
The Use of Metaphor in Psychotherapy

A Psychodramatic Exploration

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"A good metaphor implies an intuitive perception of the similarities of dissimilars"
(Aristotle).

Abstract

A metaphor that comes into a therapist's mind is a product of two minds, therapist and client, who are both unconsciously working together. The therapeutic metaphor is thus a co-creation, emerging from the therapist's perception of co-unconscious communication. This paper describes the use of psychodramatic techniques to illustrate the therapeutic use of metaphor.

Introduction

When a therapist is able to think about, speak or even enact an image or metaphor that emerges in the therapeutic relationship, this extends or gives language to what is present and not yet fully known to either therapist or client. When the therapist's experience is couched in the language of metaphor, opportunities for the creative use of symbols arise in the mind of the other person. Some questions I have are as follows:

Can we learn to use metaphor?

Should we be looking for metaphor in our work?

Will expressing the therapeutic metaphor be useful to client?

The formation of metaphor

The therapist's perception, in the form of metaphor, of their client's struggle is the result of an unconsciously projected attempt at psychological linking. I believe it is the therapist's obligation to bring to the relationship with the client both the words and the images from within the therapist's mind. These images are based on the therapist's own capacity for symbolisation. This, in turn,

inspires the client to find his/her own creative capacity to link with this presented metaphor, as well as with the person of the therapist. My sense is that many creative insights may be lost when the therapist stays too objective and ignores or passes over these metaphoric images that occur in the therapist's mind.

The way in which words are used and heard determine what meaning can be made of language. I will now set out my own personal definitions of *metaphor*, *simile*, *sign* and *symbol*.

When I hear someone saying "I *feel as if* I am...", I know they are in the realm of *simile*, as there is some measure of caution or tentativeness in their expression. Such a person may say "I *feel as if* I am like a bird, flying..." stopping short of fully identifying with the bird. Moving toward a state of metaphor—an experience of "I *am*..."—the same person may warm up to saying "I am a soaring eagle." The person has truly entered into the subjective experience of seeing the world through the eyes of an eagle.

I often ask myself when a *sign* is a *symbol* and visa versa. Meares explores the literal definitions of symbol as "not part of the observable world" (2000: 125). Signs, on the other hand, are observable, as a ring on the finger may be *seen* as a sign of marriage. The symbol of marriage cannot be seen and is *perceived* as a quality of connection within the relationship of the pair. The symbolic marriage exists in the open-hearted sharing of conscious and unconscious minds. Hence, the ending of the marriage occurs well before the separation of the pair, when the signs and rituals of marriage lose their symbolic meaning.

Meares states that:

The metaphoric process is the direct descendant of symbolic play... . The use of metaphor to describe inner states signifies the emergence of true symbolisation. The words are now free of representing things whereas in symbolic play the word was part of the thing... . In essence the therapist's goal is to participate in the creation of a feeling of aliveness in an individual whose sense of ordinary living is one of deadness. The task will involve the bringing into being of an inner life in someone for whom such an experience is limited, interrupted, or fragmentary.... Metaphors have to be found in the intersubjective field. In this way, they are shared, to be played with together (2000: 125-126).

Rather than thinking "metaphors have to be found", which may encourage a type of "looking for", I would say, here, that metaphor is a co-creation that

emerges through the intersubjective relationship and manifests in the mind of the therapist.

Jacob Moreno (1946) challenged Freud's belief that resistance had to be directly interpreted in order to treat people or to access unconscious material. Moreno thought that individuals could assist each other in groups. A group member can become an *auxiliary ego* for another; the group leader can be the *double* and speak the unconscious language of a member. Later in this paper I give an example of how a group member acted as therapeutic *double* for me, by alerting me to how I was expressing myself through my body movements.

Moreno thought Jung's notion of conscious and unconscious (each being both individual and collective) left room for another idea, that of the *interpersonal unconscious* or *co-unconscious*. He referred to the Greek story of Philemon and Baucis who hosted Zeus and his son Hermes with generosity and humility. As a reward they were granted one wish. They wished to grow old together. Their wish was granted and they continued to cohabit and at death intertwined as an oak and a lime tree. The on-going 'linking together' is symbolic of the co-conscious and co-unconscious aspects of relationship. This may inspire us to think beyond individual psychology and consider the psychology of the pair and of the group.

Psychodrama takes the individual's experience beyond the usual dyadic (therapist-client) forms of treatment. Enactment works with an individual's capacity to play and therefore to symbolise. The objects on the stage become the metaphorical representation of the similarities and differences of both the internal and the external world. As a psychotherapist and psychodramatist I am a *producer* who follows the ideas of the client-protagonist, assisting in bringing into being both signs and symbols. I am engaged in, and also guided by, conscious and unconscious forces both in others and in myself. Here are two examples of the use of metaphor.

Individual Psychotherapy: *The Baby is Rocked*

Charles, a 32 year old father separated from his young child, is relentlessly going over his experiences in a persistently wordy manner. I perceive his emotional distress and his endless speech and say to him "I am holding a little baby here now" (and make a rocking movement with my arms). He sees me, perceives my awareness of his emotional experience, and we meet in a moving encounter where he cries deeply, allowing himself to truly enter into his experience as the infant.

