5-1-1995

Bringing Berne into conjoint family therapy

Emmanuel Arockiam

Marquette University

Follow this and additional works at: https://epublications.marquette.edu/theses

Part of the Educational Psychology Commons, and the Student Counseling and Personnel Services Commons

Recommended Citation
https://epublications.marquette.edu/theses/919
BRINGING BERNE INTO CONJOINT FAMILY THERAPY

by

Emmanuel Arockiam

A thesis submitted to the faculty of the Graduate School, Marquette University, in Partial Fulfillment of the Requirements for the Degree of Master of Arts

Milwaukee, Wisconsin
June 1995
# TABLE OF CONTENTS

## CHAPTER I

### Introduction

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Problem Statement</td>
<td>2</td>
</tr>
<tr>
<td>Purpose of the Study</td>
<td>2</td>
</tr>
<tr>
<td>Research Questions</td>
<td>3</td>
</tr>
<tr>
<td>Definition of Terms</td>
<td>3</td>
</tr>
<tr>
<td>Limitation</td>
<td>4</td>
</tr>
<tr>
<td>Methodology</td>
<td>4</td>
</tr>
</tbody>
</table>

## CHAPTER II

### Review of Literature

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satir's Conjoint Family Therapy</td>
<td>6</td>
</tr>
<tr>
<td>Transactional Analysis</td>
<td>8</td>
</tr>
<tr>
<td>Use of TA in Family Therapy</td>
<td>10</td>
</tr>
<tr>
<td>Combination of TA and Satir's Conjoint Family Therapy</td>
<td>11</td>
</tr>
</tbody>
</table>

## CHAPTER III

### Findings

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Concepts of Conjoint Family Therapy</td>
<td>15</td>
</tr>
<tr>
<td>Beliefs about Human Nature</td>
<td>15</td>
</tr>
<tr>
<td>Family System</td>
<td>16</td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>18</td>
</tr>
<tr>
<td>Communication</td>
<td>19</td>
</tr>
<tr>
<td>Maturation</td>
<td>22</td>
</tr>
<tr>
<td>Dysfunctional Behavior</td>
<td>23</td>
</tr>
<tr>
<td>Defining Therapy</td>
<td>24</td>
</tr>
<tr>
<td>Role of the Therapist</td>
<td>25</td>
</tr>
</tbody>
</table>
Therapeutic Goal

Basic Concepts of TA

Structural Analysis
  Second order structural model
  Recognizing ego states

Transactions
  Three Hungers
  Strokes
  Time Structuring

Life-Script

Transactional Analysis Therapy

Commonalities between CFT and TA

Beliefs about Human Nature
  Effect of the past

Change

Communication

Self-Image (Self-Worth)

Life-Script

Differences between CFT and TA

CHAPTER IV

Weaving TA with Conjoint Family Therapy

Recommendations

References
CHAPTER I

Introduction

"Seldom, or perhaps never, does a marriage develop into an individual relationship smoothly and without crises; there is no coming to consciousness without pain" (Jung, 1956).

Sociologist Stephanie Coontz (1992) says that families are diverse and fragile entities, and always have been. In her book The way we never were: American families and the nostalgia trap she says that we should not romanticize the past because early American families were not devoid of alcoholism, child abuse, oppression of women and grinding poverty. She mentions that they had strict rules, yet one third of brides in rural New England during the 1780s and 1790s were pregnant. With short life expectancies, the average marriage lasted only 12 years. Lederer and Jackson (1968) report that 80 percent of the hundreds of couples they interviewed reported that they had seriously considered divorce at one time or another. They affirm that many said that the primary factors that kept them from divorce were economics and concern for their children.

We cannot deny the fact that families look more complex now than in the past. Divorce is more common now than a few decades ago. Because of their complex nature helping families offer an exciting challenge. As the primary social unit families can 'make or break' both individuals and
society. Families have both the joy and the responsibility of creating "heaven on earth."

Healthy/normal families will enable the individuals in the family to become better individuals, who will be the building blocks for a better society.

In many countries where counseling or therapy is neither available nor valued, and individual counseling carries a stigma, family or group counseling may be very effective and less threatening. In such countries there is a great need for counseling while counselors are scarce. Family counseling may be of great help, in part because many people can learn from one another’s experience, perception and sharing.

Problem Statement

Even though Transactional Analysis (TA) and Conjoint Family Therapy (CFT) have been compared and/or combined with other theories and therapies, no attempt seems to have been made to combine TA with Virginia Satir’s Conjoint Family Therapy. In so far as both Berne and Satir deal in their respective therapies with interactions/communications among people there appear to be common grounds for combining Transactional Analysis with Satir’s Conjoint Family Therapy. Hence this thesis explores the feasibility of weaving TA with CFT with a view to make the family counseling more effective with dysfunctional families.

Purpose of the Study

CFT, which gives importance to experience, and TA,
which relies heavily upon the complex cognitive operations of the brain and lays stress on analysis, may go hand in hand with each other to deal effectively with families. The experiential element and the cognitive element of these therapies may complement each other in making the clients’ learning long lasting. I envisage making use of a number of ideas and techniques of TA while working within the framework of Satir’s Conjoint Family Therapy.

**Research Questions**

1. What are the commonalities found in TA and CFT?
2. What are the differences found in these two theories?
3. What concepts and techniques of TA are compatible with CFT?
4. Will the weaving of TA with CFT promise to produce effective therapeutic interventions in family therapy?

**Definition of Terms**

Berne (1972) writes, "Transactional Analysis is a theory of personality and social action, and clinical method of psychotherapy, based on the analysis of all possible transactions between two or more people, on the basis of specifically defined ego states, into a finite number of established types (nine complementary, 72 crossed, 6480 duplex, and 36 angular)."

According to The Transactional Analysis Association, TA is a theory of personality and a systematic psychotherapy for personal growth and personal change.
In Conjoint Family Therapy, family therapy is oriented to the family as a whole. It is a humanistic experiential therapy. The therapist assesses family chronology and communication styles (placator, blamer, superreasonable, irrelevant, and congruent), rules, myths and themes. He/she works towards reconstruction of families by increasing the self-worth of the member/s and helping all of them learn to communicate congruently.

Limitation

Since this is only a heuristic study, I intend to put forth assumptions and propositions. Testing of these propositions is not within the scope of this study.

Since TA has grown into three major schools which present many different ideas, I intend to base my analysis on Berne’s ideas found in his books and in the book *TA today: A new introduction to transactional analysis* by Ian Stewart and Vann Joines (1987).

Methodology

The methodology followed in this study is the comparing and contrasting of the concepts of Satir’s Conjoint Family therapy and of Berne’s Transactional Analysis. Since my focus is on family therapy, I want to identify the concepts and techniques of TA that may increase the effectiveness of the family therapy. I intend to explore whether these concepts of TA would fit within the framework of CFT. The goal of this study is to put forth propositions in search of an effective therapeutic
intervention.
CHAPTER II

Review of Literature

Satir's Conjoint Family Therapy

Satir's theory is based on four assumptions: (1) Underlying every behavior is a reasonable or honorable motive; (2) everyone is healable, and healing is inherent in the therapeutic process; (3) mind and body are part of the same system and affect each other, and (4) self-esteem and effective communication beget one another (Woods and Martin, 1984).

Satir (1983) contends that self-esteem is the basic element in family dynamics; and increasing self-esteem is the chief goal of her approach. Satir believes that the relationship between self-esteem and communication is circular. The key to increase self-worth is primarily achieved through the process of disconnecting a family from its dysfunctional communication patterns. The therapist's role is primarily that of educator, which includes modeling healthy communications and translating messages between and among family members. Satir believes that lasting change occurs only when family members take responsibility for their communications, i.e., that they "level with one another" (Sperry, 1986).

Satir's diagnostic approach is straightforward. She assesses the family's chronology and communication styles. The communication styles are assessed in terms of the four coping stances: placator, blamer, superreasonable, and
irrelevant one. She also attempts to understand family rules, myths, and themes.

