

OPTIONS

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Many persons get into “locked” transactions with persons outside of the group and come into group therapy to get help on how to handle it. Transactional Analysis offers a simple approach to figure out what’s going on, and illustrates the great variety of options available to the patient. This paper presents situations brought in by patients and the variety of answers offered by the group.

The diagram below illustrates a typical “locked” transaction that seemed “unbreakable” to the patient. He was always explaining; the other person, with the initiative, was always - complaining.

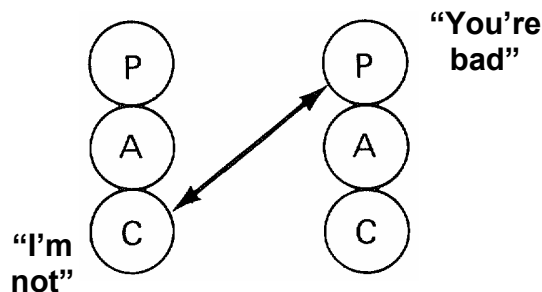


Figure 1

None of the attempts by the patient to handle this situation were effective because no matter what he thought up, everything was a variation of a Child statement. The others person’s responses, no matter how “reasonable” sounding, were all variations of Parent statements. He found out in therapy that all that was needed was an effective crossed transaction, such as from

the Child, “Go to hell,” from the Adult, “Let’s talk it over,” or from the Parent, “Stop it now!”

I. HOW TO CROSS TRANSACTIONS

The object of the above examples is to deliberately and effectively cross the transaction. To make it work, the following four criteria must check out.

1. *One or both ego states must actually change.* The person must either unhook himself from his own ego state and switch to another one or actually hook a different ego state in the other person. If both ego states remain the same, the same “locked” complementary transaction will proceed indefinitely.

2. *The transaction must be crossed.* In the above examples, the Parent to Child transaction is crossed by first a Child — Child reply, second an Adult — Adult reply, and third a Parent — Child reply. In the Adult to Adult transaction both ego states were changed.

3. *The subject must change.* In the above examples, the subject in each was changed from whether one person was “bad” or not to what the other person could do.

4. *The previous topic will be forgotten.* This goes along with the change of subject and ego state. The new topic will be more gripping than the previous one.

The object is “to change what is going on and get free in whatever way you can.” To get this you have to get the other person out of their ego state, or change your ego state, or both.

The above crossed transactions and the ones to follow are chosen by Adult decision. The Adult decides (1) what effect he wants in the other person, which ego state in him to hook, or what mood to leave the both of them in, and (2) which ego state would be best for himself. This is not “role playing” or “pretending” a certain way, but it is switching to another attitude you already have toward the person (another ego state).

The Adult, in choosing the option, just thinks quickly, “Well, there are other ways of handling this,” and then, “I don’t want to hurt him (P),” or “I better put him down (P)” or “I want him to talk straight to me (A),” or “Let’s keep this friendly (C),” etc. Ordinarily the Adult can choose to ignore the hook and let the comment pass, but this exercise is for “locked” transactions in which the person is already hooked or when they feel the “irresistible urge” of a hook and can’t be oblivious to it, but want to do something to switch off that transaction once and for all. It gives the person something to do about the situation to change it when it cannot be ignored. A teaching—therapy combination can be a “back to the drawing board” exercise for patients in transactional analysis. It supplies knowledge previously ignored by or withheld from the patient. After a while, with practice, replies become automatic as they are with most people, and there is no feeling of pausing to choose words.

If the crossed transaction doesn’t “take” then it didn’t unhook anything or hook anything new (no new crossed transaction line can be drawn on the diagram). The four criteria in such situations were not met. More may need to be learned about ego states to realize that there is a sharp difference between ego states, and, each is an entirely different “set” from the other. The situation may be one where extra hooks are needed as in duplex transactions, or

divided duplex transactions (i.e., in hysteria, reassuring the Child first, then talking to the Adult). Sometimes a “second effort” is needed to retain the ego state if it is rechallenged. The problem of being caught in a situation where one is “too nervous to think” will not come up with a properly prepared patient. A question about whether the “underlying problem” is still there is irrelevant in that this is an exercise in learning social skills and Adult control, and using sides of the personality other than the ones with “underlying problems.”

