

# Cocreative Transactional Analysis

*Graeme Summers and Keith Tudor*

## Abstract

**Drawing on field theory and social constructivism, the authors present a dynamic, cocreative approach to transactional analysis. This approach emphasizes the present-centered nature of the therapeutic relationship—or therapeutic relating—and the cocreative nature of transactions, scripts, ego states, and games. The authors frame this approach within a positive health perspective on transactional analysis (as distinct from an undue emphasis on psychopathology) and argue that cocreative transactional analysis provides a narrative or story about transactional analysis itself that offers new and contemporary meanings to old transactional truths. The article concludes with a series of questions for self-supervision that may serve as a useful guide to cocreative transactional analysis practice.**

There is currently a lively debate in transactional analysis about its present, past, and future. This discussion often becomes polarized in terms of whether transactional analysis is “transactional analysis enough” or not. Over the past 40 years, transactional analysis has developed in many directions—theoretically, technically, organizationally, and internationally—and in doing so has, in our view, lost some of its radical roots. At the same time, therapy, science, and the social/political world have changed at an exponential rate, and transactional analysis needs to account for this.

In the past ten years, a number of writers have argued for what may be characterized as a “back to the future” approach to transactional

analysis, that is, returning to its basic concepts, discovering new meanings or reaffirming old ones, and applying these to a changing and postmodern world. Cornell’s (1988) critical review of life-script theory, Schmid’s (1991) focus on the transactional creation of realities, and Allen and Allen’s work on postmodernism (1995) and constructivism (1997) have all been especially influential. It is in this tradition that we locate our work in developing a narrative of transactional analysis that reframes and updates familiar concepts.

## The Roots of Cocreativity

Cocreativity derives principally from two theoretical strands: field theory (Lewin, 1952) and social constructivism (see Gergen, 1985).

Field theory is a general theoretical outlook that emphasizes interrelationship. Drawing on the metaphor of an electrical or magnetic field, this holistic approach questions linear causality and suggests that events occur “as a function of the overall properties of the field taken as an interactive dynamic whole” (Parlett, 1991, p. 70). The implication of this approach is that “when two people converse or engage with one another in some way, something comes into existence which is a product of neither of them exclusively. . . . There is a shared field, a common communicative home, which is mutually constructed” (p. 75). This approach has been particularly developed in gestalt theory and therapy. By applying and developing this perspective in relation to transactional analysis, we are emphasizing the transactional, the relational, and the mutual in the therapeutic relationship.

From social constructivism we derive the perspective that our perceptual and phenomenological experience is an elaboration or construction based on hypothesized cognitive and affective operations. That is, there are many consensual realities, and we organize ourselves and our experiences through the

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stories or narratives we tell about "reality." Within transactional analysis, Allen and Allen (1997) pointed out that since transactional analysts work with scripts, they are familiar with this narrative view of realities. The principles of constructivism that are relevant to and that inform cocreative transactional analysis may be summarized as follows:

- Meaning constantly evolves through dialogue.
- Discourse creates systems (and not the other way around).
- Therapy is the cocreation, in dialogue, of new narratives that provide new possibilities.
- The therapist is a participant-observer in this dialogue.

Allen and Allen (1997) summarized and compared the different emphases of constructionist and classical schools of transactional analysis with the following additional implications for cocreative transactional analysis:

- There is an emphasis on continuous self-creation and self-re-creation (in dialogic relationship).
- Ego states and transactions are elicited from meaning (rather than the other way around).
- Script is a story that, like transference, is cocreated in an ongoing present process.

### **Cocreative Transactional Analysis Guiding Principles**

1. *The principle of "we"-ness.* The therapeutic relationship (or relating) is more potent than the potency (or impotency) of the therapist or client alone. It provides a supportive theoretical framework that emphasizes the "we"-ness (Saner, 1989) of the therapeutic relationship as the medium for human development and change. It also emphasizes the cultural context of both individual and field. This is significant given that more cultures in the world are "we" cultures than the individualistic and individualizing "me" monocultures of northern and western Europe and nonindigenous North America. These latter cultures have given rise to much monocultural psychology and psychotherapy.

For example, "we"-ness has generally been discouraged within transactional analysis for fear of inviting symbiosis. However, the "we-ness" of Adult-Adult relating is very different from the "we-ness" of Parent-Child, Parent-Parent, or Child-Child relating, all of which constitute transference (or what we consider cotransferential) processes.

2. *The principle of shared responsibility.* Given its emphasis on meaning through dialogue and on multiple meanings and realities, cocreative transactional analysis supports the practical manifestation of interdependence, cooperation, and mutuality within the therapeutic relationship by emphasizing the shared client-therapist responsibility for the therapeutic process. This is in contrast to traditional transactional analysis, which emphasizes the personal responsibility of the client. It also contrasts with more recent integrative transactional analysis approaches, which, in our opinion, tend to overemphasize the responsibility of the therapist. While the therapist must take a leading role in the creation of therapeutic safety, our emphasis on shared responsibility is intended to provide a conceptual frame for acknowledging and exploring cocreated experience.

Berne's (1964/1968) focus on the advantages of games suggests that even in apparently negative exchanges, each party contributes to and gains from the relationship between them. The healing aspects of relationship—for example, potency, permission, protection, support, and challenge—are cocreated and comaintained by active contributions from both therapist and client. The therapist's particular contribution is his or her skill in facilitating and using this shared responsibility to promote awareness and development. Shared responsibility is not, however, the same as equal responsibility. Efforts to divide responsibility into a 50:50 or a 60:40 split, for example, are reductionist attempts to define the phenomenon of relationship from an individualistic frame of reference.

3. *The principle of present-centered development.* Cocreative transactional analysis emphasizes the importance of present-centered human development rather than past-centered

child development. Essentially, we view psychotherapy as an Adult-Adult process of learning and healing. Although this process necessitates involvement in and learning from positive and negative transference as it is created in the relationship, the therapeutic focus is on supporting the client's here-and-now developmental direction. This reduces the possibility of inappropriate infantilizing of adult clients (and trainees), which can develop when growth is predominantly defined within a Parent-Child frame of reference.

Following Bruner's (1986) division of knowledge of the world into the paradigmatic (traditional science and consensual reality) and the narrative (the realm of stories), Allen and Allen (1997) argued that, while ego states, transactions, and games fit easily into the paradigmatic mode, scripts are more compatible with—and, indeed, *are*—narrative:

The concepts of ego states and games fit with the modernist's search for "essences." They are conceptualized as "real" and basic. . . . In contrast, at least certain understandings of script fit with the post-modernist position that meanings can emerge and disappear in the context of our interactions. (p. 91)

Although we agree with this reformulation of script theory, we also accept the challenge of the "narrative turn" that philosophy and social science have taken in the last 20 years to deconstruct transactions, ego states, and games in order to present a more complete picture of a constructivist, cocreative transactional analysis.

