

Therapeutic Use of Metaphor: Cultural Connectivity

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Abstract

Background: This research was designed to explore the experience and understanding of counsellors' and psychotherapists' engagement with metaphors in the therapeutic process. The aim is to reflect on the experience of therapists involved in therapeutic metaphors from differing perspectives.

Methodology: In a heuristic study, a group of seven therapists (counsellors and psychotherapists) shared their use of metaphors in their therapy practice. Data were collected through an informal conversational interview that supported the participants to share their experiences in a natural dialogue. Their reflections augment the understanding of the phenomenon.

Findings: The experience of using metaphor in therapy appears to involve a multifaceted web of generation, construction and development between the therapist and client. Various levels of depth of metaphor in therapy were identified along with links to transferential and cultural issues.

Discussion: Metaphors that reflect an empathic connection and encounter between therapist and client were identified. Dualistic thinking around the origination of metaphors in therapy is challenged and the concept of co-creation and the mutual development of moving metaphors are discussed. Environmental and cultural influences are considered alongside transferential aspects.

Conclusion: It appears that the use of metaphor in therapy is pervasive and offers an opportunity for therapeutic change. The consideration of the construction of metaphors and their mutual development may be useful for therapists to consider. This research highlights the need for more investigation regarding client perspectives, the environmental impact on metaphors in therapy and it is also about who the therapist and client stand for: metaphorically, for each other.

Keywords: Metaphor, Therapeutic Metaphor, Communication, Cryptophor, Culture

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I. Introduction

The substitution of meaning of one thing for another is a concept that has been used for millennia, indeed we have our metaphor for 'first-ness' in the term 'Big Bang'. Metaphor has saturated our language throughout history, from Medieval Allegories to Shakespeare. In this paper, the overarching definition of metaphor will be utilized: "as the phenomenon whereby we talk, and potentially think about something in terms of something else" (Semino, 2008, p. 1).

A significant element of language pertaining to therapy is itself metaphoric. I note that words such as 'journey', 'inner-child', and 'prison' are often used by me and my clients in my therapy room. Indeed, Rogers (1961) famously compared the growth of potatoes in the dark to the growth tendency of humans. A brief scan of my bookshelf reveals therapeutic books with metaphorical titles such as: 'The Road Less Travelled' (Peck, 1978); 'The Broken Mirror' (Phillips, 1996); 'Waking the Tiger' (Levine, 1997) and 'The Chimp Paradox' (Peters, 2012) amongst the many others. A review of the relevant literature is testament to the littering of metaphors in the world of therapy, to use two more metaphors! This pervasiveness, I propose, sits comfortably with Wickman et al. (1999) who reason that metaphoric expression is so common in everyday language that clients and counsellors are often bound to introduce metaphors not only as a linguistic tool but as a method of understanding. However, whilst this is hugely important, after all therapy is mostly about communication, I believe there are more facets to the use of metaphors in the therapy room. They are pervasive, but also, when used appropriately, they can be useful to the client and the therapist. There are times when they may not be useful, like for clients with some Personality Adaptations and for those on the Autistic Spectrum they may be unhelpful, although in practice this may not apply.

I found that psychodynamically oriented therapists tend to introduce their own metaphors to their clients (and have a bank of metaphors for certain situations) and person-centred therapists and those following specific metaphor models tend to be more interested in developing the client's metaphor. The use of Clean Language to help develop and mature metaphors is important (Grove & Panzer, 1989).

As a trained counsellor and hypnotherapist, I am fascinated by the 'common ground' that metaphors occupy. I engage with metaphors during both counselling and hypnotherapy sessions. Kincheloe (2001, p. 687) suggests that "the frontiers of knowledge

work best in the liminal zones where disciplines collide". This research has implications for the fields of counselling and psychotherapy as well as other areas of humanities including education. The 'burning question' (Whittaker & Archer, 1989) which arises from both a personal and professional interest is: What are the researcher's and participants' reflections on their experience of working with clients when using metaphors?