II. ADVANCED OPTIONS

Advanced patients who are familiar with discussing the ego states in terms of Prejudiced Parent, Nurturing Parent, Adult, Free Child and Adapted Child find the advanced analysis of options more useful. The diagram below has evolved as a practical necessity in that it is the only way of presenting the ego states in a diagram so that lines can be drawn back and forth among all of them. It is not to be confused with second order structural analysis¹ diagrams or other diagrams. The above divisions of the ego states are used rather than second order structural analysis because of their immediacy and familiarity.

In practice, keep it fun, simple, and uncomplicated for the Child. Usually only the common Parent—Parent, Parent—Child, Adult—Adult, Child—Child, and Child—Parent channels are used. The therapist can request a sampling of options without even using the diagrams; e.g. “How about a Nurturing Parent reply to her?” or “Anything funny your Child could say to get out of that?” Although the diagram can illustrate twenty-four possible ways of crossing a transaction, every one separate and discrete from the other, in actual practice only those channels mentioned that are easiest to grasp are used. The timing of the use of the option review

can appeal to the Child by using it only to solve a frustrating problem on the spot. With new patients the original transactional diagram is used, with its eight possibilities for crossed transactions.

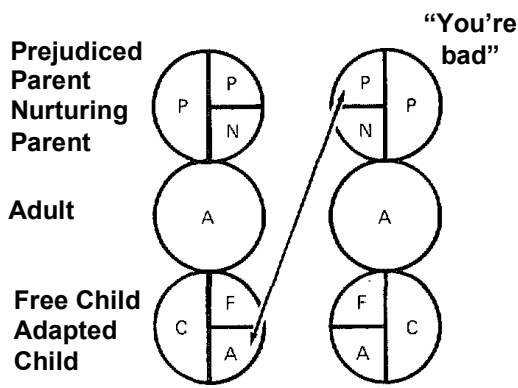


Figure 2

The transactional circles with the letters in them as below are written on the blackboard as follows. The names of the ego states are written next to the diagram in this paper for clarification only.

Using the locked transaction “You’re bad”—“I’m not” in figure 2 above, the following examples illustrate the common twelve of the twenty-four possible crossed transactions that could change the situation:

1. *Prejudiced Parent to Prejudiced Parent:*
 “The real blame is on the system. Do you know what I heard about...”
 “You’re right. I’m bad. But let me tell you what John did.”
 “C’mon. Let’s go. There’s work to be done.”
2. *Prejudiced Parent to Adapted Child:*
 “Don’t you dare talk to me in that tone of voice!”
 “Now you just listen to me for a minute.”

“Watch it. Don’t get testy with me.”
 “I’m getting sick and tired of this conduct on your part.”
 (frowning quickly) “You’re really a pest, aren’t you?”

3. *Nurturing Parent to Nurturing Parent:*
 “There’s enough trouble and hate in this world without us adding to it.”
 “We should hold our arguments down to protect the children.”
4. *Nurturing Parent to Free Child:*
 “Be kind to yourself. Anger is such a waste of your energies.”
 “Why don’t you take a night out on the town?”
 “How’s your family?”
 “Do you need anything?”
5. *Nurturing Parent to Adapted Child:*
 “Now, now. You sound upset.” “You aren’t giving of yourself when you talk that way.”
 “You poor thing. You’ve had a bad day. How’s your asthma?”
 “Tell me more about why you feel that way.”
6. *Adult to Adult:*
 “How did you arrive at that?” “Let’s check it out and see what we come up with.”
 “Define your terms.”
 “Can you rephrase that?”
7. *Free Child to Prejudiced Parent:*
 “Oh, wow! Pommel me master.”
 “Penalty! Penalty!”
 “Wouldn’t you just know it, but at a time like this I have to go to the bathroom.”
8. *Free Child to Nurturing Parent:*
 “That really doesn’t help me.” (smile)
 “I know you care.”
9. *Free Child to Free Child:*
 “Well, you’re no bargain yourself.”
 “Hey. That’s a great outfit you got on. Where did you get it?”