Primary therapeutic methods include communication skills training, sculpting, modeling, the use of metaphor, role-playing, homework, parts party, touching, reframing, and the method she takes most credit for, family reconstruction (Satir, 1972, 1988).

Nichols & Schwartz (1991) say:
Satir deviated from the norms being established by the systems family therapy theorists in Palo Alto. She focused on nurturance where they were interested in control and feedback loops. She focused on qualities of individuals where they believed that such a focus distracted from seeing interactional patterns within the larger family. She worked with whatever imbalances she found that affected communication and self-esteem where they remained problem-focused. She generated and advocated a close collaborative relationship with clients where they remained distant and expert. While Satir was seen by many of these theorists as fuzzy and naive thinker, it may be that she was ahead of her time.

In Gurman’s (1977) view Satir’s work represents an eclectic melange of communication principles, Gestalt therapy, bioenergetics, object-relations theory, rational-emotive and behavioral therapy, and client-centered therapy.
Assessing the communications model of family therapy Judith C. Nelson (1983) says that Satir's writing suggests ways to get family members communicating more effectively, but the practice model she presents does not seem comprehensive.

**Transactional Analysis**

Berne's philosophical view is based on a phenomenological humanistic model. The nature of human kind, according to Berne, is: 1) People are OK. It is a statement of essence rather than behavior. 2) Everyone has the capacity to think. It is the responsibility of each of us to decide what we want from life. 3) People decide their own destiny, and these decisions can be changed (Stewart and Joines, 1987).

Personality structure consists of three ego states: Parent, Adult, and Child. We can recognize which ego state is operant, and choose a given ego state. TA talks of four basic psychological positions based on our perception when we were children (I'm OK, You're OK; I'm not OK, you're OK; I'm OK, you're not OK; and I'm not OK, you're not OK). Each of us, in childhood, writes for himself or herself a life-story which has a beginning, a middle and an end. Though we are no longer aware of the life-script, we are likely to live it out faithfully. Script is decisional. By redefining we may distort our perception of reality so that it fits our script. By discounting we blank out the aspects of the situation that would contradict our script. Functional people, according to Berne (1977), behave authentically in relationships with others and meet their psychological and
emotional needs in a realistic manner without games, rackets, and social rituals which maintain disturbing relationships (Toshi et al., 1987).

Transactional Analysis, is a contractual and interactional counseling procedure. Both the theory and techniques of counseling are eclectic, having been influenced by a variety of psychological and sociological perspectives. TA presents a comprehensive theory of personality functioning based on the active dynamic functioning of parent, adult, and child ego states in a culturally influenced, yet individually determined life plan called the life script (Stewart and Joines, 1987). Richard Gordon Erskine believes (1975) that one of the reasons TA is such an effective psychotherapy is that it incorporates affective, behavioral and cognitive approaches to problem solving (Berne, 1967). TA uses the three approaches in the following manner: the cognitive in teaching TA theory and identifying with the client why he or she is having a problem; the behavioral in the negotiation of therapy contracts, which specify what the client wants to change, how he or she will behave differently, and how other people will know he or she has changed; and, finally, the affective, in the work done or removing old blocks and establishing new ways of experiencing.

In his philosophical analysis Weinhold (1977) says that despite some personal bias in favor of psychoanalytic theory, Berne says that other methods could be profitably
combined with TA. Berne writes (1961), "Concurrently, the therapist may opportunistically employ borrowed techniques, such as psychoanalytic interpretations and maneuvers in the customary fashion. Thus transactional analysis is not intended to replace psychodynamic group therapy, but offers a primary matrix within which other therapeutic operations can find their place according to the therapist’s personal inclinations."

Use of TA in Family Therapy

Massey (1988) affirms that Transactional Analysis is well suited to treating children and their families because it functions on both the experiential and interactional levels. While TA is analyzed as a social psychology of families, he discusses the integration of systems thinking and TA.

Marjory Zerin (1988) illustrates an application of S. Karpman’s (1968) drama triangle to promote rapid, structural change in a multiproblem blended family. She says the technique is useful in producing structural and transactional changes in a family system because it removes the focus from the identified patient and generates family member’s awareness of each other’s perceptions of family realities.

Brenda B. Bary and Frederick M. Hufford (1990) say that Berne’s six reasons for people’s use of games can provide the therapist with information about the problems that must be resolved in therapy. These reasons may reconnect and
reinforce each other to maintain the homeostatic balance in a person even though in the family, circumstance and reality are now different from the family of origin.

Robert F. Massey (1989) expands the theoretical interface between TA and family systems theory particularly in relation to work with couples. He also examines the TA constructs that imply the systemic processes of complementarity and circular causality. Massey believes that Berne's theory views the family as a system. Major TA concepts - ego states, scripting, rackets, stroking, and time structuring - can operate systemically. Using TA as a systems theory enables therapists to deal effectively not only with individual and interpersonal dynamics but also systemic influences and inhibitions on growth in a family. As a systems therapy, TA can be employed with families either directly as a set of concepts and techniques or as a frame of reference for diagnosis and designing interventions in conjunction with other family systems approaches (Massey, 1985).

Combination of TA and Satir's Conjoint Family Therapy

As noted in the beginning of the Review of Literature, no attempt has yet been made to see how TA could be interwoven into the Family therapy of Satir. But many have talked about the integration of TA and the systems theory in which Satir has her roots.

TA offers a theory of communication. Stewart, I. and Joines, V. (1987) affirm that this theory of communication
can be extended to give a method of analyzing system and organization. They hold the view that TA can be used in any field where there is a need for understanding of individuals, relationships and communication.

Satir gives so much importance to communication in her theory and family therapy that her therapy is called communication therapy. Her criteria (1964, 1967 & 1983) for terminating treatment include the answers to whether family members can complete transactions, check, ask, and whether they can give a clear message, that is, be congruent in their behavior, with a minimum of difference between feelings and communication, and with a minimum of hidden messages.

Despite Berne’s psychoanalytic training, unlike psychoanalysis TA is used to analyze the present transactions of different members. So TA may be a valuable tool to analyze the transactions of the family members in Satir’s Conjoint Family Therapy.

Since both TA and CFT stress and analyze communication, these two may be combined to explore the communication patterns of the family members.

TA has been acknowledged as effective in groups (Massey, 1985), and so it may work effectively with families, too, within the framework of CFT.

Both TA and CFT speak, in their own terms, about the powerful influence of the past and of the importance of the self-image. If so, their combination may provide the clients
not only experientially but also cognitively a better understanding of themselves, particularly of how the influence of the past and their self-image affect their current functioning in the families.

Toshi et al. (1987) say that the here and now attitude of TA counselor reinforces constructive action first and analysis of self-defeating affect.

Despite Berne's psychoanalytic training, TA does not embrace the analytic view of insight. A TA counselor feels that insight is derived from direct experience in life and in counseling. Active, experiential learning plays an essential role in the counseling process, with clients being encouraged to test out new behaviors in social settings. Berne (1949) does place an important emphasis on the intuitive processes"(p. 82).

Satir says, "Therapy consists of a process of change, consciously and deliberately entered into between a therapist and client to achieve mutually desired results" (Zeig & Lankton, 1988). Both CFT and TA seem to give importance to the here-and-now experience and learning.

Perhaps some concepts of TA regarding life-positions, life-scripts, communication, games, drama triangle and redecision can be merged with CFT. This may facilitate the effectiveness of CFT in family counseling.

How TA could be interwoven into Satir's therapy, and what are the commonalities and differences in these two
theories and therapies will be further explored in this study.
CHAPTER III

Findings

Virginia Satir is often called "the Columbus of family therapy". At the MRI, Satir (1965) developed the first family therapy training program in the United States. Her first book, Conjoint Family Therapy (1964), is considered a landmark text in the field and is still used in training family therapists today. Besides her books, she is known for her seminars and workshops on family therapy, and forming her own training group, the Avanta Network (1987).