Charles has his unfulfilled need reflected in the words and action of the therapist, who enters into the transference relationship and speaks the words of the 'mother'. He is held 'in metaphor' or metaphorically 'held'. My sense is that he can now say "I am that baby he is holding and I am utterly distressed and being held is a release for me". He is able to move from projecting his experience into the other to entering into concern for himself through the 'play' of the therapist's intervention.

A Group Working with Metaphor

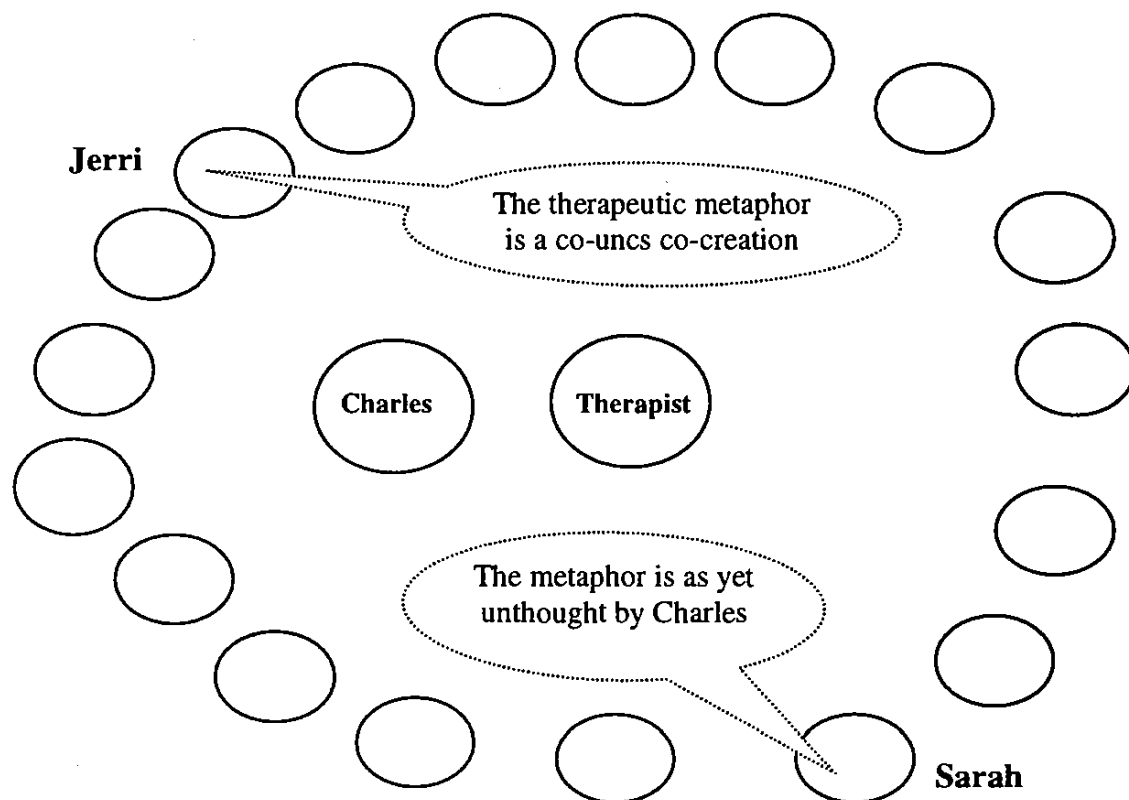
The two diagrams below represent workshop group members sitting in a circle, considering therapeutic metaphor in action. The centre of the group was the action space or 'stage' and people invited onto the stage are represented by ellipses. People were chosen to enact the psychodramatic roles of therapist and client and these roles are indicated by circles within the ellipses. In this context *role* is defined as "the actual and tangible form the self takes..." (Moreno: 1946: 153).

The moment I have chosen to present here is just after I had recounted the therapeutic story of Charles. The group members had been thoughtful about the effect of the therapist sharing the metaphor: *The Baby is Rocked*. I was about to move on to another point when a group member, Sarah,¹ spoke in response to the idea that the therapeutic metaphor is a co-unconscious co-creation of both Charles and therapist.

Sarah's reflection was: "*The metaphor is as yet unthought by Charles*". At the time, I felt I had communicated an idea to the group unconsciously and it was possible that Sarah had responded to that. The following diagram depicts the group, 'Charles', and 'Therapist', and the communication between Sarah and myself.

Prior to Sarah's reflection, I had been wondering when to bring in Bollas' thinking about the *shadow of the object*, which he referred to (1987: 3) as "the human subject's recording of his early experiences of the object", and his notion of the *unthought known*. "While we do know something of the character of the object which affects us, we may not have **thought** it yet". (Bollas: 1987: 3). Bollas wrote in terms similar to the language of psychodrama when he spoke of the "*conservative object*" which he describes as "a particular self state conserved because it is linked to the child self's continuing negotiation with some aspect

¹ Pseudonyms are used throughout this article.



of the early parental environment” (1987: 110). In the workshop I had wanted to find a way to concretise this idea of the conserved object within the symbolic play of the psychodramatic production.

