

Life Scripts: Definitions and Points of View

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Abstract

The European Association for Transactional Analysis (EATA) Conference in Prague, the Czech Republic, included a roundtable on “Life Scripts” presented on 9 July 2010. The roundtable was preceded by introductory speeches given by Richard G. Erskine (convener), Maria Teresa (Resi) Tosi, Marye O'Reilly-Knapp, and Jo Stuthridge. The roundtable discussion also included comments from Rosemary Napper and Fanita English. This article presents edited excerpts from three of the introductory speeches and some of the following discussion. (Jo Stuthridge asked that her speech not be included because it duplicates material already in print.)

Richard Erskine, Introduction

As transactional analysts we have a profound set of theories that have endured the test of time. The core theories of transactional analysis include the human need for relationships and strokes, the complexity of ego states, the distinction of transference from ordinary transactions, and the overarching concept of life scripts. Each of these specific concepts, as well as the combination of all the subconcepts, provides a rich repertoire of theory that is uniquely transactional analysis.

For 50 years transactional analysis has developed, survived, and endured clinical tests. Our theory has been refined through our increasing experience, experimentation, collegial confrontations of each other, and continuous feedback from our clients. As transactional analysts we are grounded in the theories developed by Eric Berne and the members of his seminars, and we are innovative because we listen to the experiences and needs of our clients. Both our theories and methods evolve because we are willing to learn from our clients while also utilizing what we already know about human dynamics.

The concept of *life scripts* is but one example of our innovative and evolving theory. The theory of life scripts has fascinated me since I first heard about it in 1967 in a training workshop with Fritz Perls. He had borrowed the idea from Eric Berne, but neither Berne nor Perls wrote about its psychotherapeutic applications.

Prior to his untimely death, Berne collected notes and vignettes about various influences in the formation of scripts. Those uncorrelated notes and his ideas about human destiny were published as the book *What Do You Say After You Say Hello?* (Berne, 1972). Berne did not live long enough to fully develop the concept of life scripts; he wrote only an outline of the theory and did not address how to treat life script issues in psychotherapy. He left it to future generations, to you, my colleagues here on the roundtable, to me—to all of us—to develop and refine the concepts and methods of working with life scripts.

In the book that has just been published by Karnac entitled *Life Scripts: A Transactional Analysis of Unconscious Relational Patterns* (Erskine, 2010), 14 transactional analysts have written about how they have developed, advanced, and refined Berne's rudimentary ideas. Some of the authors are here in Prague for this European Association for Transactional Analysis psychotherapy and counseling symposium. Those present today are Maria Teresa (Resi) Tosi (Italy), Mary O'Reilly-Knapp (USA), Jo Stuthridge (New Zealand), Rosemary Napper (UK), and Fanita English (citizen of the world). In this symposium, via the introductory speeches and the roundtable discussion, you will hear about a combination of traditional concepts, innovative perspectives, and some radical ideas. As a group of authors, we have written about life scripts being composed of subsymbolic and procedural memory, implicit experiential conclusions, and self-regulating patterns. Some of these authors view life scripts as existential

positions or dilemmas that need to be valued and embraced whereas others define them as embedded within the body or a result of lethal parental injunctions. As a group, though, we have written about unconscious relational patterns that have their origin in early childhood needs for attachment and in the protocol of primary relationships within the family.

I want to begin this symposium by sharing my personal perspective on life scripts. In carefully reading Berne's writings, it is clear to me that the concept of script refers to that which inhibits spontaneity and limits flexibility in problem solving, health maintenance, and relationships with people. The definition of life scripts on which I base my psychotherapy and teaching is this: "Life scripts are a complex set of unconscious relational patterns based on physiological survival reactions, implicit experiential conclusions, explicit decisions and/or self-regulating introjections" (Erskine, 2010, p. 1).

I personally believe that to achieve effective change in a client's life script, it may be necessary for the psychotherapist to focus the therapeutic work on four major areas:

1. Being aware of the client's bodily reactions and uncovering the unconscious emotional story embedded within his or her body
2. Providing an ongoing relational psychotherapy to rectify implicit experiential conclusions and fixated self-regulating accommodations
3. Engaging in in-depth therapy of the Parent ego states to decommission introjections and parental injunctions
4. Facilitating the client in making rededitions related to explicit experiences

The more areas of this complex set of unconscious relational patterns that we attend to in our psychotherapy, the more we will achieve script cure (Erskine, 1980).

