

RANDOM HOUSE  BOOKS



Staying OK

Amy Bjork Harris and Thomas A. Harris MD

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About the Author

Thomas A. Harris was born in Texas. He received his BS degree in 1938 from the University of Arkansas Medical School and his MD in 1940 from Temple University Medical School. In 1942 he began training in psychiatry at St Elizabeth's Hospital in Washington, after which he served as a psychiatrist in the Navy. In 1947 he was appointed Chief of the Psychiatric Branch of the Bureau of Medicine and Surgery in the Navy Department. After retirement from the Navy as Commander, he taught at the University of Arkansas School of Medicine and then became Director of the Department of Institutions for the State of Washington. In 1956 he entered private practice in Sacramento. He was founder and President of the Institute for Transactional Analysis there, and a Director of the International Transactional Analysis Association. Thomas A. Harris died in 1995.

Also by Thomas Harris

I'm OK-You're OK

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In Memory of Our Parents

Ruth Josefina Nyberg Bjork
Eric Johannes Bjork

Lula Jenkins Harris
William Milton Harris

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Staying OK

Amy Bjork Harris and Thomas A. Harris MD



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Foreword

Thomas A. Harris, M.D.

IT SEEMS APPROPRIATE to write a bridge between *I'm OK—You're OK*, published sixteen years ago, and *Staying OK*. The first book, the only book we have written until now, is our basic manual, what Dr. Eric Berne called "the first layman's guide" to Transactional Analysis, the system he originated. In August 1972 Webster Schott, writing in *Life* magazine, stated, "When an idea finds its time and voice it takes on force. Transactional Analysis is the idea. Now is the time. *I'm OK—You're OK* is the voice." We believe *now* is still the time and that TA is as useful today as it was sixteen years ago when the book was written. If you have not already read it we hope you will, for it contains a detailed description of the principles upon which the present book rests. For those who have not read it, the basics will be reviewed briefly in the first chapter.

Although I am retired from my practice, I continue now, as I have throughout my lifetime, to look for better ways to understand what builds and motivates persons along with practical ideas for the enrichment of life. I am as enthusiastic as ever about Transactional Analysis, which I believe is the best system yet devised to understand and explain behavior from a psychological point of view. Though extensive research in brain physiology continues to produce remarkable insights into the mystery of the mind, TA remains an effective tool anyone can use to gain practical insight into one's own behavior and how to change if one chooses.

At the time *I'm OK—You're OK* was written it contained the culmination of thirty years of my own search, research, and practice as a psychiatrist. It also contained the collected observations, anecdotes, scholarship, and writing skills of Amy, who has been my partner in marriage and vocation through nearly thirty years. The widespread enthusiasm generated by that one volume was evidence, to us, that the ideas contained in it were not only motivating, but worked! Fifteen million copies are in print and the book has been translated into eighteen foreign languages as well as Braille. Thousands of remarkable letters have brought reports of exultation, confirmation, and change. Letters continue to arrive from people in every walk of life, from prisoners and priests, professors and students, women and men, eighty-year-olds and eighteen-year-olds, Muslims and Christians, from kibbutzim and convents, from rich and poor, scientists and blue-collar workers, patients and therapists.

In a four-to-one ratio, letter writers asked for additional information and applications of TA in problem solving. Many of the applications contained in this book have grown from the questions posed in these letters and from formulations by participants in seminars and workshops that Amy and I and our colleagues have conducted over the years. We particularly thank former staff members employed in my practice as well as others who participated in the teaching programs of the Harris Institute of Transaction Analysis. Their enthusiasm and creative thinking, combined with our own, comprise many of the ideas contained in this book. We especially thank Dr. Craig Johnson, Larry Mart, Robert Miller, and the late Connie Drewry, who died in 1981 after a long, brave battle against cancer. I write the above acknowledgements in the past tense because the institute was discontinued following my retirement.