"Satir’s work is noted for its emphasis on the expression of feelings. She combined concepts from communication theory with the humanistic Rogerian concept of self-esteem and the psychoanalytic approach of how awareness of patterns learned in the family of origin can lead to change. Satir’s approach is experiential, involving families in exercises and activities during the session" (Thomas, 1992).

Basic Concepts of Conjoint Family Therapy

Beliefs about Human Nature

Satir strongly believes:

* That change is always possible
* That we have within us all the resources necessary for growth
* That any past learnings that are unsatisfactory and painful can be replaced with new learnings
* That learning occurs within a framework that is
comfortable, warm, and nourishing

* That everything is subject to use as a resource
* That all behavior is an effort at growth
* That choices are decisions one makes at a moment in time
* That the primary triad - mother, father, child - represents the original ingredients for identity and has the potential for being a nourishing source of growth and energy (Schwab, 1990).

Therapy depends on three primary beliefs about human nature:

First, that every individual is geared to survival, growth, and getting close to others and that all behavior expresses these aims, no matter how distorted it may look.

Second, that what society calls sick, crazy, stupid, or bad behavior is really an attempt on the part of the afflicted person to signal the presence of trouble and call for help.

Third, that human beings are limited only by the extent of their knowledge, their ways of understanding themselves and their ability to "check out" with others. Thought and feeling are inextricably bound together; the individual need not be a prisoner of his feelings but can use the cognitive components of his feeling to free himself. This is the basis for assuming that a human being can learn and change (Satir, 1983, pp. 124-125).

Family system
Satir believes in the concept of family as a system, and its members as interdependent parts. She prefers to deal with the whole family and not merely with the identified patient (IP), who is most obviously affected by the pained marital relationship and most subjected to dysfunctional parenting. If the IP is helped or cured, the pathology floats to another member. According to the concept of family homeostasis, the family acts so as to achieve a balance in relationships. The family's repetitious, circular, predictable communication patterns reveal this balance. The marital relationship influences the character of family homeostasis. A quality of a steady state or homeostasis is strong resistance to change (Toshi et al., 1987).

An important social-psychological concept for Satir (1967, p. 91) is maturation which she describes as "the most important concept in therapy, because it is a touchstone for all the rest". "Maturation, a growth process everyone experiences, leads to two basic goals: (1) mature individuals are fully in charge of themselves and, (2) mature individuals can make accurate decisions based on knowledge of self, others, and the context, and can take responsibility for the outcome of those decisions. Mature people are in touch with their own feelings, values, and expectations; they are able to recognize, appreciate, and grow from the acknowledgement of different-ness; they accept full responsibility for their thoughts, feelings, and actions; and they are knowledgeable of and comfortable with
the methods of giving and receiving feedback" (Toshi et al., 1987).

According to Satir the basic needs common to all are: to survive, to grow and learn, to be productive and creative, to make sense and order, and to get close to others.

Learning and change happen when there is a context that is humanistic, dynamic, organic and creative.

Self-Esteem

Satir (1983) calls self-esteem by an affectionate name "pot". According to her this "pot" is searching for some way of manifesting itself. Raising the feelings of self-esteem is indispensable for the growth of the clients. It is done:

* by seeing differentness as a channel for growth
* by reinforcing the uniqueness of each person
* by empowering and energizing each person
* by manifesting sexuality in ways that are fitting
* by being in touch with one's resources (Schwab, 1990).

Persons with low self-esteem have a great sense of anxiety and uncertainty about themselves; have high hopes about what they can expect from others, but they also have great fears; they are only too ready to expect disappointment and to distrust people (Satir, 1983). If the mates have low self-esteem and little trust in each other, they will expect their child to enhance their self-esteem, to be an extension of themselves, and to serve crucial pain-
relieving functions in the marital relationship. "The child needs to esteem himself in two areas: as a masterful person and as a sexual person. He will develop esteem about himself as a masterful person (a person able to do for himself) if at least one parent validates his developmental growth" (p. 59). A child will develop esteem about himself as a sexual person only if both parents validate his sexuality. When the parents are not able to validate each other as sexual people, they will not be able to validate the child as a sexual person.

Satir also believes that the sex drive is continually subordinated to and used for the purpose of enhancing self-esteem and defending threats of self-esteem (p. 70). She also holds that a person's self-worth is formed by his childhood experience in which his parents play an important part (p. 122). "I feel that no changes can be made in people unless they begin to feel themselves as having worth" (p. 247).

Communication

Communication means "interaction" or "transaction". It also includes all those symbols and clues used by persons in giving and receiving meaning. Communication occurs at a time and place, and with a purpose. "Without communication we, as humans, would not be able to survive" (Satir, 1983, P. 80). Communication techniques which people use can be seen as reliable indicators of interpersonal functioning. It is important to develop skills to have congruent communication:
to give, receive and check out information openly, clearly and directly, and to express one’s needs appropriately.

Communication is a complex business. The receiver must assess all the different ways in which the sender is sending messages, as well as being aware of his own receiving system, that is, his own interpretation system (Satir, 1983, p. 95). Communication is a necessarily incomplete process. And it can be said to have at least two levels: a) the detonative level: the literal content; b) the metacommunicative level: a comment on the literal content as well as on the nature of the relationship between the persons involved. Whenever a person communicates he is not only making a statement, he is also asking something of the receiver and trying to influence the receiver to give him what he wants (p. 99). All messages, when viewed at their highest abstraction level can be characterized as "Validate me" messages. Many people feel embarrassed about their wish to get validation from outside themselves (p. 103). One cannot view messages separate from interaction and receive the full picture (p. 112). One must at least note what A says, how B responds, how A responds to B’s response. Communication is a two-sided affair; senders are receivers, receivers are senders.

A congruent communication is one where two or more messages are sent via different levels but none of these messages seriously contradicts any other.

While talking about communication, Satir talks about
the circle of relationship with three segments, Self (S), Other (O), and Context (C). Context means this time, this place and this situation. Satir’s first dysfunctional communication pattern is placating. "A placator is always trying to please others in a syrupy, ingratiating manner. These people are continually invalidating their own thoughts, feelings, and behaviors, preferring to receive the approval, guidance and leadership of others" (Toshi et al., 1987). In the placating situation, the person undergoes an experience which says, "I’m no good - you better than I am." Self is crossed out in the circle (Satir, 1983).

The second dysfunctional pattern which is used as a survival technique is blaming. "A blamer consistently finds fault with others, defines problems as being in others, and tends to dominate other members of the family (or at least tries to). The tone of voice of blamers is usually quite accusatory, projected with a shrill strength... The self is the only aspect of life that matters to blamers, as they simply use the other and the context in order to accent themselves" (Toshi et al., 1987).

Satir (1983) says there is another way of handling communication in which words come out super-reasonable. When this happens, of course the words bear no relationship to how one feels. People who use this way of communication are also called computers. Intellectualization is the favorite method computers use to deal with stress. Computers deny both the self and other, leaving only the rather mechanical
context within which to live (Toshi et al., 1987).

The fourth kind of dysfunctional communication is called irrelevant, or distracting. Communication seems totally unrelated to the context or to what other people are saying. The body is in constant motion, which amounts to constant distraction. "In this case," Satir (1983) says, "I am not there, you are not there, and neither is the context!"

The fifth way of communicating is called congruent. "Nothing is omitted. The words relate to what is real, and affect is congruent. Instead of double-level communication, there is this: I feel angry in my guts - I say I am angry and I look angry. You don't have any trouble getting the message - a nice straight message - I am angry...It is all there: Self, Other, and Context" (Satir, 1983, p. 47).

**Maturation**

The most important concept in therapy, because it is a touchstone for all the rest, is that of maturation (p. 117). A mature person will:

a. manifest himself clearly to others.

b. be in touch with signals from his internal self, thus letting himself know openly what he thinks and feels.

c. be able to see and hear what is outside himself as differentiated from himself and as different from anything else.

d. behave toward another person as someone separate from himself and unique.
e. treat the presence of different-ness as an opportunity to learn and explore rather than as a threat or a signal for conflict.

f. deal with persons and situations in their context, in terms of "how it is" rather than how he wishes it were or expects it to be.

g. accept responsibility for what he feels, thinks, hears and sees, rather than denying it or attributing it to others.

h. have techniques for openly negotiating the giving, receiving and checking of meaning between himself and others (Satir, 1983, p. 118).

