

Post-graduate Research Dissertation

**Why, when and how do qualified psychotherapists
from a range of modalities make use of client-
generated metaphors using Clean Language?**

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Abstract

This study attempts to contribute to our understanding of therapist's usage of Clean Language (CL) to facilitate client-generated metaphors in brief psychotherapy.

Five semi-structured interviews were conducted with therapists who were trained in a range of psychotherapeutic modalities. The interviews utilised a CL interviewing methodology. The transcribed interviews were analysed based on the principles of Interpretative Phenomenological Analysis (IPA). Six analytic themes were derived from the analysis: 1) experience and training, 2) one of many tools, 3) focus on client and their experiencing, 4) effective and efficient enabler of change, 5) personal preference, and 6) relational and co-creative aspects.

The findings highlight the different ways that therapists understand and apply CL to facilitate client-generated metaphors in their psychotherapeutic practice. CL can be understood as an effective adjunct tool to existing psychotherapeutic modalities. The analysis of the interviews also reveals a trend supporting the use of CL as an underlying phenomenological approach in the therapeutic relationship that includes co-creative aspects.

This research has helped build a greater understanding of how CL is used in psychotherapy to facilitate client-generated metaphors. More research in this area would be welcomed.

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Table of Abbreviations

AHPP	Association for Humanistic Psychology Practitioners
BACP	British Association of Counselling and Psychotherapy
CL	Clean Language
DoH	Department of Health
HR	Hypnotherapy Register
IPA	Interpretative Phenomenological Analysis
NCS	National Counselling Society
NLP	Neuro-linguistic Programming
NLPtCA	Neurolinguistic Psychotherapy and Counselling Association
UK	United Kingdom
UKCP	United Kingdom Council for Psychotherapy

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I confirm that the work presented in this research is original except where other sources are cited.

Chapter 1: Introduction

'Metaphors' have been part of human history since the evolution of mankind. Early cave drawings and symbols were metaphorically telling a story. The actual study of metaphor might be traced to the ancient Greek philosopher Aristotle, who conceptualised metaphor as:

"...a series of words in which a comparison is being made between two or more entities that are literally dissimilar." (Angus and Rennie, 1988:552).

Many myths and stories exist throughout human history across cultures and socio-economic systems. Religions are largely based on metaphors wrapped in stories, such as parables that teach moral principles based on the socio-cultural norms of the time (Winkelman, 2000). Metaphor has been defined in essence as:

"...understanding and experiencing one kind of a thing in terms of another..." (Lakoff and Johnson, 1980:5)

Metaphors are more than figures of speech, they structure the way we perceive, think and behave (Lakoff and Johnson, 1980; Gibbs, 1996; Nadeau, 2006); how we experience and make meaning of reality. Metaphors are adept at capturing complex themes in memorable and concise ways.

Gregory Bateson (1979) proposed that:

"...mind and the evolution of all living organisms in nature are unified within a single principle, "the pattern that connects"...[which] is metaphor..." (Kopp, 1995:xxiv-xxv)

Metaphor and embodied schemata are described as primary patterns of meaning making, where our understanding becomes blended with mind-body experience, culture, language and living history. Since this affects our health and wellbeing on

these multiple levels, Owen (1989) believed that it would form the basis for a holistic psychotherapy.

I am a final year student and this dissertation presents my research project as part of my postgraduate diploma in Outcome Oriented Psychotherapies. Metaphors have had a significant impact on my own personal development and in my clinical practice with clients. I embarked on a journey to find out more about 'metaphors in therapy' and was 'blown away' by the amount of available literature. After researching this field, it became clear to me that I was particularly interested in 'client-generated' metaphors.

This naturally led me down the 'relatively new' path of Clean Language (Lawley and Tompkins, 2000). Clean Language methods appear to be an effective and efficient tool to generate client's metaphors for positive change in brief psychotherapy (Grove and Panzer, 1989; Lawley and Tompkins, 2000). On this journey, I found that this area appears to be an exciting and promising field that could benefit from good quality research going forward.

Chapter 2: Literature Review

This section explores the relevance of metaphors and client-generated metaphors in psychotherapy, comparing and contrasting it to existing research and its current limitations in the field.

2.1 Relevance of Using Metaphors in Psychotherapy

Psychotherapeutic work relies on the action of language to create, assign, and deepen meaning in the therapeutic encounter (Siegelman, 1990). To achieve this, there needs to be affective and cognitive resonance between a therapist and a client during a session. Metaphor can create a space to explore and expand ideas, retaining reality while encouraging fantasy to flourish.

Winnicott stipulated that meaning is created from the dialectic of fantasy and reality, subjective and objective, conscious and unconscious fragments between clinician and client (as cited in Siegelman, 1990). Working within the metaphor can help generate meaning.

Lyddon et al. (2001) highlighted increased interest in metaphor and its facilitative role for change in therapy since language, narratives, and stories tend to influence clients' personal and social realities. It has been suggested elsewhere that people use on average six metaphors per minute (Tosey et al., 2013). Not using clients' metaphors would appear to be ignoring a crucial aspect of people's experience.

There is now considerable research on the effectiveness of using metaphors in psychotherapy to enable positive change. Metaphors are thought to access unconscious processes and increased right-brain function, important for promoting psychological and behavioural change (Lenrow, 1966; Barker, 1985; Evans, 1988; Danesi, 1989; Strong, 1989; Gilligan, 1990; Kopp, 1995; Levitt et al., 2001).

In the late 1950s and 1960s, the psychiatrist and hypnotherapist Milton Erickson was well renowned for utilising unconventional methods to successfully achieve therapeutic change in a short time frame (Rosen, 1991; Haley, 1993).

Erickson believed metaphors would challenge the client's unconscious mind by seeking meaning through the indirect covert messages (Carmichael, 2000).

Lakoff and Johnson (1980) explained that we all have crucial metaphors which serve as unconscious representations and determinants of our lives. Whereas Barker (1985) stipulated that a person may take a metaphor literally on the conscious level, while on the unconscious level perceive its symbolic meaning. It is on this assumption that the clinical use of metaphorical communication is based.

Barker claimed that for therapy to lead to substantial and quick affective and behavioural change, it must address right brain processes (1985, cited in Larking and Zabourck, 1988). Previous research suggests that any injury caused to the right-hemisphere could produce difficulties in comprehending metaphors (Danesi, 1989). However, the right-hemisphere theory has been criticised as most complex tasks involve complementary abilities of both hemispheres:

“...Metaphor stands with a foot in each hemisphere...” (Kopp, 1995:161)

Kopp (1995) explained that metaphors are unique as metaphoric speech includes both the generation of images and its translation into verbal speech, which is an inter-hemispheric process. However, Lawley and Tompkins suggested that symbolic domain is expressed in many different ways (Lawley and Tompkins, 2000:10).

Vines (1988) found that imagery in the brain would operate under a non-logical system similar to holography. The **holographic brain hypothesis**, first developed by Pribram in the 1970s, proposed that any attribute of the system is a part that contains the whole (as cited by Kopp, 1995). The image becomes an attribute:

“...that allows an individual to reach wholeness or a state of complete physical and mental health...” (Vines, 1988:36).

Kopp (1995) suggested that the creation of spontaneous spoken and early memory metaphors would evoke sensory images that engage **neurological holographic processes** that are distributed over large areas of the brain.

Exploring and transforming these metaphors would therefore involve inter-hemispheric and holographic processes in the brain that can reflect changes in cognition which can generate new thoughts, feelings and behaviour, therefore mediating psychotherapeutic change (Kopp, 1995).

Other researchers found that images can affect areas of the brain involved in biological and physiological functioning for mind-body health and wellbeing (Rossi, 1990 and 1993; Pert, 1997; Dwairy, 1997; Danesi, 1989; Childre and Martin, 2000; Rozman and Childre, 2005; Lipton, 2008). Metaphor or imagery interventions have been shown to share common cognitive, affective, neuro-endocrine, cardiovascular and immunologic mechanisms. In this way simultaneous changes can be created in psychological, biological and even socio-cultural systems (Dwairy, 1997; Childre and Martin, 2000; Lawley and Tompkins, 2011).

Overall, metaphorical language can be a way to help clients express emotional experiences that can often be difficult to express in literal terms. This has been useful for many different psychotherapeutic modalities (Erickson and Rossi, 1979; Cirillo and Crider, 1995; Kopp, 1995; Lyddon et al, 2001; Waldron, 2010). In brief therapy it has also been regarded as particularly useful as opposed to traditional long-term therapeutic approaches (Madanes, 1990; O'Hanlon, 1990; Gilligan, 1990; Hill, 1991; Kopp, 1995; Viederman, 1995).

Many of these traditional psychotherapeutic models utilised predominantly therapist-generated metaphors, which would be presented via interpretations, analogies, and stories. This may be useful and effective when sufficiently attuned to the client material and used in a co-creative way (Gilligan, 1990). However, Kopp (1995) highlighted that theory-based interpretations in therapy should be avoided because they tend to lead away from the client's metaphoric structure of reality. A directive and more therapist-generated approach would therefore neglect the full extent of the client's subjective experiencing, and from a phenomenological perspective:

“...the subjective world is what’s real...” (Dwairy, 1997:726)

Nadeau (2006) argued that when the therapist creates a metaphor for the client, this would encapsulate more of the therapist’s experience rather than that of the client.

2.2 Client-generated metaphors

Since the 1980s a number of therapists have advocated utilising client-generated metaphors to focus more fully on the individual’s unique experience. This includes the work of Grove and Panzer (1989), Siegelman (1990), Kopp (1995), Battino (2002), Lawley and Tompkins (2000), Sullivan and Rees (2008), and Harland (2012).

Battino (2002) and Kopp (1995) were influenced by Gregory Bateson’s ideas, and (like Siegelman) largely worked collaboratively and within the client’s metaphor. However, they did at times introduce their own metaphors or made suggestions to encourage clients to form, explore and transform their metaphorical experience to find new solutions.

Metaphors that are client-generated can serve as better markers of therapeutic change throughout the course of therapy. Strong (1989) suggests that these metaphors are part of an individual’s frame of reference or phenomenological world. In this way metaphors could be more effective at generating change and creating new thoughts, feelings, behaviours and interpersonal relationships (Siegelman, 1990; Kopp, 1995; Long and Lepper, 2008, Lawley and Tompkins, 2011)

In Kopp’s *Metaphor Therapy* (1995), he presented how to explore, develop and transform metaphors and highlighted its effectiveness for early memory metaphors in particular (Kopp, 1995; Kopp and Eckstein, 2004). Battino (2002) later critiqued Kopp for using predominantly visual language with his patients and he believed that it is important to explore an individual’s experience involving all bodily senses to achieve effective metaphoric change work.

This is based on the concept that metaphors are fundamentally grounded in embodied experience (Kirmayer, 1992; Lakoff and Johnson, 1999; Gibbs et al.,

2004). Battino felt that allowances needed to be made to cover all representational systems, a term known from Neuro-linguistic Programming (NLP) (Wake, 2010). Thus, not only exploring the visual imagery aspects of a person's metaphor is important, but also its auditory (hearing), kinaesthetic (feeling), olfactory (smelling) and gustatory (tasting) qualities.

This process could then effectively explore and expand the natural metaphor of a person in a way that enables a dynamic four-dimensional spatial and temporal arrangement. This has been called the **metaphor landscape**, representing the person's unique psycho-active model of moment-to-moment experiencing (Lawley and Tompkins, 2000).

In brief psychotherapy in particular, some contemporary practitioners discovered this could be most efficiently achieved by utilising **Clean Language (CL)**, an approach first pioneered by psychotherapist David Grove in the 1980s (Lawley and Tompkins, 1996).

2.2.1 Clean Language

Grove was a New Zealand therapist who developed a unique method to assist clients with traumatic memories, particularly when working with child abuse, rape and incest; even inter-generational and ancestral healing (Grove and Panzer, 1989; Lawley and Tompkins, 1996). He realising that many clients would naturally describe their symptoms in metaphors. But instead of asking "How do you feel about that?" and assuming the client experienced "feelings" about this, he would ask e.g. "And when that happened, what was that like?" (for other examples, see Appendix 2.1).

He did this to reduce the risk of contaminating or distorting the client's reality with his own words or assumptions. Working within their own metaphors in this way enabled his clients to consider their symptoms in a new way, frequently allowing their perception of the trauma to change (Lawley and Tompkins, 2001).

Owen (1989) described Grove's work as an extension of Carl Roger's person-centred therapy. However, he argued that because the therapist's role is to facilitate

intervention of the clients' symbols it is much more a metaphor-symbol-centred or phenomenological therapy:

“Grove’s therapy...facilitates a relationship between the client and their symbols and states of consciousness. Ideally the therapist becomes just a voice while the client’s attention is focused onto their intra-psychic events...Transference and counter-transference...takes place between the client and their symbols.” (Owen, 1989:194)

Grove had called this state of consciousness “focused self-absorption” (1989:x), a relaxing state which is generally a more conscious state than, for example a hypnotherapeutic state.

Grove had done training with thousands of practitioners and had been called one of the world’s most innovative psychotherapists (Lawley and Tompkins, 2002). However, during his time he produced only one book about his methods (Grove and Panzer, 1989). It was practitioners Lawley and Tompkins (1996) who first modelled his methods for excellence with known NLP techniques which were later expanded further with others in the field (Lawley and Tompkins, 2000, 2011; Sullivan and Rees, 2008; Harland, 2012) (Appendix 2.2).

2.3 Critiques and Limitations of Current Literature

It can be misunderstood that CL questions cannot purely follow the client’s processes since they influence and direct a client’s attention. However, Lawley and Tompkins (2001) suggest that *all* language does that and that CL does it ‘cleanly’ because it aims to only utilise the client’s vocabulary, consistent with the logic of their metaphors, and introduces only universal metaphors of time, space and form (Appendix 2.2).

CL style of questioning does not come naturally at first due to its unusual repetitive syntax which can appear strange to observers. However, Lawley and Tompkins (2001) argue that the way the questions are asked is in an acknowledging rhythmic way which enables clients to pay exquisite attention to their symbolic map of their

experience. This would encourage exploration, expansion, and ultimately transformation of their metaphoric landscape for therapeutic change.

