Victims, Villains, and Rescuers: A Framework for Addressing Healthcare Workplace Drama, Frustration, and Conflict

Effective teamwork and a therapeutic alliance are essential for quality patient care. Current and future health care providers must continuously develop effective work and communication habits to prevent defensive, blaming, and shaming behaviors with patients and colleagues. Workplace drama roles of victim, villain, and rescuer are derived from power dynamics across multiple stakeholders: students, patients, instructors, providers, managers, regulatory bodies, and payers. The Transactional Analysis framework and the Drama Triangle can be used to examine workplace drama; understand why providers sometimes don’t report violations; and address situations that lead to provider frustration, burnout, and conflict.

There is a lot of evidence that provider burnout and provider frustration are big concerns. A recent study by Johanna Shapiro, et al., analyzed reflective essays from 134 medical students to better understand how medical students perceive troublesome patients. According to the study, “Students often described themselves as anxious, uncertain, confused, and frustrated.” In a recent essay, Micah Johnson argued that doctors have the primary responsibility to repair relationships with difficult patients, even if the tension was initiated by the patient. So physical therapists not only confront frustrating relationships, it’s their responsibility to manage those relationships.

Additionally, sometimes providers don’t report even clear-cut violations. What can be done to help providers feel more comfortable reporting violations to their regulatory boards?

Transactional Analysis and the Drama Triangle are systems that can help physical therapists avoid burnout and frustration while maintaining solid provider-patient relationships. It is also a useful lens for regulators who want to encourage an open and transparent dynamic with providers.

Transactional Analysis and the Drama Triangle

Transactional analysis is credited to Eric Berne. In the 1960s, he created a shift from the
Freudian psychoanalysis of internal thoughts and feelings to the analysis of one’s social interactions. He proposed that, within social interactions, there are three ego states:

**Parent:** Parental figures can be nurturing and authentic, but they can also be smothering. Someone in the parent role can be positive and supportive, but they can also be controlling and manipulative.

**Child:** In the child state, someone can be creative, free, and open. But they can also be a little rebellious and petulant or prone to feeling shame.

**Adult:** A person in an adult role does not fear disapproval and is therefore comfortable saying no and listening to constructive criticism, realizing they can decide to accept or reject the advice. They are grounded in respect and awareness and feel equal to others. Their thoughts and feelings are direct responses to the here and now.

These roles can complement each other, such as child-to-parent. For example, when someone asks a mentor for advice and guidance — or a provider asks their regulator to walk them through a complicated situation.

Conflict and tension arise when the dynamics are unstable. For example, two parents. If both people need to be in control and neither will back down, that causes tension. To release the tension, someone needs to choose to end the interaction or assume a new role to stabilize the dynamic.

Some people have more difficulty switching out of a role than others. If someone has consistently been in subservient roles, they will have a hard time assuming another role.

Steve Karpman’s Drama Triangle is based on transactional analysis. According to him, people play three roles:

- Persecutor/Villain
- Rescuer
- Victim

People can use these dynamics to play games when they have a need: attention (positive or negative), maintaining a certain status, etc. They can have a conscious or subconscious endgame that dictates certain dynamics.

**Dynamics in Physical Therapy**
A physical therapist may enter an interaction thinking of herself as an adult, a professional. She also may assume her patient is also in an adult role, but he may not be. For example, there are times when a physical therapist suggests a solution and the patient rebuts it (e.g., “No, that won’t work for me.”) So the physical therapist suggests something else. The patient also dismisses that solution. The provider continues giving him suggestions that she knows will help him — evidence-based practice. But the patient continues to rebut it, saying each suggestion won’t work. However, the patient is still looking to the provider for help. This can obviously cause the physical therapist to become frustrated.
Then the roles can flip, because after too many rebuttals, the provider can ask, “What do you think will work?” Or, less helpfully, the provider could switch to the victim role after being frustrated that the patient won’t listen to her. She can then also start seeing the patient as the villain.

That is why it’s so important to understand and observe what roles everyone is playing. To step out of the game, the provider will need to figure out who’s controlling the game, who’s making the switch, and whether or not she is making the switch.

