

## What is TA Counselling - or is it Coaching?

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### Introduction

Earlier this year I submitted my written exam for the Counselling field CTA and the feedback I received mentioned confusion because I had used the terms coaching and counselling interchangeably. The assessor liked that I grappled with the complexity of defining both terms, and then reiterated that I needed to produce my own working definitions. This article is what I have produced alongside doing this in preparation for my oral exam. I welcome feedback from readers, particularly before I take the oral exam in India on 15<sup>th</sup> August.

My first experience, in the 1970s, of providing what I thought of as TA coaching and which became counselling, was of a one-to-one session with a participant who had attended a TA-based management training programme I had run. Expecting to provide some form of organisational coaching, we ended up closing escape hatches (successfully) when she announced in our first session that she was suicidal. I went on to coach/counsel people within the organisation about topics such as severe birth deformities (thalidomide) as well as about team working and leadership. I contrast that with my more recent experience as a psychotherapist within prisons, when I sometimes counselled/coached inmates in the life skills they had never acquired.

The EATA definition of counselling (see later) can easily be read as about coaching and I struggle to differentiate the two unless I equate counselling with psychotherapy. I regard the aim of both counselling or coaching as to help clients move from a limiting script towards having increased autonomy - which I also believe is the aim of any TA practitioner. In other words, the aim is to help clients change and

we use TA specifically in order that they may change the ways in which they construct their world.

Allen & Allen (1997) point out that the constructionist practitioner aims to help the client conceptualise themselves differently. This is similar to post-modernism (Doan, 1977) in recognising that there are many ways to understand our world. Even without the current benefits of neuroscience, Maturana (1978) used the term structural determinism to mean that the organisation of our brain determines how we construct what we think we are observing, and Dallos & Draper (2010) reminded us that such views are responsible for maintaining inequalities such as “women’s subjugation by men, oppression of ethnic minorities and of those experiencing forms of mental distress.” (p.12). Further, Summers & Tudor’s (2000) material on co-creativity extends Allen & Allen’s ideas into recognition that something new comes into existence when we interact. To their principles of: “we” versus individualism; shared responsibility for the process; and present-centred development as we help clients understand differently now what they had interpreted previously, I add the ‘flavour’ of the relational approach, as when Hargaden & Sills (2002) write of “real contact, real acceptance, real awareness and real reactions” (p.28) “whilst being ordinarily human” and “by raising awareness (both emotional and cognitive), by using [our] own responses to shed light on the relational patterns” (p.29).

During the process of writing the exam, I checked out how EATA describes the field nowadays (unchanged for many years) and what has been written about it in the *Transactional Analysis Journal (TAJ)* and the *International Journal of Transactional Analysis Research & Practice (IJTARP – previously IJTAR)*. The rest of this paper therefore summarises how I think of the EATA approach to the field, followed by a

summary of what I have found when I searched the two journals for articles which have coaching or counselling within the title. I have shown coaching first because there were only a few *TAJ* articles about that, although there were more on coaching in *IJTARP* than there were on counselling. There was a special issue of the *TAJ* on the theme of counselling in 2013 so I have summarised the content of that separately. As I was reviewing those previous materials, Sylvie Monin (2018) wrote an article in *The Script* about the counselling perspective on cure versus well-being, so I have included some comments about that.

I then present some thoughts about autonomy and script, some ideas about client resources across the timespan of past, present and future, and my conclusions about definitions.

Before you read on, a note on 'donkey bridges' in case you have not come across that before. They are a way of helping people recall what they have learned, such as through pictures, stories, alliteration and similar ideas. The donkey bridges in this article are tautograms, which means that they use words which all begin with the same initial letter, like Caesar's *Veni, Vidi, Vici*. Misery is optional – if you hate gimmicks like this feel free to change the words I use.

### EATA Definition of Counselling

The EATA (2014) definition of the TA field of counselling states that it is "A professional activity within a contractual relationship. The counselling process enables clients or client systems to develop awareness, options and skills for problem management and personal development in daily life through the enhancement of their strengths and resources. Its aim is to increase autonomy in relation to their social, professional and cultural environment.

The field of counselling is chosen by those

professionals who work in the socio/psychological and cultural fields of practice. Some examples amongst others are: social welfare, health care, pastoral work, prevention, mediation, process facilitation, multicultural work and humanitarian activities." (Section 5, p.3)

The first sentence, and the aim of increasing autonomy, could apply to any application of TA. Social, professional and cultural environment leaves me wondering what other environments there might be. The second part of the definition is not really a definition – and when it goes on to refer to socio/psychological and cultural fields of practice, that seems broad enough to me to cover any form of helping activity. I use SPECTRE (Hay, 2012) as a checklist for considering the environments of organisations: social, political, economic, competition, technological, regulatory and environmental. Applied to an individual, it seems to me that social and economic fit under socio; political, technological, regulatory and environmental fit under cultural; competition is presumably psychological; and they all might be thought of as psychological from a TA perspective.

The Handbook also refers to 2 levels of counselling:

- complementary counselling, also referred to as the use of counselling skills, "as a sub-task in various psycho-social and socio-educational professions, as well as in other social, psychological, medical, legal and economic occupations" (Section 5, p.3); and
- primary counselling, which is described as done by "professional counsellors working in private practice, counselling centres, voluntary, non-profit-and profit-organisations etc." (Section 5, p.3).

In my exam, I positioned myself as using primary counselling and described the main

focus of my work as helping clients to increase their psychological intelligence, so that they will better understand why they act as they do, and hence will be better equipped to generate alternative ways of behaving in future. Because I operate from a TA theoretical basis, this will usually involve helping them to understand how their childhood experiences have impacted on them.

