

## **The Therapeutic Use of Metaphor & Clean Language**

Many models of psychotherapy and counselling have paid different degrees of attention to the words used by therapists. The person-centred approach developed by Carl Rogers promoted a non-directive engagement with clients. Rogers believed that humans have an innate tendency to find their own fulfilment. In Rogers (1980, p.117) he stated that “Individuals have within themselves vast resources for self-understanding and for altering their self-concepts, basic attitudes, and self-directed behaviour; these resources can be tapped if a definable climate of facilitative psychological attitudes can be provided”. To use a metaphor – Roger’s Person Centred model was the spring from which the river of Clean Language flows. I understand that David Grove’s tutor was Ernest Rossi (originally a student of Carl Rogers).

Clean Language is a way of using words and forming questions in a neutral way which helps the recipient stay with their own language and metaphors. It is a way in which, in the context of therapy and metaphors, the therapist does not influence the language, stance and flow of the other. In normal conversations the use of Clean Language may appear a little strange but when used when the other is engaging in their own story, narrative or metaphor it feels natural. The therapist uses Clean Language to help the client move the metaphor. Questions such as: “What happens next?” or “What needs to happen?” will be posed. These are ‘clean’ and ‘moving forward’ questions.

I do find similarities in the process of Clean Language to the ‘Focusing’ approach detailed in Gendlin (2003). Gendlin regarded his work as being Rogerian, although a number of purists have commented that his work is too directive. Gendlin’s six stage process is founded on the premise that “only the body knows your problems and where their cruxes lie” (p.11). The stages of Gendlin’s model are: clearing a space, felt sense, handle, resonating, asking and receiving. Once a ‘felt sense’ has been identified within one’s body, then a ‘handle’ is identified which links with the felt sense. This can be a word or phrase, but also can be an image. This could be a metaphor or symbol as outlined in Grove & Panzer (1989). Following a period of resonating the connection between the felt sense and the handle the final element detailed in Gendlin (2003) is a transaction of asking and receiving information from the ‘handle’, the embodied word or image. Again, this fits with Grove & Panzer (1989) where the metaphor is communicated with directly. Gendlin (2003) does not refer to Clean Language although he does highlight the importance of the therapist not analysing, being mostly silent and to “avoid forcing words into the felt sense” (p.55). Also, the “triggering questions” (p.104) have a neutral element to them, which aligns Gendlin’s model to Grove’s. For example: “what is at the centre of it?” or “what is it doing?” (Gendlin, 2003, p.104).

Other models such as Neuro Linguistic Programming (NLP) have also focused on the language of the therapist. NLP therapists focus on the predominant sub-modalities in their clients’ own language. They can be visual, auditory, kinesthetic, olfactory, or gustatory, reflecting our basic senses. For example a client with a visual language may report seeing what you say, or having a vision of the future, whereas kinesthetic language is wrapped around touch and feelings (Bandler & Grinder, 1975).

The late New Zealand counselling psychologist David Grove, pioneered the use of metaphor in counselling and psychotherapy in the 1980’s, particularly for working with clients who have suffered a trauma. He worked with a number of Vietnam War veterans in the United States. Comparing his use of Clean Language to that of Ericksonian and NLP practitioners David Grove in Groves & Panzer (1989, p.8) states: “The shape and the structure of questions will limit the ways in which a client can respond and can leave a form of tunnel vision which will restrict his response pattern. Were we to ask: ‘And how did you feel about that?’ this would tend to limit the client’s response. This may well

presuppose that the most valued way to respond pertains to a feeling, whereas the client may have wanted to respond in another way (i.e. cognitively).” When Clean Language is used the client can manifest his own language and the language used by the therapist is facilitatory, allowing the client to enter into their matrix of experience.

He found that his clients often used personal metaphors to describe their painful emotional states and traumatic memories. He also found that when the metaphors were examined they became idiosyncratic with meaning that only applied to his client and that the metaphors had form and structure that had a consistent internal logic. Sullivan & Rees (2008, p.13) comment on Grove’s work: “Rather than people having metaphors, it’s as if they were their metaphors. And when these changed, they did too.” This is a powerful assertion, and if true, could have significant impact on the therapeutic process, which is often about change (or perhaps the hope of change). On reflection I wonder why after thirty years why is there very little research and literature on the use of metaphor in therapy, (only three books have been published on Grove’s work)? His work is predominantly used in the world of coaching post 2000.

