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The Family Album and the Script

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A picture is worth a thousand words.

(a saying)

In this article a family album is understood as a carefully catalogued set of photographs or other visual materials illustrating the life of a given family (Photo 1).

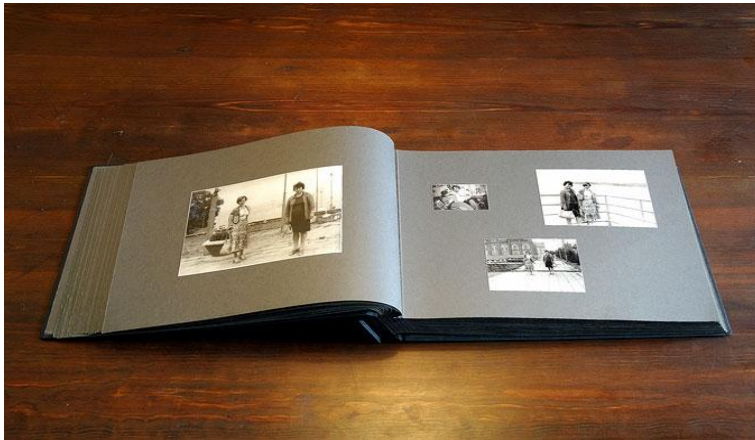


Photo 1. A family album

Source: http://www.google.pl/imgreshl=pl&biw=1280&bih=457&tbm=isch&tbnid=eJYmYfbrw2NqfM:&imgrefurl=http://www.photoproxima.eu/blog/tag/album-rodzinny&docid=KVtGUVXe5VQYM&imgurl=http://www.photoproxima.eu/files/blog/b/7_grzeszykowska_album_berlin.jpg&w=676&h=428&ei=3BqbUsvkLYiDhQedj4CgBw&zoom=1&iact=hc&vpx=220&vpy=7&dur=625&hovh=179&hovw=282&tx=191&ty=124&page=3&tbnh=122&tbnw=195&start=32&ndsp=19&ved=1t:429,r:33,s:0,i:193, [accessed on 13.12.2013].

One of the authors specializing with family photography wrote:

When most people reach for their family albums filled with the pictures of the people they love, they experience a special kind of sentiment: while watching the photographs we are looking at people who are important to us and still alive, those who are dead (or maybe it should be said that it is they who are looking at us), and at ourselves when we were young and so different (Musello, 1979, as cited in: Olechnicki, 2009, p. 164; Sztompka, 2005, p. 63–64).

In this context other functions of family photographs are also frequently mentioned, such as communal, presentational, interactional or documentational, some of them being explicit and manifest while others hidden and unconscious (Olechnicki, 2009, s. 170–179). Pierre Bourdieu adds two more functions: a prestigious one (for example, displaying one's wealth or position) and an entertaining one (for example, showing ways of escaping from reality) (Bourdieu, 1996, p. 14–15). Sometimes the term 'family album' is used in a different, more metaphorical sense, for example, as a fictionalized set of historical recollections of one's family (eg. Kozub, 1980).

Pat Novey (Novey, 1999, pp. 149–154) was the first person who noticed the importance and significance of a family album in psychotherapeutic work on patients' scripts. According to him:

Childhood photographs of patients and their families can trigger past recollections and refer them to early childhood decisions which contributed to the appearance of script (Novey, 1999, p. 149).

Thanks to this, current life dilemmas can be reinvestigated helping clients to change their self-esteem, to initiate self-care and to develop coping strategies, which can all lead to the development of their more constructive and more autonomous lifestyles. Next Pat Novey shares his experiences and thoughts connected with using family albums while working with some clients. He says that he does not always use albums, but he finds it difficult to logically justify those decisions. He claims that he mostly trusts his intuition, which tells him that the process initiated by watching family photographs will be helpful and will not disturb the pace of therapeutic work. Maintaining the balance between two levels of work with clients seems very important to him: revealing the regressive Child Ego State and focusing on taking new decisions from the autonomous Adult Ego State. It seems, however, that clients are able to reach their goals much faster by using other methods, for example, ones adapted from the behavioural or cognitive approaches. He never begins work with a family album before developing good relations with the client. Novey notices that using this method proves especially useful when a client has problems with understanding the notion of his internal child.