II. Materials and Methods

The chosen methodology in this qualitative study is heuristic inquiry as outlined in Moustakas (1990). In this context, heuristics is described in Moustakas (1990, p. 9) as a: "process of internal search through which one discovers the nature and meaning of experience... an organized and systemic form for investigating human experience." The methodology also incorporates an intersubjective enquiry (Sela-Smith, 2002) between researcher and seven chosen participants. The participants, all of whom were experienced and qualified counsellors or psychotherapists currently in practice, shared their experience of working with metaphors with their clients in semi-structured interviews (Kvale, 1996). I interviewed seven qualified counsellors or psychotherapists who either used metaphors with their clients, or were of the opinion that they did not use metaphors (in an attempt to gain a contrast); purposeful sampling as detailed in Patton (2005). The data were analysed according to the procedure set out in Moustakas (1990) to produce a set of individual depictions. From the totality of the individual depictions a composite depiction was constructed along with exemplary portraits and a creative synthesis. The creative synthesis (Moustakas, 1990), in this research, takes the form of poetry and artwork.

Heuristics is a creative, non-linear process of discovery into a phenomenon well known to the researcher from the start, which "reaches its pinnacle in taking into life active self-awareness, insights and clarifications" (Moustakas, 1990, p. 123). The researcher evokes his or her active self-awareness, and, through that engagement or exchange, the self is transformed and self-understanding and self-growth occur. This requires a passionate sustaining of focus and awareness on the phenomena (internal and external) using all the researcher's senses, values, belief systems and judgments to convey underlying meanings of the human experience. However, as the research question in this paper involves the social and

cultural phenomenon of metaphors (Lakoff & Johnson, 1980), a social constructionist epistemology has been adopted whilst retaining an essential element of self-reflection and use of the 'self' of the researcher (Hiles, 2001).

In this study, I was not planning to capture the essence of the phenomenon; as I would question whether we can actually capture an essence of experience that remains universally true over time. From the social constructionist viewpoint Burr (2003, p. 5) declares that: "There are no essences inside people that make them what they are". This position is at odds with Moustakas (1990, p. 13) when he states: "Essentially in the heuristic process, I am creating a story that portrays the qualities, meanings, and essences of universally unique experiences". In this paper, I am aligning him to hermeneutic phenomenology as outlined by Heidegger (1962/1927) and Gadamer (1990/1960) who move away from Husserl (1927) and his descriptive commentary.

III. Illuminations

This was a group of seven therapists with a combined experience gained in practice of more than one hundred years who shared their use of metaphors in their therapy practice with me. The interviews were extremely revealing and rich in examples. The therapists' experience of using metaphor in therapy involves: depth, humour, child ego-states, resistance, communication, ownership, use within the medical-model, nature, hope and the containerization of trauma.

To highlight the themes, I will link relevant quotations from the data and briefly comment as below:

Containerization of Trauma: The indirect nature of metaphors, either literal or embodied, appears to be useful for some clients to revisit difficult episodes without the potential of retraumatization.

Maddie: "It is a very creative way of dealing with major issues that are just too big to even get out there."

Brian: "Metaphor creates the containment and the safety, definitely! It's another reason why I like a metaphor. They have ownership of their own safety."

Anna: "Metaphors can be safe containers for clients. A client found it easier to talk in terms of a dinner service that he had inherited and choosing which items he might want and those he would rather let go, than talking directly about what he did not want from his abusive Father. "

Jane: "One chap. He was early 20's. He didn't want to go there with his childhood trauma. He told me that. And we dealt, we never actually referred to specifics of his trauma. We both knew what we were talking about. And the whole thing was in metaphor. "

Depth: Certain metaphors used in therapy seem to have a depth to them for both parties, which appears to be beyond a means of everyday metaphorical communication.

David: "and also deeper stuff that goes on with time, and hope, and putting them into a... creating sort of meaning for them, and having them to see the bigger picture when they are feeling very stuck."

Jonathan: "Catharsis can result through the development and change of the metaphorical landscape of the client, using what I would describe as deep metaphors. This can occur in the session, or may become a longer process, over many weeks, months or years".

Anna: "I think when my clients do that, or when they respond to an image or a metaphor that I'm offering, there is a sudden deepening of the work. It suddenly feels as that something that has been held in tension gets softened and loosened as if the connection between me and the client feels as if it's safer to go deeper, it feels very intimate."