Maria Teresa (Resi) Tosi on "The Challenges of the Narrative Script"

When I remember my first psychotherapy session as a client, I can still feel the sense of being deeply understood and respected by my psychotherapist while he was mirroring my feelings and thoughts. Richard Erskine would

probably say I felt "validated": what I felt and thought could be recognized and valued (Erskine & Trautmann, 1996). Now I think that in those days, 30 years ago, I was starting to form my first narrative of what psychotherapy is: an empathic relationship in which a client can give meaning to her own experience and start to form new images of herself, others, and life.

How many "first" experiences and images do each of us have? The first day in school, the first time we made love, the first pregnancy, the first time a loved one died. How many intense and deeply provoking moments of change in relationship to others—what Stern (2003) called *present moments*—have we experienced in life? How many traumas do we still need to integrate in our memories? How many plots or life themes have we developed and favored in our life? Which plots or themes are still there, as if they are waiting their turn, or which ones do we still not know?

In his definitions of script, Berne (1972) underscored that the script is an ongoing program, developed in early childhood under parental influence, that directs the individual's behavior in the most important parts of her life and is based on archaic decisions and conclusions. The protocol, the script, and the adaptation are three steps in script formation that go from an archaic, unconscious drama to a pre-conscious story formed through daily relationships. Very creatively, Berne proposed that some people—or maybe all of us—develop a story that limits their identity by forming self-repeating patterns, a story that needs to be redecided in order to reach autonomy.

After Berne, a wide consensus has developed around the idea that we need a story, in any case, if we want to shape our identity. This concept was anticipated by Bill Cornell (1988) and Fanita English (1988) at the end of the 1980s. Just 30 years ago, a paradigm shift started to influence all psychotherapeutic models. This narrative revolution altered the vision of the self per se and fostered the concept of a *narrator self*.

Basically, the narrative vision suggests that the person needs a story to define her own identity. Life is constructed and reconstructed through the stories we tell about ourselves and

our relationships. Stories help people integrate and make sense of their experiences. Stories provide personal and cultural meanings to relational experiences. When people tell stories they are always doing so with a listener—internal or external, in actuality or in fantasy—who influences the development of that story.

Narrative approaches can be differentiated into two major streams. In one, some authors studied the content of clients' spontaneous stories and showed that they are of great value in accessing hidden psychological processes (e.g., see Luborsky & Crits-Christoph, 1990). According to a second stream, the so-called post-psychological perspective, the concept of narrative is central because it brings together crucial aspects of the psychotherapeutic process. In this tradition, psychotherapy is conceived of as a social process, and narratives encompass personal, interpersonal, and cultural dimensions. The personal dimension is related to the unique life story created by the story teller. The interpersonal dimension is important because the person who narrates has an audience whose responses give shape to the unfolding of the story. Finally, there is a cultural dimension because stories are conceived according to patterns and values typical of a certain culture so that language, culture, and society can offer several "good" or "bad" stories (McLeod, 2004).

Berne was one of the pioneers who interpreted the psychological life as a developmental process based on a theory of social relationships. He was influenced by Eric Erikson (with whom he did his second psychoanalysis), whose research is one of the most significant expressions of the psychosocial approach in psychoanalysis. Erikson (1950) was also the creator of a developmental theory of identity with a strong orientation toward the integration and resolution of internal conflicts.

More recently, the narrative approaches, modern psychosocial theories, and research have stimulated a discussion about the idea of a *unitary self*. In this view, the self is conceived of as a community of selves, and identity includes different meanings of self (Scilligo, 2009). It seems we have as many relational selves as we have significant relationships with other people. Also, for each specific relational self that

is activated, there is a specific nonrelational self linked to it (Andersen & Chen, 2002). The attributes given to the self (e.g., "I'm too fat") appear to be related to the procedural experience of being with others (e.g., "If I am thin, then I can be admired") (Baldwyn, 1997).