Also we appreciate TA colleagues Dr. Gordon Hailberg, Dr. Hedges Capers, Dr. Robert Goulding and Mary McClure Goulding, Bill Collins, Joseph Concannon, Dr. Stephen

Karpman, Jacqui Schiff, John Defoore, Mary Joe Hannaford, Mary Boulton, and the late Warren Cheney. Through the years a wealth of stimulating ideas and encouragement has come also from our friends, notably Thomas E. Smail, Jr., Judge Wyatt Heard and Heidi Frost Heard, Dr. Baxter Geeting, Corinne Geeting, Carol Jean Noren, Merrill Heidig, and Lou Foley. We gratefully acknowledge the valuable information we gained from the staff of St. Helena Hospital and Health Center in Deer Park, California, and from many colleagues, including Richard Frink, M.D., Founder and Principal Investigator of the Sacramento Heart Research Foundation.

Particularly do we thank Amy's brother the Rev. Elvin E. Bjork, pastor of the Lutheran Church of the Good Shepherd of Salem, Oregon, our own pastor Dr. Robert R. Ball of Fremont Presbyterian Church in Sacramento, our friend Father Henry Doherty of Lenoir, North Carolina, and Dr. Elton Trueblood, who was the first to suggest we write a book, which eventually became *I'm OK—You're OK*. Special thanks to Eva Hewlin, friend and faithful helper in our home. We also thank our children for their patience, love, and wisdom beyond their years, sometimes beyond ours.

We deeply appreciate the assistance of our former editor at Harper & Row, Harold E. Grove. After his retirement we were exceedingly fortunate to work with our present editor, Ann Bramson. We are especially grateful to her for her irresistible affirmation, hospitality, and gracious persistence, which kept us moving toward the completion of this book. Finally, we thank the thousands of readers of *I'm OK—You're OK* who took the time to write us and to urge us on.

As I stated in the preface of *I'm OK—You're OK*, Amy's writing made possible the effective presentation of ideas in that book, which brought such a remarkable response. I now leave it to her to do the first-person presentation of the material in *Staying OK*. Amy is a Special Fields Teaching Member in the International Transactional Analysis

Association, her special field being Communications. She attended Eric Berne's San Francisco Social Psychiatry Seminars and was a co-founder with me of the institute. She was also a member, with me, of the board of the ITAA. In recent years she has become well known, not only as a writer but also as a lecturer in both the theory and application of TA.

Because Amy will be writing in the first person, the style, sensitive insight, humor, philosophy, and personal examples she brings to this work will be uniquely hers. This work is, nonetheless, a combined effort, for we have been in constant collaboration through the intervening years, melding ideas and experiences into one fairly unified approach. At this time in my life, after decades of treating severely ill people and counselling others with the ordinary problems of ordinary people, I gladly leave the creative, culminating effort, the reporting of our experience, and the writing to her.

One person who recognized Amy's contributions was Dr. Berne, who at the time of the publication of *I'm OK—You're OK*, wrote the following statement for the book jacket, only a brief part of which was used. Because we treasure it as an expression of his ongoing support, which came to us in frequent letters and other statements of encouragement until his death in 1970, I include it here, in full:

I am grateful to Dr. Harris and his colleagues for doing a job that needed doing. In this book he has clarified the principles of Transactional Analysis with cogent and easily understood examples, and has related them to broader considerations, including ethics, in a thoughtful and skillful way. I am sure that many people of all ages will find it instructive, broadening and helpful, and also readable and enjoyable.

Naturally I feel honoured that Dr. Harris has taken such an interest in the subject and has done so much with it, and that our association has proven so useful for both of us. I am

particularly happy to see the influence of Mrs. Harris and the Harris children come through very clearly in the book, an excellent precedent, I think, for others who write about people, and even for others who write about animals and plants and sticks and stones.

Information contained in this book is based on transactions frequently encountered in counseling; however, the individuals described are not specific individuals, but portraits with fictitious names created for illustrative purposes.

If I'm OK and You're OK, How Come I Don't Feel OK?