Metaphor is thought to encapsulate the patient's view of themselves, their life or their problems and can serve as a marker of change (Siegelman, 1990; in Long and Lepper, 2008). Metaphors are also thought to contain their own seeds for transformation, pointers and clues to the solution, important for therapeutic change (Evans, 1988; Grove and Panzer, 1989, Lawley and Tompkins, 1996). However, practitioners have noted challenges in measuring effective change. Loue (2008) argued that in practical life a client may "feel" something is different from when they first consulted with the therapist, but may not be able to identify what that difference is.

As with any therapeutic approach and technique, metaphors may not be helpful to all clients. Grove (1989) advised clinicians against the use of CL and therapeutic metaphor methods with patients that showed psychosis and borderline personality disorders. In these cases metaphors and symbols easily lead the client and therapist into a different and dangerous order of reality. It would become very difficult to control these patterns as clients move rapidly between logical levels and adjacent symbols possibly leading them into an overwhelming situation.

Siegelman (1990) however believed that even for severely regressed or borderline patients, interpreting within the metaphor would be helpful in a way that preserved distance while maintaining connection. Loue (2008) extensively utilised therapeutic metaphors with varying groups of patients, including those with schizophrenia, mood disorders, bipolar disorder or major depression. However, others argued that borderline clients would lack the capacity to shift playfully between levels of reality and fantasy which is often associated with a constriction and concreteness in the use of symbolic language (Rasmussen and Lynne, 1996).

Loue (2008) noted that some clients have a preference to express themselves in metaphorical manners whereas other clients may be unwilling to even engage in the use of metaphor. Siegelman called this lack of capacity to symbolise:

“...failures of the symbolic attitude, failure in the ability to play, or failure in the ability to imagine...” (1990:166).

Some clients may be hesitant, feeling that they will look silly or childish (Loue, 2008). Siegelman (1990) suggested that this could have something to do with a left-brain processing preference and metaphors should not be forced out of a client unready to play.

These therapists found that the metaphor therapy had not been beneficial for the following groups of individuals (Siegelman, 1990:166; Loue, 2008:149):

- 1) individuals who lack a central ego core (e.g. bits of passive imagery like dreams or fantasies exist, but they do not belong to anyone)
- 2) individuals who can form images and can identify them as his or hers but cannot trust them
- 3) intellectually limited individuals (e.g. with mental retardation)
- 4) women in their early adult years who are experiencing considerable conflict in their relationships with their mothers

On the latter point, Loue considers transference experiences suggestive of underlying attachment issues. However, it is likely that trust issues in the transference experience could apply to both men and women who experienced early conflict with either parent (Wake, 2010b).

Lawley argued that whether it was beneficial or not, these clients would still use metaphor to express themselves, and that would still inform the therapeutic encounter (2014).

Siegelman (1990) explained that if a patient cannot play, the therapist must help the patient to first trust. She describes that the damage to the capacity to play often occurs at the pre-verbal developmental stage and in order to progress this would need to be addressed first.

Siegelman asserted that it is the capacity to trust that enables the ability to imagine constructively with an affective connection to the metaphor; and this can be severely

disturbed by defects in early relationships (1990). For her the **central metaphor of therapy is the relationship** as experienced in transference and countertransference, different to Owen's (1989) explanation of CL therapy.

Siegelman (1990) talked of resonance and attunement as the musical metaphor of the therapeutic encounter. She described this resonance as the affect and the communication from unconscious to unconscious and right-brain to right-brain processes. It includes everything that cannot be revealed by a verbatim transcript – from the tone of voice, facial expressions, body language, to the web of connotations that a particular word touches in both client and therapist, who jointly develop a common language.

Asaf Rolef Ben-Shahar a contemporary practitioner, who leads a Relational Body-Psychotherapy training programme, criticises the use of CL as being too restrictive:

“I am not working with Clean Language. Although I deeply appreciate this method, it is far too procedural for me and contradicts with my relational stance - where the subjectivity of the therapist is crucial to the therapeutic work, hence the words (and world) of the therapist belong in the therapy room, sometimes as much as the words and world of the client...” (Ben-Shahar, 2013)

Siegelman (1990) also warned of therapist bias in attention and the limitations and defensive uses of metaphor. Wanting to expand on a client's metaphor may be the therapist's agenda, not the client's. Therapist's over-keenness to pursue metaphors could create therapeutic interference; but so could its opposite of ignoring more subtle metaphors (1990).

We should be careful of preferential treatment of *any* kind of therapeutic methods or material, including metaphors. Knowledge of any subject will always be limited by the constraints of the therapists' own opinions and viewpoints (Owen, 1989).

It appears that change in all forms of psychotherapy requires first and foremost a good alliance between the client and the therapist. Therefore regardless of the

therapeutic modality, it is often the quality of the therapeutic relationship that has been found to be most strongly associated with psychotherapeutic outcomes (Loue, 2008). In the UK, The Department of Health (DoH) clearly states that:

“ the efficacy of psychotherapeutic interventions depends on the therapeutic relationship between the therapist and the client and not the modality.”
(2001:3.2:35)

Overall there is lack of peer-reviewed research into client-generated metaphors in therapy utilising CL that prove its effectiveness.

2.4 Research Question Development

Though co-constructed and therapist-introduced metaphors can be effective when sufficiently attuned to the client material and accepted by the client, contemporary therapists found utilising and deliberately encouraging client-generated metaphors more efficient. This is because the therapist aims to stay completely within in the client's construct of individual reality to better facilitate exploration, extension and ultimately encourage transformation of this experiential organising pattern for therapeutic change (Lawley and Tompkins, 2001).

The CL community has been growing in the past decades with roughly 3-4,000 members held on UK expert databases. These members consist largely of coaches, management professionals, therapists and anybody interested in the approach who are working with individuals or organisations. However, it is unclear what percentage of these are trained psychotherapists and how many additional users of CL exist on top of the current estimates.

The key aim of this research is to gain a more comprehensive understanding of why, when and how some therapists of varying theoretical backgrounds practise with brief therapeutic models use metaphor work and in particular use 'CL' approaches.

It aims to assess if 'CL' methods, as one of the contemporary techniques of client-generated metaphor work, are regarded as an effective method to achieve positive therapeutic change outcomes. Predominantly, it is the therapist's subjective

experience and expert opinion of utilising CL tools in psychotherapy that will be of key interest.

Understanding what kind of outcome measures are utilised to evaluate its effectiveness should be explored. It is anticipated that this research can inform practitioners about more effective psychotherapeutic change techniques as well as provide future directions for further research in this area.

Understanding the experiences of therapists who choose to utilise CL in their individual ways could provide valuable insight into its perceived effectiveness and provide guidance on how outcomes could be measured for future research. Choosing therapists who already work within theoretical frameworks with existing evidence-base, e.g. recognised by the NHS or other accrediting bodies, could be useful for future consideration of integrating 'novel' tools like CL into clinical practice.

Therefore, the generated research question for this study is:

“Why, when and how do qualified psychotherapists from a range of modalities make use of client-generated metaphors using CL as an effective tool for brief psychotherapeutic change?”

The next chapter describes how these study objectives seem best addressed by using Interpretative Phenomenological Analysis (IPA) (Smith 2009) as well as CL as an interview methodology (Tosey et al., 2014).

Chapter 3: Methodology

This chapter reviews the methodology, design and methods chosen for this research project. Methodology describes the overall approach that is applied to a particular research topic. The study objectives will dictate the type of methodology chosen; most commonly to help find answers to the research questions. The methods refer to the specific techniques and procedures that were employed to conduct the study.

3.1 Interpretative Phenomenological Analysis (IPA)

IPA is a relatively recent approach within UK psychotherapy research introduced by Smith *et al.* (1999) which aims to understand meaning making of subjective experience. It suggests tools to allow researchers to extract meaning from interview accounts in which participants and researcher have been engaged. For this to be applied, interviewees are encouraged to give as much detail as they can to be as close to their own subjective experience as possible. IPA is informed by underlying philosophical principles from phenomenology and hermeneutics.

Phenomenology uncovers meaning, e.g. by looking at the essence or phenomenon of the experience. **Hermeneutics** interprets the meaning within a context, and recognises that in order to understand the part, we need to look at the whole and vice versa (Smith, 2009). Together it enables “inter-subjective understanding” (Pringle *et al.*, 2011).

3.1.1 Rationale for Using IPA

Our knowledge is constructed and contextualised via our varied socio-cultural, historical, political, linguistic, biological, psychological and embodied (body-mind) experiences in this world - dynamically over time. Any research design, data collection, researcher-participant relational interaction, and analysis will be influenced by a variety of factors.

Research in psychotherapy will depend on the underpinning philosophy of **ontology** (nature of being) and **epistemology** (theory of knowledge) (Bond, 2004). I believe that no one single truth exists, an epistemological position influenced by post-

modern/social constructionism as opposed to the positivist ontology of a single, objectively knowable reality.

It is only by understanding meaning that people make from their experiences that we can influence behaviour. How we experience 'reality' will therefore be a strong indicator of how we are likely to act (Pringle et al. 2011, Van Helsdingen and Lawley, 2012).

To understand the meaning of participant's figurative language, Long and Lepper (2008) suggest that qualitative research is more productive [than quantitative research] since it orients the researcher to major themes that more fully encapsulates the participant's views.

Interpretative Phenomenological Analysis (IPA) as a qualitative research approach was developed specifically to understand how people make sense of their experiences. In this way it emphasises the importance of hearing the participant's voice. Reid et al. (2005) noted that:

“These inductive and iterative procedures of IPA are intended to help the researcher to develop an initial ‘insider’s perspective’ on the topic”. (p.22)

The aim is to draw the researcher away from the original meanings of his or her assumptions and instead develop **master themes** that firmly anchor findings in **direct quotes** from participant accounts (Smith et al., 2009; Pringle et al., 2011).

IPA is an **inductive** approach ('bottom up' rather than 'top down'); it tries not to test hypotheses, prior assumptions or a pre-existing formal theoretical position (Reid et al., 2005, Pringle et al., 2011). The **iterative** procedure is not a linear step-by-step approach, but a back and forth moving through different parts of the data. This approach recognises that we understand text and create meaning at different levels as we go through it. The complexity of the captured experiential data will be reduced through rigorous and systematic analysis.

The use of CL methods for client-generated metaphors in psychotherapy is an innovative approach; therefore IPA seems apt for understanding current existing practice and opinions in this area.

3.1.2 Methods and Procedures

A small-scale study was conducted for this research with focus on in-depth qualitative analysis of interview responses around the research questions.

Recruitment of the study participants was supported by contact databases existing within the expert CL community and other media channels. Information was supplied via email and a website link (Appendix 1).

Five therapists who utilise CL tools from different theoretical frameworks were interviewed. All participants identified themselves as brief therapists as defined by Kopp (1995). Participants were trained as psychotherapists with more than two years post-qualified registration with BACP, UKCP or another recognised accrediting body (Table 1).

Table 1 List of Study Participants

ID	Name*	Training	Memberships & Registrations	Years since accreditation
1	Desmond	Integrative Counsellor, Hypnotherapist	BACP, NCS, HR	6
2	Richard	Neurolinguistic Psychotherapist, Supervisor	UKCP	5
3	Bridget	Transactional Analyst, Integrative Therapist, Supervisor	UKCP, BACP, AHPP, NLPtCA	19
4	Yvonne	Neurolinguistic Psychotherapist	UKCP	4
5	Sarah	Systemic & Family Therapist, Neurolinguistic Psychotherapist, Supervisor	UKCP	15

*all pseudonyms to protect the identity and confidentiality of the participants

The interviews were based on semi-structured Skype, and face-to-face interviews. Using Skype may not have worked for everyone, so the option of recording interviews via telephone was also considered. Open, non-leading questions and CL interviewing methods (see below, 2.1.3) were utilised. A semi-structured interview allowed more flexibility to follow the participants lead as well as follow-up interesting leads in more detail.

The initial interview schedule was reviewed by peers and research supervisors and a pilot trial with three volunteers was conducted prior to the study. This helped improve the interview questions before the modified version was used with all subsequent participants (Appendix 3).

Because the interview schedule included a lot of questions and prompts in a linear way, I created a more non-linear matrix approach which helped me with the flow of the interviews and ensured that the research questions were covered (Appendix 4.1). I adapted this from Dilt's (2014) Logical Levels Model (Appendix 4.2).

All interviews were audio recorded, transcribed and analysed according to guidelines from Smith et al. (2009) for IPA. After initially keeping all the "erhms", "ahs", silences and other notes on non-verbal information, I decided to take these out for the final data analysis to enable better readability and flow. Oliver et al. (2005) suggested incorporating reflection on this process as this may have influenced interpretation and presentation of the results.

3.1.3 Limitations of Methods

To minimize limitations around the researcher's subjective ways of creating meaning from the transcripts, Smith (2009) recommended 'triangulation' and independent audit guidelines for improved cross-validation. However, since this research project was conducted for the purpose of fulfilling the requirements of a post-graduate diploma, this rigorous approach was not required at this level (Connor, 2014). External support and guidance were sought to support these requirements (see 3.2).

During the interview and entire research process, the researcher did not only record information but was inevitably a creator of meaning. Language continues to be the

standard medium through which we access information via interviews. Tosey (2011) criticised that the significance of language in designing questions gathering phenomenological accounts has so far been largely ignored in the literature. He argues that all phenomenological methods are prone to being imprecise in both data collection and interpretation. Using IPA methods acknowledges the co-construction of data, not objective right or wrong findings but rigorously subjective data produced between researcher and participant. How much is sourced from one or the other will vary during the interview, transcription, data analysis and the final write-up process.

To minimise interpretation of the researcher, using CL as an interviewing methodology appears to be a valid method in qualitative research (Lawley et al., 2010; Lloyd, 2011; Tosey, 2011; Van Helsdingen and Lawley, 2012; Tosey et al., 2014). This approach, among other things, would:

“Distinguish clearly between metaphors introduced by a researcher into their questions or as an interpretive device, and those that originate in...and...represent interviewees’ subjective worlds. While the researcher still makes decisions about where to direct attention, the method increases confidence that the meaning being explored is that of the interviewee.” (Tosey, 2011:3)

Though Smith et al. (2009) recommend a ‘fairly homogenous sample’; they also suggested judging the study’s effectiveness based on the broader context it can provide (cited in Pringle et al., 2011). This study was limited to five participants which is appropriate for this type of qualitative research. It is possible that the sample group could be regarded as too specific or unique. However, the nature of IPA is using **purposive** sampling (vs. random sampling) for in-depth analysis, therefore the results are not expected to achieve statistical significance (Smith et al., 2009).

