

Being a Transactional Analyst – by Dave Spenceley TSTA
An integrative approach + New theory on Impasses and Transference
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Two stages of psychotherapy
by
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Is TA a relational approach to psychotherapy or a (CBT) cognitive behavioural approach?

- My answer is yes it is both at the same time – hence my title “TA and integrative approach to being a Transactional Analyst.

Two Phases of therapy

Light is at one and the same time both a particle and a wave... and that is simply not possible. How can this be? In his wisdom my physics teacher told me that it depends on my view point. I use this to describe two phases of psychotherapy, like light particles and light waves. Both are very different in nature and apparently impossible to unify however like light I understand that psychotherapy is both at the same time.

- Psychotherapy is like a particle in that within the process we deal with specific problems and create specific strategies to deal with individual problems.
- Psychotherapy is like a wave, two people or a group of people forming a wave of movement and direction, providing the colour and intensity of the relational experience which in turn leads to change in each individual.

During the early phase of treatment I describe my method of working in the following way in which I am deliberately using the transferential relationship which is already in full swing the moment the client makes first contact with the therapist.

“There are basically two approaches in my style of working: First I am very interested in getting to know you... this includes listening carefully to your story, seeking to understand the reasons why you have decided to come for therapy with me, and why now. During these early stages of the work I am interested to find out what it is you are wishing to change in your life, and how you would like to be after therapy has finished. The initial goal will be for you to find strategies in order to manage more effectively whatever has brought you into therapy. For example if you are afraid of going shopping we will be looking for strategies which will enable you to be comfortable in yourself while going shopping.” *(This is described as resolving the 1st degree impasse / crises... what Berne described as gaining social control and symptom relief).*

“Secondly while I am working with you from the start I am very interested in how you are in your life... How you live, how you think and feel and how you make decisions about what you do and don’t do. I will be noticing with you the way in which your life outside the therapy room is reflected in how you are in your relationship and work with me. The longer you are with me the more this will become the focus of our work. We may at times use specific techniques during this phase however whatever style we work in the goal is for you to make long lasting changes in your life which will enable you to manage and contain your future life.” *(This is understood as resolving 2nd and 3rd degree impasses, or what Berne described as psychoanalytic / script cure- As the core competencies of TA say so well: Healing the hurt of the past in order for the client to live fully in the present.)*

I often describe these two phases with the traditional Chinese metaphor ... “The first phase is ensuring you have a fish and so you don’t starve today. The second phase is about learning all you can about how to fish so you will never starve.” I sometimes change the metaphor slightly... saying that the difference is that in the first phase it is going to the local shop to buy a fish; while the second phase is building a fishing boat and learning all about fishing, including where the fish live, understanding the hidden currents and the life of the deep as well as learning to captain the fishing boat... all of which make for a long term project!”

I normally conclude by providing the transferentially inviting statements that I confidently expect that we can deal with the first phase relatively quickly and that according to research clients can expect to achieve

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these socially observable changes within the first 12 sessions, and often more quickly. While the second phase will take as long as we need. Finally you might make some startling / disturbing changes in your life..."

TA models

The main frame I use is my understanding of the structural model of ego states and my own development of impasse theory which I describe later in this article. I have found no better way of understanding and analysing the developing intra-psychic process as it is enacted by clients and psychotherapists in their co-created experience in the transferential process.

The first phase of TA psychotherapy:

Leading to social change and strategies for daily living. That is dealing with 1st degree impasses.

I believe it is very important to honour the client's desire for change... invariably a client enters therapy because of disturbance and stress in their lives, finding ways of managing / containing their lives safely and effectively is their primary concern, they do not need to wait for a long term unfolding of and resolution of the transference their therapy in order to do this. Indeed many clients will not have the desire or motivation needed to engage in the second phase of psychotherapy.

Often the idealised transference maintains and contributes to the hope and belief that the therapist can be used to find the first level of healing. If the client leaves therapy after successfully making the change they desire in the first phase of psychotherapy it is very likely that their idealisation of the therapist will be heightened and remain unresolved. (Indeed they are likely to be source of future referrals to the wonderful and effective therapist!)

Steps to treatment:

- a. The first priority is to establish and maintain a therapeutic contract and therapeutic alliance... while also paying close attention to the client's transferential process during the work. On occasions it will make sense to use this transferential process early in the first phase of work, sometimes naming the process at other times without overtly naming the process.
- b. During the first phase the emphasis is on "classical" TA approaches such as transactional analysis, game theory, script analysis, racket analysis with the goals of:
 - Understanding and then finding an impasse resolution.
 - Strengthening the Adult ego state boundaries so that the client can function effectively in their daily life.
 - It is likely that this work may take the form of the client making a redecision in any of their ego states... In the first phase of treatment this is more likely to be a redecision as described by Berne... The client understands the impasse and the solution in the here and now... and makes a decision in the Adult ego state.
- c. Once the initial presenting problem is effectively dealt with then it is important to review with the client their contract... do they wish to continue on to the second phase of the work?

The secondary phase of TA psychotherapy:

The goal of this phase is to work with the client's unconscious process leading to lasting script change.

My understanding is this is dealing with 2nd and 3rd degree impasses which I also refer to as deconfusion of both the Child and Parent ego states while continuing the task of strengthening the Adult ego state boundary.

The therapeutic relationship becomes the focus, increasingly fewer techniques are used in the sessions and discussions of the client's activity outside of the room becomes less important... over time the emphasis in the therapeutic work shifts so that the therapeutic relationship itself is the focus. Working in and through the

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transference will lead to many transformational experiences. The Goal during this phase is for the client to make new meanings for him / herself and in this way for their new lives to take shape and direction.

Often clients find difficulty articulating the issues dealt with in the second phase, they are dealing with their core experience of themselves – their beliefs of themselves, others and life... which often only find expression through non verbal unconscious transference expressions, dreams, fantasies and somatic experiences. Following the work the client may well find it just as difficult to articulate their new self... However their unconscious transference expressions, dreams, fantasies and somatic experiences will change, often dramatically. Their beliefs about themselves, others and life will also be changing.

Steps to treatment: (Nb: These steps are not meant to be a linear treatment plan. See my article on treatment planning to see that I understand this as a non linear process.)

The therapeutic relationship which was established in the first phase becomes the container for the ongoing psychotherapeutic work.

- 1) Depending upon the style of therapeutic relationship and working that evolves the actual process in the therapy room will take a variety of forms. We know that any one technique does not prove to be better than any other in creating transformational experiences.
- 2) At times this may look like the psycho-dynamic / analytic approach.
- 3) At times it may involve passionate / energetic body work
- 4) At other times this may take the form of redecisions which correspond to the how the Gouldings described redecisions in the Child ego state or those of described by Mellor and then later Erskine and Moursund that take place in the Parent ego state.
- 5) The second level of impasse will be experienced through unconscious expressions of the transference, somatic / body experiences, dreams and fantasies. The client will be making cognitive sense of their experiences through limited, magical thinking which maintains their script representation of life, of others and of their own place in the world.
- 6) The third degree level of impasse will be experienced none verbally, and so can only be understood and made meaning of through unconscious expressions of transference, body experiences and dreams...
- 7) These unconscious expressions of the client's are welcomed and worked with... leading to deconfusion of the Child and Parent ego states.
- 8) Termination of the therapeutic work is an important aspect of this level of work, however the ending will follow a unique way for each client, with the both the therapist and client mutually experiencing the grief and celebration involved fully and together. My experience is that when a client is ready to leave therapy it is not a struggle to end... However when the client is struggling to leave it invariably indicates more work to be done.

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