Having pointed out that I am an Accredited European Counsellor and have a Diploma in Transactional Analysis Psychotherapeutic Counselling from a TA Institute, I went on to point out that the term counselling is interpreted in different ways in different countries. For example, within the UK, the term is often used interchangeably with psychotherapy and one of the major professional associations has both terms within its name and makes no distinction in membership categories. In Italy, counselling is strictly regulated and must be conducted in a person-centred manner. In Germany, current legislation requires further qualifications in order to be a psychotherapist so many TA psychotherapists are called counsellors. The European Association of Counselling does not appear to provide a definition of counselling but does state that it is concerned with promoting human development, encouraging individuals to embrace change, and to build fuller, more rewarding lives. (EAC, 2017).

Many years ago, I was one of the original five founder members of the European Mentoring & Coaching Council (EMCC). At that time, I had the opportunity to put the CTA through a free pilot process that would have granted it EMCC status, which would have considerably increased its credibility and popularity. However, EMCC were not willing to provide such accreditation for something labelled Counselling and I was unable to convince EATA Council to add a field of Coaching, even when I pointed out that it could be a simple copy of the way

the Counselling field was described. A few years later the UK-based Institute of Transactional Analysis (ITA – now the UK TA Association – UKATA) set up a Counselling Committee in order to progress recognition by the UK Council for Psychotherapy. In the same year, Napper (2008), as the first CTA Counselling in the UK, pointed out the way in which the EATA descriptions of the counselling field fit well with coaching, mentioned how “Julie Hay of the IDTA is pressuring EATA and ITAA to either change the name of the counselling field to coaching or to add ‘and coaching.’... The marketing of TA is losing out by not having a qualification on offer in coaching...” (p.3). Napper went on to write about psychosanology “by exploring the positive strengths within the Adult ego state and empowering its resilience and capacities for ethos, pathos, logos and technos.” (p.4), rather than psychopathology which she described as working “primarily with deconfusing the Child ego state with the intention of changing the neural pathways.” (p.4).

Since then, coaching has continued to grow as an ‘industry’ in its own right and the TA Counselling field appears to be the appropriate option for practitioners who do not regard themselves as psychotherapists, educators or organisational consultants. Work in these other fields is likely to include what EATA define as complementary counselling or use of counselling skills as a sub-task. As a psychotherapist, I have often found that my clients need coaching in life skills; as an educator, participants benefit considerably from some coaching after they have attended a training programme; as an organisational consultant, my direct contact (HR director, manager, etc) may need coaching in how to present proposals to senior management or company boards.

When it comes to coaching, the options are infinitely varied. I have found numerous types of coaching being written about and/

or publicised, including: brief, personal construct, existential, co-active, business, executive, leadership, challenge, relational, sports, life, team, mindful, inner game, ontological, and out of the box. There is also an increasing focus on ‘therapeutic coaching’. EMCC has been attempting over many years to develop definitions that would separate mentoring and coaching but still operate a policy agreed a long time ago that they would use the term coach/mentor as a way of signalling to people that they should discuss their own definitions before they engage in any arguments about their approaches.

What these myriad versions of counselling and coaching mean is that clients may well arrive with a very different concept of counselling or coaching and we need to clarify carefully how their expectations match what we are offering.

### **IJTARP articles with Coaching in the title**

Mohr (2014) described a research study that evaluated an ‘individual coached within a group’ programme that used TA and was run over many years in Germany. He described coaching as “a professional relationship in which a coach works with the client to achieve certain goals of the client in terms of personal and professional competencies.” (p.3). He concluded that group coaching in the leadership/management area is complex and needs all of the following: a learning culture within a protective setting, expertise in work and professional life, specialist management knowledge, psychological expertise, up-to-date academic training, and expertise in pedagogy, group dynamics and methods.

Rosseau, Rosseau & Widdowson (2014) wrote the first of a series of three papers about applying the redecision approach (Goulding & Goulding, 1979, 1986) within executive coaching workshops internationally. The first author addressed the potential controversy about using a

therapeutic approach in a business context by explaining that his 10 years of experience as a psychotherapist before becoming a business consultant allowed him to perceive the differences between Berne’s (1961) social control, symptomatic relief, transference cure and script cure. He added that people “do reach cure in a business environment and it is far more than just ‘understanding what happened’. They do regress, change the root cause and leave the workshop with profound and sustainable redecisions.” (p.15). When the authors describe what they did, they refer to facilitated developmental workshops run by them as trainers, and describe the process “in terms of Berne’s (1961) stages of cure:

- social control involves bringing dysfunctional behaviours under control
- symptomatic relief comes from having a good understanding of intrapersonal functioning; participants go on to report that they are handling situations effectively that previously would have strongly invited them into scripty behaviour
- transference cure comes when participants symbolically and internally substitute the trainer for their parents – as when they claim: “I remember you said...” – often attributing words to us that we did not say – they have created an internally adjusted parent
- script cure - when the person takes over for themselves the intrapsychic role they had projected onto the trainer” (p.17).

### **TAJ articles with Coaching in the title**

Considering the *TAJ* has been published now for 48 years, compared to the 8 years of *IJTARP*, articles in the *TAJ* with Coaching in the title are not common – I found only five!