Dysfunctional Behavior

A dysfunctional individual is one who has not learned to communicate properly. Since he does not manifest a means of perceiving and interpreting himself accurately, or interpreting accurately messages from the outside, the assumptions on which he bases his actions will be faulty and his efforts to adapt to reality will be confused and inappropriate. He will manifest himself incongruently. He will be unable to adapt his interpretations to the present context. He will tend to see the "here and now" through labels which have been indelibly fixed in his mind during the early part of his life when all messages had survival significance. Each subsequent use of the label will strengthen its reality (p. 120).

Difficulty in communicating is closely linked to an
individual's self-concept, that is, his self-image and self-esteem. Low self-esteem leads to dysfunctional communication. Dysfunction in communication will also follow when the individual is unable to handle differentness (Satir, 1983).

Defining Therapy

Since illness is seen to derive from inadequate methods of communication (by which we mean all interactional behavior), it follows that therapy will be seen as an attempt to improve these methods. Satir et al. (1991) write, "When we look at unmet expectations and we let go of them, our reactive feelings (feelings about feelings) change. Once we explore our expectations, they no longer control us. We can then respond congruently. Transforming our coping stances, which we once used to survive, leads to greater freedom and fewer and fewer restrictions imposed by our defenses. It also allows us more choices as to how we define and esteem ourselves."

Satir (1988) explains, "Therapy consists of a process of change, consciously and deliberately entered into between a therapist and client to achieve mutually desired results." She says that there are five basic steps to her change process:

1. Recognizing and owning the status quo.
2. Introduction of a foreign element that is powerful enough to produce an effect, causing the system to respond.
3. Manifestation of chaos.
4. Practice period.

5. Integration and development of a new status quo.

Role of the Therapist

The therapist is a resource person and an "official observer" of the family, one who can report impartially on what he sees and hears. The therapist must observe keenly both the verbal and nonverbal communication to discover the six levels (yearnings, expectations, perceptions, feelings, coping & behavior) of the client's experience. The therapist must see himself as a model of communication, not only exemplifying clear communication, but also teaching his patients how to achieve it themselves (Satir, 1983, p. 129).

Satir has not developed any specific measuring tools. But she says that she has found certain concepts useful, somewhat like measuring tools, in determining the nature and extent of dysfunction in a family (p. 134). She proposes an analysis of the techniques used by each member of the family for handling the presence of different-ness. Role function analysis is to find out whether the members of a family are covertly playing roles different from those which their position in family demands that they play. Self-manifestation analysis is used for each member of a family to check whether there is any behavior that manifests incongruency. In order to find out how the early life of each member of a family has affected his present ways of behaving, Satir uses a model analysis (p. 135). To do the analyses, Satir uses family life chronology covering three
generations, that is, starting from the time the parents were infants molded by their parents.

The family therapist works with interactional, interpersonal, and intrapsychic material. The family therapist assesses family functioning by considering the dynamics of the family system, the family structure, its communication patterns, and its ways of coping.

According to Satir (1983), therapy is based on growth model's notion that people's behavior changes through process and the process is represented by transactions with other people and with the various parts of oneself. The process is very important. So, the therapy time, place, the pattern of persons seen, the pattern of therapies involved, and the techniques and tools for experiencing are all flexible and variable.

Satir has described three kinds of experiential games which the therapist uses to heighten awareness. Toshi et al. (1987) say:

The first game, the Simulated Family, is a way to teach families about themselves and how they view each other. Family members are asked to play other members of the family or themselves in some type of simulated situation. They would then review the "game" on video tape and process their feelings and perceptions concerning the experience. The second set of games, called Systems Games, are designed to illustrate to the family the
differences in the communication patterns of families who function as closed versus open systems. The last set, the Communication Games, were developed to teach congruency and clarity in communication (p. 270).

**Therapeutic Goal**

According to Grinder et al. (1976) the goal of therapy results in living the five freedoms:

1. The freedom to see and to hear what is NOW instead of what should be, could be, was, or will be.
2. The freedom to feel what is felt NOW instead of what should be, could be, was, or will be.
3. The freedom to say what is NOW instead of what should be, could be, was, or will be.
4. The freedom to reach out for what you want instead of what you should want, not having to wait for someone to offer it to you.
5. The freedom to take risks in your own behalf instead of only waiting for a change in the situation to make it possible for you to have what you want for yourself.

**Basic Concepts of TA**

Transactional Analysis is a system of psychotherapy based on the analysis of ego states, personal transactions, games, and life scripts. Berne’s theory of TA is based on reality, and is constantly being affirmed through observable behaviors. It provides a concrete basis for behavior change;
and change itself is easily perceived by both counselor and counselee (Roberts, 1975).

The philosophical assumptions of TA are:
People are OK.
Everyone has the capacity to think.
People decide their own destiny, and these decisions can be changed (Stewart & Joines, 1987).

Structural Analysis

Eric Berne (1972) writes "the basic interest of transactional analysis is the study of ego states, which are coherent systems of thought and feeling manifested by corresponding patterns of behavior. Each human being exhibits three types of ego states". Ego states are observable, measurable, and quantifiable.

(1) In the Parent ego state "he feels, thinks, acts, talks, and responds just as one of his parents did when he was little". (2) The ego state in which he appraises his environment objectively, and calculates its possibilities and probabilities on the basis of past experience, is called the Adult ego state, or the Adult. The Adult functions like a computer. (3) Each person carries within a little boy or little girl, who feels, thinks, acts, talks, and responds just the way he or she did when he or she was a child of certain age. This ego state is called the Child (pp. 11-12). The use of the ego-state model, that is, separating one feeling-and-behavior pattern from another in diagnosing ego states, to understand various aspects of personality is
called the Structural Analysis.

Stewart & Joines (1987) summarize Berne’s ideas saying that structural analysis shows what there is in each ego-state, while the functional model divides the ego-states to show us how we use them.

Structure = 'what' = content
Function = 'how' = process (Stewart & Joines, 1987).

One of the ways we use our Child ego state is called Adapted Child. We are said to be in the Adapted Child ego state, when we replay the ways of behaving decided in our childhood to correspond to the expectations of our parents. Even when we are rebelling against the rules and expectations of our parents, we are still responding to childhood rules. Therefore we are said to be still in the Adapted Child-ego state.

If we are engaging in behaviors from our childhood that pay no attention to parental rules or limits, then we are in Free Child.

When we behave in ways which copy our parents in a controlling or criticizing role, we are said to be in Controlling Parent or Critical Parent. When our parental directives to others are genuinely aimed at protecting them or promoting their well-being, we are in positive Critical Parent. If our parental behaviors entail a put-down (discount) of the other person, then we are in negative Controlling Parent.

When we replay the behaviors of our parents when they
were looking after us or caring for us, we are said to be in *Nurturing Parent*. Positive Nurturing Parent implies caring and a genuine regard for the person helped. Negative Nurturing Parent means that help is given from a one-up position that discounts the other person.

**Second order structural model.**

For each message we receive from our parents we have a certain way of thinking about it and certain fantasies we form in relation to that message. We have not only feelings about that message but also decide what to do about that message. In addition, our parents may give us reasons why the message is important. Besides their overt message, their feelings may imply a covert message.

In the second-order structural model, the messages we received from our parents are 'filed away' in P3. The reasons they gave us for why they were important are stored in A3. Any secret or covert implications are stored in C3. Our own thinking about the messages become part of our A2 content. The fantasy we formed about what would happen if we did or did not follow these messages becomes part of P1. The feelings in response to our fantasy are stored in C1, and our early decision about what we would do come from A1 (Stewart & Joines, 1987).