Modern psychosocial research hypothesizes that the personality system consists of mediational affective-cognitive unities that are organized in specific relational networks (Mischel & Shoda, 1995). This means that there is growing consensus among psychosocial researchers that the theory of traits is inadequate to diagnose a client (e.g., "she is extroverted"). On the contrary, it is important to acknowledge both the variability of one person in different contexts (context is used in a broad sense, such as interpersonal, cognitive-affective, social contexts, etc.) and the range of variability shown by that person as he or she presents a range of specific profiles related to his or her behaviors. So, for example, the same person could be extroverted in one situation and introverted in another, according to the specific meaning given to certain situations. These theories, which have been integrated by Scilligo (2009) into a model of social-cognitive transactional analysis, further develop the interpersonal theoretical frame of reference that is typical of transactional analysis.

I want to recognize the modernity of Berne when he developed social psychiatry and also the risk inherent in script theory if it is used to underline only how invariable a person is. It has been exciting for me to read several qualitative research reports put forward by authors of narrative approaches to explore if identity is better explained by unity or multiplicity. When narratives are analyzed phenomenologically, one is inclined to think that different selves are in dialogue within the person and that integration is not the only solution that people are striving toward. Sometimes we find a complexity of selves that are organized in a dynamic dualistic fashion; sometimes we find a polyphonia of selves that can be organized like a conversation; sometimes people experience an irreconcilable duality that requires a lifelong struggle to find an internal third element that would contain that duality; sometimes we realize that people organize themselves around a

personal challenge, theme, or aesthetic that orients all of their life in different contexts.

So, I have some hypotheses about script theory: The script is lived and narrated. Narratives are an important mirror of scripts, both for their content and their form. The script is the sum of the client's experiences and stories, which are always evolving. It is formed at the junction of three domains: the personal world of meanings created by each person; the interpersonal/relational dimension, which has an impact on each level (symbolic and subsymbolic, explicit and implicit) of its development; and the culture, which always gives limits and resources to its formation.

From my point of view, the psychotherapist has the task of looking for what is invariable and also what is variable in the client's story life because the complexity and creativity of each person are in the exceptions present in her life, the "errors" that open a window on multiple ways of reaching a goal, the background noise in her life that is worthwhile to acknowledge, the challenges she has been facing, the aesthetic she wants to pursue, the irreconcilable selves she does not want to deny.

I feel honored to have had the chance to present my ideas in this context, to talk about this topic, one for which I have had a passion since 1993 (Tosi, 1993, 2010).

Marye O'Reilly-Knapp on "Script System: The Unformulated Narrative"

As transactional analysts we have concepts that furnish a strong theoretical foundation. Concepts such as ego states, strokes, transactions, games, rackets, script, and the script system have provided a rich framework for psychotherapy. Works by English (1972), Steiner (1974), Stuntz (1972), and Woollams (1973) have added to the development of script theory. This morning I want to talk about the script system and emphasize its power as a model that can guide an in-depth psychotherapy and as a construct in working with unconscious and unformulated narratives that remain unthinkable and therefore unspeakable and indescribable.

First formulated by Richard Erskine and Marilyn Zalcman (1979) as the racket system, the script system is a representation of beliefs

about self and others—of relationships—and the conclusions made at many developmental levels. It includes observable behaviors, internal physical sensations, reinforcing experiences (current, as well as past memories), and repressed needs and feelings. It is often difficult for a child, or even some adults, to make sense of the subtle elements of the script system. Most of the script system is implicit, largely due to the unconscious organization of experiences.

The script was described by Berne (1961) as "an extensive unconscious life plan [that] determines the identity and destiny of the person" (p. 23). The transactional analysis literature has addressed how scripts are transmitted through parental messages and injunctions as well as the conclusions and explicit decisions the person makes. Berne (1966), in an early comment on the theory of life scripts, wrote,

Nearly all human activity [is] programmed by an ongoing script dating from early childhood, so that the feeling of autonomy is nearly always an illusion—an illusion which is the greatest affliction of the human race because it makes awareness, honesty, creativity, and intimacy possible for only a few fortunate individuals. (p. 310)

Berne did not complete the theoretical development of the concept of life scripts in his lifetime. It was left to others to carry on the work of refining script theory and developing methods of script cure.