Baugh (1981) wrote of *therapeutic coaching* as a technique which integrates Gestalt, TA and other theories that “support the position that psychotherapy is a training procedure” (p.300) (italics in original). He went on to refer to such coaching as a problem solving psychotherapy that uses a three chair arrangement where the clients switch from Needful to Caretaker position and the “third [Coaching] chair is occupied by the psychotherapist/coach who coaches and trains the person...” (p.300).

Almost 20 years later, Slater (2002) wrote about how “general counselling principles and specific transactional analysis concepts - including ego states, games, rackets and drivers - can enhance *sports coaching*.” p.184) (italics added). He provided a description of how this had worked well with a boys’ field hockey team, emphasising that Child needs, for asserting oneself, independence, being noticed, approval, feeling competent, belonging, being creative, and playing, can be met in a safe way through sport.

Nespoli (2013) also wrote of the application of TA to *sports*, providing a case study of what he refers to as *mental coaching*, where “special attention is paid to goal setting, with preference given to goals focused on performance rather than results.” (p.241) and where consideration is given to the athlete’s here-and-now thoughts, behaviours and emotions. Nespoli is writing as a sports psychologist who contracts with the athlete and involves the coach within the contracting when possible.

Krausz (2005) described how various TA concepts could make a contribution to *executive coaching*, which she described as “an interactive process between coach and coachee designed to produce changes or transforming results through the enhancement of personal awareness and optimal use of potentialities. The aim is to

promote individual, group, organizational, and social growth and development.” (p.367). She then added Kilburg’s (2002) definition of “a helping relationship formed between a client who has managerial authority and responsibility in an organization and a consultant who uses a wide variety of behavioral techniques and methods to help clients achieve a mutually identified set of goals, to improve his/her professional performance and personal satisfaction and, consequently, to improve the effectiveness of the client’s organization within a formally defined coaching agreement. (p.65)” (p.367 in Krausz).

The most recent article is by Kouwenhoven (2017), in which he comments that “The principal objective of coaching is *autonomy*. Autonomy is another word for managing oneself in relation to others.” (p.77) (italics added). He went on to present a coaching matrix based on autonomy being: competent – able to think logically; confident – managing our emotions; committed – to taking care of the needs of ourselves and others; and in control – acting effectively. He relates these to thinking, feeling, caring and acting, and refers to a mental shift from what is impossible to what is possible. Kouwenhoven writes of how therapeutic confrontations of discounts may have a negative effect, whilst “a strategic coach offers positive strokes for every positive step in the right direction.” (p.80). Beyond that, he suggests that the strategic coaching matrix can be used within education, psychotherapy, management, counselling and coaching – anywhere where goals need to be realised in complex, ever-changing situations.

### **IJTARP articles with Counselling in the title**

Although there were two articles with Counselling in the title in *IJTARP*, neither were about the nature of TA counselling.

The first was a comparison of TA Psychotherapy with Integrative Counselling Psychology and the second was about the impact of an organisational restructuring on a (non-TA) counselling team.

### TAJ articles with Counselling in the title – prior to the special issue of TAJ

The earliest I found in the *TAJ* was Thweatt (1975), who wrote about how students approach *vocational counsellors* in *Adapted Child*, which means that the counselling needs to stay in Adult, especially if tests are being used.

A few years later Margolis (1979) suggested that counsellors work with *invisible clients* when the client in front of them wants to talk about someone else. Margolis described this only for occasions when two clients attend together and complain about a third person.

In the same issue of the *TAJ*, Thweatt & Miller (1979) describe the combination of *counselling and teaching in the classroom*, where an expanded TA 101 was taught and then ‘paraprofessionals’, who were previous TA 101 students with extra training, led small groups with a focus on “growth and change as well as learning.” (p.290).

A couple of years after that, Boyd & Boyd (1981) referred to *relationship and premarital counselling*, suggesting that intimacy consists of caring (P2-C2), closeness (C2-C2) and compatibility (P2-P2). However, in the text they consistently referred to a therapist providing the counselling.

There was a long gap until Retief with Conroy (1997) used therapist and counsellor interchangeably when describing *conscious empowerment therapy* for clients traumatised by physical, sexual and emotional abuse within dysfunctional family systems. They describe the process of identifying abuse (and confirming it if possible), explaining TA, diagnosing

pathology, decontamination, deconfusion, and restoring the balance of energy in Parent (although the latter is missing in the diagram).

After another two-year gap, Cornell & Hine (1999) presented a model for *TA Counsellor training*. They began by pointing out that “counselors do not work with intrapsychic dynamics; that is, they are not to intervene within the Child ego state... training in... diagnosis, psychopathology, and intrapsychic intervention, is not necessarily appropriate professional preparation... for work that is focused on personal health and growth as encountered in counselling situations...” (p.175). They then commented that emphasising social-control contracts and interventions create a limited focus on symptom management and that “both clinicians and counselors need clear theoretical understanding of the role of emotions in human development, health, and relatedness.” (p.175). They continued by quoting the EATA definition, referencing it to 1995 although it is still the same words now, before emphasising that in their view counselling needs to be a separate profession even though TA practitioners can do both in some areas of the world. They went on to suggest that counselor training needs to include skills of observing and differentiating emotions, within the clients and within groups, attending to them in the here-and-now without inviting or evoking regression, recognising when containment or external support may be needed, and being able to stay in Adult as the practitioner. In the rest of their article, they comment on what training is required so that counsellors can work with the Adult only, before explaining that the article was prompted by psychotherapy exam board members contesting “the right of counselors to address emotionality in their work.” (p.185).

