



Metaphoria

Metaphor and Guided Metaphor
for Psychotherapy and Healing

Rubin Battino, M.S.

*"A must-buy and must-read book. Rubin's
freshness and honesty are unparalleled, his grasp
of the subject matter is uncanny."*

Stephen Lankton

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Foreword

Stephen Lankton

Introduction

Metaphors are the looms over which we stretch our experience. There is something about stories and metaphors that has a profound effect on listeners: they teach, inspire, guide, communicate, are remembered, and, most of all, are everywhere!

I see stories or complex metaphors as more than a description of one thing in terms of another. They are an altered framework within which listeners can entertain novel ways of experiencing. Metaphors play a central role in all learning and communicating. They mediate between feelings, thinking, perception, and behavior. They are the symbolic equivalent of sensation. I use the term to extend the story, analogy, and anecdotes as well, as they all act the same on consciousness. When a story is involved, it incorporates plot and character development and drama. These *entrain* conscious attention and provide an evermore profound manner of impacting listeners at an unconscious level.

Complex stories such as those in myths, epics, and legends created historical backdrops as well. I imagine that some people somewhere listened to a storyteller long ago as she told about Prometheus creating humans and stealing the fire from Mount Olympus for human use; how Zeus then created Pandora for revenge, and sent her to Earth. And the storyteller told how Pandora's curiosity led her to open that special box and release all human troubles—and, too, how in fright she shut the box just *before* hope was released.

Some of the listeners were concerned about the tattered fabric of their own lives. For some it was "worn thin," or in many ways "torn," for some their life had "faded," and for others it was drab

or just old. And the listeners saw the storyteller's facial expressions as well as hearing the tale of Pandora. They saw a quick glance over there, a frown here, a questioning look there, and a smile here. And the listeners remembered: they thought about the origins of their own troubles and the need for courage—courage to look in the box of their life to find their own hope.

Elsewhere, other storytellers were remembered differently by their listeners. In the back of their minds people remembered hearing how characters invariably meet a god, confront a monster, overcome a challenger, complete a task, yield to a wise man, or ponder a riddle.

Listeners, just as do the protagonists within the stories, come to show jealousy, purity, wisdom, foolishness, piety, shame, doubt, or hesitation. They, like people everywhere, have been attracted to sirens who will ruin them, have exposed an Achilles' heel, are afraid to look into the box for hope or to take another risk, and are afraid to love or to cry. Yet the storyteller and the story help them to tap into their own resources and to cope with their own challenges in creative and personalized ways.

Myths retain a mystery and wisdom even though we may be too "enlightened" to believe. They also contain common sense and education. Homer's *Iliad* (c. 700 B.C.) tells of an episode in the Trojan War and the wrath of Achilles with its tragic consequences, including the deaths of Patroclus and Hector. But, too, Homer wove a tale that, perhaps inadvertently, explained how to launch a ship, talk to the other gender, prepare certain meals, negotiate a contract, and more.

Socialization

For better or worse, metaphors socialize us. We have "cultural myths" or "cultural metaphors" that infuse our growing minds with a nearly unexamined set of ideas. They soak into our minds as moisture penetrates a sponge. Without so much as a complaint, we can come to accept these so-called truths: "Men are strong, women are weak"; other religions or racial groups are better or worse; "God is on *our* side"; we should all act like Davie Crockett

or Betty Crocker, James Dean or Marilyn Monroe, Superman, Rambo, or Madonna or *the* Madonna. Then, too, tales of our values bias what we believe about American justice, Native Americans, our unique history, our neighborhood, and even civilized progress.

Even the metaphor of “progress” has come to mean leaving things *behind* us, and has utterly obscured the idea of real growth, which means leaving things *inside* us. Metaphors and myths of progress tell us: For the want of a nail the shoe was lost (for the want of the shoe, a horse, a rider, a battle, a kingdom etc.). And, from within the cultural cage, we cannot evaluate reality for ourselves. Yet, at the same time, we are told via still other stories, other metaphors, that we can indeed evaluate reality for ourselves.