Grove found that clients have a number of ways of describing their experiences and inner realities. They can be expressed as memories, metaphors, symbols and semantics. In Grove & Panzer (1989) he explains that the therapist should be aware of the client’s predominant language. Each of the four languages is explored further:-

**Memories.** A memory is a recall of any event of the past. Grove suggests that the client using memory language will not only relate to particular events that have occurred (real or imagined) they may also express anticipatory memories about the future. An example is provided in Grove & Panzer (1989, p.4) “when a husband is talking about his relationship with his wife and he focuses on “If only I had not hit her then, we would not be having this difficulty now”, the husband is identifying this past event as the main cause that is affecting him now”. The client in this mode will relate current issues in terms of past events.

**Symbols.** Grove refers to symbols as internal and idiosyncratic rather than Jungian universal symbols. These symbols appear to be embodied within the client. Again in Grove & Panzer (1989, p.4) I find an example with the same client who faces a relationship problem with his wife – “I’m so upset with the fact that I hit my wife and my relationship now, it is so tensed it is like every time we meet and talk it’s like I have got this knot in my stomach.” Clients expressing in this mode relate predominantly to their physiology, although “it’s like a knot” is also a metaphor.

**Metaphors.** Grove defines metaphors in this context as individually derived, based on the client’s own experience and external to their body. Remaining with the husband client a further example is provide in Grove & Panzer (1984, p.5) “Ever since it happened we have no communication. It’s like there is a wall between us. Every time I to talk to my wife it’s like trying to talk through a brick wall. The wall is the metaphor.” Here the language is dense in metaphor. The issue is not feelings, memories or what has happened. He is concerned with the wall between them. According to Grove working on the wall will promote therapeutic change and I believe will bypass any defenses he has to talking about the core issues.

**Semantics.** The importance in this mode is the private definition of the words. The words carry the meaning for the client in this way of expressing. For example the husband might say “Well, she really deserved what I did to her, she is so immature. If she was more mature then we would not have a problem. The problem is really in the communication. It does not really have anything to do with what I did, but we are not communicating and I just think it is her immaturity that does it” (Groves &

Panzer, 1984, p.5).Grove admits that he finds this kind of client 'tricky' in that the other modes are delivered with meaning. Whereas with semantics it is the words and not the meaning that have the most effect. This kind of client appears to be 'in the head' and perhaps not the kind of client that would grasp the concept of metaphor or symbols. A client perhaps more suited to a cognitive approach?

When using a predominantly metaphoric language it is the idea of the metaphor and its visualisation (the wall) that is important. When referring to a metaphoric symbol, it is not the words that are important; it is the feelings (knot in stomach). In the language of memories it is the memory itself again rather than the words that are significant.

Groves ascertains that when a client internally accesses their 'matrix of experience' through the language of metaphors, symbols and memories and the therapist utilises 'Clean Language' the client will enter into an alpha state (an altered state or conversational trance state.) This is a fascinating concept and supports my experience of working with clients in this way. Unfortunately, no Research Findings are quoted to support this statement, although David Grove produced a number of videos of his client work (see Grove 1991a/b & 1992) where it is clear that his clients expressing in metaphorical language enter a 'conversational trance' state (or what may technically be described as the Alpha State). In my experience counselling clients will often drift in and out of this state during sessions, for example, when they are recalling memories or go inward and focus on the body etc. Examples of others working this way include; Deep Emotional Processing therapy (Berger, 2000) and Reichian therapy (West 1994), psychotherapies which help clients resolve issues by following feelings and embodied experiences. Human Givens practitioners value working in this state and promote the positive changes that occur during REM/Alpha states. Griffin & Tyrrell (2013) believe that this 'right-brain' activity is a crucial element of REM sleep states, to complete unresolved issues and patters through the unconscious. Metaphor work can feel like you are following a client through a dream, completing patters, travelling from dark caves to sunny meadows.