In this article we develop cocreative transactional analysis by first discussing the therapeutic relationship, cocreated through transactions (or what we term *cocreative reality*), following which we address the other three main areas or foundations of transactional analysis: ego states (*cocreative personality*), scripts (*cocreative identity*), and games (*cocreative confirmation*).

### The Therapeutic Relationship

It is now widely acknowledged in outcome research on psychotherapy that the therapeutic

relationship is the determining factor in successful therapy (e.g., Bergin & Lambert, 1978; Hill, 1989; Luborsky, Crits-Christoph, Alexander, Margolis, & Cohen, 1983). In fact, the relationship is more important in counseling and psychotherapy than is the practitioner's theoretical orientation (Duncan & Moynihan, 1994; Kahn, 1997; Lambert, 1992). Despite the fact that the therapeutic relationship is presupposed and "a sine qua non of effective therapy" (Stewart, 1996, p. 198), comparatively little has been written explicitly about the therapeutic relationship in transactional analysis (see Barr, 1987; Berne, 1966, 1972/1975b; Clarkson, 1992; Erskine, 1998). Although there are differences between the three so-called traditional "schools" within transactional analysis, all describe the therapeutic relationship in terms of transference (see Tudor, 1999). Erskine and Trautmann (1996), in particular, emphasize the relationship as central to the integrative approach to transactional analysis (viewed by some as a fourth school within transactional analysis). This approach draws heavily on self psychology and focuses on the importance of the therapist providing empathic attunement to the client. The role of the therapist as provider differs in emphasis from our conceptualization of psychotherapy based on mutual relationship and shared responsibility.

In a seminal and extended article on the subject, drawing on Greenson's (1967) original work in psychoanalysis, Gelso and Carter (1985) discussed three components of all therapeutic relationships: the working alliance, the transference or "unreal" relationship, and the "real" relationship. In her model of five relationship modes, Barr (1987) identified a "developmentally needed" (p. 137) relationship. Clarkson (1990, 1995) adopted this and added a fifth component: transpersonal relationship.

With regard to Gelso and Carter's theorized therapeutic relationships, we agree with Barrett-Lennard's (1985) reaction to their article:

No clear-cut grounds are given or evident for distinguishing elements that belong to the real relationship versus the working alliance. The problem may result from

these two components being basically different in kind, the former having to do with strength and effectiveness of the relationship . . . and the latter referring to a main area of content of the relationship. (p. 287)

Gelso and Carter and those who follow them, then, essentially confuse two forms of knowledge: one defining the content—and, we would add, process—of the relationship; the other evaluating a quality (strength, effectiveness) of the relationship. The working alliance is thus part of making and maintaining an Adult-Adult relationship, not a separate relationship in itself.

On the question of the developmentally needed relationship, it is perhaps significant that Barr (1987), in her brief description of this relationship mode, did not describe or diagram the relationship between client and therapist. We suggest that in theory and practice, any developmentally needed or reparative transaction is based in a transference relationship, that is, in some replay of the past in the present (e.g., an “I as I was—You as I would like you to have been” relationship). In our view, the

Child developmentally needed relationship is a positive, idealized or idealizing version of the transference relationship, whereas age-appropriate Adult developmental needs are a feature of present-centered relating.

Finally, we view Clarkson’s addition of the transpersonal as a quality—or moment—in the relationship rather than as a relationship in itself. Thus we consider the notion of a transpersonal relationship to be an overextrapolation of occasional moments of transcendence that occur within the I–You relationship.

In our view, these three models are overcomplicated both theoretically and from a practical, clinical point of view. A transactional analysis model of therapeutic relationships needs to be based on the analysis of transactions in the therapeutic relationship: a cocreative transactional relationship.

Our simplified proposal is that there are essentially two ways of relating: present-centered Adult-Adult relating and past-centered cotransferential relating (see Figure 1). In addition, there are the stepping stones of “partial transference transactions” by which we move between past- and present-centered relating.

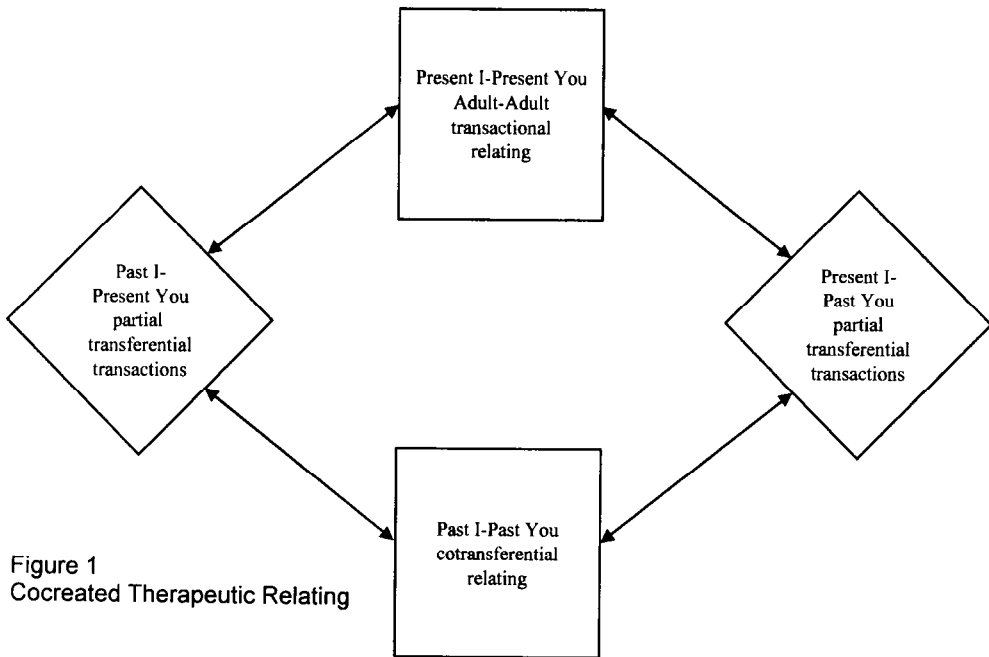


Figure 1  
Cocreated Therapeutic Relating

The process of relating occurs when two or more people engage in a series of transactions. The double-headed arrows in Figure 1 represent the equal value we give to both forms of therapeutic relating and the movement between them. Both ways of relating can cocreate meta-narratives on the therapeutic relationship. However, while cotransference relating creates familiar transference themes, Adult-Adult relating allows for fresh configurations and meanings to emerge.