12 years later, Monin (2011), writing about ethical challenges, pointed out that

“counseling covers a wide variety of professions, both in a helping relationship (e.g. counsellors in private practice, social workers, nurses, priests, policemen (sic), legal professionals, etc.) and in a managing capacity (e.g. human resources professionals, those in managerial positions, etc.)” and that “the focus of the work is the here and now and on a working through the Adult ego state in working through and with the Adult, there will be an impact on both the Child and the Parent.” (p.118) (italics added). She commented on the differences between primary and complementary roles, stating that the main difference is that primary counselling involves a dyadic contract and complementary counselling usually involves a three or more cornered contract. She pointed out that counsellors must be aware of transferential issues when accompanying clients through the decontamination process, and they must be able to distinguish their own issues from those of the client. Interestingly, Monin uses a quotation about therapy to mention that the therapeutic relationship is central to long-term counselling, agrees on the importance of ruptures and enactments occurring in counselling as well as in psychotherapy, and confirms also the need to focus on the transactional, relational and reciprocal dimensions of the relationship.

Later the same year, Fassbind-Kech (2011) pointed out that Novellino (2011), Berne (1961) and Stewart (1989) had not provided any definitions of psychotherapy, before referring to the EATA definition of counselling, now dated 2008 but still the same as the 1995 version mentioned by Cornell & Hine – and still current today. She wrote about how we would determine when a client is in counselling, stressing that they are a client and not a patient, that the counselling relationship can be based on all three ego states of both parties, that “clients usually see counseling as a support for finding options so as to master current

life challenges or to solve a problem” (p.292), and that counselling is “a journey of discovery that may lead to finding undiscovered or unexpected richness.” (p.292). She went on to stress the importance of *focus on resources*, with the counsellor as a guide to finding these, and the need for a counsellor to protect the client from setting unrealistic goals.

### The Special Issue of *TAJ* – The Many Facets of Counselling

In the introduction to this special issue, Guest Editor Monin (2013) commented that the field is “still so little known and recognized within the larger transactional analysis community” (p.3), adding that in French ‘conseiller’ is not a recognised profession and can be applied to real estate, marital counselling, financial counselling, and so on.

Monin’s Editorial is followed by Cornell (2013) who explained his conclusion that Berne conceived of TA as a psychotherapy, described how the Special Fields category, that came before the differentiation between organisational, educational and counselling, was consistently regarded as somehow of a lower status than TA psychotherapy (then referred to as clinical), quoted the American Mental Health Counsellors Association (2011) as having since 1986 clearly conflated counselling with psychotherapy [there is a new Code of Ethics dated 2015 which still refers to counselling/therapy and the counsellor as therapist], mentioned the paucity of material on counselling in the *TAJ*, proposed that we need to know the past if we are to look to the future of the discipline, and concluded with the hope that this special issue would be an opportunity to reassess the TA counselling field.

Landaiche (2013) referred to himself as a mental health counsellor; advised us that his “counseling colleagues work in settings

nearly too numerous to name: schools, prisons, job sites, military bases, religious institutions, medical facilities, social service agencies, eldercare homes, hospices, public health offices, community centers, drug and alcohol treatment centers, women's shelters, methadone maintenance clinics, birth control clinics, shelters for the homeless, residential treatment homes for adolescents or the chronically mentally ill, crisis hotlines and private practices." (p.14). He went on to describe his professional development and his work as "a counsellor and therapist... in the larger field of mental health..." (p.14). In the Author Biography he referred to himself as a licensed mental health counsellor employed as a psychotherapist and training supervisor for a student counselling centre at a university.

Fassbind-Kech (2013) described how her own working style is highly *resource oriented*. She again quoted the EATA 2008 definition (as she had in her 2011 paper), included an overview of the competencies in the same document, and added that although all of the competencies are important, No. 8 – Focusing on resources – is essential. She presented material on resources on an axis of time, making the point that the timeframe can extend back to birth or even beyond to ancestors, as well as into the future and potentially beyond death. Having given many examples of what she regarded as resources, she concluded by likening counselling to a journey of discovery, just as Hargaden & Sills (2002) had written about therapy.

Bowater (2013) proposed that although *working with dreams* is usually associated with long-term psychotherapy, short-term counselling can be effective when a dream encapsulates an ongoing problem. Suggesting that dream work operated across the interface between counselling and psychotherapy, she wrote that "there is considerable overlap between the two approaches, even though the ITAA has

chosen to define them as separate fields." She went on to reference Tilney (1998) for describing the difference as being "in the level of intrapsychic restructuring involved: 'counselling' consisting mainly of a restructuring of currently available resources while 'psychotherapy' involves deeper level interventions to make additional resources available." (Tilney, 1998, p.21). What Tilney also wrote was that there was a lack of agreement about the exact definition of counselling, lack of a clear distinction between counselling and psychotherapy within the UK, and he wrote that EATA specify the field by reference to the activities not coming under the clinical, organisational or educational field. The rest of Bowater's article contains examples of working with dreams, an exhortation for counsellors to ask clients about their dreams, and Berne's (1966) comments about the therapist doing their best and God curing the client.

Dewarrat (2013) described how she incorporates TA into her role as a *midwife*. Although she referred to this as counselling, she wrote about contracting between therapist and client, that she practices her work as an art, and described how she teaches ego states to future parents and latterly to other midwives.