The drama which takes place when a family album is used in therapy is often very intensive and unpredictable. Sometimes the very moment in which clients

inform families of their wish to take a family album to their therapeutic sessions marks the advent of open communication in the family. Novey writes:

Clients told me how helpful it had been to take out a family album and to share feelings they experienced while looking at photographs with other family members, talking about their feelings and recounting what they remembered from *those days* (Novey, 1999, p. 153).

The author shares his own personal experience from this area. He decided to hang his parents' wedding photograph in the room where group sessions took place. It was taken in 1920s when his mother was 18 and his father was 20 years old. When he looks at the photograph he smiles and invariably wonders how those two young people felt on that day. He can clearly see that his father, staring at his mother, looks hopeful, and his mother seems apprehensive. He aptly concludes: "Photographs are a part of our life, and that is why they are also a part of the therapeutic process" (Novey, 1999, p. 153).

The procedure recommended by Novey begins at the moment when he suggests bringing family photographs to the session when a client is ready for this. The photographs are not left with the therapist, but clients are asked to bring them to each session, as forgetting about it might indicate a defence mechanism, which reveals resistance. It is best if the clients' individual photographs were taken when they were aged between 3 and 6. During 25 years of his therapeutic work, Novey encountered only one client who had no such photograph of himself and was truly surprised that other people had them. When asked to bring one, he admitted that his mother had thrown all of them away. Although the author does not write about it, it is obvious that such information was a perfect opportunity to start work on reparenting. He noticed that clients often pay attention to their clothes in the photographs. One client said that she was wearing a dress she still kept, and which even her daughter used to wear. She added that her mother made a lot of clothes herself, and it was the only way in which she could express her love to her daughter.

In his own therapeutic work Novey also uses a soft velvet cushion on which he places one of the photographs. He wrote:

A client can hug the cushion or keep it close to himself. Many of my clients told me that they bought a similar cushion and kept it only for themselves (Novey, 1999, p. 150).

In the remaining part of the article Novey describes several cases of using family albums in his therapeutic work. However, these descriptions are so general that there is no point in describing them here. They only allow the reader to glimpse into the style of his therapeutic work.

The analysis of Novey's work prompted the author of this article to present his own therapeutic procedure. It consists of five stages in which he works on a script using the patient's family album and several techniques of narrative therapy.

Photographs and script

Photographs were first used in working on clients' scripts many years ago. Providing that certain conditions are fulfilled, in most cases this method brings positive results. Following Norway, I also believe that script analysis aided by family photographs should not begin before good relations between a client and a therapist are established and a constructive therapeutic contract is developed. If this does not happen, the effects will be negligible or none. The feeling that introducing a family album makes sense at a given point during therapy should be left to the therapist's intuition and experience. In many cases they are enough will certainly serve as reliable guidance in further therapy. It should be remembered that it is not a method focusing solely on the analysis of photographs (such an approach prevails in anthropological studies¹), but here photos are treated as a kind of a 'pretext' and an opportunity for the script to be revealed in the therapeutic process and therapeutic narration. Gillian Rose says:

Pictures can show things that cannot be conveyed by words, and that is why they can be used as a material developing or supporting the results of studies. However, pictures should always be accompanied by words (Rose, 2010, p. 301).

Therapeutic work can be divided into five mutually conditioned stages, which are presented below as separate levels of interactions, although, in fact, they often infiltrate each other constituting a coherent whole. It should be underlined that each stage in which family photographs are used is based on assumptions and procedures of narrative therapy (Morgan, 2011).

The introductory stage

The introductory stage serves as an initiation of the patient's readiness for sharing his family album and incorporating it into therapy. Using a family album should take place at the moment when the therapist finds it suitable in the context of the whole therapy, and, at the same time, when the development of the patient-therapist relation allows for it. One should not forget about other important factors, such as the level of mutual trust, the patient's willingness to cooperate and his conviction that it makes sense and will introduce a new, creative insight into his problems. Undoubtedly, a family album is not a faithful reflection of reality. According to Sławomir Magala:

¹ Gillian Rose notices that in the analysis and interpretation of different kinds of visual materials TV programmes are based on audience surveys, paintings are based on composition interpretations, commercials and advertisements are investigated by semiology, psychoanalysis is used in interpreting films, and photographs are typically analysed in anthropology, [in:] G. Rose, *Interpretacja materiałów wizualnych. Krytyczna metodologia badań nad wizualnością*, Wydawnictwo Naukowe PWN, Warszawa 2010, p. 53.