This formulation has a number of advantages from a transactional perspective:

1. It names and emphasizes the present-centered Adult-Adult therapeutic relationship.
2. It locates and equalizes the partial transference transactions (Past I–Present You and Present I–Past You) in that both client and therapist may be experiencing the past in the present or have “transference attitudes” (see Rogers, 1951, p. 199). This view suggests that either the therapist or the client can make a therapeutic intervention (i.e., can initiate a shift from past- to present-centered relating).
3. It emphasizes the shared responsibility of both parties (client and therapist) for creating and maintaining a cotransference relationship when operating from a Past I–Past You position.
4. It is comprehensive in describing and reflecting therapeutic relationships based on analysis of structural transactions and corresponding rules of communication (Berne, 1966) (see Figure 2).

Adult-Adult relating and cotransference relating are both examples of complementary transactions by which communication can proceed indefinitely (Berne’s first rule of communication). Partial transference transactions are, of course, crossed transactions whereby “a break in communication results and one or both individuals will need to shift ego-states in order for communication to be re-established” (Stewart & Joines, 1987, p. 65) (Berne’s second rule of communication). For this reason we regard the partial transference transaction as a transitory stepping stone between past- and present-centered ways of relating. Our suggestion is that crossed transactions alone

cannot support a sustainable form of relating. If the client is consistently relating transference-ally, then it is often useful to assume that the therapist is in some way contributing to the transference process. Berne (1966) was clearly suggesting this in his description of ulterior transactions and in his corresponding third rule of communication: “The behavioral outcome of an ulterior transaction is determined at the psychological and not at the social level” (p. 227).

*A note on terms:* In discussing these therapeutic relationships, we use the terms “Adult-Adult” and “cotransference” rather than “real” and “unreal” (as Gelso and Carter did) because we regard transference relating as phenomenologically real. For instance, wanting a therapist to be and seeing her as the independent/loving/responsive mother the client always wanted is no less real a desire for it being projected and transference. Transference is not “not-OK”; it is one way of describing ways of experiencing in therapy (Allen & Allen, 1991).

In fact, all ways of relating are important; indeed, Berne (1972/1975b) asserted that we often need to play games with clients in order to make a relationship. Also, we prefer to use “past” rather than the possible “not-You” because the former emphasizes that this relating is transferred from the past rather than implying that it is not real or not really “You.” We also recognize—and, along with constructivists, emphasize—that the past is as much affected by the present as the present is influenced by the past. We prefer the term “relating” to the word “relationship” (although we use both interchangeably) since it emphasizes a process within the therapeutic relationship rather than a fixed entity. We use structural transactions as the basis for cocreative transactional analysis because they are based on the structural model of ego states, which helps to distinguish between transference and non-transference relating (in contrast to functional transactions, based on the functional model of ego states, which is a model for mapping behavioral options). These two approaches to transactions have been well described by

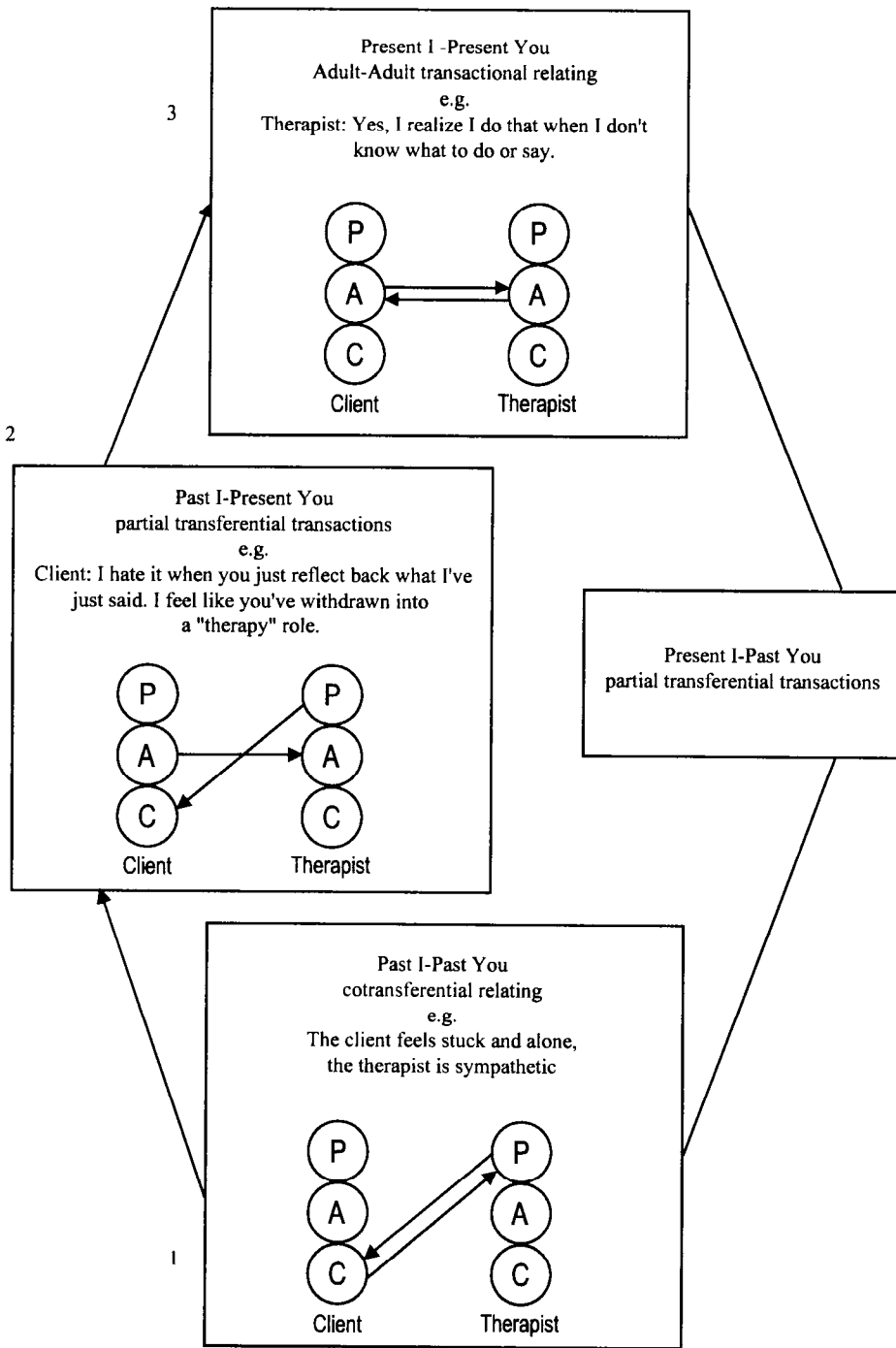


Figure 2  
Cocreative Therapeutic Relationships: Mapping Transactions

Lapworth, Sills, & Fish (1993). Our conceptualization of ego states is clarified in the section on ego states later in this article.