AFTER THE DOOR alarms, the glass breaks, the siren growls, the interview chills, after someone else gets the promotion, after a stabbing thought about what we forgot to do, after talking too much, after a look in the mirror, after a lot of things, we beat ourselves nearly to death. Why did I have to say that? Why didn't I keep my mouth shut? Why wasn't I a better parent? Why didn't I speak up? Why don't I just drop dead?

Alone with our feelings, in the dark of the night or the surreal light of day, the punishing voice of regret often plays like a broken record, if only, if only, if only. If only I could take back my words, erase it all, and start over.

When our daughter Gretchen was six years old, her persistent begging for something she couldn't have finally provoked me to angry words. She stopped begging and went to sit on the floor, tears brimming in her big blue eyes. In a few moments she was back.

"You were mad at me. You shouted at me," she said.

"That's right, I did," I replied. "But do you know what you were doing that finally made me shout at you?"

Weary of reasons, she turned her wet, wistful face square at mine and said, "Oh, Mama, sometimes we have to start all over."

And we did, and my face got wet, too. How often had I not felt just that way, a little girl again, wanting to be close once more, with another chance? I was proud of her persistence and awed by her words. Had she not stated something universal and ultimate? Do we not all, from time to time, wish we could start over?

The wonderful thing about being young is that if we had it to do all over again we could. Many of us aren't young anymore, and our history follows us around like a patent dog, nudging us for attention, and dropping long white hairs on the carpet of life. If we tell it to go lie down, it is soon back. The past is forever with us, the bad with the good, and all the feelings that accompanied both. Good feelings from the past are the golden, nostalgic moments that every so often fill our chests to bursting. The more common intrusions from the past, however, are bad feelings, sad feelings, little-girl or little-boy feelings of wanting and wishing and not getting.

Painful feelings erode self-esteem. We may wake up feeling like a million dollars, but sometimes it takes only a second for a frown, a slight, a remembered failure, to reduce us to zero, and the zero may last all day. We may have read rows of books on behavior, motivation and spiritual uplift. We may have insight, foresight, and hindsight. All this can go out the window in an instant when someone pushes a "hot" button, or when tragedy strikes, and feelings surge along every nerve fiber, preempting all the voices of reason that could give us hope and reassure us that life can be good again. Most of us are acquainted with the symptoms—weariness, depression, apathy, sleeplessness, sighs, too much to do, no taste for doing it, disorganization, sadness, loss of enthusiasm, loneliness. Emptiness.

The good news is that though we cannot stop the bad feelings from coming, we can keep them from staying. This is a book not only about how to get rid of bad feelings, once they have arrived, but also how to get good ones. It is a

book about loving, talking, listening, wanting, getting, giving, deciding where we're going, and enjoying the trip. It is the only trip we will take, and we can make it a good one despite our own imperfections and the imperfect world in which we live.

What "I'm OK—You're OK" Means

Although the millions of people who have read *I'm OK—You're OK* know what we mean by the title, we have come to realize there are a great many others who are familiar with the title only. Popularity has pitfalls. In time the title became a slogan with all the twists and twits that slogans attract. Seen only as a slogan, stenciled on sweatshirts and bumper stickers, the notion that "everybody is OK" doesn't quite seem to fit the truth. What we *know* is that sometimes we feel not OK, sometimes we act not OK, and certainly there are plenty of other people who act or feel worse than we.

Recently we received a letter from a woman who had been encouraged by a friend to read the book in 1969, the year of publication. She wrote:

What she was telling me about the ideas it contained was drowned out by my interpretation of the title, from which I gathered presumptuously that the ideas expressed a somewhat laid-back philosophy suggesting that if people would just "cool it" and accept one another, the world would be a better place. Since I didn't quarrel with such an attitude, and because it didn't seem very helpful to me, I "shelved" your book. Until recently. I was in 1969 *very* ready to consider the idea actually contained in *I'm OK—You're OK*; but presumption and what I think is a misleading title (however appropriate when one knows the meaning) have delayed for 16 years my use of some exceedingly significant ideas . . . All the same I wonder whether you've encountered this response over the years from other tardy readers. Implicit in all this is my sense of gratitude to someone for having produced such a simple, beautifully coherent and useful exposition of a subject horrendously complex.