It is obvious that such record is not totally realistic – it is always only a frame for memories or plans, always a skeleton onto which moods and feelings are wrapped (Margala, 1982, p. 59).

This aspect of family albums offers a unique opportunity of incorporating them into script analysis.

The literal stage

During this stage a series of elements visible in the photographs should be conscientiously identified. A following procedure, offered by John Collier (Collier, 1995, p. 222) will be helpful: (a) the detailed identification of persons presented in the photographs: their names, surnames, their relations towards each other, their social roles and personality traits, (b) the identification of the place where the photograph was taken, (c) rituals and ceremonials accompanying the moment presented in it (e.g. a wedding reception, coming back from abroad, etc.), (d) information referring to the events from the past (e.g. how the young couple met, how long they had been abroad, etc.) and to the present situation (e.g. the history of their marriage, where they lived, etc.). It is also important to learn who and why took the photograph. Family photographs usually depict people important for patients, but also indicate their relations.



Photo 2.

Source: <http://www.psycholog-krakow.net.pl/> [accessed on 30.12.2012].

For example, the photograph above (Photo 2) clearly emphasises the father and the mother in the foreground. Three sisters are standing in a row, although it

is hard to say which one is the oldest and which one is the youngest. One of them is touching the mother, another is touching the father, and the third is standing in the middle. Does any of this matter?

A variation of this therapeutic stage is to ask patients to bring only one photo from their childhood, which, in their opinion, is the their best reflection from this period.

The comparative stage

The stage during which various elements of family albums are compared arouses patients' curiosity and analytic approach, motivates them to obtain a deeper insight into the reality which they investigate by looking for differences between particular elements of photographs and attempting to provide answers to the questions that appear in this process. The questions should aim at highlighting similarities and differences. It is difficult to list the elements which should be compared, yet it is convenient to bear in mind a simple rule stating that elements which automatically draw our attention are often very important.

Similarities may refer to people, situations or the emotional climate of the photographs. Let us consider several examples. Photo 3 presents two women who are strikingly similar. The story accompanying this photograph reveals that they are a mother and an adult daughter. They are not only very similar in terms of physical appearance, but also generation differences between them are blurred (the same colour of dyed hair, similar clothes, dark glasses, etc.), which may be significant in script analysis. The woman in the background is the mother (aged 59) and the woman in the foreground is the daughter (aged 40).



Photo 3. The photo entrusted by a patient (from the author's collection)

Source: from the author's collection.

Other examples of similar congruity were taken from the Internet sources (Photos 4 and 5). They show stylized, that is consciously created and anticipated, similarities between mothers and daughters. This kind of stylization may evoke script of an obviously narcissistic personality. The child is presented in such a way as to enhance the mother's self-esteem by making her look younger and more attractive.

Making a child intentionally similar to a parent is included in the driver 'Please others!' This can be made more precise by saying: 'Please me by being like me'. This might be the confirmation of a widely held belief that narcissistic parents breed narcissistic children.



Photo 4.



Photo 5.

Source: http://dziecko.onet.pl/2020,1,1,matka_i_corka_jak_dwie_krople_wody.galeria.html [accessed on 06.11.2012].

Sometimes similarity between family members presented in the photographs is absolutely striking.

Photo 6 shows grandmother Roswitha at the age of 8 (the photograph was taken in 1944). Photo 7 shows Romina at the same age but 59 years later (it was taken in 2003). Even allowing for obvious stylization and natural similarity resulting from blood relations, their facial features and the eyes do not seem accidental and may indicate the source of script message. Similarly, the names and their first letters, **R**oswitha and **R**omina, are also important and do not seem accidental.



Photo 6.



Photo 7.

Source: M. Franke-Gricksch, *Brückenschlag zwischen Schule und Elternhaus*, [in:] „Tagungsjournal“, 2004, No 2, p. 9.