**Recognizing ego-states.**

By observing the behavior we can see or hear the words, tones, gestures, postures and facial expressions we can judge the ego-state of a person. The idea behind social diagnosis is that other people will often relate to us from an ego-state that is complementary to mine. So, if we note the ego-state of the responder, we can have an idea of our ego-state. By getting information about the childhood and about the parents of the client we can check on the person’s functional ego-states. Since sometimes we may re-experience the past instead of just remembering it, phenomenological diagnosis is additional help in finding out the ego-states of the client.

Berne (1961) says that structural analysis makes possible a systematic general pathology for psychiatric disorders. Structural pathology deals with anomalies of psychic structure. Toshi et al. (1987) say that "a structural analysis of ego states may reveal a vast range of functioning from dysfunctional ego boundaries to functional and active processes". They add that in TA theory, the intrapsychic relationships between ego states may include:

* Mutual isolation - The ego states are fragmented, thereby increasing confusion and psychological distress.

* Conflict - The uneven or ineffective functioning of the ego states leads to greater tension, anxiety and neurotic symptoms.

* Contamination - One ego state permeates the boundaries of another leading to significant disturbance as
in schizophrenic or psychotic functioning.

* Invasion - One ego state interferes with the processes of another resulting in severe personal and social conflict.

* Predominance - One ego state dominates all others as in a workaholic (adult ego dominance) or a severely regressed individual (child ego state).

* Cooperation - The ego states operate efficiently to minimize conflict and anxiety and increase constructive individual action.

**Transactions**

A major part of Berne’s theory dwells on transactions, and analyzes how people communicate. A transaction is defined as a stimulus and related response between various ego states of two or more people, and graphically, they are symbolized by arrows. The word transaction is preferred over the more general term communication for clarity and precision (Dusay & Dusay, 1979). Citing Dusay and Dusay, Toshi et al. (1987) mention the three rules of communication occurring in transactions:

* Communication may proceed indefinitely when an ego state of one individual relates to the same ego state in another.

* A transaction is crossed when two people communicate with each other using different ego states (i.e., Adult to Parent or Parent to Child). In these instances, the transaction is ineffective and soon discontinues.
* Behavior is explained not only by the social transaction but also determined by the psychological meaning of the message to each of the communications.

In an ulterior transaction, two messages are conveyed at the same time. One of these is an overt or social-level message. The other is a covert or psychological message. Most often, the social level content is Adult-Adult. The psychological level messages are usually either Parent-Child or Child-Parent. The behavioral outcome of an ulterior transaction is determined at the psychological and not at the social level (Stewart & Joines, 1987). When these two levels (psychological and social) are actively operating at the same time, a game is usually taking place (Dusay and Dusay, 1989).

Three hungers.

Berne explains that our efforts to transact with people are the result of three kinds of hungers we have: recognition hunger, stimulus hunger, and structure hunger.

The intolerance for long periods of boredom or isolation gives rise to the concept of stimulus-hunger, particularly for the kind of stimuli offered by physical intimacy. This stimulus-hunger parallels in many ways, biologically, psychologically, and socially, the hunger for food (Berne, 1961).

Berne continues that the stimulus-hunger, with its first order sublimation into recognition-hunger, is so
pervasive that the symbols of recognition become highly prized and are expected to be exchanged at every meeting between people. Except the spontaneous forms of recognition like the glad smile other gestures, like the hiss, the obeisance, and the handshake, tend to become ritualized (p. 84).

Strokes.

To satisfy our recognition-hunger we need to be touched or stroked (literally or figuratively). Hence, a stroke is a physical or emotional form of recognition that meets a psychological need. Toshi et al. (1987) say, "Putting oneself in a position which will lead to strokes is a primary behavioral motivator."

Strokes can be verbal or non-verbal; positive or negative; conditional or unconditional. Any kind of transaction is an exchange of strokes.

A positive stroke is one which the receiver experiences as pleasant. A negative stroke is one experienced as painful. It is not true that people want only positive strokes. Any kind of stroke is better than no stroke at all. A conditional stroke relates to what you do. An unconditional stroke refers to what you are. Stroking reinforces the behavior which is stroked. The quality and intensity of strokes are important.

Some strokes start off sounding positive, but have a negative 'sting' at the end. For example, "You have got very good grades - did you know the questions in advance"? These
strokes are called counterfeit strokes.

Positive strokes given insincerely are described by Berne as "marshmallow-throwing." Other writers use the term "plastic strokes." It is not surprising that there are people who have trouble in giving any positive strokes at all.

When it comes to taking strokes, we all have our own preferences. We may devalue certain strokes which we often receive, and secretly long for other strokes which we seldom get. In TA terms, it is said that we all have our preferred stroke quotient.

If a particular stroke does not fit in with our stroke quotient, then we are likely to ignore it or belittle it. That is called discounting or filtering out the stroke. When we do this, we are likely to exhibit some incongruity in the way we receive the stroke (Stewart & Joines, 1987).

Five restrictive (negative) rules about stroking:
* Don’t give strokes when you have them to give.
* Don’t ask for strokes when you need them.
* Don’t accept strokes if you want them.
* Don’t reject strokes when you don’t want them.
* Don’t give yourself strokes.

Parents give these rules as a way of controlling their children. By teaching children that strokes are in short supply, the parent gains the position of stroke monopolist. Knowing that strokes are essential, the child soon learns to get them by performing in ways which mother and father
demand (Stewart & Joines, 1987).

**Time structuring.**

Since mere recognition by others cannot make us content we begin to hunger to structure time. Berne (1961) says, "The specific social problem takes the form of (1) how to structure time (2) here and now (3) most profitably on the basis of (4) one's own idiosyncrasies, (5) the idiosyncrasies of other people, and (6) the estimated potentialities of the immediate and eventual situations" (p. 85-86).

In order to satisfy our structure-hunger we structure our time with the following six modes: Withdrawal, Rituals, Pastime, Activities, Games, Intimacy.

Berne (1972) writes that among the six possible kinds of social behavior the most limiting is withdrawal, in which the people do not overtly communicate with each other as for example in a subway train.

"Next to withdrawal, in which each individual remains wrapped in his own thoughts, the safest form of social action is rituals. These are highly stylized interchanges which may be informal or may be formalized into ceremonies which are completely predictable" (p. 22).

The next safest forms of social action are called activities, commonly called work. Work transactions are typically Adult-to-Adult, oriented toward the external reality.

A pastime, like a ritual, proceeds in a way that is
familiar. But the content of a pastime is not programmed so strictly as that of ritual. Pastime allows people to make their own embellishments. In any pastime, the participants talk about something but engage in no action concerning it. In social interchanges, pastiming serves an additional function. It is a way in which people 'sound each other out' as possible partners for the more intense stroke exchanges which take place in games or intimacy. (Stewart & Joines, 1987).

Games are sets of ulterior transactions, repetitive in nature, with a well-defined psychological payoff (Berne, 1961). Since an ulterior transaction means that the agent pretends to be doing one thing while he is really doing something else, all games involve a con. But a con works only if there is weakness (gimmick) it can hook into the respondent such as fear, irritability or greed. After the mark is hooked, the player pulls some sort of switch in order to get his payoff. The switch is followed by a moment of confusion or crossup. Then both players collect their payoffs as the game comes to an end (P. 23).

Games are played from any negative ego-state part: Negative Adapted Child, negative Controlling Parent or negative Nurturing Parent. Games cannot be played by Adult. Games always entail an exchange of discounts which are in psychological level. At social level, the players experience the game as an exchange of intense strokes. In the beginning the strokes may be either positive or negative, but at the
end of the game both players experience intense negative strokes (Stewart & Joines, 1987). Berne gives a formula for a game: \( C + G = R \rightarrow S \rightarrow X \rightarrow P \)

A game represents the child's best strategy for getting something from the world. When we play games in adulthood, we are attempting to meet a genuine child need. It's just that the means of satisfying that need are outdated and manipulative (Stewart & Joines, 1987).