Grant (2013) quoted the EATA definition of counselling, though she referenced it to the Training & Certification Council of Transactional Analysis in 2009. She also provided a definition from the Psychotherapy and Counselling Federation of Australia (2013) which began by referring to psychotherapy and counselling in terms of utilising an interpersonal relationship to enable people to develop self understanding and make changes in their lives, working with clear contracts, and requiring in-depth training in a range of therapeutic interventions which should be differentiated from counselling skills. She went on to quote that this definition points out recognised differences in that "the



focus of Counselling is more likely to be on specific problems, changes in life adjustments and fostering clients' well-being. Psychotherapy is more concerned with the restructuring of the personality or self and the development of insight." (online).

The website accessed by Grant has an additional sentence [accessed 2018 but still copyrighted 2013]: "At advanced levels of training, Counselling has a greater overlap with Psychotherapy than at foundation levels." (online). It also contains six points that are related to what is shown as:

"Professional Psychotherapy/Counselling:

- Utilise counselling, psychotherapeutic, and psychological theories, and a set of advanced interpersonal skills which emphasise facilitating clients' change processes in the therapeutic context. This work with client processes is based on an ethos of respect for clients, their values, their beliefs, their uniqueness and their right to self-determination.
- Require in-depth training processes to develop understanding and knowledge about human behaviour, therapeutic capacities, and ethical and professional boundaries.
- Take account of the cultural and socio-political context in which the client lives and how these factors affect the presenting problem. This includes awareness and assessment of social and cultural influences such as age, development, (dis)ability, religion, cultural identity, indigenous identity, sexual orientation, socioeconomic status, nationality and gender. Professional Psychotherapists and Counsellors value such differences and avoid discrimination on the basis of these aspects of identity.
- May involve intervening with current problems, immediate crises, or long-

term difficulties. The work may be short-term or long-term, depending on the nature of the difficulties, and may involve working with individuals, couples, families or groups.

- Counselling and Psychotherapy occur in a variety of contexts in the public and private sectors.
- Regard ongoing clinical supervision, professional development, self-awareness, self-development, self-monitoring and self-examination as central to effective and ethical practice. Such practices lead to enhanced capacity to utilise the self of the practitioner effectively in the therapeutic relationship." (online)

Grant commented that in her article she would use the words *counseling, therapy and treatment interchangeably*, gave quotes from various other authors that were about therapeutic relationships, and emphasised in her conclusion that "The counselor needs to be able to establish a positive therapeutic relationship, identify the client's goals, help the person achieve them, and be willing to say good-bye, all in a short period of time." (p.66).

Vinella (2013) extended the 2008 EATA definition of counselling to describe it as "a helping relationship in which the qualified professional, using TA methodology, enhances Adult awareness in the client or in the group from a problem-solving perspective. Transactional analysis methodology is applied in order to bring about change through an appropriate technique based on the here and now, the aim being to enhance cognitive and emotional awareness related to a specific problematic area (difficulties in relationships or performance). Counselling thus becomes an *intentional learning environment* in which the goal is to facilitate the development of the client's ability to identify his or her limits and resources in specific behavioral areas. Counselling privileges a type of intervention

that aims at reaching a state of well-being based on social and personal needs that are not specifically clinical. Such interventions are based on a methodology organized into three strategic stages (alliance, decontamination, relearning) that seeks to help the client (individual, group, system) to acquire new competencies and to identify constructive options intended to enhance the development of the client's own social identity." (p.69) (italics added)

Vinella's focus in the article is on *counselling groups*, emphasising that these are not the same as treatment groups, and mentioning specifically that Berne's (1966) therapeutic operation of interpretation should not be used within counselling because it deals with pathology of the Child through deconfusion and hence is a connection between the here and now and the there and then, and requires the practitioner to be competent regarding transference phenomena.

Vinella provides a table of the differences between counselling and psychotherapy groups, with the goals for the former being prevention, facilitating communication, and increasing awareness of one's own relational style whereas for psychotherapy the goal is cure/care and autonomy.

### Cure or Well-Being

Monin (2018) linked her article on the counselling perspective about cure or well-being to the TA exam question that asks candidates to relate this outcome to the TA concepts they use to understand the origin of psychological problems. She comments that the trainees she discussed this with thought that all TA concepts were relevant but that she found script particularly appropriate, especially when it is considered as a resource as proposed by Fanita English. Monin does not reference English but the most relevant article appears to be English (1988), in which English refers to Berne's "narrow

deterministic view of scripts" (p.294), referencing in turn Berne (1972) as the main source for his material on script. English goes on to comment that "However, the resilience of children (and indeed of humans at all ages) must not be underestimated. To do so implies that children can be conditioned in a simplistic, Pavlovian manner. Many individuals overcome difficult, even tragic, childhood experiences successfully without the benefit of therapy. Life has a way of offering many corrective opportunities. As mental health professionals we all too often forget about healthy development, thus discounting the human ability to symbolize, to transform, to create, to seek freedom even at some risk, and, ultimately, to let go" (p.294-295). Influenced by English, I tend to refer to deterministic versus developmental scripts (Hay, 2012).

Monin also refers to various models of script matrices (Steiner, 1966; Summers & Tudor, 2000) describing it as "a never-ending process of evolution... an ongoing process in constant evolution and a resource rather than a pathology one needs to be cured of... a constant resource in our life: past, present, and future." (p.2). I prefer to use my autonomy matrix (Hay, 2012), which I will describe below.