It’s also important to keep in mind the patient perspective when they come to physical therapists. Providers have a distinct powerful role. A lot of patients will assume the role of victim because physical therapists have the authority over their health. Additionally, as providers often fall into the rescuer role, they may have an inclination to “over help” or “over rescue.” This may also prevent them from asserting themselves and saying “no.”

These dynamics also play into providers’ views and relationships with regulatory bodies. Why don’t people report? Often it can come from a childlike state. Regulators want to try to be equal, to be respectful and to not have providers fear disapproval. But some providers can have childlike responses. They don’t want to get others in trouble, or they may feel they are not in the position to express disapproval of their peers.

The persecutor role is the parent role, the controlling role. This is somebody who is ready to criticize you, blame you, sets strict rules. They are rigid and authoritative. Some providers may view regulators this way.

Many people enter into health care because they think of themselves as rescuers. They want to help. They want to take care of people. A regulator can feel that calling too. They want to be good stewards of the profession and protect the public. Regulators also want to speak for those who can’t speak for themselves. They are the nurturing parent, ensuring people are taken care of.

And don’t forget the victim. This is a person who’s oppressed. They feel hopeless, powerless, ashamed, and super sensitive.

It’s important as regulators to think about the provider’s perspective on that. Regulators may think of themselves as rescuers or nurturing parents. However, when there’s a judgment, there’s a lot of shame that can come with it. So how regulators approach violators is very important, especially in the early stages. There are so many external factors that factor into how powerless providers can feel and how that drives decision-making.

For example, in one case, a provider struggled with alcoholism to the point that she would show up to work, at homes, intoxicated. What did her colleagues do? Instead of reporting her, they set up her schedule so that she was never at a home alone — there was always another provider present. Ultimately, while working intoxicated, she dropped a child.

Her colleagues tried to rescue her, but instead they created more victims — an injured child, a family that’s been victimized, a public that’s been victimized. All because her colleagues thought they were helping. In reality, they enabled her instead of helping her.
The Winner’s Triangle
When you’re stuck in a Drama Triangle, you can reframe it using the Winner’s Triangle, developed by Acey Choy.

- Assertive (instead of Persecutor/Villain)
- Caring (instead of Rescuer)
- Vulnerable (instead of Victim)

Regulators can be assertive through rules and regulations, through codes of ethics, and in maintaining and claiming their role as professionals. Providers in a professional community of practice have a duty to other professionals, and to the people they serve within that profession, to uphold certain behaviors and ideals. Because these are shared agreements, asserting them is not persecuting anyone.

When someone does deviate from the shared ideals, regulators can handle it in both responsible and caring ways. Regulators can be part of the solution without becoming singularly focused rescuers to the point of creating new victims. It’s important to be caring without being enabling.

In the case mentioned above, the provider who struggled with alcoholism is now working with her state board. She has a suspended license, but she also has check-ins and she’s making progress. The board isn’t enabling her, and they aren’t creating situations for her to create victims — but they are helping her. They are part of the solution.

In a similar vein. Sometimes people don’t report violations because they feel ignorant. Maybe they don’t want to jump to conclusions when they don’t have all the facts. Maybe they’re not sure of a path forward. It’s okay to be childlike and vulnerable. It’s okay to ask a parental figure, a regulator, for advice.

Regulators should share this message with providers so that when providers are unsure about reporting they don’t just forget about it, they do something. Providers need someone who they can call who won’t judge or shame them for being ignorant of the rules. Someone who can help them figure out a next step. Because if a provider sees something and doesn’t act, then they can cause harm.

Regulators too need to be okay with being vulnerable enough to admit that they are also fallible. It’s important to recognize that everyone makes mistakes and to place emphasis on how those mistakes will be addressed. Shifting that focus away from the mistake and toward the solution leaves the door open so that people don’t feel like they have to be stuck in a victim role, or they have to hold on to that rescuer role.

Regulators can bring both caring and vulnerable roles to regulation. There’s a certain vulnerability that comes with just getting on the same level as someone else when you’re in a position of power. Being able to express that moves everybody to the Winners Triangle.
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