outstanding self. In this case, this individual was more likely to engage in behaviour that will reinstate his or her position in others' minds. Maladaptive actions associated with malicious motivations like trying to prove one's capabilities or outperform others were undertaken to escape the unwanted state.

The Cultural Self-Perspective and the Malay Culture

The cultural approach to the self proposes that the pervasiveness of face among Japanese as opposed to self-esteem among North Americans lead them to strive to preserve face and gain respect from others (Heine, 2005a; Heine, Lehman, Markus, & Kitayama, 1999). We believe that, in general, the findings of this study dovetail with Heine's cultural-self perspective in two aspects and depart from it in one respect. Face plays a significant role in the Malay social milieu (e.g., Abdullah & Pedersen, 2009) and determines shame experience and its behavioural outcomes.

The distinction Heine (2003) made between an abstract level and an operationalized level of analysis is also pertinent to the interpretation of the findings as it helps understand the similarities and the differences of the experience of shame as it relates to the self.

We believe that the hypersensitivity of the Malays to shame highlights these commonalities and attests to the universal need to *be a good self* (Heine, 2005a). Cultural idiosyncrasies, on the other hand, may explain the tendency of the Malays to engage in reparative behaviours to self-improve in an attempt to regain respect from others. Yet, the findings indicated that the Malay individual does not self-improve only to strive for social approval. He or she may have an internal frame of reference (Heine, 2005b) that steers self-improvement towards achieving self-ideal consistency rather than struggling to avoid opprobrium. Research has yet to unravel whether this is an idiosyncratic feature of the Malays as their religion (Islam) stresses that gaining approval from others should not be the overriding concern in the pursuit of self-ideal congruency.

The abstract level of analysis and the Malay's hypersensitivity to shame. Malays are driven by *malu* (Abdullah & Pedersen, 2009) as it is central to the social fabric of their social context. The centrality of *malu* in the Malay society can be inferred from the close relationship of *face* or *air muka* to the emotion of *malu* (e.g., Abdullah & Pedersen, 2009).

The Malay is hypersensitive to what others think about him or her (Swift, 1965) because basically he or she is afraid to lose face and thereby experience *malu*, suggesting that fear of shame is unceasingly functioning. Shame is continuously operating in one's consciousness which puts the individual in a state of alertness to its occurrence, constantly anticipating it and pre-empting its experience by any means. Moreover, to Goddard (1996), the fear of shame in the Malays is equivalent to shame-anxiety in the European context. Shame anxiety in the European context acts as a guard against undignified behaviour by sensitizing the individual to judge the extent to which an event is degrading. This corroborates the contention that the fear of shame in the Malay context serves as in the European milieu the function of preserving the dignity of the self, suggesting thus, that the need to be a good self in both contexts (interdependent vs. independent) is equally central. More importantly, Henderson, Vreeland, Glenn, Hurwitz, Just, Moeller and Shinn (1977) contended that all social behaviour in the Malay society is regulated in a way to protect "individual's *amour propre* as the self is the most jealously defended possession" (cf. Goddard, 1997, p. 187).

The operationalized level of analysis and shame in the Malay context. What seems culturally specific about shame in the Malay context is that it is socialized (Wilson, 1967), serving therefore significant social functions.

Shame influences the Malay individual in two opposite ways. First, anticipatory and actual shame may *positively* affect the individual and his or her social relationships. Withdrawal and hiding as consequences to shame experience are not exclusively dysfunctional. They are believed to signal submission and deference leading the dominant attacker to de-escalate and back-off (e.g., Barrett, 1995; Gilbert, 1997). Plausibly, however, the ubiquity of shame in the Malay culture may suggest that it exerts far more important functions than these conformity strategies, i.e., through its submissive behavioural components shame not only leads the attacker to back off from the victim (previously transgressor), it may also vicariously induce empathy in the dominant attacker to the conforming victim as he or she knows the painful effects of shame, fears it, and often anticipates it.

