

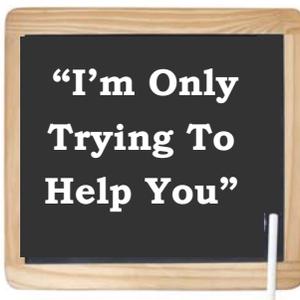
## Special points of interest:



Original contribution to  
Transactional Analysis about  
Trying-To-Help.  
See Vol. 1, No. 15  
of the The Encounterer.

## Inside this issue:

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## "I'm Only Trying To Help You"

In his book Games People Play Dr. Berne writes about the game of "I'm Only Trying To Help You." The index lists this game in several places: pages 77, 84, 88, 89, 120-121, 143-147, 148-150, 155, 159, 160.

I will start on page 143.

**Dr. Ernst's notes and comments are shown in blue.**

Dr. Berne:

### **"I'm Only Trying To Help You"**

*Thesis. This game may be played in any professional situation and is not confined to psychotherapists and welfare workers. However, it is found most commonly and in its most florid form among social workers with a certain type of training. The analysis of this game was clarified for the writer under curious circumstances. All the players at a poker table had folded except two, a research psychologist and a businessman. The businessman, who had a high hand, bet; the psychologist who had an unbeatable one, raised. The businessman looked puzzled, whereupon the psychologist remarked facetiously: "Don't be upset, I'm only trying to help you!" (\* #1) The businessman hesitated, and finally put in his chips. The psychologist showed the winning hand, whereupon the other threw down his cards in disgust (\* #2). The others present then felt free to laugh at the psychologist's joke, and*

*the loser remarked ruefully: "You sure were helpful!" (\* #3). The psychologist cast a knowing glance at the writer, implying that the joke had really been made at the expense of the psychiatric profession. It was at that moment that the structure of the game became clear.*

*The worker or therapist, of whatever profession, gives some advice to a client or patient. The patient returns and reports that the suggestion did not have the desired effect. The worker shrugs off this failure with a feeling of resignation, and tries again. If he is more watchful, he may detect at this point a twinge of frustration, but he will try again anyway (\* #3). Usually he feels little need to question his own motives, because he knows that many of his similarly trained colleagues do the same thing, and that he is following the "correct" procedure and will receive full support from his supervisors.*

**\* #1: This is a clear statement of the GIMMICK of the game. This case was more personal than that. EB won a farm in Arkansas with that hand. There were several times in latter 1959, early 1960 when seminar attenders were asked if they knew anyone wanted to buy a farm in Arkansas, which he acknowl-**

**edged having won in a poker game. In this instance this game ended with a GOW among those in attendance per above description.**

**\* #2: Gimmick line and game name, AIA [...] more specifically "You're Awful."**

**\* #3: "Anyway" -- He intends to GRO (get rid of) of the later criticisms, patient.**  
[Taking this as criticism is optional.]

*If he runs up against a hard player, such as a hostile obsessional, he will find it more and more difficult to avoid feeling inadequate (\* #4). Then he is in trouble, and the situation will slowly deteriorate. In the worst case, he may come up against an angry paranoid who will rush in one day in a rage, crying: "Look what you made me do!" (\* #5). Then his frustration will come strongly to the fore in the spoken or unspoken thought: "But I was only trying to help you!" (\* #6) His bewilderment at the ingratitude may cause him considerable suffering, indicating the complex motives underlying his own behavior. This bewilderment is the payoff. (\* #7)*

**\* #4: Here Eric Berne may be talking about the tough DMSO (Do Me Something) or AIA (Ain't It Awful) patient (player) with whom the IOTHY (I'm Only Trying To Help You)**

therapist (player) instead gets a GAF (get-away-from) or GNW (get-nowhere-with) payoff.

\* #5: "Look What You Made Me Do" game is also complementary to IOTHY.

\* #6: The game is played through TO PAYOFF at least once each session. Some stamps are accumulated by one OR both sides each time the game is played to payoff. The fact that the payoffs can and do increase in intensity, and perhaps in different corners of the OK Corral on different occasions is part of what game playing is about. The outcome depends on how the two parties, each with their gimmick (artful stratagem) play their gimmick and other game maneuvers. It is in the playing of these during the individual game that the nature of the payoff outcome is determined. Some players play their games like poker, others like chess.