Smith (2009) suggests that some of these limitations could be overcome if:

“...the research account is rich and transparent enough, and sufficiently related to current literature, [so that] the reader should be able to assess and evaluate transferability.” (Smith et al., cited in Pringle et al., 2011:21)

Making judgements about transferability and links to other areas or groups remains challenging and seems inevitable with any small and narrow sample size. This could be overcome, as suggested by Pringle et al. (2011), if limitations relating to participants [and researcher] are sufficiently acknowledged and clarified in the research.

3.2 Reflexivity and Quality

Reflexivity describes the process for the researcher to reflect upon their own 'meaning making' during the process of interviewing, interpretation, data analysis and write-up (Reid et al., 2005; Smith 2009; Pringle et al., 2011; Cotter, 2012). **Reflection** is the process of thinking about and reflecting on a topic. **Reflexivity** is the process of reflecting on these reflections and putting them into the social context of e.g. gender, ethnicity, age (Etherington, 2004). A reflexive account by the researcher will require a deliberate reflection on the experience throughout the research project. This allows greater understanding of the researcher's role in the research process and in shaping the research findings. **Quality** of research can be improved when known limitations of the chosen research methodology are minimised (see above 3.1.3). For IPA, data validation through an independent audit and triangulation is often recommended (Smith, 2009).

3.2.1 Reflexive Note

Since meaning making is based on prior experiences and subjective assumptions, the results of this study need to be put into context. My main interest in metaphors and using metaphors in therapy came from positive experiences in my own personal development and in my clinical practice with clients.

From researching this field, it became clear to me that I was particularly interested in 'client-generated' metaphors. This naturally led me down the 'relatively new' path of CL which sparked my interest in these methods. It appeared to be an effective and efficient tool to generate clients' metaphors for positive change in brief psychotherapy. With the help of this research project I wanted to learn more about CL, how and why it was used by other therapists in the field.

This topic therefore seemed relevant to me as a trainee psychotherapist as I was often acutely aware of struggling to achieve consistent positive results with this approach in clinical practice. At times it seemed related to the client's ability or preferences of utilising metaphorical material whilst at other times it was related to my own lack of training in this area. For example, having initially been trained in the natural ("hard") sciences, then in more process and structure oriented coaching and NLP skills, for a long time it seemed important for me to do the "right" thing, e.g. for CL to use the right type of questions in a scripted way to make sure I was not missing out on something; to appear competent. This for me was not something unusual and was a noticeable pattern for most of my life from early age. It was my psychotherapy training, moving towards the "soft sciences" and my own personal therapy that started to challenge this pattern and start trusting myself more and open up for more intuitive and creative flow for my personal as well as professional development. I noticed that at times I felt lost in the conscious use of certain language patterns which I felt got in the way of the flow of the session.

I was aware of how my own assumptions and knowledge about the participants which would influence the results in various ways. Though we may have been through different training programmes, I felt I could identify with utilising CL tools and working with clients psychotherapeutically and in this way understand the participants better. I knew that each of the selected therapists had their own personal interests in metaphors and CL, including myself. At the same time, it was important for me to be open-minded and unassuming about our potential differences in using client-generated metaphors in therapy.

The participant's accounts may have equally been influenced by what they knew about me. All participants were aware that I was a trainee psychotherapist and that I was interested in the subject of client-generated metaphors in therapy through the use of CL tools.

The findings of the study are a product of the interactions between all study participants and me. These may have been affected further by peer reviewers, research supervisors and the independent researcher who supported the transcript

analysis. The research findings were therefore limited to the group of people who participated in this project.

3.2.2 Research Quality

One independent researcher with an MSc in psychology was recruited to analyse the transcripts for additional views. The purpose of this was not to help create objectivity but to help uncover subjectivity, since each researcher would create different meaning of the analysis.

An independent professional academic researcher was recruited to provide advice, assess research methods and support data validation and review. This helped ensure quality and transparency of the research, and that the researcher followed all necessary steps as outlined in the methodology section (Chapter 3).

Furthermore the interpretations of the participants' accounts were discussed with the independent researchers and supervisors. They assisted in checking that the themes were grounded in the data in case of any perceived discrepancies. Extracts from the transcripts in the analysis section (Chapter 4) allowed the reader to assess the consistency of my interpretations.

3.3 Ethical Considerations

The initial proposal of this study was agreed without requiring any changes back in April 2013 by my educational institution.

Before deciding whether to take part, each participant was given an information sheet providing additional details about the study (Appendix 5). Once they decided to take part they were asked to sign a consent form which confirmed their confidentiality and anonymity (Appendix 6). Participants were reminded that they were free to decline any questions or withdraw from the study anytime without any negative consequences.

This study carried low risk of adversely affecting participants' emotional health, wellbeing, values or dignity. However, the researcher advised that in the unlikely

event of any emotional (or other) upsets, that the participant consult with their personal supervisor or therapist.

A debrief was conducted after each interview for feedback and monitoring for any potential negative effects (McDonnell and Stratton, 2011). In case of any problems or complaints, appropriate procedures were outlined in the information sheet (Appendix 5). A research supervisor was available for any questions or issues that emerged from the research.

The interviews were digitally voice recorded. The data including the transcripts were stored on a laptop, kept at home. They will be kept for no more than two years after which they would be destroyed. The researcher would be the only person having password access to this data. All data was anonymised (as per above) to protect the identity of the participants. Interviewees were given the chance to review transcripts immediately after transcription, so that they could be consulted on how they wanted to be described in the research (Cotter, 2012).

Prior to the interviews, participants were advised that their clients' confidentiality is paramount. They were asked not to disclose any personally identifiable information about their clients, and to use aliases or pseudonyms for any persons or places, or use composite examples of groups to convey and keep to the essence of their account (Bond, 2004; Cotter, 2012).

The researcher was mindful of 'self-care' aspects, e.g. to ensure personal safety, having adequate professional and personal support throughout the project and be familiar with lone working policies (if available). When travelling to a venue of the participant's choice, the researcher made sure to notify someone else of her whereabouts and the expected duration of the interview.

In my practice and research I adhere to the principles of beneficence and non-maleficence and to best practice and ethical research guidelines from BACP and UKCP (Bond, 2004; McDonnell and Stratton, 2011; Cotter, 2012; BACP, 2014).

3.4 Data Analysis

Interviews were audio recorded, transferred to a computer and then transcribed for analysis. Handwritten notes were also made. To protect confidentiality, data was anonymised; pseudonyms and aliases were used for individuals and places.

Each transcript was coded in a free textual analysis (Smith, 2009; Maunders, 2012), whereby initial noting focused on three processes for finding themes via:

- **descriptive** comments (describe the content of what is said)
- **linguistic** comments (focus on the participant's use of specific language)
- **conceptual** comments (move to a more theoretical level)

Smith et al. (2009) describe the process of looking for connections between these as abstraction and subsumption. **Abstraction** can help create higher order themes as a result of adding themes together. **Subsumption** can identify an emerging category becoming itself a master theme as it draws together related topics. This was done for each transcript, producing a table of themes, followed by establishing patterns across cases. The analyses focused on what was both distinct to the individual interviewee as well as to the group of participants. The analysis aimed to capture examples of **convergence** and **divergence** (Smith et al., 2009).

For successful analysis the results were not given the status of facts and were required to be both transparent (based on verbatim examples) and plausible to readers (Reid, 2005). Therefore the researcher aimed to provide reflexivity where possible and describe the methodological process in detail to evidence a rigorous and transparent approach.

Chapter 4: Analysis

This chapter includes personal reflections on the research process in line with the methodology. The results of the transcript analysis have been organised by the most common and salient themes that emerged.

4.1 Personal Reflections

Consideration needs to be given to the reflexivity relating to the role of the researcher in the qualitative research process and in the generation of the results. CL interviewing methodology had been utilised to generate richness of the participants' experiences aiming to limit the researchers influence. However, even when using CL techniques, the data generated between two human beings will always be co-constructed.

This has led me to wonder about the parallels between the participants using CL in their practice and my role as researcher. However, using a CL as an interviewing method is different to using CL in therapy. The biggest challenge I found was to balance encouraging the participants' own subjective experience and meaning making process, which can include rich metaphor, with more directive efforts to get through the actual interview schedule.

Furthermore, I acknowledge that when two human beings come together relational dynamics will be at play (consciously or unconsciously). These dynamics will therefore have influenced the accounts that were given as well as my analysis.

The next section aims to give more insight into the potential aspects and dynamics that can have shaped the reported accounts. As a reflexive exercise I included my own personal metaphors to help make sense of my own subjective experience about each participant interview in Appendix 8. Additionally, some key feedback from each participant on the interview experience has been included in Appendix 9.

4.1.1 *Desmond*

Desmond is an Integrative Counsellor who first trained as a Hypnotherapist eleven years ago. He has been using CL for the last eight years. He wrote his MA thesis on Metaphors in therapy and qualitative research and is finalising his Professional Doctorate in a similar topic. I interviewed him via Skype in his private home office. We had considerable technical issues at first and I was aware of not wanting to waste his time.

I experienced him as patient, warm and friendly and I found myself quickly feeling at ease. He showed great passion for the topic that I already became aware of when we previously spoke on the phone and I looked forward to the interview. Our interview had an informal conversational style. He seemed open to exploring his own experiences and upcoming emotions. At the end of the interview he expressed feeling a bit of “an evangelist” for CL in the counselling community. I was mindful that he felt strongly about the research topic.

4.1.2 Richard

Richard trained as an Integrative Psychotherapist, a supervisor and runs a CL coaching consultancy. He had come across CL thirteen years ago when meeting someone from the industry at an airport. He later trained in it as well as NLP. The interview was conducted by phone as he had difficulties with his Skype software.

In contrast to the informal feel of the interviews with Desmond, Bridget and Yvonne, this interview felt more business-like. He felt strongly about CL (“it’s all I do” “it’s who I am”) and I was mindful about his strong practice focus. His descriptions appeared more cognitive and conceptually at a higher level than the deep experiential process with Desmond.

This made the interview feel more like a task-list style and I felt that my skill level was lacking to hold the CL process in a way that can encourage a more experiential process and elicit less of a professional narrative. This left me feeling somewhat less relaxed than I had felt with Desmond. Richard was supportive of the research and at the end of the interview offered to invite me to one of his regular industry events to present my findings.

4.1.3 Bridget

Bridget has been trained in Transactional Analysis and in integrative psychotherapy; she is a supervisor and currently teaches on an Applied Neuroscience certification programme. She started her career in medical social work and has been in practice for thirty years. Later in her career she came across NLP and then first trained in CL with David Grove himself about eighteen years ago.

The interview was face-to-face at her home practice and I met her for the first time at the train station where she picked me up by car. Her consulting room was at the back of the house - full of light, books, toys, props and with a beautiful view into a green garden. It had a homely feel and I felt comfortable.

At the start of the interview she seemed thoughtful and providing one-syllable responses, which seemed more conceptual. I was aware of needing to give her more time in case she was still pondering over her responses. At some point it seemed necessary to clarify (in a more “unclean” way) that the purpose of the interview was about her own experiences with clients, after which her account seemed to become more experiential and metaphorically rich. Overall the interview felt to me like a soft trance and I was more at ease with the clean interviewing style.

4.1.4 Yvonne

Yvonne is a Neurolinguistic Psychotherapist and a CL Assessor. She first started using CL eleven years ago. Yvonne stands out as the participant who was particularly keen to talk about her experiences in rich metaphoric ways.

The interview was via Skype and despite some technical issues with my recording device Yvonne came across as patient and friendly. She appeared very competent in CL skills and I was mindful of the fact that she is an assessor. I noticed myself feeling somewhat reticent at times, perhaps reflecting my expectations about my own competence levels in CL interviewing, particularly in her presence.

This was the longest interview during which she was very talkative, providing additional useful feedback after the interview. Her professionalism and enthusiasm for her work was quite clear to me and I felt also pleased that she had so much useful

information to share. She seemed keen to get this topic more researched and published in the literature.

4.1.5 Sarah

Sarah is a Systemic and Family Therapist, a Neurolinguistic Psychotherapist, Business Coach and a Supervisor. She had been a therapist for nearly twenty years but now focuses mainly on working with businesses and organisations. She first came across CL fifteen years ago. This was the last interview and it seemed the most challenging to arrange due to Sarah's busy work schedule.

The interview was via phone as her Skype did not work. Like with Richard, the interview felt business-like and more general, rather than into any deeper exploration of the participant's experience. Opposite to all other interviews, I was left feeling that my CL interviewing methods created some frustration and irritation. As a result it felt more challenging for me and despite my efforts. It seemed that my questions were interpreted more literally and I felt I had to resort to more directive and non-clean methods to help the participant understand the questions in line with the interview schedule.

Sarah appeared highly cognitive and I noticed myself feeling slightly uncomfortable at times with her chosen way of speaking to me. I interpreted this as a reflection of insecurity around her CL skills, which she confirmed later in the interview. Upon reflection, I appreciated her high calibre of professionalism and commitment to understand the interview questions correctly and to get the answers right. Her interview was very useful for my own learning and added to the breadth of opinion of the collected accounts.

4.2 Theme Development

For data analysis the approach recommended for IPA by Smith et al. (2009) was used. This involved a line-by-line analysis of the interview transcripts with the identification of emergent themes (sub-themes) and resulting higher-level (master) themes. This was done for each individual case and across cases.

As part of the iterative process each transcript was read a number of times and at different stages in order to become familiar with the participants accounts. On each transcript the “initial noting” was recorded on the right hand margin.

The emergent (sub-) themes of this initial noting process were recorded on the inner left hand margin. These sub-themes helped to capture the essence of each comment or section. Some comments may have had multiple sub-themes allocated to them.

Sub-themes of each transcript were then captured in a separate table to understand connections and to enable the generation of clusters and higher-level (master) themes. These master themes were then recorded in the outer left hand margins.

The results were then compared across transcripts to identify a final table of master themes for all transcripts. The transcripts were re-read again to make any adjustments or changes where appropriate. Identifying names and places have been changed to protect anonymity. Table 2 below shows an extract to demonstrate these different stages of analysis.