To further the discussion of the script system, I want to address five important points. The script system is:

1. A structure to examine how script is active in life today
2. A process to make meaning of here-and-now thoughts, feelings, behaviors, and sensations
3. A way to work with the unconscious and retrieve implicit memories
4. A method for forming an autobiographical self
5. A treatment framework for script cure

How Script Is Active in Life Today. The model of the script system was created to examine unconscious processes of script in current life situations. The script system "identifies the decisions, conclusions, reactions, and or

introjections [that] are unconsciously operationalized in current life as core beliefs, overt behaviors, fantasies and obsessions, internal physical reactions, and reinforcing memories” (O’Reilly-Knapp & Erskine, 2010, p. 292).

The script system is maintained:

- To avoid reexperiencing unmet needs and the corresponding feelings regarding the unmet needs suppressed at the time of script formation
- To generalize the unconscious experience of self in relationship with others
- To create homeostatic self-regulation (the script system helps to organize experiences and maintain some stability in present life)
- To provide a predictive model of life and interpersonal relationships—this is how life is and this is how people are and what they do. (O’Reilly-Knapp & Erskine, 2010, p. 293)

The Road to the Unconscious and Meaning Making. The script system, as an unconscious organization of experiences, provides the therapist and client with the means of recovering unconscious experience and the client’s way of making meaning. This is partly done by giving meaning to the thoughts, feelings, sensations, and behaviors present in here-and-now experiences both in and out of therapy sessions. When I am working within the script system, I am reminded of Bollas’s (1987) concept of the *unthought known*, which he describes as “countless rules for being and relating that have been operationally determined” (p. 279). He identified fantasy as the first representation of the unthought known: “It is a way of thinking that which is there” (p. 279). He went on to consider *mental representations*—which are similar to Bowlby’s (1979) *internal working models*, Stern’s (1985) *representations of internal generalizations* (RIGs), and Damasio’s (1999) *from wakefulness to consciousness model*. Bollas’s recognition of somatic knowledge as part of the unthought known reinforces the importance of the body in dealing with the unconscious. In script system analysis, the inclusion of physiological reactions as well as beliefs about self and others and the meanings given to experiences, relational patterns, and the script

displays of fantasies all bring together the concepts addressed by the term the unthought known. Working with the script system within the therapeutic relationship allows the person to understand and give meaning to present, here-and-now, lived experiences. Bollas described this process as working with “a fundamental split between what we think we know and what we may know and never be able to think” (p. 282). With the use of the script system as a blueprint for script analysis, the unconscious organization of experiences becomes coherent so that there is an organized whole. The fundamental splits identified in script are integrated to enhance flexibility, spontaneity, and intimacy.

Forming an Autobiographical Self. According to Sameroff and Emde (1989), a narrative is “the story or account of the internal working models of regulations as told to oneself or another” (p. 66). Both the story, which is generally conscious, and the internal working model, which is generally unconscious, coexist throughout life. The narrative model is generally conscious, verbal, social, and made up of referents experienced via words. Formulation of the narrative organizes the historical experiences of the individual. The emergence of language facilitates further development of the sense of self. Stern (1985) described the arrival of language as bringing about the ability to narrate one’s own life story and, ultimately, to “construct narratives that begin to form the autobiographical history that evolves into the life story a patient may first present to a therapist” (p. 174).

Analysis of the script system adds to formulation of the narrative by reconstructing unconscious, implicit memories, that is, organizing an autobiographical memory—a record of the past. An autobiographical self emerges where memory is connected neurally and cognitively to what Damasio (1999) calls the *proto-self* and to “eventually to the emergent and conscious core self of each lived instant” (p. 173). “Knowing will help being,” wrote Damasio in discussing consciousness and the emergence of the autobiographical self. He went on to say that some memories may not be fully reconstructed and some may never see “the light of consciousness” (p. 227). Other memories may be

reconstructed differently from the original. Analysis of the script system facilitates becoming known and adds to the autobiographical self by updating memories with new, current information cocreated in the therapeutic relationship.

