

Book Review by Marye O'Reilly-Knapp

Relational Patterns, Therapeutic Presence: Concepts and practice of Integrative Psychotherapy by Richard G. Erskine

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In his latest book *Relational patterns, therapeutic presence: Concepts and practice of Integrative Psychotherapy*, Richard Erskine presents his theory and methods of Integrative Psychotherapy. As he signed a copy of the book Richard said to me that I already knew what was in the book. It is true that there is lots I know about his theory and methods, and indeed I should. Through countless seminars, residential workshops in Kent, and many discussions with Richard, as well as my work with clients and my own psychotherapy with him where I have “lived” Integrative Psychotherapy, I indeed know a lot. What is exciting and validating for me is that the same concepts that I was first introduced to over thirty-five years ago are still as valid today as they were back then - they have stood the test of time. The focus on intra- and inter-subjective contact, relational patterns, and therapeutic presence along with the four dimensions of human functioning - affective, behavioral, cognitive, and physiological, form an integrative frame of reference. The psychological constructs of ego states, transference, and script, together with the methods of inquiry, attunement and involvement add to the framework of a therapeutic relationship. The integrating of the personality with the use of integration of psychotherapeutic theories, allows for a major goal of Integrative Psychotherapy to be realized – “ to use the therapist-client relationship – the ability to create full contact in the present- as a stepping stone to healthier relationships with other people and a satisfying sense of self.” (p. 22). Richard’s life work has truly reflected his contributions to the field of psychotherapy.

Although the concepts are familiar to those who have read or studied Integrative Psychotherapy, this book provides us with essays that were developed over the years to expand our own knowledge base in Integrative Psychotherapy. For me in my professional growth what has been very important to me in my professional growth is to take ideas and to be able to use them in my work with clients. I do this by reading and re-reading, working and re-working information with my own thoughts. This book gives me the opportunity to learn new ideas and go back over more familiar ones. For instance, Richard lists eight philosophical principles which “serve as the foundation” for his theory and methods “of a relationally focused psychotherapy.” As I wrote this, I re-read this

section of the book. The five pages filled me with appreciation and gratitude for the privilege and honor it is for me to work with my clients. I gained a lot by reading and reflecting on the words found in the introduction to the book. Whether a beginner, a trainee, or one who has many years in psychology and psychiatry, this book provides a compilation of theoretical concepts that provide an inter-subjective process of psychotherapy that is profoundly respectful and healing.

The first chapter, *Integrative psychotherapy: theory, process, and relationship* provides a wonderful summary of the theory and methods of Integrative Psychotherapy. Richard also describes how his ideas first developed in the early seventies. In chapter two, *A therapy of contact-in-relationship*, inquiry and attunement are discussed more fully. The discussion of asking questions versus inquiry is very beneficial in identifying specifics for inquiry as a valuable therapeutic intervention. The examples given clarify the therapist's role in expanding the client's awareness and avoiding interruption of the discovery process. The "attunements" – affective cognitive, developmental, and rhythmic are considered in this chapter as well as attunement errors. The next chapter, *Attunement and involvement: therapeutic responses to relational needs*, continues with attunement to the relational needs and the therapist responses to these needs. I found it was helpful to once again review the eight relational needs of IP. The second part of this chapter was on therapeutic involvement that centers on acknowledgement, validation, normalization, and presence. For me, fine-tuning my use of inquiry, attunement, and involvement has helped me be present with the client in his journey. In chapter four, *Psychotherapy of unconscious experience*, a condensed version of Freud, Berne, Gestalt therapy, Rogers, Reich, and Kohut's descriptions of the unconscious is distinguished by Richard's view of the unconscious as " an expression of developmental and neurological processing of significant experiences." (57). He goes on to differentiate between the forms of unconscious memory – preverbal, never verbalized, unacknowledged, non-memory, and avoided verbalization. As therapist, it is important to be able to delineate the differences between these forms, and this section gives some beneficial guidelines. A case study helped highlight how what was once unconscious became conscious. In dealing with the unconscious, other areas identified were the five pre-reflective patterns of self in relationship - attachment styles, body language, relational needs, script beliefs, and introjections. For me, this chapter outlined the essentials for an in-depth psychotherapy while working with the unconscious.

Erksine's four chapters on script, Chapters 5 through 8 give a seamless presentation of what you need to know about the script system. Titled "*Life*