Table 2 Example Excerpt for Margin Analysis (Participant 1)

		Line #	
Master Themes	Emergent Themes	1	Main Transcript – Participant 1
		2	<u>Overall Interview Duration: 56:30</u>
		3	<u>[main: 09:30-43:23; plus intro and</u>
		4	<u>feedback]</u>
		5	
		6	many. And are there any other
		7	circumstances under which you use
		8	Clean Language? In your therapy,
		9	who do you use it with?
		10	
		11	I think that’s probably it. In rapport
		12	building and communication, and
		13	then with regards to metaphor work
		14	really. I don’t think I use it outside of
		15	- I can’t think of using it outside of
		16	that, personally. Metaphor is a big
		17	part of what I do, <u>it’s quite</u>
		18	<u>significant.</u>
		19	And who would you not use it with?
		20	
Focus on Client and their Experiencing	Creating Rapport		Finds CL helpful predominantly for rapport building and communication and for metaphor work in particular.
Personal Preference	Personal Preference		<i>Big on Metaphors - it’s a big part of his professional life and it seems his personal life too.</i>

The next step was organising and ranking all themes in order of occurrence for each transcript. To make this process easier an Excel software package was used.

Additionally, all relevant comments were included for each theme. The creation of Excel pivot tables helped generate some quantitative ratios. Although these ratios were not meant to provide conclusive or statistically significant results, they helped to provide an easier overview for the overall ranking. This enabled easy sorting and analysis for each individual transcript and across transcripts.

Table 3 shows the identified master themes and their respective sub-themes, keeping in mind the main research questions to be answered by this study.

Table 3 Master Themes and Sub-Themes for All Participants (Ranked)*

Master & Sub-Themes	All	%
Experience and Training	158	30%
Experience and Training	45	9%
Intuitive and Opportune Usage	21	4%
Outcome-oriented	19	4%
Therapist as Measuring Instrument	14	3%
Contracting Agreement	10	2%
Metaphor as Trigger	10	2%
Classic Usage	8	2%
Conscious Intention	7	1%
Modern Usage	5	1%
Information Gathering	4	1%
Patterns as Trigger	4	1%
Symptom focus & relief	4	1%
Outcome as Trigger	3	1%
Structure and Process-orientation	2	0%
Levels of CL Usage	1	0%
Solution-focussed	1	0%
One of Many Tools	118	23%
Integrative Usage	62	12%
Not for Everyone	41	8%
Directive Aspects	15	3%

Focus on Client and their Experiencing	87	17%
Respecting the Client's Experiencing	24	5%
Client-oriented Usage	21	4%
Experiential Process and Journey	12	2%
Trance-like 'special' space	7	1%
Creating Rapport	6	1%
Deep Experiencing	6	1%
Keeping Clients in the Metaphor	5	1%
Embodied Aspects	4	1%
Unconscious Aspects	2	0%
Effective & Efficient Enabler of Change	68	13%
Enabling Change	30	6%
Effectiveness of CL	29	6%
Time Efficiency	9	2%
Personal Preference	46	9%
Personal Preference	28	5%
Philosophy and Way of Being	18	3%
Relational & Co-creative Aspects	45	9%
Relational Aspects	35	7%
Co-creative Aspects	7	1%
Therapist-generated	2	0%
Creative Aspects	1	0%
Grand Total	522	100%

*Number of occurrences of themes across comments from all participants.

Sorting the master themes by number of occurrence per participant enabled easier comparison within the individual account as well as across accounts (Table 4).

Table 4 Master Themes by Participants (Ranked)*

Master Themes	Desmond	Richard	Bridget	Yvonne	Sarah
Experience and Training	2	1	1	1	2
One of Many Tools	3	2	2	2	1
Focus on Client and their Experiencing	1	3	5	3	4
Effective & Efficient Enabler of Change	4	4	3	5	3
Personal Preference	5	6	6	4	5
Relational & Co-creative Aspects	6	5	4	6	N/A

*Ranking based on number of occurrences of the themes across all comments.

Because the main purpose of this study was to find answers to the research questions: “**Why, when and how** do...psychotherapists...make use of client-generated metaphors using CL...?” it seemed challenging to reduce the list to less than the six master themes.

The final analysis utilised these six master themes to help create a coherent narrative. Only the most salient sub-themes were included in the final write up.

To do this, the next step was to find all the comments relevant to the respective master themes and most common sub-themes for each participant. They were reduced to their essential messages to include only those that seemed most salient to balance the challenge of remaining within the word count as well as providing a rich account.

Identification of extracts have been adapted from Larkin and Thompson (2012) whereby an annotation follows in square brackets including participant ID followed by page and line numbers [T1.11.10-21].

4.2.1 Master Theme: experience and training

The most common sub-themes were 1) intuitive and opportune usage, 2) outcome-orientation, and 3) therapist as measuring instrument.

All participants were commenting that they see a variety of adult clients. Some described seeing clients with specific symptoms, e.g. Richard explained:

“I get local clients who are coming with...symptom based stuff, so anxiety, depression, trauma...for relief...” [T2.02.41-45]

This was similar for Yvonne who highlighted that she sees clients:

“...with a range of therapeutic issues...stress, anxiety, depression, relationship issues...” [T4.02.47-50]

Sarah was the only participant who works predominantly in organisations and sometimes with children:

“I work primarily in organisations...and I keep a very small private practice” [T5.01.53-02.06]

“Because I am a family therapist I often get to work with children...often they are the children of people who are in organisations...” [T5.03.53-04.05]

Overall, the participants seemed in agreement that there wasn't sufficient awareness and training for psychotherapists in CL available. For example, Desmond shared:

“I talk to a lot of other counsellors about it, they don't know anything about it...person-centred people...love it, because it really is very person-centred.” [T1.12.37-43]

Richard would like to attend more training and also believed that:

“...other therapists should do it...at least understand the principles of it...because it's such a fundamental thing” [T2.15.31-35]

Intuitive and Opportune usage: The participants made various comments around using CL, when there is an opportunity or the time is right based on intuition.

Desmond often finds opportunities, especially when triggered by metaphors:

“...I see probably five or six clients a day and there is usually an opportunity to use some metaphor work.” [T1.02.29-31]

“...after a while you become very sensitive to clients offering you metaphors. So they come in and say “Yeah I've had this knife in my throat in the last couple of weeks” or and “it makes me sick to my stomach” or “it's like a whirl wind”...the antenna goes right up...straight into [CL] as soon as people start to use the metaphor. [T1.05.39-50]

Bridget mentions a certain 'readiness' and flow when using the approach:

“I think we are talking about a level of knowingness and...it'll come easily.” [T3.07.52-08.01]

“...sort of the right moment - when both the client and the therapist are ready. Or when the conditions promote it, it might happen without planning.” [T3.08.38-42]

Sarah seemed client-oriented around her use of the approach:

“...how the client answers that question...will make me decide what might be the best way to explore things with them. I’m much more intuitive.” [T4.07.17-22]

Outcome-orientation: A common trait among participants seemed to be a certain level of focusing on achieving the client’s desired outcome. Richard appeared the most process and structure oriented towards achieving an outcome wanting that:

“...clients [...] get what they would like to have happen.” [T2.05.01-02]

“...my job is...structure...process, so...asking those questions that are gonna...get them what they want.” [T2.09.29-34]

Yvonne also discussed how eliciting information and learning is part of this process:

“What I would like to have happen when I am using it is...that the client finds a way of expressing...understanding...learning about their own issue...problems, desired outcomes...” [T4.05.50-06.02]

“...I will notice any desired outcomes that are coming up spontaneously if I haven’t yet asked for one and that will tell me: start using ‘clean’...there is information that the client can start learning about which will be about the pattern - and then I will start...” [T4.07.12-20]

Sarah’s outcome-focus seems influenced by her business coaching work as well as previous training with David Grove himself:

“...one thing I got...from David Groves...keep taking their outcome forward...he often talks about “chase the outcome”...” [T5.07.38-42]

Therapist as a measuring-instrument: one of the key aspects for knowing when to use CL for the participants was using themselves as a measuring instrument.

Richard described his way of noticing as continuous thinking mode, a “meta-comment” running in the background that informs what to do next:

“...an internal supervisor...someone who goes: “What’s going on here? Are we on the right track?“...are you gonna pull back time...or...move time forward...expand the metaphorical landscape...is the client getting what they wanted...?” [T2.07.04-18]

Bridget describes it as an embodied sensation:

“I feel it in my arms...a tingling...it’s a nice sensation and its one that I take notice of...also...when I don’t get it.” [T3.13.42-14.01]

For Yvonne it seems more of a visual experience as well as a cognitive thought process for recognising patterns, metaphors and outcomes as her triggers:

“...like...magic eye pictures...all this background information that the client is talking about...will just...come up to the surface and...out at me...” [T4.10.11-16]

“...and it goes “ooh, that’s a pattern” or “...an outcome” or “...something interesting” or “...metaphor” or “...desired outcome”...as soon as I’ve got that...we are off...” [T4.10.19-33]

She describes a similar “internal supervisor” as Richard with an auditory experience:

“...it’s like a management version...there’s a psychotherapist doing the clean facilitation, but there’s a psychotherapist who is in manager mode as well, so it’s the manager who speaks into my ear.” [T4.09.40-46]

4.2.2 Master Theme: one of many tools

All participants reported that they would use CL as one of many tools in therapy. The main sub-themes were 1) integrative usage, that it was 2) not for everyone and that 3) directive aspects were used.

Integrative usage: For Desmond to use CL it all depends on a variety of factors:

“...the client...the moment...where we are in the therapy. Certain clients are very into metaphor usage and I will use it...60-70% at the time...it is very bespoke...overall...probably about a quarter [25%]...” [T1.02.40-52]

“...I might use something existential...Buddhist...CBT...I’m a magpie...I use different approaches that I think is appropriate.” [T1.04.45-53]

Though Richard generally described that he uses CL “all the time” he does integrate it into other approaches:

“...using transcripts of my [...] therapy sessions...between: 50-60%...”
[T2.10.44-46]

“...I use other techniques...Emergent Knowledge, Clean Space, TimeLines, all sorts of stuff...but I think [CL] makes all those exercises more sophisticated.”
[T2.02.07-12]

“I do [...] coaching, I do patient group work...relational approaches...sometimes a technique might be appropriate...sometimes it’s good to use TimeLine...” [T2.03]

“...I might choose to disclose something personal...” [T2.05.44-46]

“...a bit of psychodynamic stuff...CBT and supervise” [T2.10.19-21]

Bridget generally contractually agrees with her clients that they will use what works, which includes CL, but believes that she doesn’t:

“...use it as much as other ways of work...With some clients I use it all the time and other clients I don’t use it at all, so percentage is probably...25%...”
[T3.02.39-49]

“...TA is one of many models and I might then introduce...[CL]...Or an integrative or psychodynamic model.” [T3.03.38-42]

In contrast, Yvonne uses CL in most of the work she does:

“...pretty much any interaction that I have with clients will involve clean questions...” [T4.01.44-46]

“...it does depend on, whether I've done the work with the client before, or if it is the first time I see the client...at the very minimum 20% of the session will involve clean questions.... Some sessions...will be...90 %, 95%...” [T4.02.02-19]

She may include other approaches or ways of introducing or utilizing metaphors:

“I use some NLP approaches...combined with it...I occasionally use models from other psychotherapeutic approaches like TA model (parent-child-adult), drama triangle...Gestalt approaches...” [T4.03.29-40]

“I might use artwork as a source of eliciting metaphors...pictures, artwork, poetry...that has been generated by clients...” [T4.04.17-26]

“...there might have to be advice...an instruction...” [T4.08.40-42]

Sarah shared that she tends to use a limited part of it:

“...I don't think I'm as skilled in [CL] as I maybe am in other areas...” [T5.10.27-30]

“...I start in a clean way but dip in and out of it...” [T5.05.20]

She tends to use:

“...tons of stuff...NLP...Transactional Analysis...EMDR...” [T5.05.37-41]

“...I'm conscious of using space with my clients...could be seen as Gestalt approach or NLP approach...” [T5.05.21-30]

“...might get them to draw...picture about how things are now, how they want things to be and how those match.” [T5.13.40-44]

Not for Everyone: Though most participants believed in the value of CL they noticed occasions when it does not work well. However, Desmond notes that even then he:

“...would still use the Clean Language-ish [way] for rapport...but [...] there are some people that just don't wanna go down the metaphor route...whether they

are more kind of left brain logic or engineering-type people. But I don't want to force metaphor on somebody that doesn't really wanna go down there. 'Cause that can be counter-productive..." [T1.03.21-32]

He explains that these are clients:

"...that don't use that way of seeing the world..." [T1.10.33-34]

and if using CL this would feel like:

"...banging your head against a brick wall." [T1.08.15-16]

Richard commented that if it does not work he would generally try a different approach and provides an example:

"...that's part of the process...If something isn't working...doesn't matter what it is...a process, a technique...just do something else" [T2.09.15-17]

"...[client] came in with...massive anxiety...really...high stress...So...start off by calming him down...he wasn't in a psychological place to answer the question "What would you like to have happen?"...when he first came in...so you do something else first..." [T2.14.23-39]

Bridget used similar terminology to Desmond and believed that when the approach doesn't work it would feel:

"Stultifying. Deadening...like a thud...In the ground...from the other person."
[T3.11.23-38]

"...sort of hitting a steel wall." [T3.13.09]

Yvonne explains:

"There are times when it's very difficult to get into "clean"...if someone is highly conceptual then it's sometimes very difficult to get them into metaphor."
[T4.15.23-27]

During the interview she developed a rich metaphor for using CL - driving a toboggan in a secret underground tunnel system. But if it's not working:

“...it's clunky; you might bump up against the wall and kind of ricochet off such as you might go up a cul-de-sac and you'd have to reverse your toboggan back out. So...it hasn't got flow...” [T4.12.50-13.07]

She explains that even then this would still give her information about the client's processing and explains:

“...when I really know it hasn't landed is usually when it stops the client in their processing, so they...have to come out of their psycho-active landscape and clarify the question.” [T4.13.41-46]

“...sometimes clients will do that...but...stay in their landscape...” [T4.13.48-53]

When Sarah finds the approach not working after trying it a few times, similar to Richard she would use something else:

“... If people don't pick up on [it]...and you do it a few times and...it's just not their way of processing, then I will switch.” [T5.08.11-18]

Directive aspects: The participants also included some directive approaches to move beyond certain instances when things were not working as well. Richard, Sarah as well as Yvonne use a variety of therapist-led and directive approaches including NLP techniques. Richard uses his “internal supervisor” to continuously gauge what to do next (see above) and adds:

“If...towards the end of a session, you wanna talk about the future, then a timeline might be more important.” [T2.06.13-16]

Bridget would use more directive methods when there is limited time with a client or to bring more awareness to client's choices of verbal expression if:

“...they’re only using nouns...introducing more action words like verbs to describe the same scene. So...engage in the processes of change.”