Others who at the outset felt the title was "flip" or "pop" also changed their minds. Among them was the late

eminent neurosurgeon Dr. Wilder Penfield, whose pioneering work on memory mechanisms will be referred to in this chapter. In a letter written to us in December 1973, he stated:

I have been reading your book, *I'm OK—You're OK*. It was given to me by another surgeon who is also a member with me of the American Philosophical Society . . . Let me congratulate you. The title seemed to me first to suggest that your approach was a superficial one. I apologize now for that misconception.

Because we want to be responsive to our readers, and because the present book gains much of its recognition by virtue of the fact that it is written by the authors of *I'm OK—You're OK*, we feel it important to clarify misconceptions. We feel it a necessary siding on the tract before taking you to the destination of this book, how to handle bad feelings, produce good ones, and live life to the fullest.

One of Four Life Positions

“I’m OK—You’re OK” can best be understood when it is compared with the position of early childhood, “I’m Not OK—You’re OK.” We believe all children make this preverbal conclusion during the first or second year of life in the setting of a world of giants, the most significant being their parents, upon whom they depend for everything, food, care, nurture, life itself. This decision, permanently recorded, is a product of the situation of childhood, in which the critical reality is dependency.^{[fn1](#)} In early childhood, a period we designate as the first five years of life, thousands of events and perceptions, among them intense feelings, were recorded in the little person’s brain and are available for replay throughout his life. If in the present we find ourselves in a situation of dependency, we become a “child” again, feeling the very same feelings we did when we were little. We not only remember that child, we *are* that child. We may

again feel “I’m Not OK and You’re OK.” Much of our life consists of attempts to rise above, circumvent, prove, or disprove this early decision. To help get the feel of the predicament, we will refresh your memory.

What It Is To Be a Child

Objectively, a grownup looking at a baby sees an awesome, infinitely precious miracle of creation. Unless genetically impaired, the baby is indeed perfect. Perfectly OK. What is relevant to understand feelings, however, is the *subjective* view of the child, his interpretation of experiences in which he participates in childhood. However perfect he is, he is little and his parents are big, he is helpless, they are not. Most significant, he is totally dependent on them. It is hard to be objective even as grownups, when we need somebody that much.

Can we be objective about what the child feels? We cannot interview an infant or recall our own view of life in the first two years, the critical time during which the “I’m Not OK—You’re OK” position was decided. However, we can observe the little person and the situation in which he lives. He is small, clumsy, uncoordinated, without words to express his feelings, and totally dependent on big people to set up the situations that produce good feelings for him.

Consciously, we recall the good, most of the time. Yet the “happy childhood” is a myth, not because there was a total absence of happiness in childhood but because there was no way the child could control the environment to make the good feelings last. Play was interrupted by bedtime, mud had to be washed off, spilling the milk brought irritable disapproval, running free as the wind down the hill ended in skinned knees, mother’s rocking was terminated by the ring of the telephone, squeezing the cat produced claws, mispronunciation brought correction, intriguing explorations

of the body sometimes brought abrupt interruption, and running into the street ended with a rough retrieval.

In the best of situations, with the best-intentioned parents, the child had no way to assure that good feelings would continue. Powerlessness, the total dependence on others, left the child with the on-again-off-again experience of great glee and the sudden cessation of what felt so good. One way to figure this out was to make a decision about it: 'You are in charge; I am not.' "You are OK—I am not."

The helplessness of the little person is compounded by his lack of knowledge about a vast, strange, new, sometimes terrifying world. As grownups we forget what our point of view was as small people, how things looked and seemed. Years ago we spent a week vacationing at the White Sun Guest Ranch in Palm Desert, California. Our lodging was a snug, rough-hewn cottage, decorated with a Southwest Indian motif. After bedtime, the first night, Gretchen, then age nine months, awoke screaming. I turned on the light in the girls' bedroom, picked her up from her crib, and held her. Her uncharacteristic screaming continued as hard as ever. I thought she had been bitten by something, and searched both her body and her bed for evidence. I found nothing. I finally was able to calm her, and I rocked her and soothed her until she dozed. I turned the light off and laid her back in the crib. In the process she awoke and again began screaming. For more than an hour the holding, calming, dozing, continued. Yet every time I laid her down her terror returned.