Sullivan & Rees (2008, p.14) highlight the importance of the link between the use of clean language and metaphor in therapy: "As a complete approach, Clean Language can be combined with the metaphors a person uses, creating a bridge between their conscious and unconscious minds. This can become a profound personal exploration: a route to deeper understanding of themselves, and to resolution and healing". The therapist using Clean Language and metaphor can get to a new level of understanding. Clean language in itself is not a way of understanding metaphors, it allows the client to dwell in their experience and reveal new insights for themselves. It is not the universal answer, and is inappropriate to use in certain (more cognitive) therapies and for clients who don't easily use metaphor, symbols or memory. Its use could easily be extended to other spheres, such as education, research and commerce. Interestingly, I carried out a small piece if research on Clean Language in research interviews. The findings revealed that when the researcher asked a 'Clean' neutral question (similar to those listed in the following table) the responding answer had much more detail and revealed richer data.

Clean Language questions are only asked by the therapist that enhance the client's own understanding of their experience, thus structuring an internal reality. Examples of clean questions would be "What would you like to have happen?" or "What needs to happen?" as opposed to "What do you want?" which future orients a client and forces a reply in terms of what he wants or doesn't want. Useful examples are provided in the following table.

**Examples of Clean Language** from Grove & Panzer (1989, p.14)

<b>Question</b>	<b>Clean Question</b>
What can I do for you?	What do you need to have happen?
How can I help?	What would be helpful?
What seems to be the matter?	What do you want?
What is your problem?	What would you like?
What brings you here (today)?	What would you want (to happen here today?)
How do you feel?	Are you experiencing anything now?
What is going through your mind?	Is there something you are thinking?
I am listening.	And when that happened, how did you feel?
What are you thinking?	Are you thinking anything?
How do you feel about that?	And when that happened, how did you feel?
What does it remind you of?	And when that happened, how did that affect you?
Tell me what happened.	And when that happened...?
What do you think/feel?	Is there anything happening?
Can you get in touch with that feeling?	And when you have that feeling, what does that feel like? And where do you feel it?
How does that make you feel?	And when that happened did you have any feeling?
Are you angry/do you feel angry?	What is that feeling like?
You must have a lot of anger.	Did you feel anything when that happened?
I want you to...	And what do you suggest you could do....?
<b>Words</b>	<b>Clean Words</b>
Addiction, habit, compulsion	What is it that you don't want to do?
Depression, anxiety, phobia, obsession, pathology.	What is it that you don't want to think/feel?

The neutrality of clean language is explained in Grove (1991b, p.9) "Clean Language is information-centred. It is neither client nor therapist centred." When reflecting on the phrases used in the above table, their use in more conventional counselling and psychotherapy could be considered as inauthentic or incongruent. However, the use of the Clean Language, as suggested, keeps the client within their 'matrix of experience' and in a creative 'right-brain' state with the potential for the therapeutic movement of the metaphor.

## Case Study

It may be useful to illustrate the utilisation of Clean Language and metaphor in therapy through the introduction of a case study of a session in my private practice. I tend to agree with Stiles (2007) who suggests that practitioners have expertise in daily access to the phenomena that theories of counselling and psychotherapy seek to explain. This case study highlights the use of Clean Language and metaphor in a single session. When the client accessed the internal metaphors she would drift into a conversational trance, with closed eyes and apparent Rapid Eye Movement (REM) processing.

