RESPONSE

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Regardless of the theoretical persuasion of the therapist or the pathology of the patient, the final common pathway between the therapist and patient is the transaction. When the therapist recognizes that the transactional stimulus from a patient is an invitation to a game or when he observes a game in progress amongst group therapy members, there are four available types of response:

1. Expose the game
2. Ignore the game
3. Offer an alternative
4. Play the game

Of course, when the therapist does not recognize that he is being invited to engage in a game because of insufficient experience, inadequate training, inattention, preoccupation with trivia or profundities, etc., then his response is likely to be naive and whether or not it is of benefit to the patient will be left to chance. When the therapist is aware of the patient's game, he may then choose which of the four available types of response would be most appropriate and this choice will determine the course of therapy and possibly the extent to which the patient is able to achieve or change his life goals. It is to be emphasized that none of the four types of response are invariably found to be good or bad, but choice is to be made relative to the therapeutic contract. It is less useful, for example, to ask whether or not the therapist plays a particular game with a patient, but it has meaning to ask, "Under what circumstance does the therapist play a particular game?"

Analysis of tape-recorded weekly group psychotherapy sessions over a two-year-period of time provided the following examples:

David entered the group and his first question was, "What are we supposed to do here?" As might be predicted, a series of "helpful" suggestions from the other group members were swiftly provided, all of which were successfully rejected by David. When the therapist clearly recognized the "Why Don't You—Yes But" (YDYB) game, he explored the relationship of this behavior to the patient's contract which was to be able to make more money. When it was ascertained that YDYB was also being played with his current employer, the therapist decided that exposure was necessary and waited for the next opportunity. When asked, "What should I do now?", the therapist used an antithesis saying, "Does it matter if I tell you what to do?" and this was followed by an intelligent discussion of the game. Repeated exposure brought about an alteration in David's behavior in the group which correlated positively with his making more money and fulfilling his contract with the therapist.

Richard complained about how his parents would unfairly beat him physically when he was a child. In the group setting, he told a preposterous

"lie" which was easily detected by the therapist because of gross inconsistencies in a story that he had also told to the therapist in prior contacts. The temptation for the therapist to publicly expose the "lie" was nearly irresistible; however, at this point the therapist chose to ignore the invitation to play "Kick Me" with the patient, feeling that Richard could succeed in getting kicked almost anywhere. Had the therapist exposed the game at that point, the patient would probably have left the group because he would have considered it an unfair "Kick"; however, he remained to explore his behavioral patterns and he later confessed that he sought negative attention in preference to no attention at all.

Under different circumstances the therapist played "Kick Me" with Rose, a patient who had undergone various modalities of treatment for more than ten years including long and short term hospitalization, drugs, electroshock, individual and group therapy, etc. Through all of this she persisted in playing an especially archaic game of "Uproar" periodically whereby she would respond to stimuli almost indiscriminately and usually land in the hospital. The therapist considered going along with her psychotic "Uproar" and was trying to decide whether or not to call the police to remove her to a receiving ward; however, before going along with the "Uproar", the therapist offered her the opportunity to play "Kick Me" instead by describing her behavior judiciously to her by stating, "Rose, you are making an ass of yourself." With a surprised and incredulous look on her face, Rose halted the archaic "Uproar" and directed what was previously free-floating criticism to the therapist. During the session she berated the therapist for treating her that way, accused him of being like the therapists in the past (only worse), but finally she pouted her way into a position of "Why Does This Always Happen To Me?" Although she was angry and pouting when she left the session, she did leave at the regularly scheduled time, through the front door, without police escort and was able to resume her daily functioning without a needless trip to the inpatient wards.

Fanny had for years been a "backward" patient at a remote State Hospital following her act of infanticide. Now functioning as a "middle-class housewife", she maintained herself by following the doctor's advice that she take her medicines and by essentially saying: "Gee, aren't you a wonderful doctor" and "Gee, isn't this a wonderful Institute", etc. Her stated contract was to be able to remain at home and not be re-hospitalized. The therapist therefore chose to play her game and modestly agreed with her endorsement of his talents. Although other group members occasionally took issue with her as to the therapist's qualities, she persisted and has until the present fulfilled her contract.

The above are clinical examples of the four types of response possible in psychotherapy. From these the therapist makes his choice depending on the circumstances.

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