Once more I laid her down, this time putting my head near hers in the crib, humming, as if to go to sleep with her. Then I saw what she saw. On the wall was a handcrafted tin mask with grotesque features and with eyes made of faceted red glass. Outside the window was a neon sign that flashed on and off, lighting up the mask with regularity, and causing the red eyes to glow horribly on, off, on, off. When the lights of the room had been on, the mask had not seemed so

scary. But from her crib, in the dark, from *her* point of view, the scene was terrifying.

I picked her up again and turned on the light, and we went to examine the mask. “We will put it away in the drawer,” I said, and did. “The mask is gone, Gretchen,” I assured her. “It will not hurt you. It is only a decoration, a silly-looking face. It looked scary in the dark, but it won’t be scary anymore. I won’t let it scare you anymore.” After more rocking and reassuring I again laid her down. She stared steadily at the blank wall for a long while, the pink and dark gray still alternating from the neon light, and finally she fell asleep. There was no way to understand her terror until I saw what she saw. The mask did not frighten me. I knew what it was. She did not.

When we are grown we forget what we once saw, how scary life could be, how helpless we were. We even forget we made a decision, “I’m Not OK—You’re OK.” Yet once the decision is made, it is recorded forever. Because the assumption is a true impression of what life is like for the child, he attempts to maintain the integrity of his conclusion. Even though his assumption about himself and others seems unfavourable it has great staying power, because it is a decision based on sound early mental processes seeking practical and successful adaptation. Inadequate data, but good data processing. Though the “assumptive reality” that the child constructs may contain some wrong assumptions, it is nonetheless *reality* to him.

We believe there is ample evidence to conclude this is the preverbal assumption of *all* small children.[fn2](#) Why, then, do some children appear more self-assured, more OK, than others? Why do some seem to be little princesses and princes almost from the start? Why are some outgoing, bright, curious, pleasant, self-assertive, and happy most of the time, while others are sulky, whiny, or terrified most of the time? Why are some childhoods more happy than others? Is it because the happy children never concluded

“I’m Not OK—You’re OK”? We do not believe so. We believe the behavior of happy children is a result of unconditional love and straight, consistent, caring parental instructions and demonstrations of how to think and solve problems. Thinking and doing produce knowledge and mastery, *despite* the original decision! Mastery, too, is recorded and is replayed with accompanying feelings of self-confidence. Yet even confident children have their Not OK moments, as do grownups.

There is another way to be objective about how the little child felt about himself. This is the replay of our own recorded feelings when we find ourselves in a situation of dependency and helplessness—when a superior has us in a corner, when we run out of ideas to solve a problem, when we are tired, when we’re broke, sick, or old, when we are misunderstood, when we do our best and it still isn’t good enough, when we are judged unfairly, when our best-laid plans turn sour because of the whim of someone more powerful than we. Most people experience a feeling markedly different from “I’m OK—You’re OK” in such circumstances. The existence of a feeling of “I’m Not OK” is an indication that the original position of helplessness and dependency was recorded early in childhood and is available for replay in the present.

There is ample evidence from the existence of the first half of the equation, “I’m Not OK.” We can feel it just as plain! Also we can observe its expression in little children—tears, rage, shyness, fear, frustration. Why did we conclude, then, that these others, “they,” our parents, were OK if they were centrally involved in that which produced our frustration? Where does the “You’re OK” come from? *They* were OK because they were the child’s primary source of life-giving physical and emotional contact, which we call *stroking*.