Berne has described scores of games people play in order to fulfill their psychological hungers and to justify their scripts. Whenever people play games, they are stepping into one of the scripty roles: Persecutor, Rescuer or Victim. Berne (1961) writes, "Drama in life, as in the theater, is based on "switches," and these switches have been neatly summarized by Stephen Karpman in a single diagram he calls "the Drama Triangle." The players take one of these roles in the beginning. When the crisis occurs, the two players move around the triangle, thus switching roles. All three Drama Triangle roles are inauthentic. When people are in one of these roles, they are responding to the past rather than to the here-and-now.

In intimacy there are no secret messages. The social level and the psychological level are congruent. Bilateral intimacy is defined as a candid, game-free relationship, with mutual free giving and receiving and without exploitation.

Berne (1961) writes:
Sexual activities offer examples which cover this whole spectrum of social behavior. It is evident that they can take place in withdrawal, that they can be part of a ritualistic ceremony, or that they can be all in a day's work, a pastime for a rainy day, a game of mutual exploitation, or acts of real intimacy" (p. 25).

**Life-Script**

Another important concept in TA is *life-script*. Its origin needs some explanation about a minor concept called *life position*. On the basis of our experience and perception during the first five years of life we form ideas about ourselves and others which culminates in a decision or life position concerning the OKness or not-OKness of "I" and "they". Energies are then devoted to confirming the chosen decision (Roberts, 1975). The four life positions are:

- I'm OK, You're OK.
- I'm OK, You're not-OK
- I'm not-OK, You're OK
- I'm not-OK, You're not-OK

Once the life position has been decided upon, the child then identifies himself/herself with a character in a fairy tale, myth or legend. Then on the basis of the story, the child's experiences, the parenting messages, and the position chosen, the child develops a script, or the way he or she will live out his or her drama.

Stewart and Joines (1987) say that script is a life plan in
the form of a drama, with a clear-cut beginning, middle and end. Script is directed towards a payoff - culminates in a chosen alternative. It is also decisional and outside of awareness. Reality is redefined to justify the script. Toshi et al. (1987) cite Berne (1972) saying that there are five requirements for a script:

* Results from messages communicated by parents.
* Increases maladaptive personal and social responses.
* Leads to existential decision about self and life.
* Results in success or failure.
* Results in maladaptive social transactions.

We may live out our script as a winner, loser or non-winner. In terms of content, scripts can be classified under three headings: Winning, (accomplishing our declared purpose comfortably, happily and smoothly); losing or hamartic (not accomplishing a declared purpose); and non-winning or banal (in the middle of the road, neither winning nor losing, not taking risks) (Stewart & Joines, 1987).

The life positions or life script are decided upon in response to the script messages we get mainly from our parents. Script messages may be conveyed verbally, non-verbally, or in these two ways combined. Verbal script messages may be transmitted in the form of commands or attributions. Eric Berne compared the build-up of script messages to a pile of coins, stacked one on the other. A few of the coins in the stack are skewed. The more skewed ones there are, the more likely is the whole stack to go off line
and fall over (Stewart & Joines, 1987).

Script messages are given to us in the form of injunctions such as, "Don’t be." Besides these injunctions, the child develops certain inner commands called drivers, such as: Be perfect; Be strong; Try hard; Please (people); and Hurry up. The child believes he or she can stay OK so long as he or she obeys the driver.

If we, in order to be faithful to our script, ignore information relevant to the solution of a problem, we are said to be discounting. For the same reason we discount strokes as well. Every discount is accompanied by grandiosity. The four passive behaviors which indicate that someone is discounting are:

- Doing nothing
- Overadaptation
- Agitation
- Incapacitation or violence.

We can classify discounts according to three different criteria: area, type, and level.

Following our script, instead of staying in any of the four authentic feelings (mad, sad, scared, and glad), we may entertain and employ inauthentic feelings and behaviors as a means of manipulating the environment. This is called a racket (Stewart & Joines, 1987).

When we experience a racket feeling, we can do two things: either express it then and there or store it for later use. When we do the latter, we are saving a stamp
(psychological trading stamp). People save up stamps because by cashing in the stamps, they can move towards their script payoff.

Transactional Analysis Therapy

Stewart and Joines (1987) say that Eric Berne’s suggested ideal was Autonomy, and that he described it as being manifested by the release or recovery of three capacities: awareness, spontaneity and intimacy.

Awareness is the capacity to see, hear, feel, taste and smell things as pure sensual impressions, in the way a newborn infant does. Without interpreting or filtering the experience of the world to fit his/her parental definitions, the person who is "aware" is in contact with his/her own bodily sensations as well as with external stimuli.

Spontaneity means the capacity to choose from a full range of options in feeling, thinking and behaving. It implies that the person can respond freely from any his/her three ego states to suit the present situation, and not to comply with outdated Parental commands.

Intimacy means an open sharing of feelings and wants between two or more persons. The feelings expressed are authentic, so intimacy excludes the possibility of racketeering or game-playing.

Autonomy also suggests that the person must be free from the script. Stewart and Joines (1987) say that Berne stressed time and again that the TA practitioner’s job was to 'cure the patient', not merely to help him 'make
In order for the client to achieve autonomy, structural analysis and functional analysis are done in TA therapy. Dusay and Dusay (1989) write, "Transactional analysts focus upon three primary areas for psychotherapy: egogram balances, game interruptions, and script redecisions". Script redecision is usually accomplished concomitantly with game therapy, by overcoming early childhood decisions and by applying an opposing force against stubbornly held decisions.

TA facilitates the structural integration of the ego states so that individuals may draw from the strengths of the various ego states to make decisions, solve problems, and creatively engage in life tasks. Effective ego boundaries and differentiation occur in functional people. TA uses ego diagrams, ego grams, and script matrices to assess how the ego states are operating and to assess overall functioning of the person. The ego diagrams illustrate the structure dynamics of the ego states while ego grams assess the relative strength and quantity of time spent in these ego states. Script matrices may be used to analyze the role of ego states in transactions. TA assessment techniques provide data on what ego states operate most frequently and how the ego states are activated socially. The procedures may provide therapeutic direction for the counseling sessions but of paramount importance is the educational value that clients derive from these
assessment procedures (Toshi et al., 1987).

Game analysis and script analysis are undertaken in therapy after the client and therapist take a joint responsibility for achieving contract goals. The goals are chosen to promote movement out of script into autonomy and into open communication which is authentic and congruent (Stewart & Joines, 1987).

TA therapy is oriented to change, rather than simply to the achievement of insight, though TA gives importance to the fact the clients must understand the nature and origin of the problems. TA therapists educate the clients while curing them so that the clients are prepared to deal with any future problems.

Roberts (1975) summarizes:

The process of transactional analysis includes four distinct phases: structural analysis, transactional analysis proper, game analysis, and script analysis. The role of the therapist is that of teacher, observer, listener, and interventionist. The most effective tools of the therapist are listening and observing which provide the information about the patient that is necessary for analysis and intervention, and for determining the nature of the patient’s script. The therapist uses the intervention techniques of interrogation, specification, confrontation, explanation, illustration, confirmation,
interpretation, and crystallization, as well as permission and decontamination. Transactional analysis holds that instructing the patient in structural, transactional, and game analysis is of primary importance, for individual understanding and control of one’s behavior precedes analysis and personality change.

Commonalities between CFT and TA

Satir as well as Berne have been influenced by many other people. Both CFT and TA have borrowed ideas from other theories and therapies.

Beliefs about Human Nature

Both Satir's and Berne's beliefs about human nature are positive. Both in a way assert that people are OK. Satir believes "people have an internal drive to become more fully human. This intrinsically positive energy, also called the life force, exerts wholesome pulls and pushes on us - physically, emotionally, and spiritually - throughout life. Stemming from this idea of a universal life force is the premise that we all come into a world with intrinsic and equal worth" (Satir et al., 1991).

Toshi et al. (1987) write:

* What society calls sick, crazy, stupid, or bad behavior is really an attempt on the part of the afflicted person to signal the presence of trouble and call for help.

* Human beings are limited only by the extent of their knowledge, their ways of understanding themselves, and their
ability to check out their perceptions with others (Satir, 1967, p. 97). Berne’s basic belief is that people are OK.