scripts and attachment patterns: theoretical integration and therapeutic involvement”, Chapter 5 describes life scripts. There is an overview of the literature after which attachment patterns are elaborated. I found this discussion of the five attachment patterns – secure and insecure (which involves anxious ambivalent, avoidant, disorganized, and isolated) to be summarized in a well-defined way. In the segment on “General considerations” and “Therapeutic involvement” it was if I could hear Richard’s voice as I read this part of the chapter. Chapter 6 “*Life scripts: unconscious relational patterns and psychotherapeutic involvement*” addresses the unconscious processes in life scripts, differences in explicit, declarative memory and implicit, sub-symbolic memory. This chapter reminds me of being on a river cruise I just took in December on the Danube. We stopped at different ports and each place I learned something new and exciting. In the different parts (ports) of this chapter - injunctions and decisions, cumulative mis-attunements, implicit memory, body script, introjection, transference – there were ideas for me to add to my knowledge base. This is exciting to me. The chapter ends with a case study that I found useful in demonstrating unconscious relational patterns. For the next chapter (Chapter 7) “*The script system: an unconscious organization of experience*”, I must tell you I am biased. This is because I wrote this paper with Richard in 2010. I remember our discussions on the phone regarding the manuscript. I also remember the times we took at Kent to go over (and over and over) the text. The case study represents the components of the Script System and therapeutic interventions. Many of the candidates for IIPA evaluation have told me that this paper was helpful for them. I learned a lot and I hope you do too as you read this section of the book. The final section on life script is Chapter 8 “*Psychological functions of the life scripts.*” The six dimensions of the psychological function of life scripts are listed as: self-regulation, compensation for relational needs, self-protection, orientation of self to others, insurance against potential disruptions and loss of relationships, and maintaining integrity. These six components are skillfully defined by Richard and give us a valuable image of the script functions.

Two quotes, one on life script and the other on life script cures sum up this section:

Life script: “Life scripts are a complex set of unconscious relational patterns based on physiological survival reactions, implicit experiential conclusions, explicit decisions, and/or self-regulating introjections, made under stress, at any developmental age, that inhibit spontaneity and limit flexibility in problem-solving, health maintenance and in relationship with people” (p.78).

Life script cure: “ ... to do a thorough life script cure, it is necessary to provide a developmentally focused relational psychotherapy that integrates affective, behavioral, cognitive, and physiological dimensions of psychotherapy while paying particular attention to the client’s unconscious communication of sub-symbolic and pre-symbolic relational experiences that are revealed through their style of self-regulation, core beliefs, metaphors, avoidance, stories and narrative style, and transference both with the psychotherapist and in everyday life”. (p.79).

Chapter nine, “*Integrating expressive methods in a relational psychotherapy*” focuses on the concept of therapeutic involvement. Richard discusses working within the transference/ countertransference matrix and also working with a second position of resolving intra-psychic conflicts and archaic decisions. Specific approaches are given for you and me as therapists to be involved with the client. I especially found the transcript to be very useful because it addresses ways in which the therapist can be effective in dealing with such areas as acknowledgement, empathy, shame, body language, truth telling, therapeutic highlighting and the therapist’s responsibility for therapeutic errors. Richard writes: “An effective, relationally focused integrative psychotherapy continually weaves the client’s and psychotherapist’s experiences of their relationship in the present moment with an exploration of the emotional and self-stabilizing results of past relationships in the client’s life” (p. 141). For me this chapter reflects our values as integrative psychotherapists and the essence of therapeutic involvement and commitment to the client’s welfare.

In the next chapter, “*Bonding in relationship: a solution to violence?*” the importance of relational needs as components of bonding and relationship are examined. When relational needs are not met over and over again the results may be depression and violence. Working with “Stanley” within the therapeutic relationship highlights the absence of connection with both mother and father and his distrust of others. His violent fantasies in his second and third year of psychotherapy along with the “Author’s postscript” bring out important considerations in working with violence in the clinical setting.

Within Chapter eleven, “*A Gestalt therapy approach to shame and self-righteousness: theory and methods,*” shame and self-righteousness are considered. Both are defined as protections, where shame as the experience of an unaware, longed for hope for relationship and self-righteousness as the denial of the need for relationship place the concepts within a relational context. This is what makes the writings in this chapter so powerful and meaningful. It gives the framework to genuinely inquire within a therapeutic relationship and to work with a client’s humiliation and self-esteem issues. The last part of the chapter

concentrates on psychotherapeutic interventions. One part I have used over and over is Richard's summary of "affect as transactional-relational ...requiring a corresponding affect in resonance" (p.190): for sadness – compassion; with anger – to be taken seriously; with fear- security; for joy- pleasure. See the text for a detailed description of affect reciprocity as well as involvement for effective psychotherapy approaches to shame and self-righteousness.

In Chapter twelve, "*The schizoid process*" a consideration of the "fear-laden affect state" (p. 195) Richard refines ideas previously discussed by other theorists such as Berne, Fairbairn, Goulding, Guntrip and Winnicott inform the reader of the schizoid process. For anyone working with a client who is in an in-depth psychotherapy, I believe this chapter is essential reading because it reinforces the integrative psychotherapy methods necessary for working with the experiences of an emerging self.