*Cotransferential therapeutic relating.* Allen and Allen (1997) described a constructivist conceptualization of transference:

We create a familiar relationship pattern with the other person in the here and now, and . . . much of this relationship depends on how we are organized and the stories we and others tell ourselves; that is, we create the relationship based on what we are capable of, our stories, and what others, their stories, and the context allows. (p. 92)

The logic of a constructivist or cocreative transactional analysis is that transference—and countertransference—are cocreated, and thus, along with others, we prefer the term “cotransference”:

This better reflects the reality that meaning is being cocreated by both subjectivities . . . with neither person holding a more objectively “true” version of reality than the other. It reflects an appreciation of the inevitable, moment-by-moment participation of the therapist’s subjective organisation of experience in a system of mutual influence. (Sapriel, 1998, p. 42)

Both familiar and fresh meanings are cocreated within the relationship. If client and therapist agree to contain the familiar transferential meanings within the therapeutic frame (contracting within the present Adult-Adult therapeutic relationship), then they can enact, explore, clarify, and understand their cocreated transference.

The following example is from an initial session with a client who describes how she often feels misunderstood:

*Client:* I want you to be able to understand me.

*Therapist:* I won’t promise to do that. I am willing to explore with you how we create understanding or the lack of it so that we can learn what happens.

*Client:* That’s OK with me.

We either learn more about how we reenact the past or we learn about how to embrace

present possibilities. Cotransference could be considered the manifestation of “co-unconscious states . . . [which] partners have experienced and produced jointly” (Moreno, 1977, p. vii).

Impasse and impasse resolution may thus be viewed primarily as relational phenomena. Traditionally, transactional analysis theorists have characterized the impasse as an intrapsychic phenomena with Type 2 and Type 3 impasses being resolved within the Child ego state (Goulding & Goulding, 1976; Mellor, 1980). Our perspective is that the impasse that was originally cocreated within a relationship is now comaintained through transferential relating or coresolved through Adult-Adult contact. For example, a client laments her lack of mothering as she avoids eye contact, sighs deeply, and collapses back into her chair. The therapist feels excluded as he watches her “suffer.” They may well be reenacting past deficits; they are certainly cocreating a deficit of here-and-now contact. The therapist invites reflection on their process:

*Therapist:* You look deprived and I feel excluded. What do you think is happening between us?

*Client:* I imagined you weren’t interested in what I was saying.

*Therapist:* It’s true that right now I’m not very interested in your relationship with your mother. I’m more interested in you and me.

*Client:* I could feel hurt, but actually I feel relieved to hear you say that.

In this example the therapist crosses the initial cotransferential transaction by inviting Adult-Adult reflection, which then leads to the cocreation of contact rather than a transferential reenactment of deficit.

We now turn to present-centered therapeutic relating before considering the movement between the two (see Figure 1).

*Present I-Present You: Intersubjectivity and therapeutic relating.* The present-centered Adult-Adult relationship is the context for learning and healing—including learning from transferential reenactment. In this regard the Adult-Adult relationship incorporates the I-You relationship as described Buber (1923/

1937) in his book entitled *Ich und Du*, which is often translated as "I and Thou." (We prefer the more familiar second person form "you" to the formal "thou" as a more accurate translation of the original German.) Buber emphasized the primacy of human relating, mutual confirmation, and healing through meeting.

Similarly, Berne's formulation of the existential life position "I'm OK, You're OK" is significant in that he viewed OKness as existing in a relational context. He did not formulate it simply as "I'm OK," but described it in relation to another. He even extended this in *What Do You Say After You Say Hello?* (Berne, 1972/1975b) in an important (and, in our view, often overlooked addition): "I'm OK, You're OK, They're OK" (which he took from Satir, whose formulation was "I count, you count, context counts"). In this regard, both Buber and Berne (as well as Satir) predated much modern (and postmodern) concern with intersubjectivity, described by Atwood and Stolorow (1996) as "reciprocal mutual influence" (p. 181). They further described the implications of such reciprocity:

From this perspective, the observer and his or her language are grasped as intrinsic to the observed, and the impact of the analyst and his or her organizing activity on the unfolding of the therapeutic relationship itself becomes the focus of . . . investigation and reflection. (p. 181)

One of the implications of Berne's three-handed position in relation to our formulation of a transactional approach to therapeutic relating is, of course, in the context of groups (and organizations). If either the client or the therapist is relating from his or her past or "not-present" position (and especially if they are both in that position), other group members may not be caught in it or expressing transference attitudes and will therefore be helpful in being conscious, enlightening witnesses to the cotransference. This configuration can be understood as a manifestation of the following positions: "Past I–Present You–Present Them," "Present I–Past You–Present Them," "Past I–Past You–Present Them." One group therapist became frustrated with a client who kept

constantly interrupting her; after a number of such transactions, the therapist raised her voice and said that she was irritated with her client, at which point the client became scared and defensive. The client missed the next group, and at a subsequent group accused the therapist of being abusive toward him. The therapist and a number of group members became involved in an aggressive-defensive game, reminiscent of the client's experience of and relationship with his mother. After a number of unsuccessful attempts to communicate with the client, the therapist, using the idea of the Carom (Woolams & Brown, 1978, p. 74) transaction, began to bounce her interventions off other group members who had stayed in a present relationship with the client. As a result, the client was helped, albeit only for short periods, to be in a present-centered relationship with other group members and, through them, with the group therapist.