It may, however, also imply that shame in the Malay milieu is an elicitor of courtesy. These contentions seem to be in line with the tendency of the Malays to be sensitive and considerate to others (Wilson, 1967, cf. Goddard, 1997), their inclination to safeguard each others' *maruah* or dignity by not subjecting each other to *malu* (Goddard, 1997), and their predilection for *courteous* and *proper* behaviour or *halus/patut* (e.g., Mahathir, 1970). Shame also can pre-empt one from engaging in socially undesired behaviours like suicide in fear of dishonouring the family (Abdullah & Pedersen, 2009). This form of shame, known as *reflected shame*, has been shown to inhibit undesirable behaviours in South Asian communities (P. Gilbert, J. Gilbert & Sanghera, 2004).

Second, anticipatory and actual shame may *negatively* influence the individual by engaging in amoral behaviours (e.g., lying and cheating) or restraining from public self-affirmative performances (e.g., public speech) to protect the self from a foreseen shame.

The Malay's putative fear of shame and its role in safeguarding each others' *maruah* or dignity signifies that the primacy of the self underlies this shame anxiety because what is at stake is the loss of status in others' eyes and that the source of this shame anxiety seems to be actual past painful experiences of shame.

We believe that this, in turn, casts doubt about the general tendency of not inflicting shame on others and behaves the question of the role of the value of elder respect in both instilling shame anxiety and veering away from incurring shame in others. Speculatively, authority figures use painful shaming in socialization and children are disallowed to challenge this authority. Repeated experiences of painful shaming may instil in the Malay individual not only fear of shame but also empathy and courtesy towards others who behave indecorously. This behaves the question of whether these same shame-inflicted individuals would restrain from shaming their children/students as the pervasive value of the elder-respect may encourage shaming from the eldest and restrain from the recipient child.

It is worth pointing out that the tendency of the Malays to engage in reparative behaviours after shame may be specific to Eastern societies which may then justifies why research on shame and the self has not considered the role of both self-awareness and self-discrepancy in steering reparative behaviours in shame experience as shame in the West may not engender restitution to regain respect.

The role of religion in the experience of an adaptive form of shame. The findings of the present study indicated a form of shame that leads to reparation aimed at self-improvement. A closer scrutiny in shame-eliciting situations shows that 100% of situations provoking shame as a result of a “discrepancy felt when engaging in the behaviour” were clustered under religious shame. This behaves the question of what is the relationship of religion (in this case Islam) to the experience of a healthy form of shame in the Malay context and how is it intertwined with a reflective self that fosters improvement.

Islam has a strong influence on the Malay way of life as they tend to strictly follow its teaching (Abdullah, 1996). With the internalization of its comprehensive code of behaviour, attempts to attain self-ideal-congruence may be persistent and shame is the corollary to the inevitable incongruence.

Self-purification as an ideal in Islam can be attainable through self-examination and repentance. Self-examination inevitably provokes shame that is discharged in reparative behaviours aimed at self-improvement. These processes may allow one to discover the frailties of the self. Shame here is experienced twice in a healthy way. The first is experienced after feelings of incongruence as a result of breaching an ideal; the latter is most probably felt after an insight into the new discovered self is achieved. Yet, future research can explore whether the role of religion in instilling a healthful shame is a pancultural phenomenon or culturally specific to the Malay culture.

Conclusion

The present research investigated the role of the self in steering different forms of shame with distinct behavioural outcomes. The findings of this study were consistent with mainstream research indicating that shame is detrimental. However, the findings departed sharply from previous research in distinguishing between an anaemically deficient shame (shamelessness) and an exceedingly surfeited shame (global/specific) and identifying a healthful kind of shame. The role of the self in shame experience raises the question of how shame contributes to the self (e.g., Barrett, 1995). We believe that the relationship between the two constructs is bidirectional and that assigning regulatory functions to a generic shame (e.g., Barrett, 1995; Gilbert, 1997) obstructs understanding the contribution of shame to the self. Shame as a multifaceted construct can have different effects on the self, depending on what kind of shame is experienced.

It is noteworthy to mention that the centrality of shame in the Malay society is a theoretical speculation with no empirical moorings. *Malu* is a vague word that implies a variety of meanings and as no studies have systematically investigated the different culturally-specific meanings of this term, the present study examined the implied meanings of this term in Western definitions. Therefore, future research has to establish the centrality of shame in the Malay culture through defining the term *malu* in its embedded context without imposing predetermined definitions.

One important limitation of the present research is its failure to consider the cultural variations of the self and their repercussions on the experience of shame. Face and self-esteem may engender different versions of shame experience (Aknouche & Noraini, 2011).

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