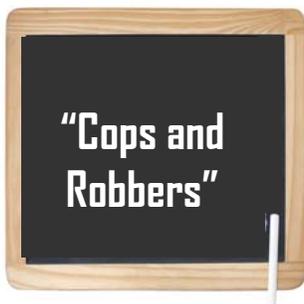


**Special points of interest:**

**"The therapist, remembering the inmate's reasoned objective in the group was to "to get out of prison and stay out," was presented with frequent opportunities in group to contrast the goal of the particular inmate with his periodic episodes of discrepant and contradictory behavior. The therapist continued to demonstrate the presence of the inmates rebellious Child to the particular group patient.**



**Inside this issue:**

"Psychiatric Treatment of the California Felon" cont.

## "Psychiatric Treatment of the California Felon" continued

The following is the continuation of an unpublished paper written by F.H. Ernst Jr., M.D.: **"Psychiatric Treatment of Prisoners Using Transactional Analysis."** Dad based this 2007 writing on his 1964 paper titled "Psychiatric Treatment of the California Felon," published in the American Journal of Psychiatry, Vol.120, No.10, 1964.

Eric Berne, M.D. referenced the original in his book "Games People Play" on page 140: "For further information about 'Cops and Robbers' and games played by prison inmates, see Ernst, F.H. and Keating, W.C., 'Psychiatric Treatment of the California Felon.' American Journal of Psychiatry, 120:974-979, 1964."

### Psychiatric Treatment of Prisoners Using Transactional Analysis

by Franklin H. Ernst Jr., M.D., 2007.

The Parent self comes from the person's own parent (or parent surrogate). The Child comes from the person's own memories and behaviors that begin in his childhood. The Adult is the thinking, data processing, probability estimating self inside the person.

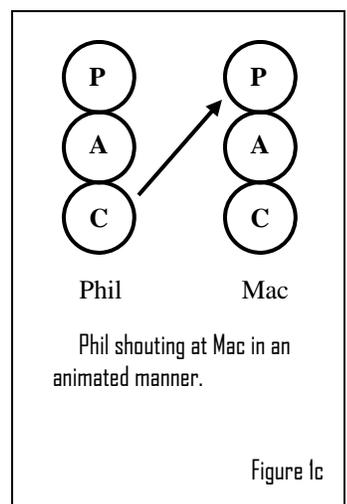
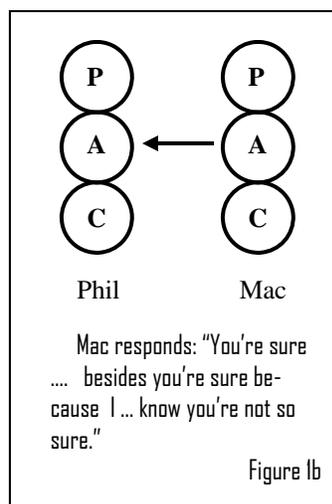
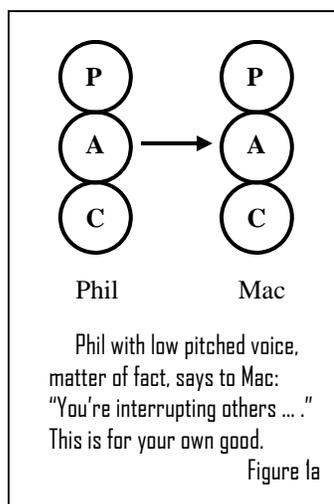
As inmates in the writer's groups began talking with each other about these ideas away from the group they rapidly assimilated and accepted this diagram.

The following is an example of such a (stimulus/response) transactional conversational exchange that occurred in a group session.

*Phil, in a matter-of-fact low-pitched, clear, and confidential manner said to Mac: "Say, Mac, I want to tell you something for your own good. You talk about good manners but you interrupt other people while they are talking. Now, I know you might not like this, but I'm doing this for your own good.* (See Figure 1a).

*In his conversational response Mac's voice had a bouncy quality as he told Phil: "You're sore because I know that you aren't so pure. Besides you're just trying to impress the doctor".* (See Figure 1b).

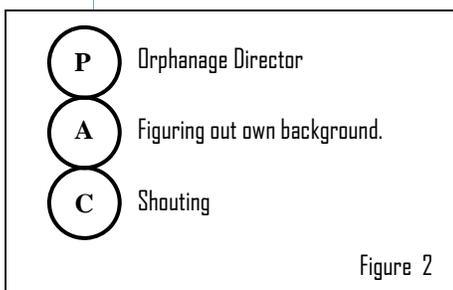
Directly following this, Phil was shouting and threatening while the group snickered at Phil's loss of temper. (See Figure 1c)



“It became clinically advantageous to take the position that everything the patient said and did with the group therapy could be looked at from the viewpoint of the patient’s Childhood self attempting to influence this reporting. Historically, the act of making records and the filing of descriptive and identifying information about the inmate had been going on for several years before he came to his therapy group. He had been fingerprinted and “mugged,” photographed, repeatedly; individual detailed crime reports by several persons and agencies had been done each time he had been apprehended, convicted; a chronologic cataloging of his criminal record or “rap sheet” was on state computer files, had been reproduced in multiple copy; judicial, sociological and psychological reports had been duly filed on each man in the past.