The photographs which are to be compared can also show differences in frames. (Photos indicated as 1 and 2 in Photo 8). This apparently tiny detail from the patient's narration may turn out significant. The arrangement of people changes when a new person appears (Photo 8). Does it mean something? We can find the answer to this question only on the basis of accompanying narration.



Photo 8. Comparing photographs in the family album

Source: http://www.google.pl/imgreshl=pl&biw=1280&bih=457&tbn=isch&tbnid=WR08NdNO_zlIXM:&imgrefurl=http://www.photoproxima.eu/ciemnia/bo-panie-beda-juz-wiedzialy-co-z-tym-zrobic.html&docid=fOm7qqVWXho9DM&imgurl=http://www.photoproxima.eu/editor/image/CIEMNIA/albumy_3.jpg&w=1301&h=868&ei=3BqbUsvkLYiDhQedj4CgBw&zoom=1&iact=rc&page=2&tbnh=145&tbnw=198&start=12&ndsp=20&ved=1t:429,r:12,s:0,i:124&tx=106&ty=91 [accessed on 13.12.2013].

It may turn out that similarities and differences mentioned by the patient do not seem significant, but if a therapist displays his genuine curiosity and keeps on asking specific questions (the basis of narrative techniques), it is more than likely that new information, forgotten events or a fresh perspective on the evaluation of the patient's life situation will frequently emerge.

The variation in which we have only one photograph from early childhood evokes comparisons between now and the moment in which it was taken as well as between the patients' current situation and their early life determinants. It is a look from the perspective of accumulated present experiences and memories from one's distant past. In a special way this moment identifies one's life script: an unconscious life plan based on early childhood decisions and illusions. It is not possible to unambiguously determine whether a person remains under the influence of script at present, although there are two factors which can be helpful: if the patients perceive their current situation as stressful, and if there are similarities between their current situation and stressful situations from their childhood.



Photo 9. A photograph selected by the patient

Source: from the author's collection.

Promising results can be obtained by convincing the patients to build a narration in which they address themselves in the photograph as if they were talking to a living person. This narration should be spontaneous, although, if necessary, prompted by the therapist's questions, such as:

How do you feel looking at the photograph?

What was the person in the photograph thinking about when it was being taken?

What did her parents make her do?

What did she want to avoid?

Did she make any decisions then? etc.

This kind of narration can be rounded up by asking the patients to write a letter from them as adults to the child in the photograph. The letter should be addressed directly to the child (e.g. Dear Betty) and signed by an adult (e.g. Yours adult 40 year old Elizabeth). The letter may be used as a basis for further therapeutic work in the last stage of reaching redecision.

Photographs sometimes hide a kind of a script secret, which can be solved only after many years. Photograph 10 was taken in 1948 in Poland. A young soldier fell in love with a slightly older girl and gave her his photograph. Then, their lives went along two separate paths. An elderly owner of the photographs claims that it has always had and still has a great influence on her life. She often looks at it and thinks of the boy who has not become her husband. In difficult moments of her life she looks at the photograph and goes back to the moment when she was loved by someone. Overleaf (Photo 11) a young soldier drew a heart and said that it contained a coded important message. The woman has not been able to decipher this intriguing message. After listening to the story, the therapist, to his amazement, solved the puzzle and read (it was enough to look at it from a certain angle): 'I remember and I love you'.



Photo 10. The photo of a soldier



Photo 11. The reverse of the photo of a soldier

Source: from the author's collection.

Family photographs can sometimes reveal the irrationality of aggravating script messages acting as a curse (James, Jongeward, 1994, pp. 119–121) for many generations. It is a kind of an illusion, which can last long and exert an impact on many generations, as in the example below. An 100-year-old photograph shows a funeral of a small child (Photo 12). In the patient's family it is a proof of a curse. When we look at the photograph, we can see that all adults look earnest and grave, as is expected at a funeral. One person is making a strange grimace (the one standing behind a woman wearing a bright coat). It is hard to say what it means, but for the next three generations of the family parade (James, 1984, pp. 18–28) it was interpreted as a smirk and a proof of a curse. According to family stories, this is a woman who, as a young girl, was jilted by the father of the child and wished him the death of his future children. It became a self-fulfilling prophecy. After the death of the child from the photograph, two more children in this family died. The owner of the photograph (a women aged 20) is named after the dead child, but dislikes her name and would like to have a different one. She claims that the story connected with the photograph and passed from generation to generation is still highly significant for her. It exemplifies how heavy a burden this kind of family messages might be.