\* #7: This bewilderment is the payoff on this final time of playing this game with this person; is collected by cashing in his stamps for it. [People collect, figuratively speaking, psychological stamps for various areas of concern. For example: brown stamps for ..., green stamps for ..., purple stamps for ... . Dad talked to us a lot about the Eric Berne seminars, stamps and all.; this, when we were very young.]

*Legitimate helpers should not be confused with people who play "I'm Only Trying To Help You" (ITHY). "I think we can do something about it", "I know what to do", "I was assigned to help you" or "My fee for helping you will be..." are different from "I'm only trying to help you." The first four, in good faith, represent Adult*

*offers to put professional qualifications at the disposal of the distressed patient or client; ITHY has an ulterior motive which is more important than the professional skill in determining the outcome. This motive is based on the position that people are ungrateful and disappointing. The prospect of success is alarming to the Parent of the professional and is an invitation to sabotage, because success would threaten the position. The ITHY player needs to be reassured that help will not be accepted no matter how strenuously it is offered. The client responds with "Look How Hard I'm Trying" or "There's Nothing You Can Do to Help Me." [TNYCDHM] (\* #8) More flexible players can compromise: it is all right for people to accept help providing it takes them a long time to do so. Hence therapists tend to feel apologetic for a quick result, since they know that some of their colleagues at staff meetings will be critical. At the opposite pole from hard ITHY players, such as are found among social workers, are good lawyers who help their clients without personal involvement or sentimentality. Here craftsmanship takes the place of covert strenuousness.*

\* #8: TNYCDHM as a game is related to the AIA (Ain't It Awful) group of games. AIA is one of the complementary games to "ITHY" (I'm Only Trying To Help You). Others include DMSO (Do Me Something), SWYMD (See What You Made Me Do). The Child-based LHIT (Look How Hard I'm Trying) is also complementary as noted in text above here.

*Some schools of social work seem to be primarily academies for the training of professional ITHY players, and it is not easy for their graduates*

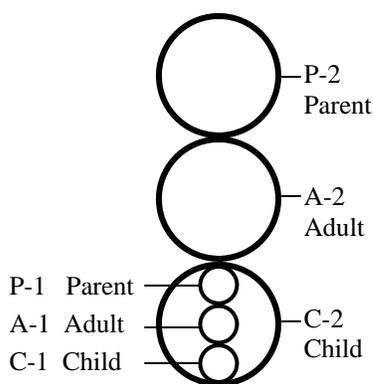
*to desist from playing it. An example which may help to illustrate some of the foregoing points will be found in the description of the complementary (\* #9) game "Indigence."*

\* #9: I was the first to introduce the concept and term of "complementary game" in the seminars, ca 1960. Up to that point games had been discussed as the transactions of one person. This occurred when I first presented a couple I was treating, describing in seminar the pair of games they played. To that point AND still "Why Don't You...Yes But" is talked of in the seminar as a single game although in this text EB is clearly aware of it being two separate games played within a paired matrix.

*ITHY and its variants are easy to find in everyday life. It is played by family friends and relatives (eg, "I Can Get It For You Wholesale"), and by adults who do community work with children. It is a favorite among parents, and the complementary game played by the offspring is usually "Look What You Made Me Do." Socially it may be a variant of "Schlemiel" in which the damage is done while being helpful rather than impulsively (\* #10); here the client is represented by a victim who may be playing "Why Does This Always Happen To Me?" or one of its variants.*

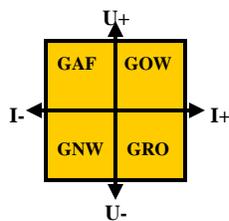
\* #10: "Helpful" to cover the impulsive damage?