(smile) “Yes, you’re absolutely right. Yes. I agree with you 100%. Yes. Yes.
“Let’s go to bed.”

10. *Adapted Child to Prejudiced Parent:*
(won’t cross the transaction of fig. 2.)
11. *Adapted Child to Nurturing Parent:*
(sob) “I know I’m just a horrible wretch without feelings.”
(tears) “I feel so hurt.”
“I’m sorry.”
“You don’t have a very high opinion of me. There’s a little good in everyone, isn’t there?”
12. *Adapted Child to Adapted Child:*
(nasty) “You’re always right and I’m always wrong.”
“I ought to punch you in the nose for that.”
“You’re making us both look crazy.”

These Parent to Child locked transactions are common in clinical practice. The following three examples will illustrate similar relationships discussed in therapy.

1. A sleepy patient one morning was told by her bossy (Parent) roommate, “Let’s go. We’re going to the beach right now.” The patient responded with her sulky Child “I’m not going” which set off a long drawn out lecture. At the time she could see no other option open to her other than trying to reason with or refuse a bossy person. Some options mentioned in group were: A—A: “I know it would be fun but I should get some work done. Why not find someone else?” FC—FC: “I’ll put sand on the deck and get a fan and blow it on you.” NP—AC: “Is it necessary I go with you?” PP—AC: “Is attendance at your lectures compulsory?”

2. A passive, beaten woman long dominated by her tyrannical, punishing husband had a first contract in group to learn how to use her Parent in order to get her husband “off her back” (Adult or Child didn’t work). Within several months she

was able to handle a situation that occurred at the beginning of every month: her husband comes into the room angry Parent and waving the monthly bills, shouting “What about these bills? Do you think you are Mrs. Tycoon?” To this she was able to come up with these replies, all of which relieved the oppression: a) “You shouldn’t have gotten married if you couldn’t afford it.” b) “How could I be Mrs. Tycoon? I didn’t marry Mr. Tycoon.” and c) “Yes, the price of living is discouraging.” This was the start of a more sane relationship.

3. A sad, quiet young man who played “Wax Museum” discovered that he did this in the presence of a lecturing Parent wearing a sweatshirt saying “Follow me. Do my thing.” Some plausible options were worked out in therapy as a substitute for the Adapted Child “Wax Museum” option: a) He found his Child could joke with the person about the lecturing transaction; b) that his Adult could sit back and learn something from it; or c) his Parent could take sport at challenging the accuracy of the ideas presented. That the patient accepted these options is interesting in that only a few months previously he had not know that there were sides to his personality other than the Adapted Child, and that there were sides to other people’s personalities other than their Prejudiced Parent, and that these ego states were actually available.

So far, all the examples mentioned have concerned attempts to escape from a Prejudiced Parent to Adapted Child “locked” complementary transaction. Many other types of locked transactions are possible too and have come up in therapy. In one case, a person could not shake off a Child—Child transaction with a person who is always silly and wanting to have fun and could never be made to sober up or talk seriously. In another instance, a woman complained that an older lady at work saw her as a lovely daughter, and she could not

break out of this Nurturing Parent to Child situation. A man in his forties complained that all his relationships were Adult—Adult, and he could not see any way of changing them. Another patient discovered in therapy that he was the type of person who left other people in the position of trying to figure out options on how to handle him.

