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**““WELL SAID”: OUR WORDS, OUR TOOLS”: COMPASSIONATE CARE
THROUGH METAPHORICAL TALK**

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“Well Said”: Our Words, Our Tools”; Compassionate Care Through Metaphorical Talk

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Abstract

In keeping with our founders, social workers strive for the well being of those they serve and the environments in which they practice. As social workers, our words are indeed our tools. Many practitioners are familiar with the use of journal keeping, storytelling, and analogies as techniques to assist in unveiling deep rooted thoughts and feelings. Often unnoticed or overlooked, metaphors can provide innovative ways to enhance the therapeutic relationship. This presentation will explore the clinical indications and different uses of metaphorical talk in the context of oncology social work. Drawn from the literature, several perspectives, models, theories, will be discussed to build the rationale for using metaphors as an adjunctive technique. Whether one is psychodynamic oriented or cognitively based, both schools agree metaphorical talk can be useful in the helping process. There will be an emphasis on “generative” metaphors which are closely related to the social work techniques of problem solving and reframing. Case examples along with specific techniques will be used to illustrate the theory and demonstrate outcomes. The presentation will discuss the following: defining metaphors, theoretical approaches, and the beneficial application of various types of metaphors, as well as why and when metaphors are appropriate. Lastly, special construction considerations will be reviewed along with cautions and concerns in using this technique. Through the use of metaphorical talk, the social worker can enhance their therapeutic “tool box” bringing relief and compassionate care to their patients.

Objectives

1. Define and understand the various conceptual approaches of metaphorical talk in the helping process;
2. Construct and implement “generative” metaphors as an adjunctive technique in a clinically eclectic social work setting;
3. Identify the benefits as well as the cautions and concerns of using metaphorical talk in a therapeutic relationship in a clinical social work practice.

Introduction

“tools for your toolbox”

a user friendly “avenue” to explore sensitive issues

Fits the brief and short term models

Eclectic nature of its utility is a “good fit” for social work

researched based: psychodynamic & cognitive

Definition: The Role of Language

“do you see what I’m saying?” ... “watch what you say”

“see” how words shape images in our minds; thoughts, actions, and perceptions

Psychologically, a metaphor can be viewed not only as a means of communication but also, and more importantly, as a method for facilitating change

A metaphor is by definition an analogy or suggestion. It is a figure of speech which depicts one quality in terms of another. In figurative language what is said is not what is meant.

...a persuasive process marked by “symbolic communications” in which ideas are conveyed by the therapist in order to foster attitudinal, emotional, and behavioral change in the client.

...metaphor is regarded as playing an important role in the formulation and transmission of new paradigms

...lies at the heart of paradigm change

Generative Metaphors

Can Be Therapist or Client Generated

Generating new ways of understanding a problem and enhances problem solving

“Reframing” a new way of “picturing” the problem and interpretation of the situation

Under construction: Who generated the metaphor? Therapist, Client, Spontaneously, or Collaboratively

Let’s “walk through” two examples:

“My husband’s a bear when he comes home from work”

“Your silence speaks volumes

Techniques

A Therapeutic Metaphor Should:

Be consistent with the development level of the client

Be drawn from the every day world of common sense

Have the capability to be cued in situations outside the therapy hour

Provides clients with a quick comprehensible map for current directions, awareness and problem solutions

Elicits an unconscious search for alternative ways to deal with their problems

Illustrates the meaning and application that the client attaches to the metaphor as being derived from the client’s own inner resources: memories, dreams, goals, fears, hopes, and unconscious yearnings

Strategic and Deliberate Use of Metaphors:

Explain the meaning, value, and the applicability of the metaphor

Model its use in stressful situations

Have clients practice imagining the metaphor as homework assignments

Practice the metaphor as a coping and/or problem solving technique

Frequent or repeated presentations of the metaphor can assist in lowering resistance in certain cases

Ask clients to verbalize the metaphor to their situation, explicitly, this ensure shared meaning and helps the internalization process

Humor may be used

Evaluation of the usefulness can be made by noting if there is a change in pattern of thinking, belief system is challenged and/or the client asks for clarification

Note how much of the metaphor is remembered

Has the original impression of the metaphor changed in any way

Practical Reminders :

Useful metaphors can be as simple as one-liners or as elaborate as carefully constructed stories

Brief metaphors can be used to make a specific point

Longer metaphors facilitate change by providing new perspectives

Metaphor must fit the client's "frame of reference" – childhood experiences, past times, particular likes or dislikes

Metaphors have the ability to move at the pace of the client

Metaphors can build rapport and tends to enhance participation

Sometimes metaphors receive more attention when they are delivered suddenly, as a complete change in subject form preceding conversation, "a verbal punctuation"

Are non authoritarian and a gentle way to suggest change

References

Atwood, J. D. & Levine, L. B. (1991). Ax murderers, dragons, spiders and webs: therapeutic metaphors in couple therapy. Contemporary Family Therapy, 13(3), 201-217

Berlin, R. M., Olsen, M. E., Cano, C. E., Engel, S. (1991). Metaphor and psychotherapy, American Journal of Psychotherapy, Vol. XLV, No. 3, 359-368.

Billings, C. V. (1991). Therapeutic use of metaphors, Issues in Mental Health Nursing, 12:1-8.

Combs, G., & Freedman, J. (1990). Symbol, story, and ceremony: Using Metaphor in Individual and Family Therapy. New York: W. W. Norton.

Fox, R. (1989). What is meta for? Clinical Social Work Journal, Vol. 17, No. 3, Fa 233-244.

Mays, M. (1990). The use of metaphor in hypnotherapy and psychotherapy, Individual Psychology, Vol 46, No 4, 423-430.

McCurry, S.M. & Hayes, S.C. (1992). Clinical and experimental perspectives on metaphorical talk, Clinical Psychology Review, Vol 12, 763-785.

Morgan, L. B. (1988). Metaphoric communication and the psychotherapeutic process, Journal of Poetry Therapy, Vol 1, No 3, 161-181.

Murran, J. C. & DiGiuseppe, R. A. (1990). Toward a cognitive formulation of metaphor use in psychotherapy, Clinical Psychology Review, Vol 10, pp 69-85.

Wig, C. A. & Gruenke, C. (1991). The use of metaphor to overcome inmate resistance to mental health counseling, Journal of Counseling and Development, Vol 69, 414-418.

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