The change in Phil from the low voiced, confidential talking person, apparently trying “to help”, into a person with a high-pitched voice, talking in machine-gun fire bursts of words calling Mac names, were evident and clear for all group members to see. Phil’s first remark, Mac’s response acting as a stimulus back to Phil and thirdly Phil’s response to Mac (to Mac’s response) which operated as a stimulus for Phil’s second remarks, included a gross behavioral change in Phil’s appearance.

On inquiry by therapist after Phil cooled down the significance of the change for Phil was that he clearly recalled the historical background of these two personality qualities in himself, (See Figure No. 2) the person



with the confidential, low-pitched voice he identified as being copied from his own Parent who was the highly respected director of the orphanage where he lived until age 16. Secondly, Phil gave historical verification of his second behavior as coming directly in unchanged form from his childhood temper tantrums. In this act of reasoning and giving credit to each of these two aspects of himself, Phil demonstrated in the group an objective quality of himself, a data-processor sensitive to psychological information. These three qualities were schematized in a blackboard diagram for Phil, Mac, and the rest of the group to see and labeled Parent, Adult and Child; each quality doing something unique.

In group work, this finding of at least two differently organized, operationally distinct qualities of personality has been the single most characteristic finding of seeing people in groups. The discovery by an individual of having experiential options within himself and having a choice in the uses of these, in itself, resulted in very significant improvement in Phil’s behavior; in the quality of stimuli which he offered to people, and in the quality of responses which he returned to those who wanted to start something with him.

As a result of operationally locating these choices within himself he began to more frequently use his **Adult** data-processing self to determine his social procedures as contrasted to “relics” from his disturbed childhood. Later this same procedure of analyzing his transactions was also carried out with Mac.

Inmates in these groups obtained an operational and a functional grasp of these three real qualities within themselves and inside each other. Members who learned this reduced the frequency of involvement in “jailhouse incidents.” They increased their non-exploitative interpersonal skills.

The therapist, remembering the inmate’s reasoned objective in the group was to “to get out of prison and stay out,” was presented with frequent opportunities in group to contrast the goal of the particular inmate with his periodic episodes of discrepant and contradictory behavior. The therapist continued to demonstrate the presence of the inmates rebellious Child to the particular group patient.

Since the intent of the Department of Corrections in 1964, and the legislative acts which governed this department were to secure the correction of an inmate’s social behavior, this above noted ability of Phil now to modify his quality of social initiative and responsiveness was his cure. If you will, he learned to tell the difference of straight forwardness in others and “I’m only trying to help you” as a maneuver to tease his childhood self into a volcanic display. Additionally, he now knows what to expect in response to his own efforts to exploit someone else.

The opportunity to reference the (therapeutic) agreement with the particular group member markedly reduced the number of pastime conversations on baseball, injustices, courtroom evidence, and medical waiting room items such as: “my ulcer diet,” headaches and “what was your hemorrhoidectomy like?”

The study of these phenomena and potential gratifications to the inmate were incorporated by this writer into composing the annual psychiatric evaluations of the therapy group member during the preceding year. One result of this approach was a decrease in the time spent “buttering up” the therapist and later when not released exclaiming “foul” to the therapist about treatment not doing anything for him. Removing the secrecy cloak from the writer’s report did reduce the counter-secrecy intrigues by group members around the therapists.

Additionally the group’s therapist wrote up a psychiatric report each year on each inmate detailing the inmate’s status of mental health and behavior if released at the particular time. A written psychiatric report was prepared including a description of the



current status, progress, and readiness for release. The patients in therapy knew this. In fact they were aware that it is often the key item determining their release or retention for another year. For some therapists this reporting was objectionable because "it interferes with psychotherapy" but for those who kept their job it is inescapable.

It became clinically advantageous to take the position that everything the patient said and did with the group therapy could be looked at from the viewpoint of the patient's Childhood self attempting to influence this reporting. Historically, the act of making records and the filing of descriptive and identifying information about the inmate had been going on for several years before he came to his therapy group. He had been fingerprinted and "mugged," photographed, repeatedly; individual detailed crime reports by several persons and agencies had been done each time he had been apprehended, convicted; a chronologic cataloguing of his criminal record or "rap sheet" was on state computer files, had been reproduced in multiple copy; judicial, sociological and psychological reports had been duly filed on each man in the past.