Photo 12.

Source: from the author's collection.

The alternative stage

During this stage an alternative story is created based on the narration built earlier while watching, comparing and analysing the photographs from the fam-

ily album or the photograph from the patient's childhood. It is an important stage of the therapeutic process which allows patients to develop **counterscript**, that is a story serving as an alternative for destructive family messages. It should be noticed that in narrative therapy creating family stories without using photographs is known as a thin description. Creating new alternative narrations on the basis of a single photograph or family photographs makes it possible to obtain a 'rich' or 'dense' (Morgan, 2011, pp. 14–15) alternative story. This change is obtained by providing a greater number of more detailed strands of the patient's life or embedding them in the broader context, as well as by noticing situations or events which are not consistent with or contradicting previously dominating life stories. It also allows the therapist and the patient to follow the history of the patient's problem from a given time perspective and recognize its effects and further consequences. It helps the patients to analyse their scripts, notice the consequences of their early childhood decisions and deconstruct them undermining their alleged 'certainty' 'inevitability' or 'obviousness'.

During the deconstructing process the therapist must not impose on the patients his own views or question their parents' behaviour. It also seems important to discover situations in which script had a weaker or even no influence on the patient's life. Creating an alternative narration can be achieved by so called remembering conversations, in which a patient thoughtfully recaptures particular persons or events presented in the photographs in the family album commemorating their role and importance in his life. Those persons constitute a specific 'club' (this term is used in narrative therapy) to which patients can invite but also exclude members. Re-remembering conversations make recollections and narrations referring to relations with other people more accessible and meaningful.

The therapist can also encourage patients to create alternative stories from a point of view of another significant person appearing in the photographs in the family album, such as a member of the closest family (mother, father, brother, sister, grandfather, grandmother) or a distant relative or an acquaintance. This can also be a less familiar person, alive or dead, functioning as an external observer. Summing up, it can be repeated after Alice Morgan, that

Narrative therapists are interested in creating alternative stories of human life, with rich descriptions and interwoven with the stories of other people (Morgan, 2011, p. 15).

The rededecision stage

The procedures described above can (although, of course, do not guarantee to) lead to a rededecision. Its guidelines were developed by Bob and Mary Goulding (Goulding, Goulding, 1978, pp. 132–135; Goulding, Goulding, 1976, pp. 41–48; Goulding, Goulding, 1979) and consist of replacing an early self-restricting script decision with a new decision which accommodates patient's adult resources and takes into account the following perspectives: *retrospective* (focusing on past experiences), *current* (replacing current dysfunctional behav-

aviours with new behaviours) and *future* (taking into consideration distant consequences of the new decision).

When a rededcison is to be taken during group work, it might be beneficial to use a method of external witnesses, which is a procedure used in narrative therapy. People listening to the therapeutic conversation act out clearly specified roles of witnesses. Four stages of this process are as follows: creating an introductory narration in which external witnesses repeat the conversation while the patient is listening, creating a new, richer narration by the patient, discussing the whole procedure together, and, finally, making a rededcison. Such a declaration can become consolidated and strengthened by a form of a ritual record, for example, by creating a kind of a ‘document’ or a ‘certificate’.

The requirements of transactional analysis should be borne in mind when we focus on the role and tasks of a therapist in the procedure of combining work on patients' scripts using their family albums and narrative therapy. Working on counterscript threatens fixed introjections in the structure of the patient's Parent Ego State, as it contains fixed drivers and injunctions coming from real parents and constituting the script apparatus. It triggers a whole range of defence mechanisms and anxieties. It may evoke a loyalty conflict towards the patient's parents. In this situation the therapist should consistently maintain Adult Ego State, which will protect him from countertransference resulting from the permission for other Ego States to interfere (it especially refers to Controlling Parent or over-Protective parent). The therapist who works within the framework of ‘3 Ps’ (Berne, 1998, pp. 433–434, 452–453) will provide the patient with the **p**ermission to eliminate certain types of behaviour, with the **p**ower (**p**uissance, **p**otency) to confront the destructive elements of the script, and with **p**rotection against the consequences of opposing parents' injunctions².