*Present-centered development.* In our view there is an overemphasis in transactional analysis conceptualizations of depth psychotherapy on the Child ego state; we believe that working with the "inner Child" reifies the ego-state metaphor (see the section on ego states later in this article). We therefore question transactional analysis techniques of deconfusion and redecision in the Child when they are based on regression to childhood scenes. A person's emotional desire to complete an archaic scene through an exchange with, for example, a parental figure is not an attempt to resolve the transference; it *is* the transference. Our task as therapists is not to facilitate such completion and thereby to reinforce the transference pattern; it is primarily to facilitate suspension of the transference expectation and to invite co-creation of fresh experience/s: "For the clinician, the developmental literature suggests that the careful, continued attention to the effectiveness of a client's present day functioning is more apt to facilitate self-enhancement than the therapeutic 're-doing' of a specific developmental period" (Cornell, 1988, p. 278). It is this juxtaposition of cotransferential and present-centered relating, developing in parallel, that facilitates the therapeutic emergence of



transference. This duality of relating enables transference phenomena to be experienced, compassionately identified, and contained in the relationship. Integration then occurs as the client gradually embodies and reowns previously fixated aspects of his or her experience in the context of freshly cocreated support that was originally absent in childhood.

What differentiates Adult contact from the reenactment of archaic fixated experience (i.e., Parent or Child ego states) is not the source or intensity of feelings but the incorporation of self and relational support. When a client reaches for, and cocreates contactful engagement in a manner that is new, he or she has by definition moved out of an archaic ego state. Our view is that archaic ego states are defenses that are to be deconstructed rather than deconfused or redecided. The only purpose of "working with the Child ego state" is, in our view, to identify fixated, and therefore alienated, aspects of experience, aspects that can then be assimilated through present-centered relating. We thus prefer to conceptualize the sharing and integration of previously withheld feelings, needs, and desires as the *expansion of the Adult* rather than the deconfusion of the Child. Depth psychotherapy is the process by which fixated, archaic experience is transformed into an extended range of Adult relational capacity.

Recent developmental theorists such as Stern (1985) consider developmental phases as ongoing processes throughout the life cycle with such phases not attached to childhood or any other specific life stage (see the section on script later in this article). Stern's suggestion that four senses of self (emergent, core, inter-subjective, and verbal) develop in parallel throughout adult life supports the possibility of working at nonverbal levels of self development within an Adult frame of reference. This contrasts with defining such work as preverbal along with the associated regressive implications. Similarly, developments in attachment theory conceptualize attachment as a life-cycle issue:

Bowlby's conviction that attachment needs continue throughout life and are not

outgrown has important implications for psychotherapy. It means that the therapist inevitably becomes an important attachment figure for the client and that this is not necessarily best seen as a "regression" to infantile dependence but rather the reactivation of attachment needs that have been previously suppressed. (Holmes, 1993, p. 143)

In transactional terms, psychotherapy enables clients to explore how they create reenactments of insecure attachments in the cotransferential relationship as well as how to develop a secure attachment within Adult-Adult relating. Berne's second rule of communication, which states that communication is (at least temporarily) broken following a crossed transaction, helps us to appreciate the perceived risk for clients and therapists in making the transition between cotransferential and Adult-Adult relating. Such a move may break the attachment, and an insecure attachment (symbiosis) may be seen as better than no attachment at all.

These perspectives on human development support present-centered diagnosis, contracting, and treatment planning.

*Partial transference transactions.* Partial transference transactions are transactions in which one party is in Adult and the other is not (see Figures 1 and 2). These transactions provide the link between the cotransferential relationship and the Present I–Present You relationship, and thus the map of cocreative therapeutic relationships (Figure 1) forms a chart by which we may navigate—or narrate—our way to present-centered Adult-Adult therapeutic relating (see Figure 2, to be read from the bottom up).

The example in Figure 2 reflects the point that the client may equally raise awareness of cotransferential relating. Another example, this time of the therapist inviting Present I–Present You relating, goes as follows:

*Client:* I must change. I haven't got time to stay like this.

*Therapist:* You sound harsh.

*Client:* Life is harsh.

*Therapist:* I understand you experience life

as harsh and I'm interested in whether you want to experiment with creating other kinds of life experience here.

*Client* (looks startled): Yes.

This begins (from the therapist) with an empathic transaction; the therapist then acknowledges the client's frame of reference in experiencing life as harsh *and* (rather than "but") invites the client to create a different experience "here" (i.e., in the present). An implication of the constructivist perspective is that the therapist does not have to confront the validity of the client's frame of reference, only its uniqueness as a way of experiencing life.

In cases of recurring crossed transactions, the analysis of ulterior transactions may reveal underlying cotransference. For example, a client repeatedly complains that the therapist is not listening to him. The therapist suggests that this is the client's projection. The therapist's defensiveness and subsequent defining of the client could indeed constitute "not listening." An exploration of the cotransference would involve a careful investigation as to the subtle ways in which the client's perception might be true. The shared exploration of ulterior transactions in therapy or supervision may therefore reveal instances in which an apparently present-centered communication has a past-centered transference dynamic embedded within it. Conversely, analysis of apparent transference process may reveal ulterior Adult-Adult dynamics.

Having offered this new narrative about therapeutic relationships or relating based on transactions or cocreative reality, we now turn our attention to examining the other foundations of transactional analysis from a cocreative perspective. We begin with script theory. Traditional transactional analysis theory offers us an outstanding and elegant system for understanding transference phenomena. However, as Cornell (1988) observed, "Like many clinicians, Berne became possessed by the effort to understand pathology. He lost track of health" (p. 274). The narrative theme throughout this revision of major transactional analysis concepts acknowledges the contribution of transactional analysis to healthy as well as

pathological processes. This balanced interest in health as well as pathology reflects current developments in health psychology, mental health (meaning *health*) and "salutogenesis" (i.e., the origin of health) (Antonovsky, 1979, 1987), and mental health promotion (see Tudor, 1996).

### **Script (Cocreative Identity)**

In a critical review of script theory, Cornell (1988) suggested that script, as presented in most transactional analysis literature, is "overly reductionistic and insufficiently attentive to the formative factors in healthy psychological development" (p. 270). From a philosophical point of view, this is especially ironic given the potential compatibility of script theory with constructivism (Allen & Allen, 1997). However, if, with Allen and Allen (1995), we are to view scripts as constructive narratives that, like memories, are cocreated in the present and projected into the past, then we need to reformulate much of our present understanding of script and script theory. Several points inform this critique:

- Traditional, linear, stage theories of (child) development have been challenged by writers such as Stern (1985): "It, therefore, cannot be known, in advance, on theoretical grounds, at what point in life a particular traditional clinical-developmental issue will receive its pathogenic origin" (p. 256).
- Scripts are cocreated; Cornell (1988) referred to current developmental research that suggests that infants influence and shape their parents as much as they are shaped by their parents.
- Injunctions, programs, and drivers/counterinjunctions are, equally, cocreated and decided and only become part of a person's script if accepted and "fixed" as such.
- Despite the concept of cultural scripting (White & White, 1975), the script, in one of its most popular and most often used manifestations (the script matrix) is, in its reference only to the heterosexual nuclear family, deeply culturally determined.
- A postmodern script theory suggests that we can have several stories about our lives

running in parallel—and that we can choose between them. Allen and Allen (1995) stated that “each person is entitled to more than one story” (p. 329). The stories we write may be based on motives combining survival, compliance, rebellion, resilience, aspiration, self-assertion, loyalty, revenge, and love.