Soon after joining a group the patient came to see that being in jail resulted from playing a game called "cops and robbers", i.e., "professional robbers" very rarely are caught. Being captured was often reported to writer by inmates as a "relief." Being caught after all was the expected outcome of this, his "game." (The word "game" is used here with a very precise definition including the elements of repetitively carried out serial transactions involving maneuvering another person and

having a unique "payoff" for the individual.)

The psychogenesis of "cops and robbers" is seen in the normal 2 to 4-year-old game of "hide-and-seek." In this latter game, contrary to popular opinion and as any parent can tell you, the objective is to be "found and caught." In the childhood "hide-and-seek" there is a specified time during which the hider will stay quiet, but if not found at its end he begins to give hints to the seeker. Upon being found the squeals and giggles of delight of the 3-year-old who has been found attest to the joy of the game and the gratification of being caught. When roles are reversed 3-year-olds as a rule also squeal at the successful conclusion of seeking the sibling or parent acting as the would-be hider.

The joy, pleasure, and excitement of the very recently "recaptured" recidivist upon interview by a member of either the clinical or custodial staff, is very often reciprocated by the staff member and is readily available to observe.

In old time "tough" prisons, structuring of time was rather complete. The rules (of the game) of the "keepers" and the "kept" were stricter and more definitely laid out with larger stakes available including many more occasions to put one's time and life on the "I dare you" line. In some places present day penology is generally more directed toward diminishing the uniqueness of being a "bad guy." In old time prisons prestige was available for being hardened, for example, "nobody ever broke him," "that guy could really take it." Intrigues and special language enhanced this uniqueness.

Institutional design has become less directed toward "rewarding" contra-social behavior. This has decreased the social advantages (gains) which come to one who "can take the physical punishment and prolonged isolation and segregation." By decreasing the institutional prestige for being hard there is less opportunity for a case-hardening situation to develop; there is a reduced amount of training time spent by inmates in a convict style post-graduate school of criminology.

This article is aimed to identify that the therapist of an inmate therapy group can direct his energies and work toward correcting the behavior of the offending inmates by attending to the repetitively carried out conversational transactions which lead to loss of behavioral options when one is locked up in prison. Recognition of alternative behavioral choices provides the inmate with a markedly improved measure of personal control over his day to day situations. For example the euphemistic stimulus: "Why, my goodness! You can't let somebody run over you like that," previously would have unfailingly evoked the response of "Of course not, I know it." But treatment can lead an inmate to choose either the above response or a second, such as, "I can if I want to," or a sophisticated group member may reply, "Haven't you got something else to do besides offering to hold my coat" (while I fight this other guy)?

**Soon after joining a group the patient came to see that being in jail resulted from playing a game called "cops and robbers," i.e., "professional robbers" very rarely are caught. Being captured was often reported to writer by inmates as a "relief." Being caught after all was the expected outcome of this, his "game." (The word "game" is used here with a very precise definition including the elements of repetitively carried out serial transactions involving maneuvering another person and having a unique "payoff" for the individual.)**



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"Game Codes—Newsletter of Games People Play"

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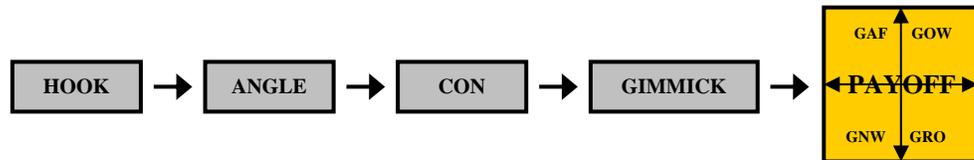
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A game is defined as a recurring set of transactions with ulterior transactions, concealed motivation, a gimmick, and a payoff. Eric Berne, M.D. used a particular variation of the duplex transactional diagram to represent the ulterior aspects of a game. Berne added the concept of switch in 1966 and introduced "The Game Formula."  $\text{Con} + \text{Gimmick} = \text{Response} > \text{Switch} > \text{Payoff}$ . 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."*

### Summary

The objectives of psychiatric **treatment** of the incarcerated felon are (a) correction and "care" of his psychological and social tactics which lead to loss of his "freedom," (b) teaching behavioral options and showing how the loss of control over his social (behavioral) stimuli and responses contributes to the loss of freedom. Note, inmates often have not "relearned" (i.e. not corrected) how to use social options for starting or continuing conversations.

Two of the major advantages the so-called anti-social person gives up on cure are:

- (1) Playing "cops and robbers" with its attendant gratifications, and
- (2) The use of "go-directly-to-jail" to solve external or internal life stresses and problems.

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