Humour: Metaphors used in therapy have the potential to introduce humour into the narrative. Some participants believe that humour is an important element in the process of therapy.

Jane: "This came about whilst working with a 17 year old client with E.D. (eating disorder). After building the relationship for a few weeks, featuring usage of humour, the client mentioned her 'dog'. She described a Rottweiler that would wait outside her bedroom door at night or outside the bathroom door when she was showering (sometimes climbing in the shower with her). Naturally this was extremely distressing and meant she felt trapped inside the rooms. She hadn't disclosed this dog previously to anyone else. Aside from exploring who or what this dog represented, I decided the first step would be to 'move' the dog so she could at least pay a call of nature in the middle of the night, and also manage the stress she was experiencing when encountering it. The client agreed with this strategy and we spent a session 'ridiculing' the dog thereby reducing the fear and power it held. We named it 'Scooby', visualised with a pink bow round its neck, wearing a 'designer' dog coat and

wellies, gave it a 'Gnasher' cartoon grin, and made it 'run off' into the distance to the tune of Benny Hill. Our rapport in the session was collaborative and fun – much giggling, but it served as a resource for her – the process of dressing the dog and removing it when she encountered it. Most of the time it worked for her. It also provided us with a private, shared discourse that became a running feature of our sessions... 'Is Scooby wearing Burberry this week?' I believe this approach provided us with a vehicle with which to slowly unpick the meaning behind the dog."

Brian: "I often find that it is in the same energy stream as the use of humour. So, for example, I use humour a lot as a psychotherapist. It lightens the whole process of psychotherapy. It's an interesting one that I've noticed that when I do metaphor work it has an energy, a relaxation that is in the same ball park."

Child Ego States: This concept, which emanates from the Transactional Analysis model (Berne, 1961), identifies that metaphors can promote a creative and playful element into the process of therapy.

Brian: "One of the reasons that I like metaphor particularly is that it allows people to feel relaxed and to feel a sense of security, excitement, creativity, and, most important, to get to parts of their unconscious or Child Ego-State. Or you might say Alpha state, so they can get to parts of themselves that they were not aware of. I think it's a very important part of psychotherapy that allows a person to take ownership of a creative part of him/her."

Anna: "Metaphor is playful. Metaphor is really playing. It is playing the way that little kids play."

Resistance: Rather than the narrative in therapy literally referring to the client and their problems, metaphors can offer an alternative and less threatening language. This appears to reduce the resistance of the client to face challenging issues, although I would offer that they can also be used as a form of avoidance.

Brian: "They can go to places in different parts of their energetic systems which allows them through narrative, imagery and metaphor to go to places that they definitely would have resisted otherwise."

Maddie: "[...] the more that you delve - the more resistant you see them becoming. If you can find a different way of them accessing their feelings and

that's good for me - it's all about expressing, however you get there."

Communication: Not surprisingly, metaphors can improve communication between the therapist and client (Lakoff & Johnson, 1980).

David: "In a kind of conversational, empathy-showing way, then taking upon kind of your own pictures and working with that, to create therapeutic metaphors".

Maddie: Researcher: "So it's used as a non-threatening way of communicating how they are right now?" "Absolutely." "It is instinctive - very much what is going on in the moment in your head."

Alan: "For me, yes, it is. Immediacy and appropriateness. "

Ownership: Metaphors can be introduced by the client or the therapist. I would also suggest that they can be co-created in the relationship.

Jonathan: "Metaphors in therapy can arise in a number of ways. They can be introduced by the therapist or the client, in a conversational way, but if the therapist tracks the client's metaphor it can be developed into a deep landscape that relates indirectly with the client's issues."

Yvette: "Sometimes, I see it in a picture, when the client is describing their life or their issue, or just in conversation. And I see the picture and I give it to them back as a metaphor."

Nature: The participant Anna finds that metaphors of nature are important in her practice.