Cornell (1988) acknowledged that English (1977) has stood virtually alone in acknowledging scripts as valuable assets. We adopt Cornell’s (1988) definition of script because of its applicability to both healthy and pathological process and its recognition of the significance of meaning:

Life script is the ongoing process of a self-defining and sometimes self-limiting psychological construction of reality. Script formation is the process by which the individual attempts to make sense of family and social environments, to establish meaning in life, and to predict and manage life’s problems in the hope of realizing one’s dreams and desires. (p. 281)

As regards the script matrix, we suggest taking the logic of Cornell’s (1988) arguments

further in developing a narrative map of the influences on cocreative identity:

1. We agree with Cornell in drawing the script matrix horizontally, bringing the “parental” influences into a mutual relationship with the “child” or subject.
2. We extend the mutuality of vectors to include the Parent vector.
3. Perhaps most significantly and radically, we replace “Mother” and “Father” with any polarity (or continuum) that is significant to the subject based on his or her own construction/s of reality (see Figure 3).

Thus, the injunctions, programs, and drivers of the script cut both ways. A child telling her parent to “Go away” may be both receiving and responding to *and* conveying a Don’t Exist injunction. Of course, the relative impact on the parent, who usually has more power than the child, will vary according to his or her own development, history, experiences, pathology, present support, and so on. The child who models his or her parents’ various behaviors (e.g., by succeeding at school) also perpetuates the family/cultural “success” story and this again impacts the parents. Similarly, the driver

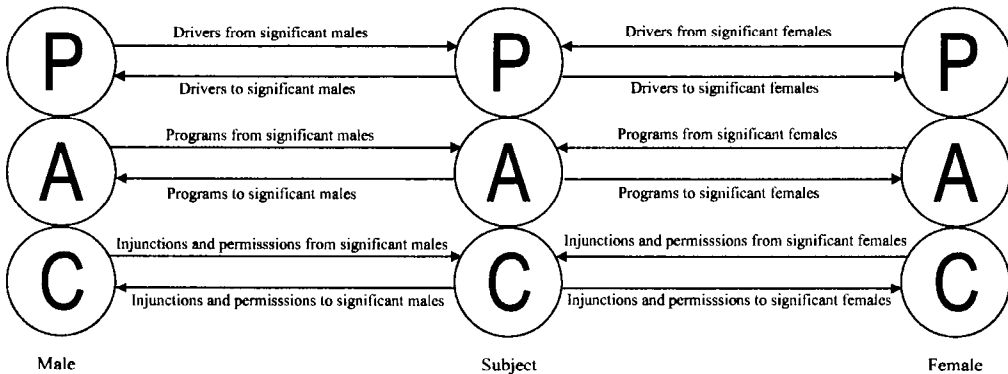


Figure 3  
Cocreative Script Matrix (Developed from Cornell, 1988)

messages are equally mutual: "Pull yourself together, son" (from a father) may be matched by a "Hold me and be there for me always" (from the son), which may represent mutual drives to "Be strong."

Our horizontal diagram does not represent equality of power in parent-child relationships. It is intended to emphasize our ongoing capacity to influence and be influenced. The matrix can be used to map mutual influences at any stage in the life cycle and may be applied to various situations in which we may be more or less powerful than others by virtue of status, knowledge, financial resources, age, or discrimination based on class, disability, gender, race, sexual orientation, and so on.

We can also consider script influences in terms of other polarities and the continua between them. For example, an important polarity in the identity development of a black child brought up in a predominantly white culture is likely to be black, minority home culture and white, dominant school culture. Indeed, there

are a number of models of minority identity development (e.g., Atkinson, Morton & Sue, 1989)—as well as models that describe the development of white racial consciousness (Helms, 1984)—that could be represented by and within the context of the cocreative script matrix. Similarly, the predominant polarity that influences the experiences of a child brought up by gay, lesbian, or bisexual parents, *depending on their circumstances, at certain points in their life, may be a gay-straight polarity*. The italics represent the fact that such influences are not determined, as is implied by traditional conceptualizations of script, but, rather, in our view, *constructed*; in other words, the construction of the script matrix is itself a personal construct. Thus, the script matrix becomes a cocreated series of matrices, rather like a constantly changing helix of relational atoms, spinning around us, by which we tell, retell, and reformulate the stories of different influences on our continuing development (see Figure 4).

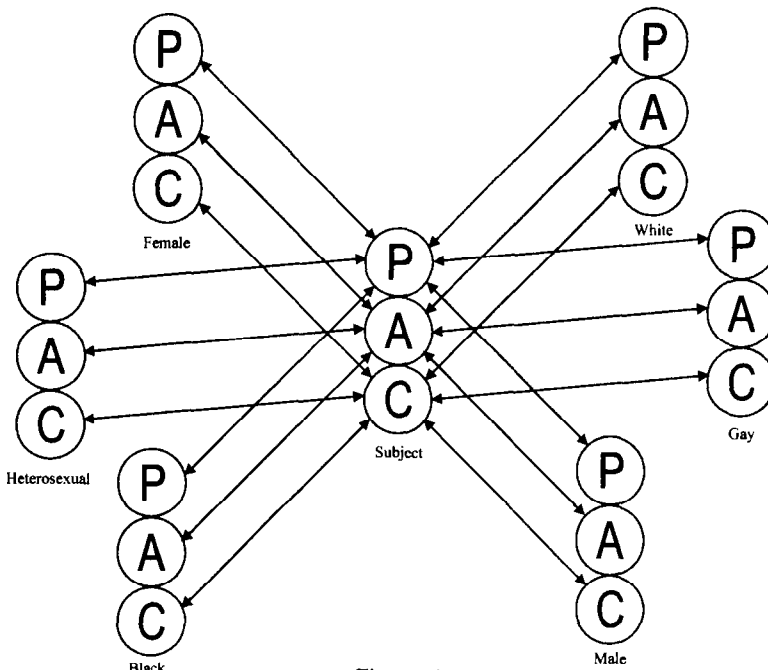


Figure 4  
A Script Helix

In this model, scripts as cocreative identity are, as Allen and Allen (1997) observed, clearly compatible with our postmodernist project of retelling transactional analysis—and, indeed, they are the precursor of present notions of narrative in (formed) therapy.