The question sometimes arises “Which of the options is best to use?” The purpose of the exercise is to show the options available, not the philosophy of whether it is “better” to be funny, frank, punishing, helpful or what not. The information should be made available to a patient inasmuch as whether he uses all of the options or not other people may be using all of them with him, and it would help to know it. The use of all the ego states is valid; the timing and manner of their use determines their effect. Responses are measured and tailored to the threat and are basically protective to preserve Adult control. Ones that seem cruel are acknowledged as such but are not hidden and change things for the better for both parties. There’s no talk of “winning” or “losing,” or acquiring “sociopathic defenses,” or learning to play a better game of “Now, I’ve Got You, You S.O.B.” It just shows people the variety in their ego states and the ego states of others, how to reveal the different sides of their personality and to appeal to the different sides of others, and to have a variety of tools to create a better communication. It doesn’t concern “role playing” or “pretending” but switching to a different ego state and “taking a different tack altogether.”

III OTHER OPTIONS

Duplex transactions often are required in complex situations. One phrase can contain the duplex, such as the reply “How unkind” which comes from both the Prejudiced

Parent (putdown) and the Nurturing Parent (kindness) to the Adapted Child. The arresting question “What’s your point?” comes from both the Adult (request for clear information) and the Prejudiced Parent (demand) to the Adult. Sometimes a duplex from another person has to be fielded in separate stages. A duplex can also hook two ego states in another person, such as a son’s comment “You’ll always be the greatest mother in the world,” which strokes both the mother’s Nurturing Parent and Free Child.

A “Bull’s-eye” is a direct comment that reaches all three ego states in another person. Usually an Adult interpretation that senses what a person’s Parent, Adult and Child are experiencing will result in hooking a person’s Adult. One patient got her husband to listen to her in an argument when she stated “You’re trying to start a fight, and I hate fights, and I’m not going to do it,” and at another time “I have to wait for an opportune moment to tell you something I’ve done.”

Destructive Prejudiced Parent options can be learned from this author’s monograph called “Verbate (rhymes with Karate): The Verbal Art of Self-Defense.” Here a person learns to deliver precise blows to the Adapted Child giving him a measured amount of guilt stamps, hurt stamps, mad stamps and fear stamps. The comments are gauged as to whether they go to the skin, the bone or the marrow. Permanent or near permanent neuroses are achieved by blows to the marrow. One patient lost his black belt in Verbate when someone addressed him with “My, isn’t it a beautiful day,” and he responded with “You look like you’re having a heart attack.” He had been warned in class only to use Verbate in life and death struggles.

Other options available are 1) Switch the roles in the game; e.g. from “kicked” to “kicker” in the game of “Kick Me.” 2)

Switch to another game. One patient could switch the game of "Blemish" into "Gee, You're Wonderful, Mr. Murgatroyd." When a woman stopped the merriment in the group by turning to him and saying probingly, "I noted your eyes are shifty," he turned that "Blemish" game around by saying proudly "People often comment about my eyes, like my students at school, they say I have big, blue eyes, etc." and the woman, hooked, responded warmly by saying "You know, they are good-looking." Everyone else in the group was smiling at how wonderful he was and how lucky they were to be in the group with him. Another Parental patient said to him once "You always take things too seriously," and he switched quickly from Adapted Child to Free Child and started a Child—Child game of "GYWM" by saying "Actually it goes with intelligence and hard work," and proceeded to relay the stories of how he got A's in graduate school. 3) Switch in time structuring. The option is always available to a person to switch from a game into pastimes, or get into an activity, or switch to intimacy, or withdraw, etc.