It is not difficult to notice that the procedure presented above to some extent resembles a method in quantitative research described as ‘a photo interpretation interview’ (Kubinowski, 2011, pp. 228–228; Sztompka, 2005, pp. 66–70), in which respondents are shown a photograph to trigger their spontaneous interpretation. Photographs here play the same role as questions in a traditional interview and are used to initiate a conversation and focus its topic on the objects presented in it. The interviewer's role can be rather limited or more active, and

² It should be added here that the rules presented above were extended by Jean Clarke who added the rule of *practice*, which is used to consolidate new behaviour patterns, and the rule of *perception*, which recommends following and controlling everything that happens in the therapeutic relation. in: J.I. Clarke, *The Synergetic Use of Five Transactional Analysis Concepts by Educators*, “Transactional Analysis Journal”, vol. 26, No 3, 1996, pp. 214–219. Next Willem Lammers added the rule of *pacing*, (moving ahead), that is crossing one's frames of reference without fear, in: W. Lammers, *P for Pacing*, “Transactional Analysis Journal”, vol. 27, No 1, 1997, pp. 55–56.

a whole array of photographs can be used ranging from very general to very specific ones. In-depth interviews with photographs as prompts can be classified as the 'discursive interpretation', as the images make sense only in relation to their receivers. As Piotr Sztompka aptly observes:

A photograph is in a sense the same object as other objects and takes on a special meaning for people when it becomes a target of their experience (Sztompka, 2005, p. 92).

However, the main difference between those two approaches lies in their objective: therapy versus research.

Conclusions

The article delineated the possibility of combining two different psychotherapeutic approaches: transactional analysis and narrative therapy (Morgan, 2011). Their various elements lead to the reconstruction of the patients' biographies and the attempts at making redecisions of their earlier resolutions. The therapist's genuine interest in the patient's life and his appropriate questions (to which he does not know the answers) form the basis of successful interactions in these approaches. The therapist's only task is to create the framework for a given narration describing the patient's life. This story (this phrase is also frequently used in narrative therapy) is significant for the therapist as a string of significant events interconnected with each other in order to make specific sequences and taking place within a specified time period, at the same time constituting a coherent whole. Such life stories very often contain the elements of script. Working on the biographical dimension of script, whose various aspects can be found also in family albums, resembles the context found in situations of projective identification found in other therapies. According to Lidia Grzesiuk (Grzesiuk, 1997, p. 56), at the moment of projective identification the therapist becomes a specifically understood container of bad, disconnected parts of the patient's Ego or his objects. The therapist retains them for some time in order to 'give them back' later in the form of a conversation focusing on such experiences. What the patient receives from the therapist is free from pathological aspects and easier to accept and integrate with the patient's experience or parts of his good Ego or his internalized objects. Something similar may happen while working on patient's script with the use of his family album. It resembles hermeneutic approach frequently illustrated by the so called hermeneutic circle (Krüger, 2007, p. 239), where the movement is performed around the circle. We begin with an introductory understanding, at which we arrive without any primary premises although we are aware of our background knowledge. Then, we go through consecutive approximations taking into account the appearance of new and supplementary elements, and, finally, we reach understanding. In our approach single

elements can be inferred from the whole album or the other way round – the whole of the exposition can be understood only on the basis of its components³.

An attempt to combine the transactional approach with interpretative narrations presented in this article is not unusual. Barbara Pietkiewicz draws attention to the links between script analysis and a narrative outlook on life through so called phantasm (a certain dramatic structure in a form of a scenario acted out not only in one's mind but also in life). She writes:

I would like to spend some time on the theory inspired by psychoanalysis, but heading in a slightly different direction: the clinical narrative theory, that is the theory of life scripts developed by Eric Bern, the creator of Transactional Analysis (Pietkiewicz, 2002, p. 140).