[T3.05.33-37]

“...If it’s a short term contract, I might ask them for a metaphor early on. So [...] direct them towards making a metaphor.” [T3.05.53-06.02]

4.2.3 Master Theme: focus on the client and their experiencing

One of the key reasons for using CL in therapy for all participants is that it would enable focusing on the client and their own subjective experiencing. Common sub-themes were 1) respecting the client’s experiencing, 2) client-oriented usage, 3) experiential process and journey.

Respecting the client’s experiencing: Sarah noted that one of the things that CL make her very conscious of is:

“...not painting clients’ processes with your view of the world...So you’re very mindful of using their language, their view of things, even if I’m not using [CL]”
[T5.06.07-15]

Not interfering with clients’ processes is important to Bridget:

“Particularly when somebody is dissociating in their session...” [T3.16.06-09]

Richard uses person-centred approaches to notice moment-to-moment changes with the client and believes that:

“...to get deeper and closer to their [client’s] experience, [CL] is the way [...] as far as I’m concerned.” [T2.02.03-06]

Yvonne expands this as using the approach quite clearly would allow her to appreciate:

“...the very individualistic nature of our own subjective experience, I am reminded all the time...from not being clean...just how differently we all think and so working in that way...is just a really beautiful way...allowing someone to work with their own information within their constructs.” [T4.05.31-42]

Client-oriented usage: All participants made some comments around the importance of following the client’s process and checking in at various intervals to find out where they are or what they would like to have happen. Most participants during the course of the interview mentioned about the importance of going with the flow and staying with the moment. Richard explains:

“...so whatever we do, we kind of take the clients process...or generally what they like [to have happen]?” [T2.14.08-11]

Yvonne’s toboggan metaphor may be a helpful representation of the CL facilitator. Though she is the “driver” of the toboggan she knows that there is no other way but to go with the client’s process:

“...I don't necessarily have control of where the tunnel takes us, so I have...to go with it...you can kind of get speed up, but after that there is not much you can do other than sit there and hope for the best.” [T4.14.12-21]

Experiential process and journey: The participants also commented on the client’s individual process and their journey in the therapeutic change work. For Richard it is journeying (together) towards the outcome:

“...that process, where clients or myself and what we work with gets to become, gets to be, gets to experience...” [T2.05.26-29]

“...the real joy there of course is that you’ve no idea where you’re going. So, yes you’re going to some pretty higher places.” [T2.12.20-23]

4.2.4 Master Theme: effective and efficient enabler of change

An important reason for using CL is that participants find it an efficient approach to successfully enable therapeutic change. This section will look first at why the participants find it useful and will then explore their evidence criteria.

Desmond finds it useful for:

“...rapport building and communication...” [T1.03.08-09]

and particularly because:

“...it keeps the client in the metaphor and doesn't bring them out of it. So if I use a non-clean approach, they gonna find it difficult to stay with the metaphor and mature it and get the best out of it...” [T1.04.10-19]

He also mentions the trance-like qualities of the CL session which would create:

“...a spiritual special place that...fertile ground for changes.” [T1.07.52-54]

Desmond believes that in his experience when he would get into deep metaphor work using CL there can be quite significant shifts within the client and finds it is:

“...one of the key catalyst of change...” [T1.10.52]

“...not the answer for everything – but powerful.” [T1.11.22]

For Richard CL enhance the effect of other methods he uses in therapy:

“...it just makes everything else more sophisticated and more effective.”
[T2.03.48-50]

“...you just see [...] translation of metaphors, see metaphors evolve, transform, translate...” [T2.14.49-52]

“...The essence is people feel differently and they generally feel better.”
[T2.16.21-22]

For Bridget CL helps to get clients out of a stuck state and:

“...when a client is preparing internally and out of awareness for a transformation and a different perspective.” [T3.02.24-27]

For Yvonne the approach is particularly helpful to get clients

“...out of the prevailing patterns of thinking or feeling or doing, and...take up a different, perceptual position with it.” [T4.05.14-24]

When Yvonne was asked if CL would ever not work she answered:

“Course not. *[Laughs]* Well, see it depends on your perspective, on one level “clean” is always going to work, as it always elicits more information. Always. “Clean space” will always elicit information.” [T4.15.16-21]
“...I’d still use [CL], even using...conceptual language and that will still be effective...” [T4.15.34-37]

Sarah finds the approach important:

“...because...for example people in traumatic situations, without letting them re-experience the trauma... there can be a huge shift in the client’s state as they process some of the knowledge they’ve just got. And so it helps them to achieve a state more quickly because of their realisation it’s the metaphor they held within their body or within their head.” [T5.11.15-26]

Sarah also commented on an important aspect of the metaphor work where:

“...at some level, you’re checking whether the metaphor has changed at the end, in terms of their understanding of the different parts? So that’s one thing that metaphor therapy has taught me very much. So...we’re talking about processes internally, if that has changed, then the metaphor language has changed.” [T5.10.04-18]

However, Sarah also gave a counter-example suggesting that CL is effective but maybe not so efficient when she is in time-limited situations:

“...I may only have two hours with somebody, and that’s it...I may never see them again. I may choose to do a different approach, if I think that will get them to where they need to be quicker. And what we...do will resonate better with them.” [T5.09.09-23]

The participants were also asked about their evidence or success measures, of how they knew that the approach was effective. None of the participants recorded any form of outcome measures before and after a course of therapy. Most participants’ success criteria were based on noticeable therapeutic shifts in the sessions, physical changes or verbal feedback from patients.

For Desmond it’s mainly the client’s responses to the therapeutic work, which may not always be obvious:

“Because clients tell me. They might come in and say: “I feel a lot better...”, “...my relationship with my father is significantly improved” - whatever we’ve been working on basically. And sometimes it might not be the obvious thing because it’s metaphor work. You might think they are coming about X, but actually they’ve fixed Y...which actually sorts X out...so...the clients’ responses.” [T1.11.04-18]

Richard’s evidence is when:

“Clients come back and tell you what’s different in their lives, sometimes you...sense...shift in the moment. You just see it’s different...a whole different phenomenology...” [T2.14.53-15.05]

“Their skin colour changes, they smile...they forget about problems...Old stuff just becomes historic...” [T2.15.06-09]

“...black holes turning into sunny days or clouds shifting with silver linings...loads of metaphorical shifts.” [T2.15.50-16.01]

For Bridget it is often a verbal response or physiological changes that she notices:

“Usually there is a change in body language and a change in the way that they express themselves, which can be quite dramatic.” [T3.07.34-37]

“Because they usually tell me or they say: “wow”... or “that’s it”...usually a verbal response.” [T3.14.39-41]

“...cry or laugh?...” [T3.14.47]

“The client will show me non-verbally...from the skin colour, from their eyes, from the way they use their body...” [T3.14.47]

This is similar for Yvonne who knows that the approach has worked because of clients’ general signals of change whether they are verbal or non-verbal:

“...changes in posture...in breathing, and some people get sensations when they are making the change...They might get a headache or they might get a sleepy feeling...” [T4.16.52-17.04]

“...for me it's been successful if they have got a good degree of new information, new awareness...quite often they will say...“oh, that's interesting...I never realised that before...I get it now...or....this is completely different to...”...those kind of things tell me that...something has shifted.” [T4.16.21-35]

For Sarah, working with CL can create changes that can happen very quickly and also outside of the sessions:

“...because you’re working with their metaphoric landscape...when you ask a question that causes the landscape to realign itself, it all can happen quite quickly...” [T5.12.01-06]

“...the physiology of a client, the language of the client. All the signs that you would use as a psychotherapist to visually check and...assess that your client is shifting and moving...” [T5.13.12-18]

“...there might be external validation...So...with a phobia, it’s whether they can do what they couldn’t do before...” [T5.13.28-32]

Desmond mentioned a recent client example to highlight the metaphoric shift paralleling an emotional shift, which was generated in a short time:

“...There was a lady who talked about a monster that was living...inside of her...she came in with a drawing...and it’s had - this monster had its mouth all sown up. And in the session she asked for an eraser...and she rubbed out the stitches...as soon as she rubbed it out she opened the door to everything that was already going on, and spilled out...that was the one that had the relationship with her father. That’s what...improved. She was far more assertive with him...she sorted it out through that metaphor.” [T1.11.48-12.15]

4.2.5 Master Theme: personal preference

What was noticeable about all participants was their own personal preference for metaphors and working with them in a way that was close to a philosophy or way of being. Desmond describes that he would also use this approach outside of the therapy with his kids at home and believes that:

“Metaphor is a big part of what I do, it’s quite significant.” [T1.03.13-15]

“...I can’t see how you can do it without it.” [T1.04.19-20]

“...metaphor is my kind of favourite, so...I’m gonna pick up on it...” [T1.04.53-54]

For Richard using CL seemed like a philosophy or identity:

“...it’s all we do...my identity...” [T2.01.19-20]

“...[CL] is the operating system...running in the background and...it’s...almost a way of being...It’s just who I am and what I do...” [T2.04.16-32]

“...I find it art extending, exciting...” [T2.10.25-26]

Bridget agrees that she uses it because of her own preference:

“Probably because I like it...” [T3.05.46]

This is similar to Yvonne for whom CL is part of an overall methodology, and similar to Richard it is her primary approach:

“...clean being an approach in its own right, as opposed to a technique or a tool that you can add on, for me...” [T4.17.51-53]

“...because of my preferences, my own personality preferences and my own working preferences that suit me much better...” [T4.06.28-32]

“...I am holding “clean” as my overall framework, so I have an intention of getting into a “clean” session, or starting to use it...” [T4.07.30-37]

Even though Sarah does not use it all the time she comments:

“...once you’re aware of it...you can’t not know it. It becomes part of what you do, even if you don’t do it all the time.” [T5.15.20-24]

“...you notice them [metaphors]...even if you’re not meaning to. [T5.15.34-35]

4.2.6 Master Theme: relational and co-creative aspects

An important commonality underpinning all participants’ therapeutic work seemed to be the therapeutic relationship as well as a co-creative space where metaphors can be client-generated with CL but also therapist-generated with non-CL methods in a co-creative way. For example, Desmond explains that for him it:

“...could be client-generated it could be therapist-generated, it becomes co-created.” [T1.01.42-44]

“...sometimes I might offer a metaphor myself that they can pick up on and then we go into [CL]...” [T1.05.52-54]

“...It’s a connectedness between you and your client when you are in that space. A closeness that you are sharing something, that’s important.” [T1.08.41-45]

Richard noted the importance of the relational aspects not only between him and his client but also between his client and his metaphors:

“...I use [CL] to facilitate the relationship of both the client and myself [...] the client with their metaphors...their landscape, their problems, their outcomes...” [T2.01.20-25]

“...I’m always kind of trying to work out where...How does it relate to our relationship, how does it relate to the here and now...” [T2.06.27-33]

“...like we are creating wind or...energy for the client to catch...It’s their energy...some of it is coming from me, ‘cause I’m...human even though you’re “clean”...” [T2.12.17-47]

Bridget found that when there is limited time a therapist-generated metaphor but working within the logic of the client’s metaphor can be effective:

“...metaphor about being in an aircraft...[client] was the pilot and she was on her own. And so I would say “well, how about the ground staff and your stewardesses and your flight attendants”...and gradually she was able to enlarge her perception to include other people. And...this was quite out of her understanding at the time...then realised that she did have a lot of ground staff in her life.” [T3.15.10-22]

“...we only had quarter of an hour, so I realised I had to introduce using [CL] and I had to introduce the fact that if she was in an airline all by herself that there were likely to be other people involved in that process and then she can began to identify them.” [T3.15.28-35]

Yvonne appears to use CL in its most classical form where she aims for the client to:

“...get a different relationship with the information...so that they can start relating to the information in a different way so they take up a different, perceptual position with it...” [T4.05.18-24]

She also adds her thoughts about relational aspects:

“...there is something important to me about the nature of the therapeutic relationship itself and using clean in that context...” [T4.05.51-54]

“...I was partly drawn to “clean” because it allows us to have an intimate connection with the client and their information without having to kind of step into their shoes...we can keep separate from it and yet there is still this intimacy about the relationship between the therapist, the client and the client’s information.” [T4.06.39-48]

“So when I am with a client...I enter the bubble and everything else is inside it: the client, me, their information, their landscape...” [T4.08.05-14]

4.3 Reflexive Notes on the Research Process

After one of the interviews I felt dissatisfied believing that I did not get as much information out of the interview as I hoped for. However, discussions with my supervisor helped me gain confidence and a different perspective. It helped me appreciate my own interviewing skills level for where it was at the time and that each participant’s account was valuable in its own way and reflective of each individual’s unique processing.

Technical complications made the research process more challenging. For example, one of the interviews had strong sound interference with the recording device which was only noticed after the interview. This created considerable additional work to make the interview usable and the transcription was still the most difficult of all because of this issue. It would have been good to practise and prepare better for the technical aspects before conducting the interviews.

The most challenging of all was the transcribing process of the interviews. It was so tedious and time consuming at the time that half way through I felt I needed extra support from professional transcribers to complete the remainder of the interviews. I re-checked all the audio data against the transcripts to ensure same data quality.

Though the actual data analysis was relatively straight forward, I felt that I was too close to the material which made it challenging to prioritise the participant themes and comments while conforming to word count restrictions. If there had been more time I would have liked to readjust and reduce the amount of sub-themes to avoid time-consuming double – and cross-checking throughout the write-up.

It was helpful to have had support from an independent second researcher during the transcript analysis. Most of her sub-themes and master themes, though not as many, were similar to mine. I found her reflections on the process supportive and revealing. For example she shared that she felt sometimes as if analysing “a computer...all processes and outcomes...” Other participants to her “...seemed more human...” She also noticed that some were “...more focussed on themselves...what next to do...rather than just taking the time to listen to their clients” (Appendix 10).

As a reflective exercise on completion of this dissertation, I included my personal metaphor for undertaking this research project in Appendix 11.

Chapter 5: Discussion

This chapter summarises the findings of the study, comparing and contrasting the results with the existing knowledge in the field. This is followed by considering this study's limitations, its contribution to psychotherapy and implications for practice as well as recommendations for future research.