There are also cultural metaphors that concern even our biological attributes and address characteristics such as red hair, green eyes, long fingers, blonde hair, fatness, skinniness, and so on. There are children’s metaphors that guide or tease out self-image. We hear labels such as Pinocchio, “Anna-Rexia,” and Gumby as children. We have family metaphors that include everything from “I can fix anything” and “our family is never good at math” to an idea that our family name can determine our occupation. And, of course, there is the favorite family “sphincter” (Berne, 1972, p. 164) that develops from repeated attention focused on how life is a “thrill to the heart,” or “a pain in the butt,” or “a constant upset,” a “pain in the neck,” “pisses me off,” or “oh, my aching back.” Metaphors are everywhere and they influence our being from cradle to grave, from our expectations to our attitudes and to our visceral experience.

Discovery and inspiration

But metaphors do even more. Let’s remember Dr Carl Jung, who pointed out the fact that even when our senses react to real phenomena—sights, and sounds—that they are then somehow translated from the realm of reality into that of the mind. That is, as our sensation happens, the experience has been affected or absorbed subliminally without our conscious knowledge, and ideas well up later from the unconscious as a sort of afterthought. These ideas may appear in the form of a dream or an inspiration. As a general

Chapter 4

Basic Metaphor—Structure and Development

4.1 Introduction

There are as many styles of metaphor as there are storytellers. Is the metaphor simple or complex, direct or indirect, with a straightforward message or one embedded in riddle like a Zen koan, plain or dramatic, neutral or moralistic, realistic or mythical, ordinary or heroic, general or specific, client- or therapist-generated, or one involving real people or spirits or animals or objects or fantastical beings? There are obviously many choices in the construction of a metaphor, just as there are in the content and delivery. Stories have beginnings, middles, and ends, with the middles expandable for whatever complex development is deemed necessary. The simple version may be that used by good lecturers: tell them what you are going to tell them, tell them, and then tell them what you've told them. A related approach is the sandwich method of criticism wherein you say something nice or praise the listener, state your criticism, and then end with something nice again. Whatever the format, the metaphor needs to engage the listener's attention, i.e. it needs to be dramatic, a *good* story.

Zeig (1980) has given eight reasons for the value of anecdotes (or metaphors) in therapy. They are: (1) anecdotes are nonthreatening; (2) anecdotes are engaging; (3) anecdotes foster independence—the person needs to make sense of the message and then come to a self-initiated conclusion or a self-initiated action; (4) anecdotes can be used to bypass natural resistance to change; (5) anecdotes can be used to control the relationship; (6) anecdotes model flexibility; (7) anecdotes can create confusion and promote hypnotic responsiveness; (8) anecdotes jog the memory—"They make the presented idea more memorable." Anecdotes are also respectful and gentle.

4.2 The four elements of a metaphor

Using a metaphor involves four basic elements. They are: (1) gather information; (2) construct the metaphor; (3) deliver the metaphor; and (4) some kind of closure. Each element is treated separately in what follows. (This material builds on Battino and South (1999) with permission.)

1. Gather information

Two kinds of information are needed before constructing appropriate metaphors. The first is about the presenting concern, and the second is related to obtaining sufficient personal information so that the metaphors can be tailor-made. These two aspects will be discussed separately. Please note that I use the word “concern” rather than the word “problem” since the former is less threatening and more open to solutions. This choice represents my bias towards solution-oriented therapy, rather than problem-oriented therapy.

a. Information about the problem

In a chapter on “negotiating the problem,” Cade and O’Hanlon (1993) give a useful list of questions designed to clarify the presenting concern. The questions are followed by some commentary. (To avoid awkward constructions, I will use “problem” in some of this section.)

(1) *When* does the problem occur? Are there any patterns or regularities in the occurrence of the problem, i.e. only on weekends, in the evening, at midnight etc.?

(2) *Where* does the problem occur? Is there a pattern as to particular locations where the problem occurs or does not occur? Is it never at work and only in the kitchen, for example?

(3) What is the *performance* of the problem? What would an objective observer see when the client had the problem, i.e. specific stances, movements, speech, gestures, actions? If I had your concern how would I act to reproduce it?