The script system gives us as transactional analysts an image of the make-up of the client's unconscious script dynamics, which are composed of four primary elements: script beliefs about self, others, and the quality of life; behavior, fantasy, and physiological manifestations; reinforcing experiences; and the intrapsychic process of repressed needs and feelings (Erskine, 1997; Erskine & Moursund, 1988; Erskine & Zalcman, 1979).

Another valuable element of the script system for me has been the framework it provides for working within the therapeutic relationship; it offers a guide to help me, both as a therapist and as a client, to understand internal processes and to fill in the blanks of relational experience. In this cocreative process, the inner world of the various subsystems that comprise the script can be known and understood. Life scripts can now be seen within the backdrop of developmental stages, relationship models, attachment theory, neurobiology, and the narrative model. All this adds further to the understanding of both intrapsychic and interpersonal experiences.

Roundtable Discussion

Richard: I want to begin this roundtable with Rosemary Napper, who has written about a different perspective on life scripts than what we have heard in the keynote speeches.

Rosemary: My perspective is as an organizational and educational transactional analyst and as a counselor. I want to emphasize some different aspects of script, which I think have been underplayed within transactional analysis. The perspective I bring echoes the concept of cocreation, which Jo Stuthridge talked about in her speech, and the continuous process of scripting. The formation of script is not just something that happens at the beginning of life; script continues to form throughout our lives in relation to the wider context that we live within. I think that there have been some interesting writings that look at both the setting and at

transference (e.g., transference to objects). This is an area that we could be developing much further.

In particular, I want to emphasize culture. Some transactional analysis—such as Berne, Denton Roberts, Jerry and Terry White, and Pearl Drego—have emphasized the importance of culture. This is an area of theoretical development with much potential. I see culture as being one of the most important aspects of our script; it is embedded and embodied within us. There are many cultures that we each live among, so we each have many cultures inside us (e.g., family, ethnic, and national cultures). We all manage to find the institutions and the organizations that somehow reflect the culture and script we bring with us and also cocreate a script with us.

Being a member of a transactional analysis association is a major way that we could be thinking about our own script and the script of TA associations. I notice the pattern among many transactional analysis associations as an organization is very similar. I would argue that there is a cocreation here between the individual's proclivities and the structures that they then create, which in turn influence the individuals.

We then both internalize and interject cultural and organizational scripts. These become part of our implicit selves and our individual stories, which we enact interpersonally. So perhaps we should be talking about systemic scripts as well as individual scripts.

Fanita: Richard suggested that we had to debate, but the only thing I do have to say is I am so fortunate that nobody ever cured me of my script! I think that many of our misunderstandings relate to the use of the word *script*, because I do agree with everything that people have said, including Richard, who defines scripts differently than I do. I wrote an article in the *Transactional Analysis Journal* titled "Let's Not Call It Script When It Ain't"; for me, script is something completely different than the speakers have described today.

Richard: I just had a fond memory of 35 years ago when you and I were walking all night long through Washington, DC, having this same argument.

Fanita: Exactly!

Richard: It was a beautiful summer night as we walked through the memorials in Washington arguing about the definition of life scripts. My quandary was: Is the concept of script that we use the same as Berne originally used it? As Fritz Perls used it? As they borrowed the concept from Alfred Adler? Those definitions imply that script is that which inhibits spontaneity and limits flexibility in problem solving, health maintenance, and relationships with people. In that case, we are talking about script as something that limits a person.

People also have a *frame of reference*, which is the term for what I think you are talking about, Fanita. We all have a frame of reference. We have our family culture. We have our national culture. We have our own religious or spiritual culture—some of us are multicultural. Does adherence to the proclivities of our culture(s) limit our spontaneity in problem solving, in health maintenance, and relationships with people? When I hear you, Fanita, I think you are talking about opening the frame of reference, using the culture, owning those possibilities and potential. When I think about life scripts, I am thinking about what inhibits and limits a person.