Monin points out that definitions of health (World Health Organization, 2018a, 2018b) sound very similar to definitions of counselling based on research within the USA (Kaplan, Tarvydas & Gladding, 2014), which in turn sound similar to the TA definition of counselling (EATA, 2014 – which is of course to the same Handbook referred to several times above). She also refers to examples of counselling as being with a client after a brutal murder of the client's parents, a client in palliative care with only a few weeks left to live, and a human resource manager counselling an employee integrating into a new team, before commenting that she does not refer

to cure or well-being. For her, counselling is “helping the client to find a new sense of self-agency, to build the capacity, with a more lucid Adult, to cope better with his or her life, and at times to learn to bear and live with the unbearable.” (p.3).

### Script and Autonomy

For me, the point of applying TA is to help clients to move from a deterministic script so that they can attain increased autonomy within the framework of a developmental script. The script provides us with structure – without that, we would have to re-think our identity each morning as we wake up. Fanita English wrote of improvisation theatre – we have an overall structure but we know that we can make our own choices within that – and indeed, we have made the choice of the overall structure. For instance, when I realised that my script character is Robin Hood (Hay, 1995) I was able to choose which aspects of the story to keep. The way in which ITAA, EATA, EMCC and my own non-profit business all

provide discounted rates to those in financially-disadvantaged areas of the world exist because I introduced these policies as a way to ‘rob the rich and give to the poor’ just as Robin Hood did in the story.

Instead of focussing on script as pathological, I have developed an autonomy matrix (Hay, 1997, 2012) as reproduced below; this presents an interpretation based on the notion that parents/caregivers generally want to support their children to reach their potential, however much the parents/ caregivers may be limited by their own scripts. Hence, in this diagram the aspiration arrow that represents physis (Berne, 1968) extends above the stacked circles of the parents. Also, I have developed Holloway’s (1977) suggestion about the lines not reaching the little person so that the gap represents how the little person interprets the messages from the big people. I have also made the lines dotted to show that the messages may

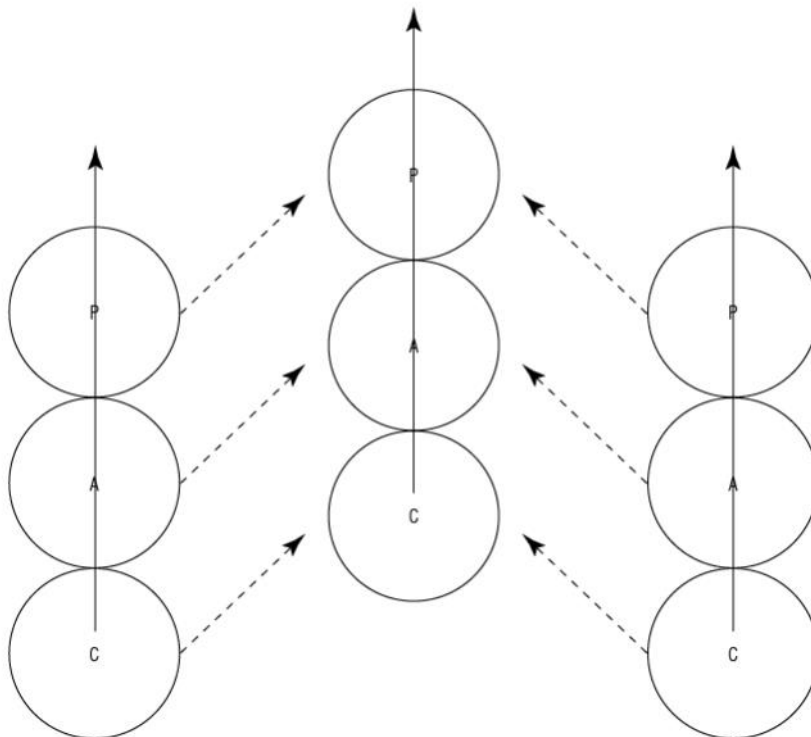


Figure 1: Autonomy Matrix (Hay, 2012, p.19)

exist only at the psychological level i.e. the big person may never have overtly expressed whatever the little person has interpreted.

I have also considered the nature of autonomy, which Berne (1964) described as a combination of awareness, spontaneity and intimacy. His rather strange use of the word spontaneity is misleading as he described it as being aware that we have options for how to behave, whereas that word is often taken to mean that we do something 'spontaneously' when we exhibit some kind of Free Child behaviour without stopping to think about the likely impact. I prefer to think of this as options, rather like Karpman (1971), who pointed out that we always have five different ego state options to choose from. We have many other TA concepts that we can use to identify a range of ways in which we can choose to behave. I also tend to use the term 'attachment' rather than intimacy, partly because attachment is well recognised outside the TA community and partly because it avoids the sexual connotations that are often attached to Berne's labels for time structuring.

To provide a donkey bridge, I change the 'spontaneous/options' to alternatives so that I have a run of awareness, alternatives and attachment. I then add two more elements (Hay, 2017): authenticity to represent the fact that we are OK even though we will not be perfect – we can be ourselves 'warts and all' and be accepted by others; and accountability to emphasise the fact that we are responsible for the choices we make (at least, we are once someone has taught us about the TA concepts of script and autonomy).

Hence, the more we have:

- *awareness* – of who we are, who other people really are, without transference or projection;
- *alternatives* – and can choose from a range of options;

- *attachment* – the ability to enter into interactions and exchange healthy strokes with others;
- *authenticity* – the knowledge that we and others are OK even with our faults; and
- *accountability* – the willingness to accept responsibility for our own choices and expect and allow others to do the same;

the more we are able to run a developmental rather than a deterministic script. I see that developing autonomy is the aim of any TA practitioner with any client – it is only the ways in which we approach this that will vary depending on how significantly deterministic the script of the client is.