The next three sections are parts of a case study trilogy which appeared in the *International Journal of Integrative Psychotherapy* in 2011. Chapter thirteen "*Early affect confusion: the "borderline" between despair and rage*" starts with a client's request for therapy. A description of the first year with "Theresa" profiles the "calm, consistent, dependable and validating" (p. 203) relationship needed for the therapist to maintain a therapeutic relationship with someone who is disorganized, terrified of connection and at the same time longing for contact. The next chapter, "*Balancing on the "borderline" of early affect-confusion*" documents working with the client within the second and third years of therapy. The last chapter in this trilogy "*Relational healing of early affect-confusion*" describes years four and five of psychotherapy. These three sections taken together are a remarkable account of the relational conflicts both within the client (intra-psychic) and within the therapeutic relationship (interpersonal). In this case study Richard gives us a wonderful paradigm of his consistent attempts to understand his evident compassion for Theresa and his sustainment of the therapeutic relationship. For me these chapters are a reminder of the honor it is to be trusted with a very precious part of the human being, the psyche. Thank you, Richard.

The last six chapters of *Relational Patterns, Therapeutic Presence: Concepts and Practice of Integrative Psychotherapy* present additional areas for therapeutic consideration. Chapter sixteen "*Introjection, psychic presence, and Parent ego states: considerations for psychotherapy*" presents a systematic account of works by Freud, Bruer, Fairbairn, Watkins, Berne and others who worked with intra-psychic states of the ego. The exploration of the ego and states of the ego continues with a well-defined description that "Parent ego states are an actual historical internalization of the personality of one's own parent or other

significant parental figures as perceived by the child at the time of introjection” (p. 238). Next follows a thorough analysis of the four determinants necessary for the diagnosis of an ego state, and the correlation of the four to determine which ego state is active at the time. These four components are the behavioral, social, historical and phenomenological. A breakdown of the introjected Parent ego state into active or intra-psychically influencing and the inclusion of the fantasy parent or “self-generated parent” are examined to further assist in differentiating ego states. The last part of the chapter explores treatment planning and what is needed for an in-depth psychotherapy of the Parent ego state.

In the next chapter “*Resolving intrapsychic conflict: psychotherapy of Parent ego states*”, co-authored with Rebecca Trautmann, a case study is presented. Annotated comments regarding the process of psychotherapy are included in “Anna’s” work. While reading this chapter I felt like I was actually present while Anna spoke as her mother. The interpretations as the work progressed helped to understand the therapeutic process and to appreciate some of the tenets of Integrative Psychotherapy: genuine interest in the client’s experience, therapeutic inquiry, encouragement and support, ongoing contracting between client and therapist, the alleviation of intra-psychic conflict. Both this chapter and the preceding one offer the clinician a comprehensive framework for working with the Parent ego states.

In Chapter eighteen, “*What do you say before you say goodbye? Psychotherapy of grief*”, the focus is on giving sorrow “words” as stated in the beginning quote by Shakespeare and dealing with both the incomplete “hello” and “goodbye”. This section adds to the literature on grief and loss by dealing with clients who face major losses in their lives and the significance of inter-subjective contact for the healing process. Case examples clearly demonstrate the results of an interpersonal approach in dealing with loss and grief. Methods such as “truth telling” and the “empty chair” are used as means to facilitate unfinished business and disavowed feelings. The ultimate purpose of psychotherapy of grief is an interactive psychotherapy that “restore[s] the individual’s capacity to have an honest and meaningful hello before engaging in a genuine goodbye” (p. 313).

Chapter nineteen, “*Nonverbal stories: the body in psychotherapy*” centers on body sensations and affect in psychotherapy in order to construct “a verbal narrative that reflects the body’s story” (p. 319). Body-oriented methods are discussed along with ethical considerations when doing bodywork. Attention is given to a body oriented therapy without the use of touch while the next part takes into account healing touch. This is a powerful chapter in that it gives guidelines for therapeutic touch within a relational psychotherapy. Integrative

Psychotherapy's model "Self-in-relationship system" outlines the domains of cognitive, affective, behavioral, and physiological – all significant and integral for full contact. This chapter takes into account the biological component and advances the information in previous writings in Integrative Psychotherapy on bodywork within a relational psychotherapy.

The last chapter, Chapter twenty "*Narcissism or the therapist's error?*" talks about a client who is seen for possible psychotherapy. "Philip" was having a great deal of difficulty at work and was referred by the firm for at least two years of psychotherapy. A three-session evaluation is described. As I read the last chapter my initial reaction was to think that this was a strange place for this chapter – at the end of the book. As I thought more about this I realized that the last chapter ends like a lot of Richard's teachings end. The many times I have been with him and heard him lecture or in supervision he invites others into the experience by asking the question – what would you do?

The reading of this book is certainly not the end for me. I will go back and re-read different parts. The writings are rich in theory and methods within a relational therapeutic process. As Joshua Zavin wrote in the forward to the book " these articles are the product of a steadfast quest to keep developing his ideas on theory, clinical practice and human relationships." This book is another of the many rich resources we inherit from Richard Erskine.

Author:

Marye O'Reilly-Knapp, PhD, RN is a board certified Clinical Nurse Specialist in psychiatric and mental health nursing, certified Clinical Transactional Analyst, and certified Group Psychotherapist. She was a member of the Professional Development Seminar in Kent, Connecticut, a Founding Member, and Teaching and Supervisory faculty member of the International Integrative Psychotherapy Association.

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