Fanita: I must answer: There are survival conclusions, as I call them, which are inserts in the personality that are negative, although their original function was hopeful. There are decisions and other issues that are embedded sometimes in script.

For me the script is creative: It is in the DNA, it is the mystery of who I am, of how I am developing, of how I am trying to grow, of who I am trying to be, and of what I am trying to achieve. That is what I mean by script. The script is an ongoing narrative. While I agree with Berne that it starts very early, at age five, and that even some of the structure of script is started in early childhood, I believe that children have tremendous stuff that is going on in the unconscious to create their story. So for me, this is script. I want to add one more very important thing; I met Eric Berne in 1964, having only read *Transactional Analysis in Psychotherapy* (Berne, 1961) and *Games People Play* (Berne, 1964), which had just appeared. Much of my contact with Berne involved arguing. I

guess there is something about my childhood and the need to fight. Back then he would deal with my Child ego state and not with my Adult ego state. His attitude then was, “Don’t bother with script. There is much to do in treatment without bothering with script.” That attitude of Berne’s has influenced me.

Resi: I want to contribute to this discussion by mentioning the concept of *repetition compulsion*, which I think Berne had in mind when he created the idea of script. We have to rethink the concept of repetition compulsion and probably challenge this idea in order to understand people’s complexity. What do people repeat and what do they not in different contexts?

Richard: May I suggest an additional way to think about repetition compulsion? When I think of the concept from a phenomenological and relational perspective, repetition compulsion is not a compulsion to repeat the pain but rather simply an attempt to repeat an experience with the desire to repair and resolve the pain.

Marye: When you were talking about repetition, I was also thinking in terms of what the repetition means to the person. That would fit with your understanding of the person’s own narrative. There is often the search for resolution in what clients are trying to tell us, in what the person gives to his or her beliefs or actions. Are they telling themselves “I can never do this,” “I am no good,” or “I am clumsy”? Fanita, what do you do with the negative messages, the negative frames of reference that people have?

Fanita: I work with the negative message and I don’t bother with thinking about script in regard to cancelling negative messages.

Marye: In the way you define script, I can understand that.

Richard: Jo, I am interested in hearing from you, because Marye, in her speech, was talking about script beliefs and the script system and yet in your talk you said that changing script beliefs does not seem to change anything. Would you elaborate on that more. Why have you taken that position?

Jo: I think we have the whole thing upside down when we think of development as an individual process, as Berne did at the time he

was writing. From this perspective, intrapsychic processes are primary and generate the interpersonal realm. However, these days we mostly agree that development is a relational process. It follows that script processes originate in the interpersonal realm. Traditionally, transactional analysts have focused on intrapsychic processes: digging up the client's script beliefs and making redeductions. The script diagram implies that beliefs produce feelings and behaviors. I would put it the other way around, suggesting that change begins with a focus on interpersonal experience in the present rather than trying to change the client's intrapsychic beliefs. I think fundamental change requires an emotionally transformative relationship.

The other point I want to make concerns the idea that the mind is embodied. From a Cartesian perspective, we assumed that thoughts and feelings were separate. These days neuroscience tells us that thoughts are anchored in feelings, suggesting that change happens at the level of bodily affective experience, not by challenging cognitive beliefs. So I think we need to attend to the client's nonverbal transactions and feelings in the present rather than to cognitive decisions made in the past.

Richard: That is not how it was meant in my writing about the script system. The script beliefs, behaviors, fantasies, and physiological reactions are a reflection and an expression of what is going on unconsciously as a result of all of those intersubjective experiences we have had throughout our lifetime. So the script is really a crystallization of hundreds and hundreds of interpersonal experiences. The script beliefs are a condensation of the person's narrative.

Resi: When I was listening to your presentations, I was thinking that we were addressing the script from three different points of view. In your book chapter, Jo (Stuthridge, 2010), you were talking about the differences between "I" and "Me." So you were especially talking about the "I." How can you create an "I," which is a form to integrate and connect different parts of the self?