For this, I turn to neuroscience as a way of understanding Berne's (1961) metaphors of script and protocol. It is now generally accepted that the brain develops from the bottom up, so whatever labels we use, we begin life with a brainstem or reptilian brain that will operate the fight-flight-freeze responses; above that will be the limbic system or emotional brain; and above that will develop the layers of the cortex. This process of development is why it is also recognised that the younger the brain, the more vulnerable it will be to the effects of the environment.

Berne described the protocol as "played out to an unsatisfactory conclusion in the earliest years of life... repressed in later years. Its precipitates re-appear as the *script proper*, which is a preconscious derivative of the protocol." (p.117) (italics in original). If we consider the structure of the brain, our protocol might be thought of as how we form our basic life position, depending on the ways in which we are treated. Then, as our neocortex grows and we begin to think logically, we may choose, or create our own special version, of a fairy story that seems to us to explain the way we are feeling within our emotional brain.

Recognising that protocol and script are both metaphors, it does seem that neuroscience is now confirming what Berne surmised. We can also link this to structural ego states, in that the emotional brain corresponds to Child with some overlays of Parent, the neocortex might be thought of as Adult, and more structural Parent may be created as our brain continues developing through to adulthood and hopefully for the rest of our life.

For me, positioning protocol and script within the brain in this way allows us to distinguish between counselling and psychotherapy – if the damage was done before the child was about three years old, it is likely to be contained within the emotional brain and therefore within Child, so it will be a second or third degree impasse (Goulding & Goulding, 1976) to be resolved through deconfusion. However, if the experiences of the little person were generally positive in the very early months of their life, then the protocol may be largely one of OKness and hence any script may be amenable to decontamination because it is accessible to their structural Adult. Deconfusion often requires longer-term and deeper therapeutic work whereas decontamination may be achieved whilst the client remains in the here-and-now – hence counselling or coaching may be the appropriate approach.

A technique described by Greve (1976) is also helpful in considering how the protocol/script connection might enable us to decide whether the work fits within the boundaries of counselling/coaching. Greve describes a technique she refers to as protocol fantasy. Pointing out that adults cannot remember scenes when they were still very young, she suggests that clients

can develop a fantasy of what may have been happening to them as they developed their protocol, based on what they have recognised as their script. She describes a couple of client cases: in one case the client got in touch with the early emotional experiences that she had been repressing and was then able to move on; in the other case imagining the protocol fantasy resulted in the client recalling a later scene and completing a redecision on the basis of that. It seems to me that, because the client is aware that they are creating their own protocol fantasy, this provides a useful technique for clients to ‘keep one foot in the here-and-now’ as they explore how they may have ‘laid down’ their original life position at the basis of their script. My own example involved realising that there were bombs being dropped when I was born, my father was a soldier who was wounded more than once, my mother was left to care for me and for her young brother, and to deal with a father who was attempting to have her mother committed to a mental hospital so he would be free to live with his mistress – so my life position was based on the sense as a baby that the world was a threatening place and I could not rely on anyone else - I’m OK, You’re not OK.

### A Donkey Bridge about Resources

I present below another donkey bridge that has emerged as I have been writing. This encapsulates my way of prompting clients to consider resources they may have from the past, resources they may have in the present, and how they can take those resources into the future. I include it here because it has relevance to how I define counselling/coaching.

Past	Present	Future
Regression/Rubberbanding	Reactions/Rackets	Rewards
Resource States	Responses	Risks

### Resources from Past to Future

## Past

In my opinion, TA counselling/coaching is so potent precisely because we have so many great constructs that allow us to help clients understand how events in childhood, and their interpretations of these and the decisions they made, are still impacting on them and will continue to do so in the future unless they make some changes.

*Regression/Rubberbanding* – although often regarded as something to be avoided, neuroscience tells us that regression, including the TA concept of rubberbanding (Kupfer & Haimowitz, 1971) simply means that we are constructing our present world by firing off the same pattern of synapses as we did in the past (unless there is so much fear that fight, flight or freeze is involved); provided we regress momentarily (such as through setting up a ‘safe word’ to bring us back to the present, as is customary when working with trauma), regression can be a useful way of identifying both issues and resources that occurred in the past. Issues in the sense that the individual can remind themselves of what they recall happening in the past, with the option to change, or re-construct, their interpretation of it nowadays; or resources in the sense of getting in touch with their uncontaminated emotional responses such as curiosity, creativity, joy, anger, sadness, etc.

*Resource states* – an NLP rather than a TA concept, creating a resource state is done by choosing to regress into a moment in the past when the individual was functioning in a manner which they would like to repeat. For example, someone needing to make a presentation might identify that they wish to feel confident – yet they have never previously felt confident whilst doing a presentation – maybe they have never done a presentation before. They can be invited to think of a time in the past when they felt confident in a way that would be

appropriate for their presentation – this may well be when they were engaging in some other activity, such as a sport, being in a choir, cooking a meal – the activity does not need to have any relationship to making a presentation. What matters is that the person recreates the way they were feeling in the past; they then set up an ‘anchor’ that they can use to trigger feeling the same way again whenever they wish. When I passed the teaching part of my TSTA exam, I recreated the way I had felt when white water rafting – very exhilarated whilst aware that there were risks involved - this would not have been a good example if I had fallen from the raft.

Even for a client who would not consider it credible to have resources from past lives, it is worth considering how resources are transferred through the transgenerational scripting process (Noriega Gayol, 2004). There is no valid reason why this process should only be considered in terms of pathology.