Anna: "Metaphors from the natural world really affect people because we are basically animals. So, when we are using a metaphor to do with biology, with things that are found naturally, that feeds this profound connection that we've all got." "Most of the metaphors that really affect me and my clients relate to the natural world... we forget that we are just sophisticated animals." "There is something deep within the human psyche that wants to connect to the rhythms and textures and the essences of the natural world."

Medical Model: The environment in which the therapy takes place appears to have potential to affect the metaphors. For example, Maddie, who works for a cancer charity, believes that her clients' exposure to the medical model impacts on their metaphorical language.

Maddie: Researcher: "What about clients introducing metaphors, does that happen in your

Poetic Representation

I am like....

*I am like the wind
I am the train on the tracks
that runs and runs and runs*

*I am from you
me
us
them*

*I am like the glue that binds
the magnet that repels
the missing in the fog*

*I am like my child
I can play
I can smile
can cry
I can find strength from here*

*I am like a bird
I can fly
I can drift
as high as the cloud
I can burrow deep into the cloud*

*I am always there
ready
on the shelf
in the dream
in this moment*

*I am like the creator
I can change
colour
shape
Your world and mine*

*I am like the gift
the chameleon pathway to your mind*

*I am like the knot in your gut
I rest in your heart
I rest in your neck
like the blade in your side
I hold the dreams you cannot tell*

*I am like
what you are like
change me you
our hills caves and dance floors*

*I am like the monster sleeping in the dark
that can lead to doors
doors hiding smiles behind*

*I am like the crack in the cult
the safe dungeon
the shiny hub
the frozen rose*

*I am like the tissues in the box
I am hope*

I am like.

V. Discussion

The aim of this research was to explore my experience of working with metaphors as a counsellor and to expose myself through interviews to others' experience of this phenomenon. The heuristic process, as detailed by Moustakas (1990) focuses on the changes and awareness's developed within me whilst also reporting the message of the experience of others. I certainly have changed through this process from mostly practitioner with a minor researcher part, to someone who is comfortable to experience and learn in both fields of research and practice. Alternatively, through the lens of Reinharz (1997), my 'research-based self' is represented more within my 'situationally created self' (current self) than my original 'brought self' (previous self), which saw the world through the eyes of a practitioner. My process around the use of metaphor in the therapy room has also changed dramatically. During this research I have been surprised, frustrated, amazed, bored and unsurprised at times. The findings of this thesis from my own experiences and those reported by the participants have revealed a number of themes including humour, containerisation, ownership, and origination. However, in this paper, I will discuss one topic which I believe is important and topical. The use of metaphors in therapy can help with cultural connectivity.

Cultural Connectivity



The above image was brought into my therapy room by a client who was suffering from severe anxiety. He had created this metaphorical representation to show me how he was affected by his 'inner voices'. I believe that this opened a dialogue about how he wants to be seen as the 'everyman' James Stewart. Stewart was an actor known for his portrayal of the average American Middle-Class Man, which in turn, I believe, led to a meaningful and fruitful exploration. We were both able to access from a shared cultural perspective the metaphor of 'hear no evil, see no evil, do no evil' and this became part of our narrative throughout the therapeutic process. His metaphor provided rich material for our discussions, far more than simply saying 'I hear these negative voices'. Humour was also introduced to a previously bleak topic. The metaphor seemed to become a catalyst for more creativity which helped his self-esteem and which also externalized what was previously internal. One of the reasons I propose that the 'three monkeys' metaphor' appeared to work well, was that both myself and my client understood the metaphor culturally in a similar way. This may not have worked so well (or at all) if my client had not understood the metaphor, or their culture held a different meaning for this metaphor. I understand that my metaphors as a therapist are influenced by the time and place from which I come and the people that I meet and it's the same for my clients. One view which I can identify with is that there is nothing beyond culture (Dalal, 1993): even non-culture is a culture of sorts. Hobson (1985, p. 60) eloquently defines my thoughts on this phenomenon: "The meaning of metaphor is revealed within a personal and cultural context, within a society of utterances." Metaphors potentially occupy the liminal space between the personal and cultural. This is a space which should be of interest to most therapists.