Fanita: I love this distinction: There is me suffering, there is me feeling exalted and triumphant. Resi, you pointed out in your writing the connection between script and identity, which

was enlightening to me because script really has to do with identity. May I be biographical in terms of my identity? My identity started as a child on the streets of Istanbul. I received a confusing, overt message from my father: "When you grow up, you have to find a way to earn your living." This was quite a startling message, a useful one and a good one. You can call it an injunction or whatever you want to call it. There I was, wondering, "How am I going to earn my living when I grow up?" The models I had at that time were only school teachers and nurses. I did not want to be a school teacher. I did not want to be a nurse. I did not want to be a maid or a governess. I could also see another wonderful model—a gypsy on the street. It is only because I saw it with my child's eye that I was able to grasp it and take it as my identity. I took the idea of the gypsy as my identity. I could not even begin to think about the real lives of gypsies. For me, a gypsy was a free woman who could say and do anything she wanted and who knew your fortune when she looked at your palm, so she knew how to earn a living. She wore powerful clothes, she could say and do anything, and she could buy all the sweets she wanted on the streets. That is quite an identity. Fortunately, I took on this identity, which has enabled me to travel and do workshops all over Europe.

Jo: When I listen to this dialogue, I notice that we use different words, like script, stories, or frame of reference, and I wonder if we are talking about a kind of continuum. At one end of this continuum, a script can be rigid and restrictive, while at the other, a script can be fluid and flexible—like a story that is continuously retold and changes over time. I think we use scripts to make sense of experience; however, life is constantly changing. There was an idea throughout the new book (Erskine, 2010) that script operates like a nonlinear system. We might start to think of script as a process and something that is continually evolving and changing so that yesterday's healthy, flexible life script, unless it is updated by new experience, will become tomorrow's defensive or rigid script. Jeremy Holmes (2001) uses the terms *story-making* and *story-breaking* to describe this dialectical tension. Scripting is a constant

process of disintegration and integration, making new stories and dispersing them in light of new experiences. I suggest we retain the word *script* to represent the whole continuum.

Richard: Back in the 1920s, when Alfred Adler broke with Freud in disagreement over Freud's drive theory, Adler talked about the importance of people telling their story to overcome what he called a personal *inferiority*. He suggested that people stay in analysis long enough to tell their entire life story in detail at least three different times. What he listened for was how the telling of the story changed—not the content, not the facts, but the emotional valence, the emotional thrust of the story. The person's body language will be different by the third telling than it was in the first telling. Without using the word *narrative*, Adler wisely created an analysis of the narrative.

Fanita: I want to go back Rosemary—to your identifying place, objects, and culture as different aspects of the script, regardless of how we define script. For me, looking at the sea is a source of great consolation, but for someone else, looking at the mountains might be a source of consolation. The mountains don't do anything for me; they are pretty and lovely, but they don't touch me as the sea does. I have discovered in the course of meeting many people that every one of us has this yearning for location.

Another word I would like to add to our talk about script is *yearning*, whether you talk about it negatively or positively—a suffering script or a happy script—script always has the element of yearning or wanting or looking or hoping.

Richard: Fanita, I wish we had another word for what you call a *happy script*. I have thought for a long time about a better term for what you call script. I use the term frame of reference. I think that what you are doing is looking at people's potential. You are looking at those hidden talents, the unexpressed creativity and the desire to grow, the person's expansive fantasies.

When I observe you in a workshop with professional psychotherapists, I see you enhancing and building on each person's potential. In my clinical practice, I work with clients who have been neglected for many years, who have been beaten when they were a child by the people

they depended on, who have been sexually abused, who have been humiliated through school. Their painful stories are held tightly in their bodies. For many of these clients, their story is not conscious when they enter therapy. Often it is not conscious because no one has ever engaged them in a discussion about their experiences. Nobody was there at bedtime to ask them what they felt or after school to ask about what happened during their school day. This is why I define script as I do. I would love to spend all of my time on creativity, but I can't get to the creativity while I am still dealing with that pool of pain deep inside my client's body.

Rosemary: I have the pleasure of working as a coach, and in doing so I talk about recognizing, releasing, and realizing potential, which I think is what you have been talking about. I was reminded, as you talked, about that Chinese character that stands for crisis—which is part of that very tough end of script—but it also means opportunity. Opportunity is what you have been talking about.

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