Redeciding

What was once decided can be redecided. Our childhood position was arrived at preverbally and was based on feelings about how life seemed to us then. The “I’m OK—You’re OK” position is based less on feelings than on conscious thought, faith, and the wager of action. It is a decision to reject our childhood assumption and to assert that we are no longer helpless, dependent children. It is a statement not of evaluation but of acceptance. It is a statement of belief in the worth of persons, ourselves included. It does not mean that everybody is perfect or that all actions are good. It does not mean that all actions have the same merit, or that all persons are the same. It does mean that we treat people as persons and not things, willing to regard them in the best possible light, open to what can be regardless of what has been. It means we view ourselves in the same way. Goethe stated the possibility of the “I’m OK—You’re OK” position: “When we treat a man as he is, we make him worse than he is. When we treat him as if he already were what he potentially could be, we make him what he should be.”

“I’m OK—You’re OK” is an amendment of our constitution. Many good and novel actions may ensue. It does not mean the earlier decision is erased, for it was recorded and every so often it replays. But our later decision is recorded, too. The more conscious we become of this new way to look at ourselves and others, the more readily we are able to change the nature of our daily transactions, our greetings, our attitudes, our reaction to stress, and the way we handle feelings. Our guiding star is the faith that something better can exist between persons in this world than the combative and manipulative exchanges that threaten to destroy us today.

What Is Transactional Analysis?

Having attended to the clarification of the meaning of “I’m OK—You’re OK,” we now wish to be responsive to persons who do not know what Transactional Analysis is. We trust that those of you who are already familiar with the basics of TA will be patient with a brief review. We simply do not know a better or more precise way to understand or discuss behavior than TA. Nor do we know how to say anything novel about handling feelings without using TA tools. The next few pages of this chapter and a brief section in [Chapter 3](#), describing transactions, are the only places in this book where basics will be reviewed. For those not acquainted with TA, an understanding of these basics is essential to a correct understanding of all that follows. For instance, when we write of Parent Stoppers and Parent Shrinkers, we do not mean we are against parents, yours or ours. Quite the opposite! Even TA old-timers may derive new insights. Emerson said, “We are far from having exhausted the significance of the few symbols we use.” TA’s symbols are three circles, representing the three parts of the personality of every person, Parent, Adult, and Child, words which we will define forthwith.

A *transaction* is the basic unit of behavior: you say or do something to me, and I say or do something back. *Transactional Analysis* is determining what part of the three-part you initiated the transaction and what part of the three-part me responded.

You Are More Than a Child

Thus far we have written mostly about the part of the personality which in TA we call the *Child*, the recorded experience of that little person we once were. It is a state of

being, a state in which we may appear in the present, felt by ourselves and observed by others.

In the 1950s TA's founder Dr. Eric Berne was treating a patient who was a lawyer. At one point the lawyer said, "Right now I feel like a little boy." And he looked like a little boy, the way he was sitting, his vocabulary, his facial expression. Soon the treatment began to center on the question "Who's talking now, the lawyer or the little boy?" They were two different people. About six months later Berne introduced his observation that still another person made his appearance in the present. That was a person who was very much like the man's father, a parental person who appeared in a nurturing, sometimes critical way.

TA is based on the observation that all of us are three persons in one. Sometimes we act as the little child we once were, sometimes in a parental way copied from what we observed our parents do, and sometimes as an objective data processor, thinking, analyzing, predicting, estimating probabilities, making decisions, and solving problems. We are in one or another of these states at any given time. We can change from one person to another in a moment. Everything about us changes—our physiology, voice tone, respiration, perspiration, vocabulary, and gestures. These states are not roles, but realities. The state is produced by the playback of recorded events in the past involving real people, real times, real places, real decisions, and real feelings.

We represent these states by three circles, signifying *Parent, Adult, and Child* ([Figure 1](#)). These three words, defined, form the basic language tools of TA. Thoreau once said, "Beware of all enterprises that require new clothes." In a similar vein, many people are wary of a system that requires new worlds. Yet in order to communicate meaning it is essential to agree upon definitions. The thousand of letters we received from readers of *I'm OK—You're OK* confirmed that meaning had been communicated, and we

shall use these words in exactly the same way we did in that book. An impressive slogan used in a TRW advertisement is “Getting an idea from one place to another is as important as getting an idea.” Ideas travel on words. We therefore review the following definitions of Parent, Adult, and Child, always capitalized.