*Emily (not her real name) in her forties presented with issues around weight gain. She explained that she had received counselling and psychotherapy over a number of years and hinted at possible child abuse. She indicated that she believed that her weight problems and low self-esteem were connected to childhood issues, but didn't want to go over her past with me again at this time. We contracted to use metaphor as a way of resolving her issues without the need to resurrect painful memories. She also believed that her previous therapy had been useful but hadn't got to the root of her problems.*

*The session can be reviewed (almost verbatim) as follows:-*

*Client: "When I think of my weight it's like a bubbling black liquid" (pointing at her stomach).*

*Therapist: "So it's like a bubbling black liquid – and it's in your stomach?"*

*Client: "Yes and underneath the bubbling black liquid there is turmoil".*

*Therapist: "And when there is bubbling black liquid with turmoil underneath, what needs to happen?" (I could have investigated 'turmoil' in more depth here".*

*Client: "It needs to turn white".*

*Therapist: "And when it needs to turn white, can it turn white?"*

*Client: (pause...client has her eyes closed at this stage) "No it's blue"*

*Therapist: "What needs to happen next?"*

*Client: "I need to get rid of some rubbish."*

*Therapist: "And when you need to get rid of some rubbish, what needs to happen?"*

*Client: "I need to put the bags in the bin."*

*Therapist: "How many bags do you need to put in the bin?" (Deepening her matrix of experience.)*

*Client: "Twenty eight."*

*Therapist: "And when you need to put twenty eight bags in the bin – can you put twenty eight bags in the bin?"*

*Client: (Pause and Rapid Eye Movement (R.E.M.)) "Yes" (Small sigh.)*

*Therapist: "And when you have put the twenty eight bags in the bin, what happens next?"*

*Client: "It's still blue."*

*Therapist: "And when it's still blue, what needs to happen?"*

*Client: (Pause) "There are seventeen more bags"*

*Therapist: "And when there are seventeen more bags, what needs to happen to those bags?"*

*Client: "They need to go in the cosmic bin".*

*Therapist: "And when they need to go into the cosmic bin, can they go into the cosmic bin?"*

*Client: (Pause and R.E.M.) "Yes" (Sigh).*

*Therapist: "And when they have all gone in the bin, what happens next?"*

*Client: "It's now light blue."*

*Therapist: "So what needs to happen?"*

*Client: "There are seventy two layers."*

*Therapist: "What needs to happen to seventy two layers?"*

*Client: "They need to go."*

*Therapist: "And when they need to go, can they go?"*

*Client: (Pause and R.E.M.) "No".*

*Therapist: "So when there are seventy two layers what needs to happen?"*

*Client: "I need to ask for help."*

*Therapist: "And when you need to ask for help, who or what can help?" (Often resources can be found in this altered state – they range from 'higher-self', 'spiritual-self' or God.)*

*Client: "The wise part can help."*

*Therapist: "Thank you wise part, thank you for helping, now what needs to happen?"*

*Client: "They need to go into the cosmic bin – ten at a time."*

*Therapist: "And when they need to go into the bin ten at a time – can they go into the cosmic bin ten at a time?"*

*Client: (Pause and R.E.M.) "Yes" (large sigh and further pause).*

*Therapist: "And what happens next?"*

*Client: (Weeping) "It's the core, its horrible!"*

*Therapist: "And when there is a core and it's horrible; what needs to happen?"*

*Client: "It needs to be wrapped in a metal covering."*

*Therapist: "And when it needs to be wrapped in a metal covering, can it be wrapped in a metal covering?"*

*Client: (Pause and R.E.M.) "Yes" (sigh.)*

*Therapist: "What happens next?"*

*Client: "It needs to go into the cosmic bin."*

*Therapist: "And when it needs to go into the cosmic bin, can it go into the cosmic bin?"*

*Client: (Pause and R.E.M.) "Yes" (more tears).*

*Therapist: "And what happens next?"*

*Client: (smile) "It's a white shiny thing, it's white and shiny and there is a filter over it to keep it white and shiny".*

*Therapist: "And when it's white and shiny and there is a filter over it, what else needs to happen?"*

*Client: "I need to put it on a pedestal."*

*Therapist: "And when you need to put it on a pedestal, can you put it on a pedestal?"*

*Client: "Yes" (smile.)*

*Therapist: "What else needs to happen?"*

*Client: "I need to keep it."*

*Therapist: "And when you need to keep it, can you keep it?"*

*Client: "Yes, it is in my heart now" (points to her heart.)*

*Therapist: "And when it is in your heart, what else needs to happen?"*

*Client: "Nothing".*

*The client opens her eyes, coming back to conscious awareness and says "Wow".*

I think it would be useful to put this session into further context at this stage:

- This Clean Language session was after several sessions of rapport building. A sound relationship is preferable before you start this work. If Clean Language and metaphors are introduced too early the client can find it disturbing or alien.
- Emily reported some catharsis following this session, although considerable subsequent work was carried out – approximately 2 years of fortnightly sessions.
- Following this and other metaphor sessions Emily was able to talk through childhood issues in a bearable way.
- Clean Language appears to help the client stay with and develop the metaphor. There is a sense of movement here similar to Meredith's case study.
- It appears to me that the presenting issue of weight was a layer of protection for Emily and also related to her relationship with her mother. Her mother was a 'feeder' and fed Emily huge portions when she would visit. We did some work on this where she imagined her mother in wicker basket which hung from the ceiling. My client had the key to the door of the basket. When she next visited her holding that image in her mind, her mother gave her a smaller portion. I can only conclude that the metaphor helped my client gain control of her emotions and body language which unconsciously projected the message 'I am an Adult' to her mother.
- One metaphor session with Emily highlighted a potential problem with metaphor usage in therapy. I will be discussing the downsides of metaphor in a subsequent chapter. In this

particular session her 'Child' was put in charge of what Emily would eat (in an attempt to give her some 'Adult' responsibilities). This did not work out for Emily who reported a disastrous week of eating. The 'Child' did not want this responsibility and rebelled against this. The result was a week of a poor diet of crisps and chocolate! Before metaphor work is completed it is important to bring the client back to their actual age. You do not want an 8 year old driving a car home, which is what happened in a group a friend and colleague was running. He had a very scared and upset client.

## **Grove & Trauma**

In a world which is increasingly and unfortunately involved in terrorism and natural disasters it is important, I believe it is important to review the methods of therapy which claim to help with trauma. The focus on the role of the body in trauma is gaining recognition (Levine, 1997: Van der Kolk, 2000). The work of Grove aligns itself to other somatic adjuncts to psychological trauma-focused therapies. As Peter Levine (1997, p.3) emphatically concludes: "Most trauma therapies address the mind through talk and the molecules of the mind through drugs. Both of these approaches can be of use. However, trauma is not, will not, and can never be fully healed until we address the essential role played by the body". He insists that "body sensation, rather than intense emotion, is the key to healing trauma" (p.12).

Metaphor therapy, with more supportive research and training could offer a viable alternative to current trauma resolution models, such as EMDR and Cognitive Behavioural Trauma Focused Therapy. I certainly have experienced positive results on maturing embodied metaphors in the way David Grove proposed. Grove claimed that metaphors are foreign objects which have been imported into the body at a moment in time just before a traumatic event, often the client has frozen this moment. A moment he referred to as T-1. The purpose of his metaphor work is to grow the experience up from T-1 through T, into T+1, when it's all over. The healing strategy is to provide a suitable environment in which the metaphors can be commissioned to go outside and to perform a healing function outside the body. He would question the client's metaphor (often directly) until it confesses its strengths, matures itself and externalises so client no longer has to hold these feelings on the inside. Clients can change unhelpful metaphors through the psychological process of metaphor therapy into more positive ones, or become more accepting of them. He found that clients could recall their traumas far easier once the metaphor work was completed. I also find that it easier for my clients to talk about the difficult episodes in their lives after the embodied metaphors have been matured (see the 'Emily' case study above).

## **Summary**

The use of Clean Language can be useful to help clients remain within their experiencing and development of a metaphor. David Grove employed an extremely soporific voice when working with clients with Clean Language. His voice was very soft and about a third of the speed of normal conversations. In my experience this is not needed. A slightly softer tone than usual at your normal conversational pace can be effective, but not necessary. As a therapist you may engage fruitfully with the metaphors you create between you and your client without using Clean Language. However, you may find the neutralisation of your own language in general to be helpful when working as a therapist. For example the question: "How does that feel?" may throw a client because at that moment they aren't aware of feeling anything: "What is that like for you?" or "What are you experiencing?" may open up some new possibilities for you and your client.