Effect of the past.

Both Satir and Berne believe that what we learned as children may still be affecting us in the present. Satir says time and again that "people are affected by past models" (Satir, 1983, p. 166). "Our parents are our first teachers. We get our ideas of how to behave from what we see, what we experience and what we are told, and all this comes to us from our first teachers. You got your first ideas from your respective first teachers" (pp. 163-164). To find out how the past has affected each member of the family Satir starts with the family chronology in her Conjoint Family Therapy.

The study of ego-states in TA reveals how much a person is affected by the childhood experiences. In the Parent ego state he feels, thinks, acts, talks and responds just as one of his parents did when he was little. In the same way, the Child ego state is that which thinks, feels, acts and responds just the way as he or she did when he or she was a child. Even the Adult ego state makes an objective assessment of the environment and calculates its possibilities and probabilities on the basis of the past experience. The concepts of Racket, Games and Life-script point to Berne’s belief that the effects of our past continue in the present.

Another concept that appears to be similar is that
dysfunctional people feel that they have no options. "People feel that they have no options" (Satir, 1983, p. 86).

According to Berne, script decisions represent the infant’s best strategy for surviving. A game also represents the child’s best strategy for getting something from the world. When we play games in adulthood, we are attempting to meet a genuine child need. It’s just that the means of satisfying that need are outdated and manipulative (Stewart and Joines, 1987). When people resort to survival stances according to Satir, or when they hang on to a hamartic script according to Berne, the dysfunctional people feel that they have no options.

**Change**

Both Satir and Berne believe that change is always possible and that we have within us all the resources necessary for growth. The basic concepts of Satir and Berne attest to this fact. Schwab (1990) confirms in her book *A Resource Handbook for Satir Concepts* that CFT believes that change is possible (p. 3). Schwab (1990) in her summary of the concepts of CFT says that people can replace the old unsatisfactory learning with the new ones. Toshi et al. (1987) write, "Berne (1977) asserts that people have capabilities and unconscious desires to behave and respond to others in reasonably realistic and spontaneous ways. He feels that people have the capacity to examine scripts and games and can minimize the effects of those self-defeating processes". Both Satir and Berne believe that the past
defective and painful learnings can be replaced with new learnings. Berne also believes that people are dysfunctional when they carry on their childhood decisions which are no longer effective and needed (pp. 23-25).

**Communication**

Both Satir and Berne give importance to the concept of communication. They analyze communication patterns. Both advocate congruent communication. Satir talks about five ways of communicating, whereas Berne talks about nine possible vectors of social action between an agent and a respondent.

Berne’s concept of life-position "I’m not-OK, you’re OK" corresponds to Satir’s placating. Berne’s life-position “I’m OK, You’re not-OK" parallels Satir’s blaming. Berne has no corresponding life-position to Satir’s super-reasonable. Berne’s life-position "I’m not-OK, You’re not-OK" is similar to Satir’s irrelevant, except that Berne does not mention explicitly the context. Congruent communication seems to come from Berne’s life-position "I’m OK, You’re OK".

Satir’s survival stance placator seems to have a counterpart in the victim of Karpman’s Drama Triangle. The blamer reminds us of the persecutor in the Drama Triangle. Karpman’s rescuer does not have a parallel one in Satir’s survival stances.

**Self-Image (self-Worth)**

Satir believes that difficulty in communicating is closely linked to an individual’s self-concept, that is, his
or her self-image and self-esteem. She asserts that low self esteem leads to dysfunctional communication. Berne does not talk as elaborately as Satir on Self-esteem. But he talks about the life-positions based on the self-concepts of the people. Those who believe that they are not-OK have indeed low self-esteem.

Berne’s ideal autonomy is manifested by the release or recovery of three capacities: awareness, spontaneity and intimacy. Satir’s idea of growth therapy seems to express the same concept as autonomy: "Growth therapy is based on the premise that people can be taught to be congruent, to speak directly and clearly, and to communicate their feelings, thoughts, and desires accurately in order to be able to deal with what is" (Satir, 1983).

Life-Script

The life-script (that is preconscious) that is made when we are children is lived through until the end of our lives. It reveals itself through our feelings, thoughts, and behavior which includes games. Satir seems to express the same idea when she talks about the process. "Process entails coping with people’s feelings, especially those that have a survival value. These appear in times of stress and can contaminate the present with inappropriate emotional reactions or behavior. The root, the source, can be found somewhere in the past, usually when the person was very young. At that time some trauma or event produced a real feeling of helplessness, impotency, and powerlessness...A
survival feeling persists at some level and is usually out of awareness. It is aroused when a current situation raises similar feelings" (Schwab, 1990, p. 14).

The therapists in both CFT and TA are models of good, congruent communication. Analyses, though different in names and content, are the tools of the therapists. Both CFT and TA therapists are teachers in the sense that they teach their clients the concepts of their therapies. "The therapist does take charge, but does not treat the patient like a child or expect him behave like one" (Satir, 1983, p. 224). "Transactional analysis holds that instructing the patient in structural, transactional, and game analysis is of primary importance, for individual understanding and control of one’s behavior precedes analysis and personality change" (Roberts, 1975).

Both CFT and TA therapists are concerned about the clients’ here-and-now experiential learning (Toshi et al., 1987). "A TA counselor feels that insight is derived from direct experience in life and in counseling. Active, experiential learning plays an essential role in the counseling process, with clients being encouraged to test out new behaviors in social settings." (Toshi et al, 1987). Satir’s approach is directed towards clients’ change through experience. "Healing occurs through experiencing and learning about congruence." (Satir et al., 1991).

The goals of CFT and TA therapy seem to be the same. CFT aims at increasing the self-esteem of the family members
and at helping them learn to communicate congruently. The goals in TA therapy are chosen to promote movement out of script into autonomy and into open communication which is authentic and congruent (Stewart & Joines, 1987).

**Differences between CFT and TA**

Conjoint Family Therapy is oriented towards, as the name suggests, family therapy, whereas TA is basically practiced with individual and group therapies.

In CFT, the family therapist works with interactional, interpersonal, and intrapsychic material (cf. p. 26). He or she intervenes at the level of the communication, the system, and the self-worth. One difference in TA is that it deals more elaborately with intrapsychic relationships between ego states (Berne, 1977).

Satir talks about our basic needs to survive, to grow and learn, to be productive and creative, to make sense or order, and to get close to others. But Berne talks about structure hunger, a person’s need to organize meaningful activity, or transactional hunger, a need to relate to and interact with others (Toshi et al., 1987).

Berne describes games as a set of ulterior transactions which have two levels: Psychological and social. Satir cites examples of covert communications between people who have low self-esteem. But she does not call these covert communications games.

Berne deals with the game analysis because he believes that to change the games and learn new responses, people
must understand their ego state’s ulterior motive in the transaction. Toshi et al. (1987) say that exploring the game increases understanding of both the ego states and the transaction, and creates an opportunity for more authentic ways of relating. Satir’s communication analysis does not deal with game analysis.

Berne asserts that people make decisions about their existence based on their experiences. To analyze these decisions about existence Transactional Analysis relies heavily upon the complex cognitive operations of the brain (Toshi et al., 1987, pp. 74-75). In my opinion, TA is more cognitive than experiential. But CFT is more experiential than cognitive. "Foley (1974) notes that Satir brings to the highly cognitive communications approach a strong concentration on the feelings associated with the communication process" (Toshi et al., 1987, p. 252).

TA has more concepts than CFT has. But the terms used for different concepts in both CFT and TA are simple.

Berne believes that bodily contact is not necessary to be therapeutically effective. "Transactional analysis as a therapeutic method is based on the assumption that words and gestures can have a therapeutic effect without any bodily contact with the patient beyond a handshake" (Berne, 1972). But Satir’s belief is different. "Virginia insisted on using touch to amplify any important positive communication or new learning and thus to consolidate change" (Andreas, 1991). The same author writes:
One of the most obvious hallmarks of Virginia’s work was her use of touch. Although it is perhaps the most controversial aspect of her work (any physical contact between therapist and client is still expressly prohibited as unethical in mainstream psychiatry), she felt it was crucial (p. 37).