*Reactions/Rackets* – I have suggested above that neuroscience allied to ego states and protocol/script provides us with a way of differentiating whether the reactions of the client are here-and-now – with the neocortex ‘in charge’ - or whether they are regressions – being triggered in the emotional brain. If they are second or third degree impasses they may be occurring in the emotional brain and the client may need psychotherapy; provided the client has an OK enough protocol, it is more likely to be a first degree impasse and coaching/counselling in the here-and-now will be appropriate.

To help clients overcome rackets, we can work with them to understand that these tend to be substitute feelings (English, 1971, 1972) so they can explore what the ‘genuine’ feelings are underneath; that rackets have a manipulative effect on others (Berne, 1966) so they can explore

what the gains are and how they might obtain the same outcomes in a healthier manner; and that there are thinking rackets (Hay, 2009) in the sense that we are told as children that we should feel guilty or we learn that 'being confused' gets us lots of attention.

*Responses* – having determined that the client's reactions are here-and-now, there are several TA frameworks for thinking about their choices for responding. I have simplified Kahler's (1971, 1979a, 1979b, 2008) material into what I refer to as the assessing cube, or AP3 (Hay, 2001, 2009) which brings together working styles/ drivers, stroking preferences, channels of communication (preferred transactions), doors to contact, and leadership style preferences.

### Future

NLP has a very useful concept of meta programs, which are high level mental processes by which we sort and respond to experience (Cameron-Bandler, 1985) and which include one which is about whether people are motivated to move towards gain or to move away from pain. Charvet (1995) has demonstrated through the use of the questionnaire (in North America and Western Europe) that 40% of respondents move towards and 40% move away from. When working with clients, we need to take this into account as some will be sufficiently motivated as they think about the rewards of changing their behaviour whereas others will become more motivated if we invite them to think about the negative outcomes if they fail to change their behaviour.

Although I have shown *Rewards* and *Risks* as if they are separate factors, they are of course intertwined. An obvious TA concept to help clients think about their future rewards and risks is to consider their stroking patterns (McKenna, 1974 ; Hay, 2009). In terms of them identifying current problems and planning what to do, there

are the steps to success (Hay, 2009) that are based on the treatment levels contained in the discount matrix (Schiff & Contributors, 1975). When preparing action plans, I use the metaphor of M&M's (Hay, 2009) as a framework for checking that all of their ego states are in line with whatever they plan to do – measurable so that Parent can approve what is being planned, manageable so that Adult can check that it is realistic, and motivational so that it is worthwhile enough for the Child to be committed to achieving.

### Conclusions

I notice several themes in terms of what has appeared in the TA literature:

- **Lack of definitions** – most of the authors failed to define what they mean by counselling or coaching; many of them reference instead the EATA Handbook, where the definition could be applied to any of the ways in which practitioners apply TA.
- **Terminological confusion** – many of the authors equate counselling to therapy; some even use the words interchangeably. This is the case generally within the UK; we have the British Association for Counselling & Psychotherapy which has been considering for some time whether to add Coaching to the name of the organisation. Increasingly, coaching is not being differentiated from therapy; I have an ever-growing list of modes of coaching in addition to those mentioned in this article (e.g. personal construct, existential, co-active, inner game, ontological, out of the box, and many more) and this increasingly includes people referring to therapeutic coaching.
- **Ego state confusion** – I mention this separately as it is a significant potential terminological confusion. Several authors refer to the use of

Adult within counselling, without defining which model of ego states they are using. Berne caused considerable confusion by describing Adult as existing within both the structural and functional models, defining it as how we are when we are in the here-and-now, and then using the same term to describe the behavioural aspects only of what he called the functional model in which Adult is like a computer. Clearly behaving like a computer will only be in the here-and-now when logical behaviour is called for – and even then what looks like logical behaviour may be a regression to childhood and/or a behaviour modelled by a parent figure.

- **Extensive range** – several authors, and the EATA Handbook, suggest very lengthy lists of who might be providing TA counselling; it might be more accurate to say that the field is intended for anyone who is working one-to-one. This raises other questions - consultants often work one-to-one - how can a practitioner support a client who wishes to create a healthier organisation without at the same time enhancing the autonomy of that client. A non-TA consultant might be passing on expertise about management but a TA consultant will be focusing on psychological factors – and the client is part of the system.

In terms of the question raised by the assessor of my written exam, my definition for counselling and coaching is the same as my definition for any developmental application of TA – it is a process through which the practitioner assists the client to construct their world differently in ways which enable them to be increasingly autonomous. What makes it TA is that this is done by increasing their psychological intelligence – their ability to apply

theoretical frameworks that allow them to: understand the impact of childhood events and their interpretations of them; identify a wider range of cognitive, affective and behavioural options; and initiate actions that will contribute to an enhanced sense of OKness for themselves and others.

I represent this as a metaphor based on the way in which plants will still grow towards the sun even when they have been covered in concrete – they will sprout around the edges and will also come through any cracks appear. This is due to the physis within the plants. Children have the same urge to grow and develop to their potential but often it is as if the grown-ups pour concrete over them. The main tool of the TA practitioner is a pickaxe because this enables us to make cracks in their metaphorical concrete – often that will be all we need to do because the client’s physis will then kick in and they will begin to grow through the cracks. Eventually, there will be so many cracks in the concrete that it is as if it no longer exists. Psychotherapeutic rather than developmental TA may be needed when the concrete poured over the child is so thick that a pickaxe is not enough and it needs a bulldozer - in the form of a more potent set of practitioner ego states than those possessed by the original concrete-pourers.

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