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Are we too attached to normality and too invested in change?

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Summary by Frank Kelley

Steff Oates qualified as a Transactional Analyst in 1997. She runs a private practice in Cheshire, provides supervision and training, and regularly writes and speaks on TA theory and practice. She is Vice President of Research and Innovation for the International Transactional Analysis Association.

In this workshop we discussed whether therapists impose standards of ok-ness and normality, and thereby marginalise those who may think differently and may not conform to our ideas of health and change.

Steff has always valued being both a client and a therapist. Her first experience of therapy was through seeking help for anxiety. She has a remarkable ability to seamlessly integrate her own life in her talks about therapy. Linked to this presentation was her recent diagnosis of Attention deficit hyperactivity disorder (ADHD).

She began by asking us what is mental health? Not surprisingly we had a range of views.

Transactional Analysis has the view that people are OK and have the capacity to think and change. Eric Berne, the founder of Transactional Analysis, said there are four stages of cure.

1. **Social control** the person takes control over their behaviours, employing an Adult ego state.
2. **Symptomatic relief**, the person still maintains Adult as the ego state in charge of the process and goes on to address some of the problematic content of Child or Parent ego state directly.
3. **Transference cure** the person substitutes the psychotherapist for the original parent and sees the psychotherapist as fulfilling a role in their script but in a more benign way.
4. **Script cure** the person is capable of breaking out his script entirely and, as Berne put it, putting their own show on the road, with new characters, new roles, and a new plot and payoff. Such a script cure, which changes our character and destiny, is also clinical cure, since most of his symptoms will be relieved by this re- decision.

Berne went on to develop the idea of the secret garden. This is a well defended inner world explored through a deeper therapy.

Steff went from these original TA therapeutic principles on a long path through relational therapy and body therapy, both as a client and therapist. This led her to questions about how therapy helps clients.

Are we helping clients to be in their secret garden or helping them to adjust to life outside their garden. She asked us to imagine all therapists as beautiful smelling roses and graduates of Rose University. If our client is a sunflower we would want them to be smaller. If our clients were daises we would want them to be taller.

This Rose metaphor is a way of capturing the outside in way of conceiving of change in therapy. This contrasts with looking to see how clients use therapy to come to their own sense of the usefulness of therapy. This is a process from the inside out.

This brought Steff to the principles of neurodiversity. The word neurodiversity was coined in the late 1990's by journalist Harvey Blume and autism advocate Judy Singer.

This way of shifting perspective is set out well in the work of Thomas Armstrong and his books *The Power of Neurodiversity* and *Neurodiversity in the Classroom*. In an echo of Steff's metaphor Armstrong wrote:

We don't pathologise a calla lily for not having petals (e.g. petal deficit disorder), nor do we diagnose an individual with brown skin as suffering from a "pigmentation dysfunction." Similarly, we ought not to pathologise individuals who have different ways of thinking, relating, attending, and learning

Be a first class version of yourself rather than a second class version of someone else. Working hard to fit someone into a norm that they are trying to fit into anyway never works very well. A self deficit is also a deficit in the environment for meeting those needs. Always enquire further.

Steff gave us an image to convey the experience of ADHD. It is like a chaotic Indian road junction. For neurotypicals this junction is managed by traffic cops. In ADHD this function of the brain is like having traffic cops who have fallen asleep. The paradoxical treatment of ADHD is that stimulants like Ritalin slow and organise people with ADHD. This is because this medication stimulates the organising part of the brain that has fallen asleep. It helps rebalance immediate and deferred gratification. Chemically ADHD does not reward deferred gratification.

Thank you to Steff Oates. The rethinking and perspective change of neurodiversity and related concepts like *crip theory* and *ableism* are examples of inside out working. The kind of inside out working that we could use to gain an insight into what our clients need from therapy.