TA deals with redecision in therapy helping the client to make new decisions about his/her feelings, thoughts, and behavior based on new awareness of the defective life-script. CFT is engaged in family reconstruction. Nerin (1986) writes in the preface of his book, Family reconstruction, "I believe that family reconstruction is the epitome of her (Virginia’s) work and contribution to the field of family therapy."
CHAPTER IV
Weaving TA with Conjoint Family Therapy

Both CFT and TA are acknowledged and praised as effective in their own circles. Since the focus is on family therapy, I want to identify where and how CFT could be combined with TA in order to increase the effectiveness of family therapy. This idea of weaving TA with CFT will not be frowned upon because Satir herself mentions:

In my therapy and training, I make use of principles and ideas gleaned from the disciplines of dance, drama, religion, medicine, communications, education, speech, the behavioral sciences - and the physical sciences, from which the "systems concept" (on which my practice is based) first derived. Integration, in theory and practice, of all the tools available for growth is necessary before we begin to deal in fact with the "total person" (Satir, 1983, p. 231).

In the beginning of CFT, the family therapist may instruct the clients (family members) about the concepts of ego states and their function in social transactions. The therapist may then explain systems concept of family describing graphically with concrete examples the circular causality. He/she may continue with how one's ego states respond to another's ego states in transactions.

Since Satir (1983) talks about the re-education of patients for adulthood, for accountability, by reminding the
patient of his ability to be in charge of himself, the use of Berne's concept of activating the Adult ego state to take charge of oneself may be useful.

In CFT, the family therapist assesses family functioning by considering the dynamics of the family, the family structure, its communication patterns, and its ways of coping. The assessment is done while going through the family mapping and family chronology. This assessment is similar to the family structural analysis and the transactional analysis in the context of a family.

Schwab (1990) claims that the CFT therapist works with not only interactional and interpersonal but also intrapsychic material. But there are no detailed explanations of how Satir works with intrapsychic material.

It is true that Satir (1983) has stressed the need for the individual to observe himself in interaction, including the part he plays in the family system (p. 231). But if individuals are to be permanently helped, Berne's concept of ego states (structural analysis) could very well be used in CFT without doing violence to the flow of CFT. With the knowledge and practice of the structural analysis clients can continue to analyze and become aware of their self and of their communication pattern. Moreover, the understanding of the ego states may decrease the client's anxiety, enhance awareness, and encourage the recognition of material to be processed in later counseling sessions (Toshi et al., 1987).

Roberts (1975) says that structural analysis can later
assist us in learning to listen to the internal dialogues between ego states, or our voices in the head, and to allow our Adult to start a new dialogue. Examining and evaluating the needs of the individual ego states will help our decision making; Structural analysis is also used in looking at and diagramming the various facets of the personality; in determining whether any of the ego states limit or distort one's perceptions of our world; and as a way of categorizing external events.

Satir's communication analysis of the family is contextual. She explains that there are three segments in the circle of relationship: Self, Other, and the Context, whereas Berne has not thought of including the Context. She describes four dysfunctional ways of communicating as opposed to congruent communication. While dealing with communication analysis in CFT, it may be worthwhile to incorporate Berne's transactional analysis not only because it talks about nine possible channels of open communication but also it can be used to depict blocks to communication and listening which are the result of crossed transactions. The family members' progress can be shown by diagramming the way in which they are using more and more of the nine available ways of communicating effectively with others (Roberts, 1975).

Satir (1983) describes the discrepancies between the words and the behavior, the verbal and the nonverbal, and the words and the feelings. But Satir's term "congruent" or
"incongruent" communication seems to be rather too general to explain this concept. The TA concepts like ulterior or gallows transactions will be handy to explain the complex concept with its many subdivisions. Moreover the colloquial terms in TA will catch the attention of the clients who can use them even in their workaday world.

Berne’s game analysis may be introduced in CFT during the communication analysis of the family members. The reason behind introducing game analysis is that families very often get into repetitive psychological games. Games like Why Don’t You - Yes But and NIGYSOB are not uncommon among families. It is also true that the people involved in games are not aware of the fact that they are playing games as well as of their psychological need to play games.

Game analysis helps behavior analysis, too. It is good to know how intensely and at what stage the games are played by the family members. Berne (1964) classifies games as First-Degree Games (Socially acceptable), Second-Degree Games (no permanent damage to players but usually concealed from public), and Third-Degree Games (played for keeps and usually with dramatic, often tragic outcomes) (Roberts, 1975).

The games played by the family members may be identified so that similar games could be role-played by the same or different family members to make the game-players aware of their kinds and stages of games and their intensity, as well. Such games may become part of the
Simulated Family Games or Communication Games.

Berne's concept of time-structuring may be useful to analyze the family time-structuring. Families may be helped to choose intimacy as their ideal in the whole spectrum of social behavior.

Schwab (1990) writes that the system is how the family copes with life, stress, and change; the rules dictate whether the system is closed or open; the family functions in the areas of communication, the uniqueness of each family member, the existence of differences, the process of decision-making, power and sexuality. It goes without saying that the therapist must find out not only the family life-script consisting of rules and myths but also the individual members' life-scripts. In this sense, Berne's concept of life-script can be extended to the family and used in therapy as family script analysis.

In CFT, after going through the family chronology and identifying the problem areas, interventions can be made at three levels: Communication, System and Self. TA (with its Structural analysis, Transactional analysis and Game analysis) may assist CFT at two levels: Communication and Self.

In Karpman's Drama Triangle the Identified Patient in the family may, at any time, be considered any of the three players: Victim (by the IP because the family may consider him/her a nuisance or a problem), or Persecutor (by the parents and other family members who consider the IP as the
source of trouble), or the Rescuer (by the therapist because the IP contributes to the homeostasis). A mention has already been made in the Review of Literature that Zerin (1988) has illustrated an application of Karpman’s drama triangle to promote rapid, structural change in a multiproblem blended family. So, making use of the concept of the Drama Triangle in CFT may be of great help to the family members to understand their part in this family game.

In CFT, while tackling the issue of self-esteem which affects both communication and the functioning of the family, the therapist deals with the feelings about self as well as the feelings about the feelings (Schwab, 1990). At this juncture, it is possible for the therapist to talk about the life positions of TA. He may also explain to the family members how we cling on to a life position despite many new experiences which give us messages contradictory to our life positions.

While encouraging the family members to give and receive feedback, the family therapist may make use of the TA concept of strokes. After explaining Berne’s different kinds of strokes, the therapist may educate the family members to learn to give positive strokes in a congruent way. As Satir (1990) mentions one of the results of her therapy is for the client to ask for what one wants, instead of waiting for permission. Family members may be taught there is nothing wrong in asking for strokes. The concept of stroke quotient may explain to family members how we filter
the strokes we receive in order to preserve our life script as individuals and as one family.

**Recommendations**

CFT and TA have many things in common. Despite the differences, there does not seem to be any philosophical contradiction in their orientation.

Moreover, Berne as well as others who have practiced TA acclaim that TA is very effective in group settings. Roberts (1990) says, "Transactional analysis approach is most effective when used within a group setting. The language is simple and easily taught, and it provides the group members with a common vehicle for communication. The social transactions within the group provide the therapist and the patient the material with which to work." If TA is effective in groups, it should be effective with families, too.

While working within the framework of Satir’s Conjoint Family Therapy, many concepts, analyses and techniques of TA can be easily and beautifully interwoven with CFT for the benefit of the family members. In applying TA techniques and concepts the level of the cognitive development of the family members, especially of children, must be taken into consideration. CFT and TA can complement each other in their effectiveness in family therapy. If the affective experience of CFT goes hand in hand with the cognitive understanding of self and transactions provided by TA, the learning of the family members will be very strong and long lasting.
It will be the task of future researchers to test the effectiveness of combining Transactional Analysis with Conjoint Family Therapy.
References