4) Switch in the Drama Triangle.² With practice a person can learn to know the verbal and somatic feeling of being in the Persecutor, Rescuer and Victim positions in the triangle, and pull very effective switches, or get out of the triangle. 5) Switch in the O.K. positions. Similarly as above, any switch in the O.K. positions in the situation will bring a dramatic change in the situation; e.g. when the not O.K. person suddenly becomes O.K. 6) Switch to an antithesis. A young social worker, Miss Smith, was repeatedly called Mrs. Smith by a client, despite repeated reminders month after month. The group suggested some antitheses, such as buying a name plate to put on the desk that she could point to effortlessly, or calling the patient "Miss" Jones instead of "Mrs." Jones each time, or refusing to talk further until she

was called Miss Smith. The worker felt that an antithesis was easier for her at her point in therapy than switching ego states.

IV. INDICATIONS AND USES IN THERAPY

1. *Show that there are options.* The most important use of this exercise is to show that there actually are options, and that they can be easily used, and that others are using them. This is the main idea to get across, and it is more important than the learning of individual transactions. When a group patient presents a problem situation, he is surprised to find that many of the people in the group already have ready techniques to handle it, and that he can learn these techniques from them. The more random the group selection and the more representative of a "cross section of society" the group is, the more clearly this idea will get across. The person sees, too, that other people have options in handling him, and he may try to test someone during the week to prove this point. He will see that people who don't get along with many people in the world are limited in their range of possible responses. Anxiety, in this case, would be inversely proportional to the number of options a person has.

2. *Solve immediate problems.* In this way it can be a very practical treatment method as, invariably, from time to time, each of the patients will present a situation in their daily living that they cannot cope with. Usually the patient will write down possible "comebacks" or direct statements, and the following week report to the group that the situation has straightened out immeasurably.

3. *Learn structural analysis.* As a necessary part of the exercise there is a constant review of ego states and questions long unasked are brought up. The ego states and the idea of transactions must be learned more thoroughly at these moments

as they have to be put into action after the group. It makes structural analysis come to life as a useful idea. Often patients find the “lines” they hear very exciting, and several of them copy down ones useful to them. Sometimes it becomes evident that people who have been in transactional analysis therapy over a year still don’t understand ego states until this exercise has been done several times, and then it takes on a meaning for them that diagrams didn’t. in the group therapy setting when sudden problem transactions come up and the person handles them well, he may get a stroke from someone who says, “You fielded that one beautifully.” If he isn’t able to handle himself well in the group, the options in dealing with a person in the group can be reviewed on the blackboard. Some people find it is the fastest way of learning ego states. Teachers may examine students or trainees in a transactional analysis course by presenting a problem transaction and request that a certain number of options be worked out, possibly all twenty-four.

4. *Discover permissions needed. Reparenting.* In the course of working out questions about options or reluctance toward changing a situation for the better, it is discovered that certain permissions are needed by the patient that were denied him in his formative years. These permissions often come to the group in the form of reparenting injunctions, a few of which come out in the group as follows:

- a. *You have a right to demand straight transactions.* One does not have to deal with crooked transactions and games and can request direct, open confrontation or seek out others who can transact directly.
- b. *You have a right to protect yourself.* Patients sometimes feel that they would “destroy” someone if they talked back, without realizing that they can create any

desired effect. If a person says that they have been “destroyed” in a game way, then this transaction can be handled too. One patient saw options as an “ABM System” to protect her Adult. Another saw it as a way of reducing the total number of anxious situations for her each day.

c. *You have a right to express yourself.* Group patients will say one should get things off their chest and not let things build up or collect trading stamps. Some patients are frustrated because they can’t say what they feel because their options are so limited. An occasional legalistic patient will take the “express yourself” permission as a blanket permission rather than as an Adult permission.

d. *You have a right to learn options.* Some people are always learning ways of handling things from others. Limited patients don’t know that the social skills and techniques can be learned by working at them. One patient felt that she could not learn humor (Child—Child option) because she thought it was a talent that was innate. Another patient suggested to her that she could pick up a feel for it by watching the late night talk shows.

e. *You have a right to use options.* One has permission to handle any situation that comes up and to think of the best thing to say and to switch on and off an attitude if it is unwanted and to gauge responses to correct a situation for the better.