*Antithesis. There are several devices available for the professional to handle an invitation to play this game, and his selection will depend on the state of the relationship between himself and the patient, particularly on the attitude of the patient's Child.*



1. The classical psychoanalytic antithesis is the most thoroughgoing and the most difficult for the patient to tolerate. The invitation is completely ignored (\* #11). The patient tries harder and harder. Eventually he falls into a state of despair, manifested by anger or depression, which is the characteristic sign that a game has been frustrated. This may lead to a useful confrontation.

\* #11: "Ignored" is precise; i.e. as defined in the OK Corral, patient playing this game ends with a GNW, gets-nowhere-with the psychoanalyst.



2. A more gentle (but not prim) confrontation may be attempted on the first invitation. The therapist states that he is the patient's therapist not his manager.

3. An even more gentle procedure is to introduce the patient into a therapy group, and let the other patients handle it.

4. With an acutely disturbed patient it may be necessary to play along during the initial phase. These patients should be treated by a psychiatrist, who being a medical man, can prescribe both medications and some of the hygienic measures which are still valuable, even in this day of tranquilizers, in the treatment of such people. If the physician prescribes a hygienic regimen, which may include baths, exercise, rest periods, and regular meals along with medication, the patient (1) carries out

the regimen and feels better, (2) carries out the regimen scrupulously and complains that it does not help, (3) mentions casually that he forgot to carry out the instructions or that he had abandoned the regimen because it was not doing any good. In the second and case it is then up to the psychiatrist to decide whether the patient is amenable to game analysis at that point, or whether some other form of treatment is indicated to prepare him for later psychotherapy. The relationship between the adequacy of the regimen and the patient's tendency to play games with it should be carefully evaluated by the psychiatrist before he decides how to proceed next.

For the patient, on the other hand, the antithesis is, "Don't tell me what to do to help myself, I'll tell you what to do to help me." If the therapist is known to be a **Schlemiel**, the correct antithesis for the patient to use is, "Don't help me, help him." But serious players of "I'm Only Trying To Help You" are generally lacking in a sense of humor. Antithetical moves on the part of a patient are usually unfavorably received, and may result in the therapist's lifelong enmity. In everyday life such moves should not be initiated unless one is prepared to carry them through ruthlessly and take the consequences. For example, spurning a relative who "Can Get It For You Wholesale" may cause serious domestic complications.

Thesis: Nobody ever does what I tell them.

Aim: Alleviation of guilt.

Roles: Helper; Client.

Dynamics: Masochism.

Examples:

- (1) Children learning, parent intervenes.
- (2) Social worker and client.



Social Paradigm: Parent-Child.  
 Child: "What do I do now?(\* #12)  
 Parent: "Here's what you do."

Psychological Paradigm: Parent-Child.  
 Parent: "See how adequate I am."  
 Child: "I'll make you feel inadequate."

Moves:  
 (1) Instructions requested--Instructions given.  
 (2) Procedure bungled--Reproof.  
 (3) Demonstration that procedures are faulty --Implicit apology. (\* #13)

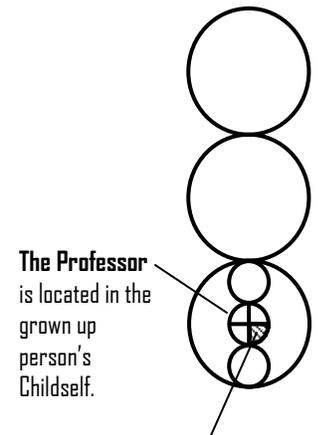
Advantages:  
 (1) Internal Psychological--martyrdom.  
 (2) External psychological--avoids facing inadequacies.  
 (3) Internal Social--"PTA", Projective Type; ingratitude. (\* #14)  
 (4) External Social--"Psychiatry", Projective Type.  
 (5) Biological--slapping from client, stroking from supervisors.  
 (6) Existential--All people are ungrateful.

\* #12: This can be either a request for the next instructions or the prototypical start of DMSO.

\* #13: Moves of ITHY are (1 - Hook) Inquire, (2 - Angle) Correct, (3 - Con) Reassure, (4 - Gimmick) Take to task, only trying to help.

Complementary games include: AIA, DMSO, SWYMD, Stupid, Wooden Leg, Indigence.