### **Ego States (Cocreative Personality)**

The notion of an integrated Adult ego state was first suggested by Berne (1961/1975a):

Anyone functioning as an Adult should ideally exhibit three kinds of tendencies: personal attractiveness and responsiveness [pathos], objective data-processing [logos], and ethical responsibility [ethos]; representing respectively archaeopsyche, neopsyche, and exteroopsyche elements “integrated” into the neopsyche ego state, perhaps as “influences.” (p. 195, words in brackets added by authors)

This idea is developed in the structural model of ego states based on Erskine’s (1988) interpretation of Berne. This model serves as a useful basis for a cocreative approach because of its clear distinction between Adult integration and fixated archaic responses. Integrated Adult is distinguished from introjected Parent states and fixated archaic Child ego states. Parent and Child ego states are patterns of relating employed in and out of awareness as defenses against Adult integration. We therefore consider Parent and Child ego states to represent fixated creative adjustments that have been developed earlier in life and are pathological in so far as they are compulsively used in the here and now at the expense of excluding other choices. We agree with Erskine’s view that the “Adult ego state consists of current age-related motor behavior; emotional, cognitive and moral development; the ability to be creative; and the capacity for full contactful engagement in meaningful relationships” (p. 16). Having adopted this model as the basis for a cocreative approach, we suggest several modifications to support the transition from a modernist to a postmodern basis for a cocreative transactional analysis.

First, we question the notion that the Adult ego state is the basis for objective processing

and suggest that we use the ego-state model as a way of describing different kinds of subjective experience. Moving away from modernist conceptions of a definable, objective reality, we embrace the perspective of intersubjectivity and the postmodern notion of coexisting alternative realities. We believe that this perspective helps to highlight the cultural context of embedded assumptions that could otherwise be dangerously and blindly defined as objective. Matze (1991) argued that the distinction between transference and nontransference transactions is itself “grounded in a myth of objectivity” (p. 142) and that therapists should treat all transactions as transference so that the therapist “minimizes the possibility of a major error in empathic attunement” (p. 142). We consider this to be throwing the Adult out “with the bath water.” In contrast, we believe it is possible to disregard the myth of objectivity and to maintain the transference/nontransference distinction through a framework of systematic, intersubjective phenomenology. This view is based on Berne’s (1961/1975a) conceptualization of structural analysis as a systematic phenomenology. It suggests that different kinds of reality can be experienced by an individual: Some are based on past experience of self (Child), others are based on past experience of others (Parent), and still others are present-centered (Adult). We believe it is Berne’s articulation of the phenomenological experience of shifts in patterns of perception, thought, feeling, and behavior that makes intuitive sense to so many people.

Like Matze (1991), many psychodynamic writers have argued that therapy is solely about the transference relationship. However, we believe that the systematic phenomenology of transactional analysis supports the notion of nontransference Adult–Adult relating. Of course, this does not mean that therapist and client are objectively free from the influence of past experience. We remain embedded in matrices of our culture (see sector or script). We continually coinfluence each other and negotiate the unknown, partly based on previous experience. However, we can experience ourselves as present-centered or past-centered

and as progressive or regressive in relation to the world. These shifts in experience of self remain discernible and usable within an intersubjective and postmodern frame of reference.

The second alteration we make to the ego-state model is to move away from the structural metaphor in which it has been cast. The mechanical metaphor of "personality structure" has been popular throughout this century. It has invited questions such as: "What is the structure?" "What is wrong with it?" and "How can it be fixed?" This mechanistic metaphor is based on modernist principles of objective reality and truth. Berne suggested that transactional analysis works most effectively when we behave as though this metaphor were reality and when we talk to the "inner Child" or "Parent" as though they actually exist: "The trichotomy must be taken quite literally. It is just as if each patient were three different people. Until the therapist can perceive it this way, he is not ready to use this system effectively" (Berne, 1961/1975a, p. 235).

This has led to many transactional analytic techniques that suggest ways of working with the inner Parent (e.g., Dashiell, 1978; McNeel, 1976; Mellor & Andrewartha, 1980; Schiff, 1969) and/or the inner Child (e.g., Berne, 1966; Clarkson & Fish, 1988; Erskine, 1974). We suggest a move away from this structural metaphor and a movement toward the metaphor of possibility. Considering the ego-state model as a system of relational possibilities (and probabilities) rather than structures invites different questions, such as: "Why this possibility at this point in time?" "What other possibilities are there?" and "What needs to happen now to generate and support new possibilities?"

This perspective shifts the therapeutic emphasis away from the treatment of ego-state structures and toward an exploration of how relational possibilities are cocreated on a moment-to-moment basis. We shift the therapeutic focus away from work with the metaphorical inner Child or Parent and instead explore the process through which Child or Parent ego states are cocreated within the

cotransference of the therapeutic relationship/relating. We learn how we cocreate regressive experience/s by attending to the cotransference as it emerges and unfolds in our relationship. Clarification of our cotransference then supports our experimentation with the cocreation of progressive rather than regressive experience(s). The therapeutic focus is not on changing prior ego states but on recognizing that we do not have to continue creating ego states based on the old models. It is OK to do something different. It is OK to make meaning of our experience outside of the Parent-Child frame of reference. It is OK to invent and use imagination to cocreate different realities and meanings that enhance our life experience.

An excellent visual representation of this perspective is Escher's "Drawing Hands," in which two hands are drawing each other: Each is bringing the other into existence. The South African saying "I am because we are" also echoes this approach. The postmodern perspective suggests that ego-state structures do not preexist prior to transactions but are cocreated within and elicited through our transactions. They only preexist as possible or probable ways of relating. The structural metaphor reifies these possibilities, creating the illusion of a structural entity (see Loria, 1990). We suggest that the structural perspective paradoxically reinforces archaic possibilities in an attempt to "fix" them. In contrast, we prefer to emphasize the inextricable link between ego states and transactions by viewing the ego-state model as a way of describing "cocreated personality."