5.1 Summary of findings

The results of the IPA highlighted six master themes. These were ordered in a way that could more easily answer the research questions. Appendix 7 shows a table of how this was done. Some master themes were split over two questions with different corresponding sub-themes. The results showed that participants used CL in a number of ways depending on their experience and training, their choice of psychotherapeutic methods and their personal preferences.

Most participants found it a useful and time-efficient tool for therapeutic change. This was mainly explained by its respectful way of staying in the client's own subjective experiential world as highlighted by Grove and Panzer (1989), Kopp, (1995), and Lawley and Tompkins (2000). The therapists aimed to facilitate clients to explore their metaphorical world to find meaning and to create change towards their desired outcomes. However, it is important to note that metaphor was a personal preference of all participants.

Though all participants used CL in an integrative way, most differences were found around when and how participants used this approach. It was agreed that CL does not always create therapeutic change or helps clients achieve their outcome depending on their processing and preferences (Loue, 2008; Siegelman, 1990).

Part of this study also aimed to understand what kind of outcome measures are utilised by therapists to evaluate the effectiveness of their approach. None of the therapists utilised formal questionnaires before and after therapeutic interventions. Evidence criteria were generally based on noticeable changes during the therapeutic process (verbal or non-verbal), the client's achievement of their desired outcome, or

from specific feedback provided by clients (Loue, 2008). There is currently only limited research into the efficacy of CL (Divett, 2004; Robinson, 2014).

An important finding was that all therapists found relational and co-creative aspects key to generative change in the therapeutic relationship (Siegelman, 1990). This also encompassed directive and therapist-generated approaches to metaphors; often due to time pressures. Mearns and Cooper (2005 cited in Maunders, 2012) noted a recent shift towards general inter-subjective, relational and social constructionist positions within therapy. This somewhat contradicts Owen's (1989) view of CL in therapy and other practitioners and the DoH seem to agree that the therapeutic relationship is more important than the modality (Siegelman, 1990; DoH, 2001; Loue, 2008; Ben-Shahar, 2013).

CL does not seem to be commonly known among most psychotherapy professions, unless for those who came across it by coincidence or through NLP training, which explains its lack of representation in psychotherapy literature.

The following sections provide more detail in relation to the research questions.

5.1.1 Why do therapists use CL?

All participants found CL methods effective and time-efficient on various levels. The participants believed that this was because the approach allowed them to get as close as possible to the client's subjective experiencing without being clouded by the therapist's own subjective interpretations (Grove and Panzer, 1989; Kopp, 1995; Lawley and Tompkins, 2011; Harland, 2012). However, one of the differences that two of the participants noted was when time was really limited (between 15 minutes and 2 hours for total length of therapy) more directive and therapist-generated approaches could be more effective.

Participants believed that working inside the client's experiential model while utilising CL questions to direct clients' attention to explore, expand, mature and the transform their metaphoric landscapes, enables psychotherapeutic change (Lawley and Tompkins, 2000). Primarily metaphorical changes were noticed, accompanied with

behavioural, physiological and emotional shifts or verbal feedback similar to what Levitt et al. (2001), Strong (1989) and Waldron (2010) found.

Some participants mentioned that applying this approach creates a trance-like or light hypnotic state of altered consciousness which made this kind of deep experiencing conducive to change. This is what Grove called “a state of focused self-absorption” (1998:p.x).

All participants disclosed that they personally liked using metaphors as one of their preferred tools and ways of interacting with clients. The main reason given for this was its respectful way of honouring the client’s experience, their view and model of the world; which is one of the key presuppositions of NLP (Wake, 2010).

It also seemed that all participants had at some part in their careers and educational journeys come across NLP, had a coaching or Hypno-psychotherapy background. Considering that the CL itself has been modelled by therapists familiar with NLP modelling techniques (Lawley and Tompkins, 2000), it is understandable that this approach would be known in these circles. This also explains the limited representation in academic research.

All participants mentioned embodied aspects of metaphor at least once during the interview for the client’s experiencing or their own. This supports findings from Kirmayer (1992). Lakoff and Johnson (1999) and Gibbs et al. (2004) seeing metaphors fundamentally grounded in embodied experience

5.1.2 When do therapists use CL?

One of the key difference between participants appeared to be around ‘when’ they would use CL as an approach during psychotherapy. All participants commented on using CL when the opportunity arose, it felt right and the client responded to it. Two participants seemed to use it more consistently throughout their sessions as per and Lawley and Tompkins (2011). One participant mainly used it when the client offered a metaphor. Another participant commented noticing metaphors, patterns, or outcomes that were triggering use of this approach. Two participants used it mainly at the start of sessions, for information gathering and rapport building.

Participants with a stronger coaching background or focus seemed to combine CL with more directive therapist-led techniques, including NLP approaches (Wake, 2010) more readily, or drawing on any other approach in their toolbox if needed.

One participant seemed to use the term CL to define generally using metaphors in therapy. This including therapist-generated metaphors, which does not strictly follow CL principles (Lawley and Tompkins, 2011).

Three of the participants found the approach helpful for specific symptoms, including anxiety, depression, relationship issues, dyslexia, sleeping issues, trauma work. However, research into the treatment of these specific symptoms with CL alone does currently not exist.

All participants agreed that CL may not always create effective therapeutic change for some clients, e.g. those who were either highly distressed or more left-brain (“engineering-type”) and who processed information more cognitively. Similar research was found by Danesi (1989) and Kopp (1995) and may highlight deeper rooted issues and failures to trust (Siegelman, 1990).

5.1.3 How do therapists use CL?

Depending on their training, most participants seemed to use CL in its ‘classical’ way using Grovian as well as questions evolved from these (Grove and Panzer, 1989; Lawley and Tompkins, 2000). Two participants utilised some more recent applications, including Emergent Knowledge, Clean Space, Symbolic Modelling (Lawley and Tompkins, 2011; Harland, 2012).

The main similarity between all participants was that they practised their therapy in an integrative way, though they may have started from different psychotherapeutic models (e.g. family therapy, transactional analysis, hypnotherapy, counselling). CL was used more as a tool for three of the participants while for two of the participants, it was their primary approach and other techniques and tools were added to this overarching framework.

There was clear outcome-orientation among the participants in the way they utilised CL as they had been taught in their training (Grove and Panzer, 1989; Lawley and Tompkins, 2000), some following the structure and processes more explicitly than others.

All participants commented on conscious and intuitive usage of their own sensations (embodied aspects) or their thought processes to measure the progress of therapy; using themselves as measuring instruments (Maunder, 2012).

A significant finding was that all therapists found relational and co-creative aspects of the work an important part of the therapeutic relationship for generating change. This was interesting as previous research had described the CL facilitator which seemed somewhat more removed from the therapeutic process when Owen (1989) proposed that CL is a metaphor-symbol-centred therapy where transference dynamics would exist between the client and their symbols. It included also co-creative and directive therapist-generated metaphors as opposed to the classic use of only working with client-generated metaphors. However, working with CL may suggest a different level of co-creation as the therapist chooses the questions that direct the client's attention. It is therefore important to acknowledge that when two human beings come together, dynamic inter-subjective and mutual influencing is inevitable and highlights those relational aspects can influence the effectiveness of any therapy (Seligman, 1990; DoH, 2001; Loue, 2008; Ben-Shahar, 2013).

5.2 Limitations and Learning

This study was designed to be limited to therapists from different psychotherapeutic orientations that utilised CL for therapeutic change. These therapists tended to have a personal preference for this approach and therefore actively chose to utilise it regularly in practice. It may have been interesting to have found more participants from other psychotherapeutic modalities without knowledge or background in NLP, coaching, or hypnotherapy.

One participant appeared particularly focussed on client-generated processes, noting that it is dependent on the therapist's facilitation skills and ability to direct the client's attention to ultimately achieve a desired outcome. Other participants were more

flexible utilising co-creative or therapist-generated metaphors. This observation shows that despite the therapists' voluntary efforts to participate in this study and their choices for using CL in practice, its understanding and application is different for each therapist.

This may have been due to the different types of CL training that the participants had. Since our knowledge and standards of training continuously evolve, it might have been useful to have found more participants who attended similar or standardised training courses within a certain time-frame.

Challenges were experienced around Skype interviews and recording phone interviews. Not all participants had the software working or there were sound interference and connection issues. This has affected the quality of the transcription process and result. It would have been good to trial effective solutions with each participant beforehand.

The transcription process was challenging because of my initial choice to include all 'erhms' and 'ahs'. This was based on my misunderstanding that for proper 'phenomenological' research everything can be useful information. Audio recordings will inevitably lose certain non-verbal information (e.g. gestures and facial expressions). As an independent study, peer and supervisor support was my own responsibility.

Getting voluntary support was challenging recognising everyone's busy schedules while balancing this against a low research budget. It would have been good to have sought more support and clarification from available supervisors before starting the transcribing process.

It could be argued that seeking information as to why, when and how therapists use CL in therapy is a tall order. Therefore a fairly large number of questions were developed for the interview schedule which was challenging to get through during a 45-60 minute interview, especially in a CL way. Despite going on a week-long intensive course for CL in therapy prior to the research, my level of training in CL interviewing methods was incomplete; and my experience in both limited.

A future consideration could be to reduce the number of questions and follow up any interesting leads throughout the interview. It would have been particularly useful to have had more training and experience in clean interviewing methods to get more experiential information out of the participants.

I was pleased about my thorough research preparation before starting the study as this really helped me in the implementation and completion of the project. For the initial proposal I received my highest grade so far (85%). Attending a number of CL training days and a CL conference in London to present my initial research also helped boost my confidence, motivation and personal interest in the topic.

This project allowed me to learn and grow in many ways. It included finding my own voice and feeling that I really owned this independent piece of research which was not only useful to my own professional development but also potentially for the whole psychotherapeutic community.

5.3 Contribution to Psychotherapy

The participants' accounts have shed light on the ways that therapists can understand and apply the CL processes in brief therapy. It also highlighted different therapists' ways of relating with clients during the therapeutic engagement. Since the therapeutic relationship has become central to the theory and practise of many psychotherapeutic models, the findings of this study in regards to the relational and co-creative aspects of therapy are particularly relevant. It highlights that the therapeutic process takes place within the inter-subjective context in which client and therapist mutually influence each other (Siegelman, 1990; Yalom, 2003; Maunders, 2012).

The field of mindfulness or altered states of consciousness seems to offer further insight into the successful application of CL. Some of the participants described a special trance-like state of mind, experienced by both clients and therapists, in which clients were able to more fully experience, explore, expand and transform their metaphoric landscape to achieve therapeutic change more successfully. The rhythm and the way CL questions are used therefore have similarities to hypnotic trance

work but in a lighter more conscious context creating psycho-active landscape (Grove and Panzer, 1989; Harland, 2012).

Another interesting link is the importance of embodied experience mentioned by some of the participants. Others in the field have criticised the commonly held Western view that mind as separate from the body (Danesi, 1989; Rossi, 1990; Dwairy, 1997; Lakoff and Johnson, 1999). Trends are shifting and alternative views are seeing experience as an embodied process providing knowledge through our intertwined mind-body system. Acquiring knowledge through our embodied as well as cognitive experiencing provides us with a fuller experience of emotion, as Kirmayer (1992), Lakoff and Johnson (1999) and Gibbs et al. (2004) had shown.

5.4 Implications for Practice

One area in which the study of CL methods is valuable is in regards to training. Given the importance of effective therapeutic change for brief therapy and the wide use of metaphors in therapy, training programmes need to teach psychotherapists how to work with client-generated metaphors and how to understand and apply CL for a variety of psychotherapeutic modalities.

We also need to consider the kind of relational work that the therapist needs to engage in to be able to understand and make use of both the client's and their own inner experiences. The therapist's willingness to relate effectively to the client and yet put the client's subjective experiential world and the client's relationship with their experience (and metaphors) to the forefront is achieved by creating an environment in which the therapist also has an opportunity to experience this exploration for positive change (Mauders, 2012).

The therapist's own experience and personal therapy is one way of raising awareness of self in relationship with another as well as with metaphoric symbols and embodied senses (Kirmayer, 1992; Gilligan, 1997; Mauders, 2012). Utilising supervision, with supervisors trained in the approach (Arnold, 2014), attending CPD and further education as well as practice groups can also offer more powerful way of raising awareness. Often group work can be effective in creating an environment in which people can learn about themselves through their interactions with others and

the practical exercises. Another direction may involve integrating some form of embodied-mindfulness practice into the training of psychotherapists in order to help cultivate the capacity for self-observation and promote therapist's confidence in the approach (Hanh, 2006; Siegel et al., 2013).

Classic training courses (Lawley and Tompkins, 2011) encourage clients' subjective experiencing via the use of CL questions however do not tend to put the therapeutic relationship at the centre of the therapeutic process. It may seem like a process whereby the therapist is a facilitator on the outskirts of the therapeutic process, holding the process, aiming not to get too involved in the material or in the relationship with the client, but encouraging the client's relationship more with its symbols and their metaphoric landscape by directing them with specific questions. Lawley argues that there are several types of therapeutic relationship and that its general view should be widened, including the relationship to self (Lawley, 2011).

As in any therapy, it also depends on how the therapist uses the questions, e.g. in an intuitive way being tuned into their own embodied feelings and into the client's material – in a way of transference, or in the more practical structured process-oriented way of ticking off the questions trying to stay separate from any naturally occurring transference processes.

Most therapists who have undergone psychotherapy training will be aware of this; however, the majority of existing CL training courses is geared to mostly coaches or a variety of other professions. More training is needed specifically for psychotherapists.

More training is also needed for researchers in CL interviewing techniques, which is currently even more limited and used only by a few industry experts (Lawley et al., 2010; Tosey, 2011; Lloyd, 2011; Van Helsdingen and Lawley, 2012; Tosey et al., 2014).

5.5 Future Research

The findings of this research project have pointed to the importance of understanding the use and application of CL to facilitate client-generated metaphors embedded in a

relational context. More research emphasising some of the relational processes and the therapists' subjective experiences in the application of CL in therapy could deepen our understanding of the inter-subjective mutually influenced therapeutic change process.

To gain more insight into the internal processes of both therapist and client would require in-depth descriptions of their experiences together with detailed accounts around any changes in internal experiencing. It could include videotaping the client sessions and interviewing therapists as well as clients. This could provide an opportunity to obtain both the therapist's and the client's individual subjective experiences of the therapeutic process.