Chapter 9

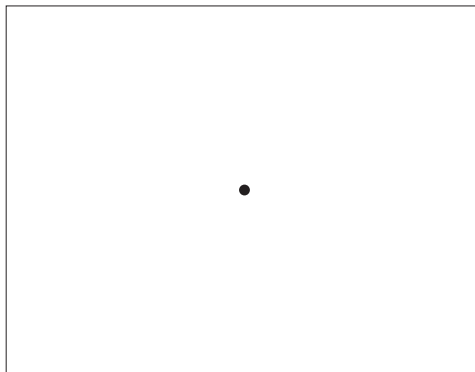
Reframing as Metaphor

9.1 Introduction

The way that you perceive a particular photograph or painting is influenced by the frame in which it is set, the lighting, and the surroundings. You can immediately sense how different a painting would look framed or unframed, alone on a wall, surrounded by many other paintings on the same wall, or on an easel in an open meadow or under shade trees. The surroundings affect our perception. This, of course, was well understood by Gestalt psychologists in their many experiments on figure–ground relationships. Changing the framing or the background or the surroundings changes the way that we perceive a given “figure.”

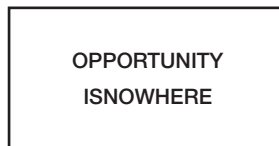
A simple example that Bernie Siegel likes to use is in Figure 9.1. On an $8\frac{1}{2} \times 11$ -inch piece of white paper, he has a black dot of perhaps $\frac{1}{4}$ -inch diameter, centered. He shows this to an audience and asks what they see. Most respond that they see a black dot. The white area is about 2,000 times the area of the black dot. (If you use a

Figure 9.1 The black dot on the white paper



black dot of ½-inch diameter, the ratio of white to black is about 500.) Siegel then points out that this is how most people who are confronted with a diagnosis of a life-challenging disease perceive the rest of their lives—they see the black dot and not the much greater white area surrounding it. This is one exercise in the art of reframing. It deals with where you focus your attention, and that affects your thinking and feeling and associated memories. The object itself—in this case the white paper with the black dot—does not change; what changes is your perception. The fascinating thing about the human mind is that once your way of perceiving an object or an event changes, it is almost impossible to return to the earlier perception.

Figure 9.2 Opportunity ...



Let us examine another “trick,” which I learned from John Graham-Pole, M.D., a pediatric oncologist. (You may be interested in his book, *Illness and the Art of Creative Self-Expression* (2000).) You are shown a card (Figure 9.2) on which two sequences of letters are printed. You can interpret this in two ways: OPPORTUNITY IS NOWHERE or OPPORTUNITY IS NOW HERE. Which did you choose? Knowing about the alternate readings, which one do you prefer? Is this a word game, or does it tell you about how you perceive the world? Where do you go with this latter information?

A good picture-framing shop can provide you with a number of choices for reframing the framed art work you brought in, or for your unframed work. You go to an experienced framer when your choices are limited; you go to a psychotherapist for effectively the same reason. When you are stuck in a particular behavior pattern or ideation, you expect the therapist to help you find new choices—new ways of behaving or thinking. Your personal situation and past are the reality fixed in the picture, the story, of your life up until that point. That past, that story, may be unalterable,

but how you *perceive* it, how you think about it, and how you feel about it can all be reframed. The perspective can change, the frame can be replaced.

What is the connection between reframing and metaphor? The answer is the subject of this chapter. Simply, if listening to a story changes your perspective on your life, on yourself, then that has already changed you. The guided metaphor discussed in the previous chapter is one way of obtaining this therapeutic reframing. Before discussing more about this subject, the nature of change is taken up in the next section.

9.2 *First- and second-order change*

One of the most important books in the history of psychotherapy was published in 1974—*Change. Principles of Problem Formation and Problem Resolution*. Its authors were Watzlawick, Weakland, and Fisch of the Mental Research Institute (MRI), Palo Alto. In the Foreword (pp. ix–x), Milton H. Erickson has the following to say:

There have been multitudes of books and theories on how to change people, but at long last, the authors in this book have looked seriously at the subject of change itself—both how change occurs spontaneously, and how change can be promoted ... I have viewed much of what I have done as expediting the currents of change already seething within the person and the family—but currents that need the “unexpected,” the “illogical,” and the “sudden” move to lead them to tangible fruition.