\* #14: The inherent alibi in only trying to help. It is sacred to try to help, give the appearance. "And besides I never said I was going to help, only try to." "You can't fault a person for trying." More needs to be said about the multifaceted aspect of gimmicks, gimmick lines.



The Professor is located in the grown up person's Childself.

The young child's decisive event and decision for a favored method of concluding personal social events is GRO, GNW, GAF, or GOW.



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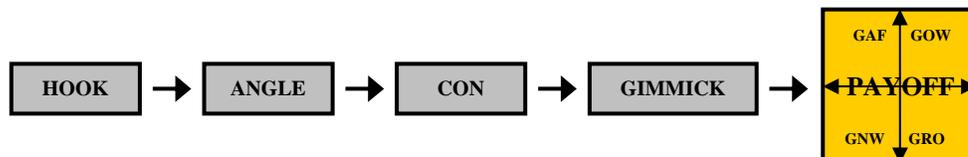
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A game is defined as a recurring set of transactions with ulterior transactions, concealed motivation, a gimmick, and a payoff. Eric Berne, M.D. used a particular variation of the duplex transactional diagram to represent the ulterior aspects of a game. Berne added the concept of switch in 1966 and introduced "The Game Formula."  $Con + Gimmick = Response > Switch > Payoff$ . The "Ernst Game Diagram" as described by Franklin H. Ernst Jr., M.D. in his paper "The Game Diagram" shows the phenomena of the variableness of a game and number of variations without contradicting "Berne's Game Formula." The Game Diagram" has five moves: Move #1-Hook, Move #2-Angle, Move #3-Con, Move #4-Gimmick, Move #5-Payoff. Diagrammatically it looks like this:



*"Mastery of the universe is proportional to the symbols man has by which to represent his universe."*

## "I'm Only Trying To Help You" and the Game of "Psychiatry"

*Psychiatry as a procedure must be distinguished from "Psychiatry" as a game. There are many approaches that have value in treating psychiatric conditions. Any of these can be used in the game of "Psychiatry", which is based on the position "I am a healer", supported by a diploma: "It says here I am a healer." It will be noted that in any case this is a constructive, benevolent position, and that people who play "Psychiatry" can do a great deal of good, providing they are professionally trained.*

Berne continues on page 154 of **Games People Play**. It is likely, however, that there will be some gain in therapeutic results if therapeutic ardor is moderated. The *antithesis* was best expressed long ago by Ambrase Pare, who said in effect: "I treat them, but God cures them." Every medical student learns about this dictum, along with others such as *primum non nocere*, and phrases such as *vis medicatrix*

*naturae*. Nonmedical therapists, however, are not so likely to be exposed to these ancient cautions. The position "I am a healer because it says here that I am a healer" is likely to be an impairment, and may be replaced to advantage with something like: "I will apply what therapeutic procedures I have learned in the hope that they will be of some benefit." This avoids the possibility of games based on: "Since I am a healer, if you don't get better it's your fault" (eg, **"I'm Only Trying To Help You"**), or "Since you're a healer, I will get better for you" (eg, **"Peasant"**). All of this, of course, is known in principle to every conscientious therapist. Certainly every therapist who has ever presented a case at a reputable clinic has been made aware of it. Conversely, a good clinic may be defined as one which makes its therapists aware of these things.

On the other side, the game of **"Psychiatry"** is more apt to crop up

with patients who have previously been treated by less competent therapists. A few patients, for example, carefully pick weak psychoanalysts, moving from one to another, demonstrating that they cannot be cured and meanwhile learning to play a sharper and sharper game of **"Psychiatry"**; eventually it becomes difficult for even a first-rate clinician to separate the wheat from the chaff. The duplex transaction on the patient's side is:  
Adult: "I am coming to be cured."  
Child: "You will never cure me, but you will teach me to be a better neurotic (play a better game of **"Psychiatry"**)."

**"Mental Health"** is played similarly; here the Adult statement is, "Everything will get better if I apply the principles of mental health which I have read and heard about." ... . And so, too, with ... **"Transactional Analysis."** ...

To be continued

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