There should be more research into CL interviewing methodologies and how it could be applied more effectively. There has been little research (Lloyd, 2011) and studies could be designed around conventional interview questioning methods and CL interviewing methods and the outcomes compared in regards to their phenomenological richness.

Further research would be helpful into the use of outcome measures that are utilised to evaluate effectiveness of CL in therapy. Justifying future research and encouraging potential funding and uptake by recognised accreditation bodies and national health services would require demonstration of accepted evidence. Research could be designed over a longer-term whereby participants could use commonly accepted evaluation forms before and after the therapeutic interventions to provide more insight.

Chapter 6: Conclusion

I embarked on a journey to investigate why, when and how psychotherapists of different therapeutic modalities use CL to facilitate client-generated metaphors in therapy. This research provided an in-depth snapshot of a small number of therapists who were initially trained in different modalities but now use predominantly integrative methods. The benefits gained from this study include insights into how therapists understand and apply CL methods in clinical practice.

I intended to use IPA with CL interviewing methods to enable rich experiential participant accounts and a clearer theme development compared to standard interviewing methods. The results from this study also highlight the value of qualitative research methods using in-depth interviewing techniques.

The conclusions drawn from this research support the fact that client-therapist interactions are complex and have a relational element. The participants understood the therapeutic application of CL methods and their experiences in a number of different ways and all seemed to agree that it was an effective tool to enable clients' change processes in brief therapy.

This research generated new questions, such as 'what influence have relational aspects on the effectiveness of CL methods in therapy'. It also aimed to provide directions for future research, such as emphasising some of the relational processes and the therapists' subjective experiences in the application of CL in therapy.

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List of Appendices

Appendix 1: *Email and Website Information*

1.1 *Email Communication and Home Page information*

Are you using client-generated metaphors in your clinical practice?
Are you using Clean Language as a therapeutic tool?

I am looking for psychotherapists who use client-generated metaphors with Clean Language in their practice for a postgraduate research project.

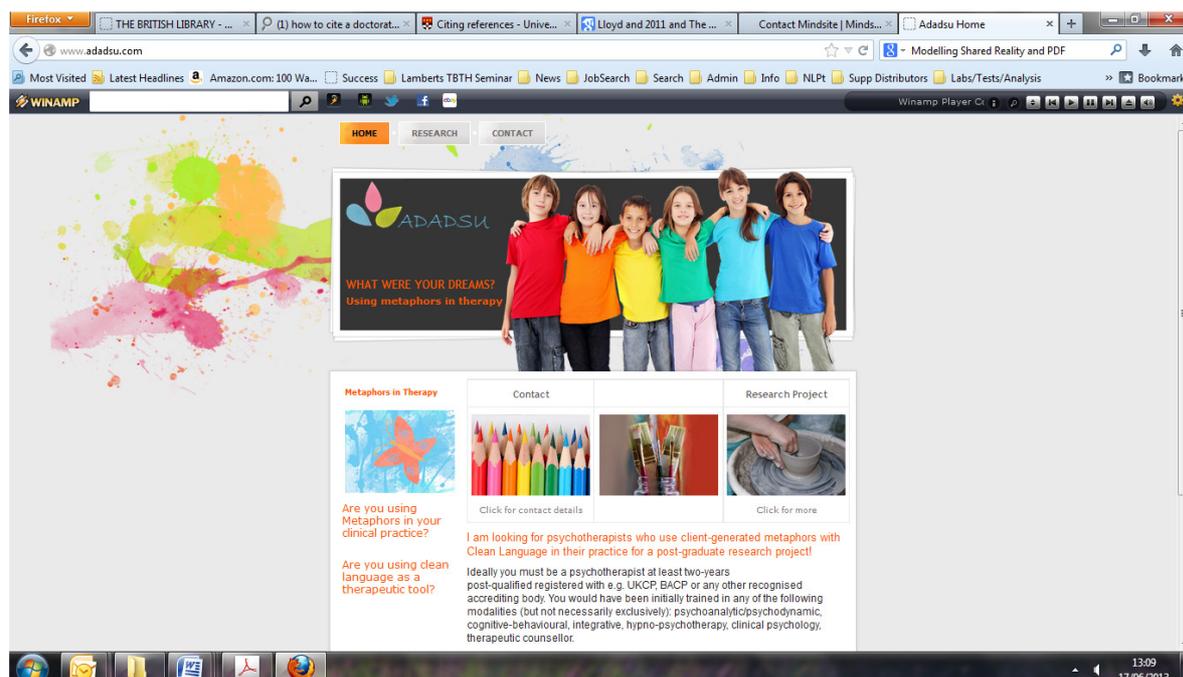
Ideally you must be a psychotherapist at least two-years post-qualified and registered with e.g. UKCP, BACP or any other recognised accrediting body. You would have been initially trained in any of the following modalities (but not necessarily exclusively): psychoanalytic/psychodynamic, cognitive-behavioural, integrative, hypnotherapy, clinical psychology, neurolinguistic psychotherapy, therapeutic counsellor.

Your involvement would be limited to a one-hour interview. I will travel to your location of choice or agree a convenient Skype video conference call.

My aim is to add to the current understanding of the psychotherapeutic value of metaphor and Clean Language-based approaches.

For more information, please see: www.adadsu.com or contact Lara Just via email: lara@adadsu.com or mobile: 07791 991199.

Your help will be greatly appreciated.



1.2 Research Page Information

Research Proposal Outline

Research title: Why, when and how do qualified psychotherapists from a range of modalities make use of client-generated metaphors using Clean Language as an effective tool for brief psychotherapeutic change?

Utilising Clean Language in brief psychotherapy is currently seen by some as an effective tool to elicit client-generated metaphors to enable psychological and behavioural change.

Key aim of this research is to gain a more comprehensive understanding of why, when and how some therapists (of different theoretical backgrounds) practicing with brief therapeutic models use metaphor work, in particular with the help of 'Clean Language' approaches as part of their clinical practice. It aims to assess if 'Clean Language' methods, as one of the contemporary techniques of client-generated metaphor work, are regarded as an effective method to achieve positive therapeutic change outcomes. Predominantly, it is the therapist's subjective experience and expert opinion of utilising Clean Language tools in psychotherapy that will be of key interest. Understanding what kind of outcome measures are utilised to evaluate its effectiveness should be explored. It is anticipated that this research can inform practitioners of more effective psychotherapeutic change techniques as well as provide future directions of further research in this area.

This study is part of a final year research project for a PGDip in Outcome Oriented Psychotherapies with Awaken School of Outcome Oriented Psychotherapies Ltd.

Key Rationales

Using Metaphors in Psychotherapy

There is considerable research on the effectiveness of using metaphors in psychotherapy to enable positive change. Metaphors are thought to access unconscious processes and increased right-brain function, important for promoting

psychological and behavioural change. Metaphorical language can help express emotional experiences that can be difficult to express in literal terms. This has been useful for psychotherapy for many different modalities (Kopp, 1995), and it has been regarded as a useful tool particularly when working 'brief' (Madanes, 1990; Gilligan, 1990; Kopp, 1995).

Images can affect areas of the brain that are involved in biological and physiological functioning for mind-body health and wellbeing (Rossi, 1990 and 1993; Pert, 1997; Dwairy, 1997; Childre and Martin, 2000; Rozman and Childre, 2005; Lipton, 2008). Hence metaphor and imagery interventions can create simultaneous changes in psychological, biological and socio-cultural systems (Dwairy, 1997; Childre and Martin, 2000).

Focus on Client-generated Metaphors

Many traditional psychotherapeutic models have utilised therapist-generated metaphors (presented via interpretations, analogies, stories, myths, archetypes). However, since the 1980s a number of therapists have advocated utilising client-generated metaphors, to focus more fully on the individual's unique experience. This includes the work of Grove (1989), Siegelman (1993), Kopp (1995), Battino (2002), Lawley and Tompkins (2000), Sullivan and Rees (2008), and Harland (2012).

Some of their approaches highlighted the importance of exploring the individual's experience involving all bodily senses. This is based on the concept that metaphors are fundamentally grounded in embodied experience (Kirmayer, 1992; Lakoff and Johnson, 1999; Gibbs et al., 2004). Thus it is important to explore not only the visual imagery aspects of a person's metaphor, but also its auditory (hearing), kinaesthetic (feeling), olfactory (smelling) and gustatory (tasting) qualities (Battino, 2002). This can effectively expand the natural metaphor in a way that enables a dynamic four-dimensional spatial and temporal arrangement ("metaphor landscape" as in Symbolic Modelling by Lawley and Tompkins, 2000) representing the person's unique model of experience.

Clean Language

Using 'Clean Language' tools can be an efficient way to achieve this. This approach was initially pioneered by Grove (1989) who developed a unique method to assist clients with traumatic memories, particularly when working with child abuse, rape and incest; even inter-generational and ancestral healing (Lawley and Tompkins, 1996).

Realising that many clients would naturally describe their symptoms in metaphors, he started to ask specific questions about these. For example, instead of asking "How do you feel about that?" he would use mainly the client's exact words and ask e.g. "And when that happened, what was that like?" He did this to reduce the risk of contaminating or distorting the client's reality with his own words or assumptions. Working within their own metaphors in this way enabled his clients to consider their symptoms in a new way, frequently allowing their perception of the trauma to change (Lawley and Tompkins, 2001). These specific methods were later expanded on by more recent contemporary practitioners in the field (Lawley and Tompkins, 2000; Sullivan and Rees, 2008; Harland, 2012).

Conclusions

Though therapist-introduced metaphors can be effective when sufficiently attuned to the client material and accepted by the client, more contemporary therapists found utilising and deliberately encouraging client-generated approaches faster and more effective. This is because the therapist aims to stay completely within in the client's construct of individual reality to better facilitate exploration, extension and to ultimately encourage transformation of this experiential organising pattern ('metaphor landscape').

There is however lack of peer-reviewed research into client-generated metaphors in therapy utilising Clean Language that prove its effectiveness. The main purpose of this research is to add to the existing knowledge in the field of therapeutic approaches that use client-generated metaphors with Clean Language methods.

The Clean Language community has been growing in the past decades, with currently roughly 3-4,000 members held on UK databases of the expert Clean Language community. These members consists largely of coaches, management professionals, therapists and anybody interested in the approach of varying

backgrounds who are working with individuals or organisations. However, it is currently unclear what percentage of these are trained psychotherapists and how many other users of Clean Language exist on top of the current estimates.

Understanding therapists' experience who chose to utilise Clean Language in their individual varying ways could provide valuable insight into its perceived effectiveness and provide guidance on how outcomes could be measured for future research. Choosing therapists that already work within theoretical frameworks with existing evidence-base, e.g. recognised by the NHS or other accreditation bodies, could be useful for future consideration of integrating 'novel' tools like Clean Language into clinical practice.

Methodology Design

Four to six therapists will be interviewed from different theoretical frameworks who are working within brief psychotherapeutic models and utilise Clean Language tools. The interviews will be semi-structured, face-to-face or via Skype, audio recorded and transcribed. The interview would include open, non-leading questions, and would utilise a 'Clean Language' interviewing methodology to more fully understand the participants' experience (Lawley et al.; 2010, Lloyd, 2011; Tosey, 2011; Van Helsdingen and Lawley, 2012). The transcripts will be analysed according to guidelines from Smith et al. (2009) for Interpretative Phenomenological Analysis (IPA).

Selection Criteria

Participants will be recruited from contact databases existing within the expert Clean Language community. The psychotherapists should all work as brief therapists as defined by Kopp (1995). Ideally the participants should be a psychotherapist with at least two years post-qualified registration with e.g. UKCP, BACP or any other recognised accrediting body. They would have been initially trained in any of the following modalities (but not necessarily exclusively): e.g. psychoanalytic/psychodynamic, cognitive-behavioural, integrative, hypnotherapy, clinical

psychology, neurolinguistic psychotherapy, therapeutic counsellors. It would be welcomed if some of these therapists would work within the National Health Service.

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Appendix 2: Clean Language Questions**2.1. Example of David Grove's Clean Language Questions as opposed to Non-Clean Language Questions****Grove's Clean Language Questions***

Grove's clean language – a phenomenological inquiry	"Unclean" talk
And what do you want to have happen?	How can I help you?
And what do you want?	What is wrong?
And what is happening?	How do you feel?
And is there something you are thinking?	What is on your mind?
And when that happened, what was that like?	How do you feel about that?
And when that happens, what happens?	What does it remind you of?
And when that happened?	Tell me what happened?
And when you feel that, where do you feel that, when you feel that?	Can you get in touch with it now?
And when that happened, did you have any feeling?	How does it make you feel?
And what is that feeling like?	Are you angry?
And what can you suggest you could do?	I want you to get your anger out.
And when that happens, how do you know that happens?	What is bothering you?
And when you know that, how do you know you know that?	What did you think about that?

*A comparison of clean language questions which elicit the client's pristine information as opposed to ordinary questioning (*Owen, 1989:192*)

2.2. 'New' Clean Language Questions (based on Lawley and Tompkins; Sullivan and Rees)

Twelve Basic Clean Language Questions*

DEVELOPING (THE CURRENT PERCEPTION)

ATTRIBUTES

- And is there anything else about X?
- And what kind of X is that X?

LOCATION

- And where/whereabouts is X?

RELATIONSHIP

- And is there a relationship between X and Y?
- And when Y, what happens to X?

METAPHOR

- And that's X like what?

SEQUENCE (MOVING TIME) and SOURCE QUESTIONS

BEFORE

- And what happens? (Or) And what happens just before X?

AFTER

- And then what happens/what happens next?

SOURCE

- And where does/could X come from?

INTENTION

DESIRED OUTCOME

- And what would X like to have happen?

NECESSARY CONDITIONS

- And what needs to happen (for X)?
- And can X happen?