Finally, while we note that this shift can still incorporate Berne's (1961/1975a) four criteria for the recognition/diagnosis of ego states (behavioral, social, historical, and phenomenological), we incorporate a significant development. The intersubjective exploration and classification of ego states (or relational possibilities) can now be extended to include intuition of the possible and not just the probable (based on past experience). We find Schmid's (1991) ideas about intuition particularly useful in support of this approach. He pointed out that

Berne focused on using intuition to diagnose or analyze archaic ego states by intuiting the represented archaic realities (Schmid, 1991, p. 150) of the client's presentation. He further suggested developing our capacity to intuit new, possible ways of relating. We believe Schmid counterbalances Berne's intuition for archaic possibilities with an emphasis on intuiting future possibilities. Perhaps we need to see ourselves as transactional *designers* as well as transactional analysts: What possibilities can we intuit for and with our clients and our relationship with them, and how can we support the exploration and development of these possibilities?

### Games: Cocreative Confirmation

Consistent with developing transactional analysis as a theoretical model of psychological health, an approach that may be described as "psychosatology" as well as one of psychopathology, we envisage that game theory can describe both healthy and pathological processes. Berne's (1964/1968) definition of a game as "an ongoing series of complementary ulterior transactions progressing to a well-defined, predictable outcome" (p. 44) provides us with a neutral, nonpathological formulation which later definitions restrict. We choose this definition precisely because it allows us to describe both healthy, satisfying patterns as well as the pathological repetition and reenactment of traumatic experience.

The application of game theory to pathological process is well described in the transactional analysis literature: for example, degrees of game (Berne, 1968), the drama triangle (Karpman, 1968), Formula G (Berne, 1972/1975b), the Goulding-Kupfer game diagram (Goulding & Goulding, 1979), and the bystander role (Clarkson, 1987). In addition, the almost exclusively pathological focus of game theory implies that ulterior transactions are exchanged between archaic ego states communicating contaminated negative beliefs about self, others, and the world. The undeveloped exception to this pathological focus is Berne's concept of the "good" game, that is, "one whose social contribution outweighs the complexity of its

motivations . . . one which contributes both to the well-being of the other players and to the unfolding of the one who is 'it'" (Berne, 1964/1968, p. 143). This is similar to the concept of "growth vitality games" developed by Satir (1967/1978, p. 186).

To illustrate the possibility of the game as a healthy process, we suggest a particular application of James's (1973) game plan (with Laurence Collinson's addition of the two mystery questions [cited in Stewart & Joines, 1987, p. 261]):

1. What keeps happening to me over and over again?
2. How does it start?
3. What happens next?
4. (Mystery question)
5. And then?
6. (Mystery question)
7. How does it end?
- 8a. How do I feel?
- 8b. How do I think the other person feels?

Consider a relationship with someone you know that is consistently satisfying. Now use the above game plan to map out the sequence of the pattern you manage to cocreate with this person over and over again. Finally consider the mystery questions:

4. What is my secret message to the other person?
5. What is the other person's secret message to me?

Typical responses to this approach are that such patterns start with a sense of anticipation, welcoming, and reconnection. The middle phase often involves sharing, recognition, openness, and acceptance. Such patterns often end with satisfaction, confirmation, and well being. Common ulterior messages include "I like you," "I love you," and "I respect you." In satisfying relationships, such patterns create a framework within which intimacy can be risked.

These healthy patterns fit the definition of a game we have adopted from Berne. From a postmodern perspective we suggest that games are patterns we engage in and through which we cocreate confirmation of versions of reality. These versions of reality may be past- or

present-centered and can incorporate either discounting or, importantly, accounting and, therefore, nonexploitative ulterior transactions. In many ways, game theory is the aspect of transactional analysis in which Berne particularly emphasized the cocreated nature of relationship patterns.

### Conclusion

For the practitioner, the value of theory is in how useful it is in informing practice. By way of concluding, and in the spirit of the narrative turn of postmodern, constructivist inquiry, we offer a number of questions that arise from the ideas presented in this article. The first comes from Berne himself, who wrote only briefly about the therapeutic relationship as such (see Berne, 1966). In doing so he suggested that before and in the first few minutes of each session or meeting with a client(s), the therapist should ask himself or herself "some fundamental questions about the real meaning of the therapeutic relationship" (pp. 63-64). He viewed this first with regard to the therapist's own development: " 'Why am I sitting in this room? Why am I not at home with my children? . . . What will this hour contribute to my unfolding?' " (p. 64). Second, Berne suggested reflecting on the client and his or her motivations: " 'Why are they here? Why are they not at home with their children or doing what their fancy dictates? Why did they choose psychotherapy as a solution? Why not religion, alcohol, drugs, crime, gambling? . . . What will this hour contribute to their unfolding?' " (p. 64).

To these questions we add further self-supervision questions for the transactional analysis practitioner, questions that are derived from a cocreative approach to the four main areas of transactional analysis discussed in this article:

- What patterns emerge between us?
- How are we presently making sense of these patterns?
- What are we each contributing to these patterns?
- What happens if we create different meanings for the same patterns?
- What happens if we do something different?

- How do we make sense of different patterns that we cocreate?
- What ego states are we evoking and cocreating in each other?
- Why are we creating these ego states at this point in time?
- What else may be possible?
- What version of reality might we (have we) been confirming?
- How can we explore, acknowledge, and choose between different realities?
- What constructs are we using to define self and other?
- How do these constructs support or limit us?

*Graeme Summers, B.Sc. (Hons.), Dip.Psychotherapy, CTA, PTSTA, is a registered transactional analysis psychotherapist with the United Kingdom Council for Psychotherapy (UKCP). He is a psychotherapist, supervisor, and trainer working at Manchester Gestalt Centre, Dacrelands Clinic, Lancaster, and the Edinburgh Institute for Counselling and Psychotherapy. He can be reached at Manchester Gestalt Centre, 7 Norman Road, Manchester M14 5LF, England; and by email at [graeme@mgc.org.uk](mailto:graeme@mgc.org.uk) .*

*Keith Tudor, M.A., M.Sc., CQSW, Dip.Psychotherapy, PTSTA, MAHPP, is registered with the UKCP both as a transactional analysis psychotherapist as well as a group psychotherapist and facilitator. He is in private/independent practice as a therapist, supervisor, and trainer in Sheffield, where he is also a Director of Temenos. He is the author of a number of articles and two books in the field of therapy and mental health. Please send reprint requests to Keith Tudor, Temenos, 13A Penryhn Road, Sheffield S11 8UL, England; email: [keith.tudor@temenos.ac.uk](mailto:keith.tudor@temenos.ac.uk) .*

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