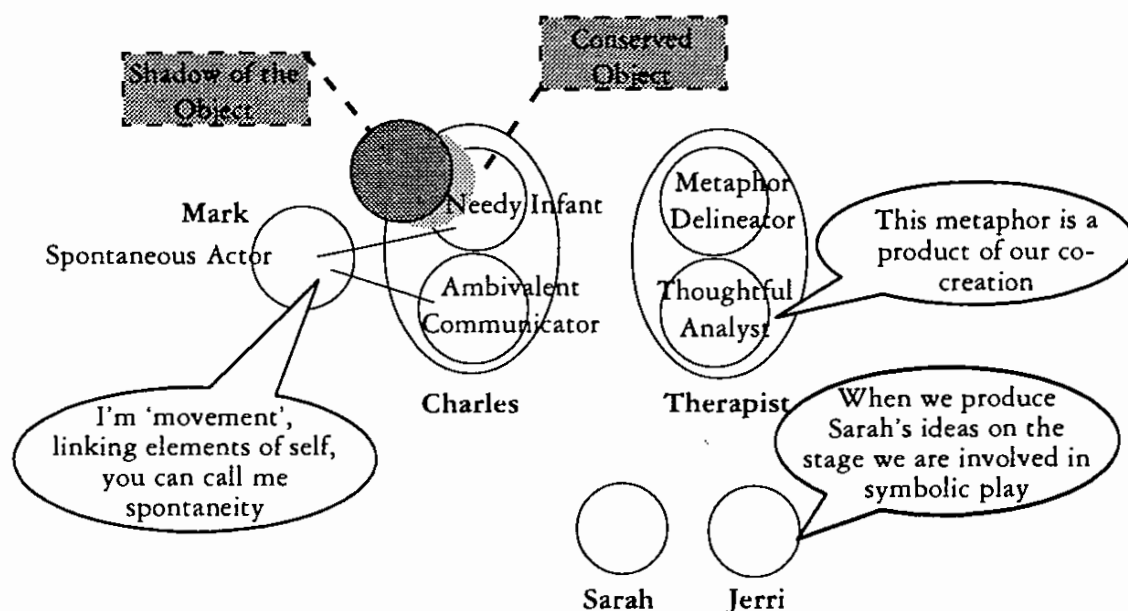
I invited Sarah to step onto the stage and co-create with me a production of the idea that had emerged in her mind. I interviewed Sarah regarding her experience of the ‘Charles’ story and we began to set out the elements of the clinical vignette, as shown above, using group members to represent the ways in which ‘Charles’ and ‘Therapist’ were responding to one another. I added someone to represent the *shadow of the object*, the thought I believed we had shared in an unspoken manner and which Sarah had spoken about in the group. Having the ‘shadow’ on the stage demonstrated how Charles’ experience as a needy infant had been overshadowed by some unthought experience in his early life. Thus the needy infant emerged when the therapist communicated metaphor in word, image and gesture.

The enactment included identifying Charles’ ambivalence in recognising his previously unthought experience of being a needy infant. During the setting out, another group member, Mark, noticed my physical movement and asked if I was aware of this. I invited Mark to create his impression and enact his experience. This is what was referred to earlier as the role of therapeutic *double*. Mark perceived something of the unconscious language of my body. His

willingness to enact the expression assisted me to be more conscious. He then became the 'movement' required for Charles to psychologically link up the *needy infant* with his *ambivalent communicator*. In that moment Mark was the 'therapist' for the group, sharing his insight in the form of movement which both linked two conflicting forces within Charles and also enhanced the spontaneity level of the group-as-a-whole.

Mark had taken a risk, yet his expression was his 'response-ability' to the group. He was expressing the perception of the group in that particular moment of symbolic play. When this perception was expressed and enacted the picture on the stage became more complete. Given more time we could have maximised the enactment still further to give further clarity to the therapist-client relationship.

The following diagram depicts Sarah being interviewed by me at the edge of the stage, along with my thought that metaphor is a product of our co-creation. On the stage itself, aspects of 'Therapist' and 'Charles' are depicted. The therapist's role of *thoughtful analyst* linked to Charles' role of *ambivalent communicator*; the *metaphor delineator* linked with the emerging *needy infant*. Mark, as spontaneous actor, linked the *needy infant* and the *ambivalent communicator*.



The dramatic enactment was the metaphorical expression of the group experience beginning with recognition of a co-unconscious communication between Sarah and myself. Mark's contribution linked up the unexpressed insight of the group-as-a-whole.

Conclusion

The therapeutic metaphor, occurring in the mind of the therapist, is invaluable because it is the therapist's perception of the client's inner conflict. Sharing this perception requires a level of creativity and spontaneity in the therapist. This will ultimately assist people in developing their own capacity for symbolic play and therefore symbolisation. When I present my ideas in action, I endeavour to create opportunities for participants to gain greater perception through their experience whilst utilising the spontaneity of the group. This is both a rewarding and a challenging task.

References

- Bollas, C. (1987). *Shadow of the Object: The Psychoanalysis of the Unthought Known*. London: Free Association Books.
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