f. *You have a right to see that others are using options.* A person can see that all responses to him are not necessarily instinctual but may be decided upon. People he deals with have a range of possible options and they can appeal to those sides of him.

g. *You have a right to see ego states correctly in others.* One patient

questioned whether it was “sane” to pick up on the covert message and trust her feelings. She backed this up with some quotation from literature on “shadow versus reality.” For the first time she was able to see that ego states were objective reality and that she had a built-in means for determining reality.

h. *You have a right to use all your ego states.* One withdrawn patient thought that some ego states were O.K. and some were not O.K. He felt his Parent was not O.K., and he therefore would not defend himself in most situations. Another patient, with a “serious” sweatshirt, felt that the Child was frivolous and that laughter and joking “and all that business” was childish. The injunctions against using some ego states in both cases could be traced to crooked parenting in childhood.

5. *Discover childhood prohibitions.* Some investigations into the family life reveal the inhibiting transactions. Sometimes there were no counterscript injunctions favoring politeness, tact, flexibility, “thinking on your feet,” etc. Negative scripting injunctions were varied, such as “Don’t think,” “Don’t talk back,” “Don’t do anything on your own,” and “Don’t say what you think.” The Child—Child “wink” from the parent indicated that fun was found by hiding, holding back, being safe, battering people bluntly, or that being a clown was all that was needed. There was no model to identify with (“here’s how” in the Script Matrix)³ with minimal demonstrations of artistry, tact, wit, or honesty in dealing with people. There was frequent mystification against direct expression (e.g. “It’s cruel to speak out,” etc.). Tact and artistry were not specifically valued and there was no direct positive stroking for this. The four discounts (Schiff)⁴ discounted that there was a problem, or that a lack of options was

significant, or that there were other options available, or that they could be learned and used. It is possible that a Parental psychotherapist could discount that social skills are a problem for some patients, or that social skills are significant, or that the skills are available, or that they can be learned in therapy.

6. New contracts and prescriptions for therapy. In the course of working out the various options on the blackboard, it is usually discovered that a patient is not able to think of options that “feel right” to him from one of his ego states. One woman felt that it was completely foreign to her to say things to her boyfriend from her Nurturing Parent ego state, and she did not think she would be able to do it. The diagram in this case and others can then pinpoint the precise “lesion” or problem with the patient, discovered in a scientific way. The patient often then adopts a new contract in therapy to practice or “let out” that ego state whether it be Free Child, Nurturing Parent, etc. Some people recall once using the ego states that are now unavailable to them, others cannot remember ever knowing about them or being able to use them.

Patients can work on their ego state contract in a variety of settings. In weekly group therapy the patient can establish a contract to be “the Parent” in the group, for instance, as one twenty year old did as part of his “get out of his house” therapy. One patient took an Adult contract and another practiced a Free Child contract in a weekend marathon. Whenever they made comments that were not in these ego states it was pointed out by the group. Theoretically this could be done likewise in a classroom setting or in an “attack therapy” setting where a person’s task was to maintain the ego state in the face of rapidly varying attacks or attempts to unhook him. This could have wider

therapeutic potential than the conventional attack therapy.

The patient may also be given "homework" in practicing an ego state such as what was done with the woman above who was uncomfortable with her Nurturing Parent ego state. She took home a problem transaction of the previous week with her boyfriend and worked out a Nurturing Parent reply that discriminated between each of the following attitudes: 1) Caring, 2) Considerate, 3) Concerned, 4)

Compassionate, 5) Kind, 6) Forgiving, 7) Reassuring, 8) Understanding, and 9) Protecting; e.g. "Don't worry about that. Right now I just want you to have fun." She reported to the group several weeks later that after discussing the problem transaction in group and doing the homework, she was able to be more considerate to her boyfriend and that he had remarked several times how she had changed.

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