The cultural influence on metaphors is highlighted in the influential work of Lakoff & Johnson (1980, 2003). They argue that different cultures give rise to different metaphors due in part to the fact that they are associated to different human experiences and they provide different linguistic tools to characterize things. They also argue that cultures produce conceptual metaphors that form our way of seeing the world. The very nature of the conventional metaphor is that we are not normally aware of its figurativeness, the ways it affects meaning are therefore subliminal. There are many theorists who agree that not all metaphors are universally understood and there are cultural differences in many metaphorical

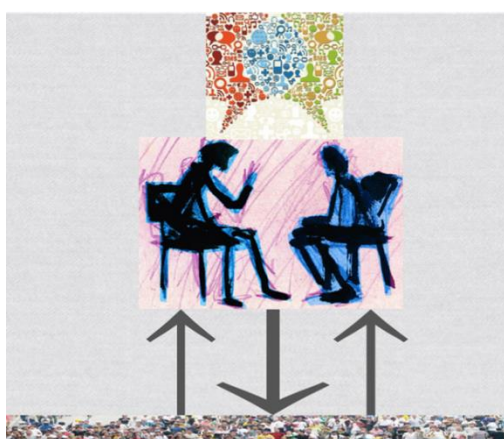
expressions. Kövecses (2002) suggests that inferences are unavoidable when either interpreting an English metaphor such as 'Manchester City slaughtered Manchester United' or an Inuktitut metaphor 'inuktaiwa' which can either mean 'killed him' or 'took him as servant'.

Interestingly, Füredi (2004) argues that psychotherapy appears to have a culture of its own and the metaphors and language of therapy appear to have leaked into Western mainstream culture. I would submit that this will have negative and positive effects in the dilution of the personal against the possibility of shared understanding. Cultural awareness and flexibility are certainly promoted within the field of therapy (Lago & Thompson, 1996), although, as Tseng et al. (2005) point out, there are significant cultural differences between Western and Eastern societies. It is therefore paramount, they suggest, that the success of therapy is based on accepting the existence of these differing views of the world and metaphors offer a way for clients to communicate their experiences with mutual understanding.

It appears that some therapeutic metaphors are co-constructed in some way between the therapist and their client. Often, as reported by the participants, the therapist forms a visual image in their mind which in their experience resonates metaphorically with the client's world. The client and therapist then seem to co-construct and mutually develop the metaphor in their relationship, or in the culture of the therapy. This is indicated by a client, reported in Cox & Theilgaard (1987, p. 49): "because I don't begin. You induce beginning in me." It is this impact of the inner world of the client on that of the therapist and vice versa which promotes metaphor generation and the potential for movement. I would tentatively offer my view on this phenomenon that metaphors arise from the culture of the therapeutic relationship and for them to be therapeutically useful they need to be mutually understood and developed (they need to have an impact on each other's 'inner world'). Counselling and psychotherapy is about dialogue and conversation in a given context, even in person-centred circles it is now accepted that the therapist inevitably influences what is said, it is a co-constructive, contextualised process (Worsley, 2002).

The following image displays my reflections on the social and cultural aspects of metaphors in therapy. Here, in part I refer to the inevitable nature of the relational aspect of the co-construction of metaphors, and suggest that the client and therapist

bring in their metaphors from their culture into the subculture of therapy. These metaphors are then co-constructed and mutually developed and have the potential to return to the outside of therapy culture. The subculture of therapy, I would offer, has the potential opportunity to 'ingest' through symbolic interaction those cultural metaphors previously owned separately by the client and therapist.



VI. Conclusion

The use of metaphors in therapy offers an alternative less threatening, symbolic and none-direct way of revealing unconscious material. Dwairy (2009) proposes that metaphors create a therapeutic environment that allows the client to make alterations in their belief system whilst remaining within their family, culture and religion. This highlights an important aspect of the use of metaphor in therapy. The indirect nature of metaphor invites the possibility for change that is perceived to be safe and non-threatening to the sense-of-self-in-the-world, although I would add this is only the case if the metaphor is mutually understood. If they 'hit the target' they improve communication, understanding and rapport and if they miss then this isn't necessarily a negative. Metaphor and culture have a fundamental connection as the communication of shared meaning always carries cultural overtones.

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