She further provides a detailed description of the connections between a narrative nature of script as a life scenario and the elements of the script apparatus. Concluding, she categorically claims that

The structure of knowledge and the structure of experiencing the world by the patient are of narrative nature. It means that the world referring to Ego and emotionally significant for a given person is recorded in his mind as a general scenario of an important story (or several stories) (Pietkiewicz, 2002, p. 150).

Later she adds:

Psychoanalysts and Transactional Analysis therapists try to reach the main scenario, try to verbalize it and – by showing it to the patient – in different ways help him to overcome his current limitations (Pietkiewicz, 2002, p. 150).

Krystyna Sztuka perceives this issue in a similar way, paying additional attention to the role and significance of alternative life scenarios (Sztuka, 2003, pp. 64–70). She writes:

The script theory assumes, first of all, limiting the number of possibilities of making life choices, while narrative concepts clearly focus on the person's agency and his ability to build different stories on the basis of the same facts (Sztuka, 2003, p. 70).

Those alternative schemes of one's life allow a person to look at his life from a new, creative perspective and to view many facts differently (both as far as he himself is concerned and as far as other people are concerned). It seems that multi-faceted narrative ways of working on script create a new and promising area of research, in which much remains to be discovered.

³ Krystyna Ablewicz aptly observes that it would be more sensible to use the phrase 'hermeneutic spiral' instead of 'hermeneutic circle', as: "The point crowning understanding is not the same as the point at which we begin, but passes it and becomes a seed of the next circle of thought", [in:] K. Ablewicz, *Hermeneutyczno-fenomenologiczna perspektywa badań w pedagogice*, Wydawnictwo Uniwersytetu Jagiellońskiego, Kraków 1994, pp. 31–32.

Maybe it is the last moment when a family album can fulfil the role we want it to fulfil. The advancement of digital photography has marked a new era. On the one hand, taking and displaying photos is much easier and less-time consuming than before, but, on the other hand, people are no longer eager to create family albums understood as carefully catalogued sets of visual materials illustrating and documenting the fortunes of their families.

Contemporary albums – Krzysztof Olechnicki writes – are less durable, but what is worse, often non-existent at all. Most people seem contented with storing their photos on optical record carriers or hard discs of their PCs (Olechnicki, 2009, p. 165).

Thus, it might be the last moment in which family albums in their traditional sense can be analysed. In the past photographs were taken with greater care, were stylized and carefully arranged and selected, while nowadays digital snaps are often like reports, taken spontaneously without due care given to location and frame but with the intention of capturing the events in the process of their happening. New phenomena appear, such as displaying private photos of oneself and one's family members in the Internet photoblogs, chat rooms or social networks (Olechnicki, 2009, pp. 164–312). This way one's private life and one's family members become more transparent and easily accessible for everyone. These phenomena are certainly interesting for sociologists and culture researchers, but should also be noticed by therapists for whom they might provide numerous manifold meanings. However, as long as people keep traditional family albums, it is advisable to use them while working on life scripts.

Summing up, it can be said that using family albums to conduct a script analysis in a therapeutic context strongly confirms the belief that a human being consists mostly of the language and memory.

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Album rodzinny a skrypt

Streszczenie

Artykuł ukazuje możliwości zainicjowania pracy nad skrypciem pacjenta, z wykorzystaniem albumu zdjęć rodzinnych. Następuje to według pięciu kolejnych faz bliskich terapii narracyjnej. Pierwszy etap wstępny przygotowuje do wykorzystania albumu. Etap drugi pozwala ustalić osoby pojawiające się na zdjęciach. Faza kolejna służy wieloaspektowym porównaniom zdjęć i poszukiwaniu znaczących faktów w biografii jednostki. Etap czwarty sprowadza się do tworzenia alternatywy zdarzeń w historii życia danej osoby. Faza końcowa ma doprowadzić do redycyzji wczesnodziecięcych postanowień. Być może ze względu na inny obecnie charakter gromadzenia zdjęć rodzinnych i ich prezentacji jest to już ostatnia chwila, w której taki sposób pracy nad skrypciem w procesie terapii może spełnić rolę, jaką od niego oczekujemy.

Słowa kluczowe: skrypt życiowy, album rodzinny, skrypt, terapia narracyjna.