

Transactional Analysis

The background is a gradient of blue and black. A prominent curved line starts from the left edge and curves downwards towards the bottom right, separating the dark blue upper section from the lighter blue lower section. The text 'Transactional Analysis' is centered in the upper dark blue section.

What is it?

- A consultation model that helps us look at difficult or unsatisfactory consultations
- TA concentrates on the state of mind, or ego state, of the doctor and the patient and how they interact
- The theory was described by Eric Berne, author of “Games People Play”

3 ego states

- Parent ego state (P)
- Adult ego state (A)
- Child ego state (C)
- Parent ego state is the part of us preoccupied with parental thoughts and speech; it can often be identified by containing the words “should, ought or must”
- Imprinted on us as children by our own parents or authority figures such as teachers, doctors, older siblings, police, those in authority

2 types of Parent ego state

- Nurturing Parent
- E.g. "You shouldn't go near the fire or it will burn you"
- Critical Parent
- E.g. "you really must stop smoking NOW!"

Adult ego state

- Principally concerned with thoughts and speech that are logical and factual
- E.g.” If you go near the fire it will burn you”
- “If you smoke your asthma will probably get worse”
- Logical, lack of parental content
- Problem-solving, looking for sensible and constructive compromise but allowing autonomy i.e. making the patient responsible for their actions

Child ego state

- Part of ourselves concerned with the expression of our feelings
- Develops first when we are young and contributes to our subsequent development of the whole person
- We acquire a basketful of feelings as a result of our earliest experiences
- Some of these feelings will be resolved, or fulfilled; others will be unresolved and continue to affect us throughout the rest of our lives

2 types of child ego state

- Free child: the healthy uninhibited part of us that is involved in having fun, being creative, experimenting, playing and loving
- Adapted child lacks spontaneity; the thinking and behaviour is adapted or inhibited in response to other people's expectations or to difficult circumstances
- Adapted child ego state can result in unnatural or manipulative behaviour such as petulant or sulky behaviour

Examples

- At any one time, each of us can be said to be using one or other ego states which determines how we think and feel and behave
- It influences the way others feel about us and dictate “what we are like”
- “Doctor, I have got a very sore throat. I think it may be tonsillitis. Can you advise me what to do?”
- The patient is ill and simply needs to know the diagnosis and how to get better; factual, logical thinking; adult ego state
- “Tell the doctor my throat is sore and he must visit me today and he should prescribe penicillin this time”
- Demanding patient, nothing is ever right, seem to have a perpetual axe to grind: parental ego state

Examples

- “Oh dear, doctor, my asthma is so bad I don’t know what to do. I am so worried about it. I have been completely unable to stop smoking like you said I should”
- Some patients seem to be emotional, unable to be logical or take responsibility for their illness.
- Helpless, worried well, unable to cope; adapted child ego state
- Adapted their behaviour to try and elicit a “nice” response from the doctor; sympathy, comfort, a prescription, a certificate

Application

- Key to understanding TA is to identify which ego state your patient is “in” or “using” and be aware of how appropriate or inappropriate it might be in the circumstances
- Is our own and the other’s ego state appropriate to enable a person to make the best progress as a patient?
- In most successful consultations both patient and doctor display adult behaviour
- Sometimes a parent doctor can work effectively with a patient in child ego state
- If both are happy with their own and the other’s ego state, consultation likely to succeed
- Parallel or complementary transactions, constructive and effective

Crossed transactions

- The transaction may be crossed, not complementary
- Dr: “Your liver enzymes are quite high. We need to look at how much you are drinking”
- Pt: “Doctor, you’re always telling me off about my drinking.....”
- Not a constructive way forward; progress is impeded
- Patients tend to have a certain repertoire of thinking and behaviour
- If we as doctors can recognise our patient’s difficult or unproductive behaviour, we can help them to develop insight and help themselves
- Lots of games people play e.g. “Yes, but....”