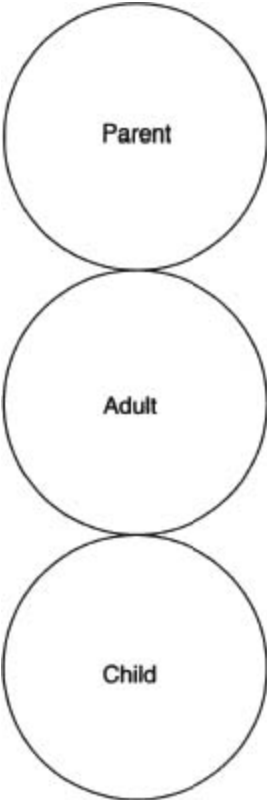


Figure 1

Three-Part Structure of the Personality

The Parent

The Parent is made up of recordings of what the little person saw mother and father (or parent substitutes) do during a period we have designated as the first five years of life. It also includes what they said. It was recorded unedited, for the child was in no position to question the powerful people upon whom he depended for everything. Because of his dependency, he made assumptions and attributed to his parents magic qualities. They were OK, no matter what. In the Parent is recorded a *taught* and *demonstrated* concept of life. Traditions and values reside in the Parent, although values, as well as other information, may need updating later in life. The Parent is dated. What your parents think today may not be the same as the Parent in your head. They may have changed. The Parent may not even be what they actually said and did when you were little, but what you *assumed* about what they said and did.

The Parent is unerasable. The Parent is both nurturing and critical, if your parents, in fact, were both. The Parent is the history of your early environment, events that really happened, not an abstraction like “super-ego.” The Parent is unique. Yours is different from mine. The Parent is both a state and an influence. From this vast source of data comes information into our thought processes to influence decisions. Or we can “come on” Parent, and act just as mother or father did, even to the finer points of the same gestures and voice tone. The Parent is a recording. We do not think with it, we merely play it back.

One of the most powerful ways in which the Parent enters our lives in the present is the “internal dialogue” in which we hear the same applause, warnings, accusations, and punishments we heard when we were toddlers. The person in us who is at the other end of the dialogue is the Child, the preschooler in our heads. We can feel as bad today as we

did then, when negative recordings in either Parent or Child are activated, and we hear the internal, unceasing voices of regret or accusation, if only, if only, if only, why did you, why did you, why didn't you? It is probable people cannot hurt our feelings unless they arouse our Parent, which then accuses us internally. An oppressive Parent does not mean we had cruel parents. They could have been angels, but to the little person, when the Parent was recorded, they were giant angels, and may not always have seemed to be angels, either.

Parent is, in some respects, a problematic word, for, even though it has a unique meaning in TA, it nonetheless has intrinsic semantic power. We have tried to think of a less inflammatory word, but have not been successful. Neither are we eager to alter a now well-known structure, Parent-Adult-Child.

Perhaps inflammation has a benefit. It takes a certain amount of psychic upset to power a fresh examination of our hallowed dogmas and crippling misconceptions. *Parent*, despite the above-mentioned semantic shading, is an apt name for the authority in our heads, for it was derived essentially from what mother and father or their substitutes said and did. The significant distortion, however, is that it was *we ourselves* who internalized them, and we were unable to do the job objectively—unable to comprehend that they were only human and not God—because of our dependency, and inescapable situation of childhood.

As we begin to recognize the distortion, and as we begin to feel compassion for ourselves instead of continual self-castigation, we also begin to feel capable of compassion for our parents, who are, or were, in the same boat as we. They had a Child, too.

The Child

A great deal has been written already in this chapter about what it is to be a child. The child's experience was recorded in the same way the Parent was recorded. It consists of the child's responses to what the parents said and did. The Child is a permanent recording of internal events in response to the external events of the first five years of life. The most potent internal events were *feelings*. These feelings frequently replay in the present when we are put in a situation similar to that of the little person, when we are cornered, dependent, unfairly accused, clumsy, uninformed. If we are confronted today by parental-type accusers, we may be transported *back there* once again. Old tapes are always ready to roll, be they Parent or Child.