It is this phenomenon of change with which this book is concerned, the actual nature and kinds of change so long overlooked by the formulation of theories about how to change people. Watzlawick, Weakland, and Fisch have, in this extremely important book, looked at this phenomenon and put it into a conceptual framework—illuminated by examples from a variety of areas—which opens up new pathways to the further understanding of how people become enmeshed in problems with each other, and new pathways to expediting the resolution of such human impasses. The relevance of this new framework extends far beyond the sphere of “psychological” problems from which it grew. This work is

14.2 Elements of narrative therapy

Before describing for the reader the many essential elements of narrative therapy, I need to point out that the originators proceeded in their work from a grounding in social, linguistic, and communication theory. That is, there is a solid theoretical base for narrative therapy. Freedman and Combs (1996) do an excellent job of summarizing this.

Perhaps some quotations from White and Epston (1990) can help.

Social scientists became interested in the text analogy [where social organization is constructed as a behavioral test; problems are constructed as the performance of the oppressive dominant story or knowledge; and solutions are constructed in terms of opening space for the authoring of alternative stories] following observations that, although a piece of behavior occurs in time in such a way that it no longer exists in the present by the time it is attended to, the meaning that is ascribed to the behavior survives across time. [p. 9]

Concluding that we cannot have direct knowledge of the world, social scientists proposed that what persons know of life they know through “lived experience.” [p. 9]

... in order to make sense of our lives and to express ourselves, experience must be “storied” and it is this storying that determines the meaning ascribed to experience.

In striving to make sense of life, persons face the task of arranging their experiences of events in sequences across time in such a way as to arrive at a coherent account of themselves and the world around them. Specific experiences of events of the past and present, and those that are predicted to occur in the future, must be connected in a lineal sequence to develop this account. This account can be referred to as a story or self-narrative (see Gergen & Gergen, 1984). The success of this storying of experience provides persons with a sense of continuity and meaning in their lives, and this is relied upon for the ordering of daily lives and for the interpretation of further experiences. Since all stories have a beginning (or a history), a middle (or a present), and an ending (or a future), then the

interpretation of current events is as much future-shaped as it is past-determined. [pp. 9–10]

White and Epston (1990, p. 83) consider that a therapy working within the narrative mode of thought would take a form that:

1. privileges the person's lived experience;
2. encourages a perception of a changing world through the plotting or linking of lived experience through the temporal dimension;
3. invokes the subjunctive mood in the triggering of presuppositions, the establishment of implicit meaning, and in the generation of multiple perspective;
4. encourages polysemy ["polyphonic orientation"] and the use of ordinary, poetic and picturesque language in the description of experience and in the endeavor to construct new stories;
5. invites a reflexive posture and an appreciation of one's participation in interpretive acts;
6. encourages a sense of authorship and re-authorship of one's life and relationships in the telling and retelling of one's story;
7. acknowledges that stories are co-produced and endeavors to establish conditions under which the "subject" becomes the privileged author;
8. consistently inserts pronouns "I" and "you" in the description of events.

Narrative therapy has a number of characteristic elements. A basic one is described as follows by O'Hanlon (1994, p. 24):

The hallmark of the narrative approach is the credo, "The person is never the problem; the problem is the problem." Through use of their most well-known technique, externalization, narrative therapists are able to acknowledge the power of labels while both avoiding the trap of reinforcing people's attachment to them and letting

This text is essential for trainers, clinicians and *everyone* wishing to explore the fascinating potential of metaphor. In a systematic analysis of the effectiveness of metaphor, *Metaphoria* examines:

- the structure of a metaphor: from its essential elements to its optional components
- the delivery of metaphor: from rapport-building and communication skills to the art of effective story telling
- what makes a metaphor work.

Forming a complete reference guide and resource for the practitioner and therapist, *Metaphoria* investigates:

- the application of metaphor for all ages
- the use of metaphor in specific approaches such as: sleep induction, pain control, trauma, reframing, art therapy, hypnotherapy, healing, preparation for surgery, narrative therapy, solution-focused therapy and ordeal therapy
- language forms
- metaphor in Ericksonian psychotherapy and hypnosis.

Containing sample scripts and suggestions for basic and advanced metaphors, as well as a history of the use of metaphor, *Metaphoria* provides readers with everything they need to comprehend fully the unique properties of metaphor, and to create metaphors to suit their individual requirements.





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“It is comprehensive, giving not only Battino’s original ideas about metaphor, but excellent summaries of the other major contributors’ in this area. This book gives precise instructions for using a vague art and method. Highly recommended.”

Bill O’Hanlon, author of *Do One Thing Different*, and co-author of *In Search of Solutions* and *A Guide to Possibility-Land*.


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