The Child includes our instincts and biological urges, genetic recordings, our physical selves, curiosity, and intuition. It contains joy as well as sadness. Whereas the Parent is filled with demands, directions and dogma, the Child is filled with desire. The Child is where the "want to," the motivation, is. Much of what we *have* to do is an adaptive response to the Parent. What we *want* to do originates in the Child. The Child, like the Parent, is both an influence and a state. When we are *in* the Child state we act and look like the little person we once were. The Child is the most delightful part of our personality, or can be, if it is free to be inventive, creative, and spontaneous. The Child can also be a problem part of our personality if it is fearful, intimidated, or selfish. The referee between the demands of the Parent and the desires of the Child is the third part of the personality, the Adult, which thinks, solves problems, and mediates.

The Adult

At about ten months of age, perhaps earlier, the little person has developed motor control and strength sufficient

to enable him to begin to explore things on his own. Soon he crawls, he climbs, he walks, he runs! He has entered the glorious age of major motion. He also is thinking, adding a novel *thought concept of life* to the Parent-taught concept of life and Child-felt concept of life. He begins to construct his own understandings. He begins to separate himself from mother and learns how to say *no*. He has his own intentions and his own reasons. As his vocabulary grows, he begins to ask *why*. All of these individuating activities are products of that growing part of his personality we call the *Adult*. The Adult reasons, thinks, predicts, and figures out how to do things. In time the Adult begins to consider consequences. Whereas the Child provides the “want to,” the Adult provides the “how to,” borrowing heavily from what he learned from his parents. Good parents encourage the building of the child’s Adult capabilities, praise him for his observations about life, and applaud his questions as to why the rain falls, the smoke rises, and his shadow leans over.

The Adult is not only a functional part of the personality, but also a state, observable by others in the present. A person in the Adult state appears thoughtful, rational, and in the here and now. We can usually tell which state a person is in by looking. Body language, vocabulary, and gestures are clues to each state. The Adult grows from the child’s innate curiosity. Both Adult and Child are internally derived, whereas the Parent is externally derived. One of the important functions of the Adult is to update the Parent. A secure youngster is one who finds that most Parent data is reliable: “They told me the truth!”

The functions of all three states will appear in the following chapters. For a more detailed explanation of Parent, Adult, and Child, we encourage you to review Chapter 2 of *I’m OK—You’re OK*.

This Is a Recording

Startling realism is conferred on the foregoing descriptions by the findings of the late Dr. Wilder Penfield of McGill University. His hundreds of experiments in evoking artificial recall by applying a galvanic probe to the exposed brains of persons undergoing surgery for focal epilepsy provide convincing evidence that the past is recorded in time sequence and in detail.^{fn3} He discovered that the electrode probe evoked one single recollection from another, not a mixture of memories or a generalization. He discovered the memory record continued intact even after the subject's ability to recall it had disappeared. His experiments led to four conclusions of great significance to the understanding of feelings.^{fn4}

1. The brain functions as a high-fidelity recorder of the events of our lives, the most deterministic of which occurred in early childhood. These recordings are in sequence and continuous. "Whenever a normal person is paying conscious attention to something," said Penfield, "he simultaneously is recording it in the temporal cortex of each hemisphere."

2. The *feelings* which were associated with past experiences also are recorded and are *inextricably locked* to those experiences.

3. Persons can exist in two "places" at the same time. You can be physically present with someone in the here and now, but your mind can be miles and years removed. One of our problems in relationships is that "something" removes us from the present and we are not whom we're with.

4. These recorded experiences and *feelings associated with them* are available for replay today in as vivid a form as when they happened, and they provide much of the data that determines the nature of today's transactions. Events in the present can replicate an old experience and we not only remember how we felt, but we feel the same way. We not only remember the past, we relive it. We are there! Much of what we relive we don't remember.