**Source: Lawley and Tompkins (2000); Sullivan and Rees (2008)*

Appendix 3: Interview Questions (Interview Schedule)**Interview Questions***

1. (And) What is it like for you to use client-generated metaphors via Clean Language methods in therapy?
 Prompt: (And) Why use Clean Language?
 Prompt: (And) What are the benefits of using Clean Language in therapy?
2. (And) Have you found any potential issues or disadvantages in using Clean Language methods in therapy?
 Prompt: (And) When didn't it work?
3. (And) How long have you been using Clean Language approaches for client-generated metaphors in therapy?
4. (And) When do you use Clean Language approaches for client-generated metaphors in therapy?
 Prompt: (And) Do you use it as sole intervention or integrated tool?
 Prompt: (And) When or how frequently do you use it in therapy?
5. (And) Would you use any other techniques to utilise metaphors in therapy?
 Prompt: (And) Do you ever introduce your own metaphors in the therapy?
 Prompt: (And) Do you use metaphors with collaborative suggestions?
6. (And) How do you know that this approach has been successful with a client?
 Prompt: (And) Do you measure the effectiveness of your approach by using any clinical outcome questionnaires?
7. (And) What are your hopes for Clean Language use in the future for psychotherapy?

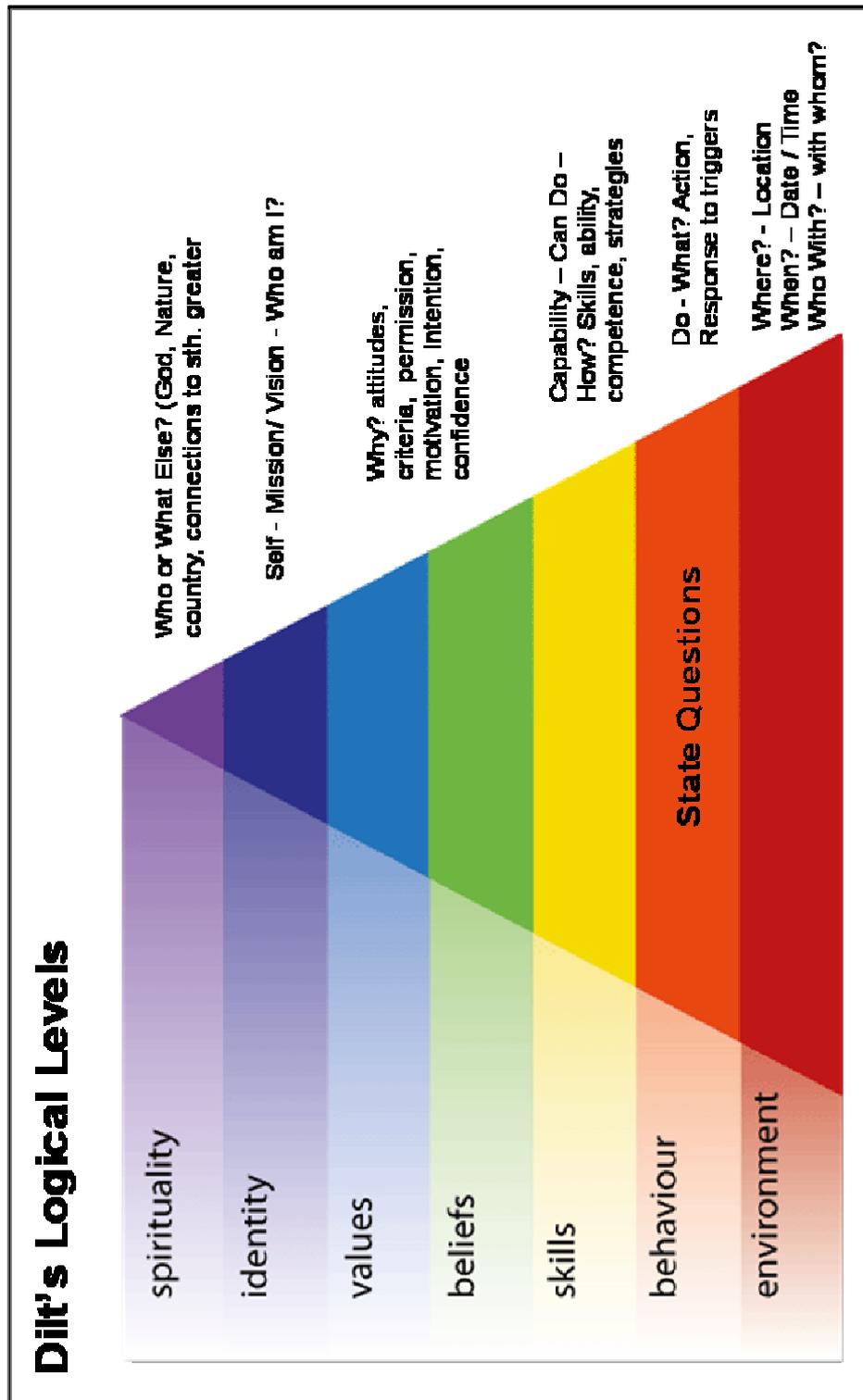
**All other prompts would be generated through Clean Questions (Appendix 2.2).*

Appendix 4: Matrix Guidance and Dilt’s Logical Levels Model

4.1 Matrix Guidance for Interview Schedule

Identity / Spirituality ?	Beliefs & Values	Behaviour & Skills	Environment
Identity ?	Pers. Reasons Intentions & Benefits	Experience (CL)	Location / Employment
?	Issues & Disadvantages	CL Skills & Approaches (How “Clean” / Other Approaches for Metaphors?)	% Split / Frequency (during sessions)
?	Success Measures	Capability / Strategies (Process - knowing when how...)	Client Groups

4.2 *Dilt's Logical Levels Model*



**Adapted from Robert Dilt's Logical Levels (2014)*

Appendix 5: Participant Information Sheet**Participant Information Sheet**

Research title: Why, when and how do qualified psychotherapists from a range of modalities make use of client-generated metaphors using Clean Language as an effective tool for brief psychotherapeutic change?

Name of researcher: **Lara Just**

I would like to invite you to take part in a research study. This study is about qualified psychotherapists that use client-generated metaphors with Clean Language approaches in their clinical practice.

Before you decide whether to participate you need to understand why the research is being done and what it would involve for you. Please take time to read the information carefully. Do let me know if anything is unclear or if you would like more information. Please take time to decide whether or not you would like to take part.

What is the purpose of the study?

This study is part of a final year research project for a PGDip in Outcome Oriented Psychotherapies with Awaken School of Outcome Oriented Psychotherapies Ltd. The aim of the study is to develop an understanding of why, when and how therapists make use of client-generated metaphors with Clean Language approaches in their clinical practice. I am looking for four to six therapists about their opinions in this area. You have been identified as a potential participant because of your background and experience in this area.

What will happen if I take part?

This study will involve semi-structured interviews. This type of interview involves open-ended questions that are few in number. The interviews will be conducted face-to-face (or via Skype video call) and on a one-to-one basis. The interview will last for approximately one hour. The aim is to enable you to describe your experience of working with metaphors and Clean Language in the psychotherapeutic context.

The interviews will be audio recorded and later transcribed for analysis. Handwritten notes will also be made. For reasons of client confidentiality, you will be asked not to reveal any personal details about your clients. To protect your anonymity, aliases or pseudonyms will be used for individuals and places. The interviews will be transferred to a computer and will be password protected. It is envisaged that the recordings will be kept for no more than two years after which time they will be destroyed.

Expenses and payments

It is not anticipated that you will incur any expenses and there is no plan to make payments.

What if there is a problem or I don't want to carry on with the study?

You can decline to answer any of the questions. If you wish, the interview can be stopped at any point. At any time you can withdraw from the study and ask for your data or have it destroyed.

If you have a complaint about any aspect of the research you should speak to me and I will do my best to answer your questions (tel. 07791 991199). If you remain unhappy and wish to complain formally, you can do this through the educational institution's complaints procedure.

Will my taking part in the study be kept confidential?

Yes. Ethical and legal practice will be followed and all information about you will be handled in confidence. If you join the study, information might be seen by authorised persons from the educational institution. They may also be looked at by authorised people to check that the research is being carried out correctly.

What will happen to the results of the research?

The results will be presented in my postgraduate thesis which can be made available to you upon request.

Who is sponsoring the research?

This research project is self-funded.

Who has reviewed the study?

All research at Awaken School of Outcome Oriented Psychotherapies Ltd. is authorised and looked at by an independent group of people, to protect your safety, rights, well-being and dignity.

You will be given a copy of this information sheet and a copy of the consent form to keep.

Further information and contact details

If you have any questions or would like any further information about this study, please contact:

Lara Just
Email: lara@adadsu.com
Tel: 07791 991199
Web: www.adadsu.com

If you are unhappy about the study you should contact Lisa Wake, Director (Research Supervisor), Awaken School of Outcome Oriented Psychotherapies Ltd. (Address: 13 South Parade, Northallerton, North Yorkshire, DL7 8SE).

Thank you very much for your participation.

Appendix 6: Consent Form

Participant Number _____

Consent Form

Research Title: *Why, when and how do qualified psychotherapists from a range of modalities make use of client-generated metaphors using Clean Language as an effective tool for brief psychotherapeutic change?*

Name of researcher: **Lara Just**

I have been asked to participate in a study investigating psychotherapists' use of client-generated metaphors with Clean Language in clinical practice. This involves a one-hour interview, which will be audio recorded, transcribed and analysed for the purpose of the study.

- The researcher named above has briefed me to my satisfaction on the research for which I have volunteered.
- I understand that my participation in this research is voluntary.
- I understand that the data collected will consist of voice recordings, and that recording equipment will be used throughout the interview.
- I understand that I have the right to withdraw from the study at any point and to have the data returned to me or destroyed if requested.
- I understand that my rights to anonymity and confidentiality will be respected.
- I understand that this data will be used for a postgraduate thesis and for any other related and appropriate publication.
- I understand that I will be given the opportunity to ask questions.

By signing this form I am confirming that I am over 18 years of age, and that I consent to participate in this study.

Participant

Signature _____

Date _____

Researcher

Signature _____

Date _____

Appendix 7: Master and Sub-Themes Allocated to the Research Questions

WHY	Focus on Client and their Experiencing	Effective & Efficient Enabler of Change	Personal Preference
Matrix: Beliefs & Values Pers. Reasons, Intentions Benefits Success Measures	Respecting the Client's Experiencing	Enabling Change	Personal Preference
	Client-oriented Usage	Effectiveness of CL	Philosophy and Way of Being
	Experiential Process and Journey	Time Efficiency	
	Trance-like 'special' space		
	Creating Rapport		
	Deep Experiencing		
	Keeping Clients in the Metaphor		
	Embodied Aspects		
	Unconscious Aspects		
WHEN	Experience and Training	One of Many Tools	
Matrix: Environment Location / Employment % Split / Frequency (during sessions) Client Groups	Experience and Training	Not for Everyone	
	Intuitive and Opportune Usage		
	Metaphor as Trigger		
	Information Gathering		
	Patterns as Trigger		
	Symptom focus & relief		
	Outcome as Trigger		
Matrix: Beliefs & Values Issues & Disadvantages			
HOW	Experience and Training	Relational & Co-creative Aspects	One of Many Tools
Matrix: Behaviour & Skills CL Experience CL Skills & Approaches Other Approaches Capabilities & Strategies	Experience and Training	Relational Aspects	Integrative Usage
	Outcome-oriented	Co-creative Aspects	Directive Aspects
	Therapist as Measuring Instrument	Therapist-generated	
	Contracting Agreement	Creative Aspects	
	Classic Usage		
	Conscious Intention		
	Modern Usage		
	Structure and Process-orientation		
	Levels of CL Usage		
	Solution-focused		
Matrix: Identity / Spirituality CL Identity			

Appendix 8: Personal Metaphors and Poems About My Interview Experiences**Participant 1**

*Sitting under a tree in the spring-like outdoors,
with birds singing and sun shining to open the doors,
to a deep connection of a peaceful river that flows,
his loyal dog Bruce with wagging tail, smiles and bellows,
wind blowing softly, the leaves rustle with shining glows,
faces at ease with tears and laughter that follows.*

*Together sitting in this moment and sharing
truly being and feeling and caring.*

*Come over here, come here and sit,
let's share ideas and some tea
let go of your fears, let's not quit
come over here and just be.*

Participant 2

It felt like we were two ships floating at sea in the grey and cold fog. I was unsure if I was steering the boat in the right direction, towards the other boat. I wanted to see the other boat but the fog prevented me from it. I felt like a lousy captain. Sometimes the fog lifted and I could make out some of the flags that were presented, those that were well known to sea farers. However, though I could make out the shape and size of the boat it was still unclear to me who the captain was.

*Two ships in the fog,
not sure if friend or foe,
like pirate ships, with canon, wood and bow,
I only wanted to say hello.*

*Left in the dark
though daylight it was
there was no spark
unclear was the cause.*

Participant 3

*I am finding myself in a sunny and colourful garden
with a small lake right in the middle.
I am in a small boat holding a rope
which Bridget has in her hand but on land.*

*I am floating slightly from side to side,
trying to get a little closer and not slide
to have a look at her from different angles.*

*A beautiful rainbow crystal that dangles,
but I don't get on the land that I found
or am let out onto her own garden ground.*

*Bridget continuous holding the rope,
I am feeling grateful and curious and hope
to be there where she watches me,
occasionally pointing out different flowers
describing their smells, their heritage and colours.*

*Though the feeling was slightly distant
I felt comfortable, pleasant, and fully present.
I respected her choice of distance or closeness
witnessing her voice and honoured to be part of that moment of time.*

*It was like a little trip to a foreign garden
which felt like going back in time.
Like being a child to come here to play, to feel safe and to stay.
A sensation that was strangely familiar and foreign - both at the same time.*

Participant 4

The metaphor that came up for me was really the metaphor that came up in the interview itself. It was so rich that I really felt part of the participant's metaphor in a shared way. It was the fast toboggan that whizzes through underground tunnels and there is excitement of discovery and not knowing which tunnel will come next. This was in affect the participant's experience of Clean Language in therapy at its best but I really felt being part of her experience. It resonated with me and it made me think of the scenes in the Harry Potter movie (Gringott's bank scenes). There was something about the thrill of going through secret tunnels not sure where it takes us but trusting the safety of the toboggan and that it gets us where we need to get. It felt like a really shared experience with a mutual connection and I felt myself sitting alongside her in that toboggan. The metaphor was still with me after the interview and I could even notice butterflies in my stomach when the toboggan drops at speed a few feet until it rushes up again with wind in my hair. I really enjoyed this experience.

Participant 5

*Treading through treacle and feeling unsure,
Not knowing if this leads to death or to cure.*

*Knowing that process is needed,
Not the endpoint of a goal.*

*Wanting to give others to read it,
The murky waters disturbed by a mole.*

*When at last the end was in sight,
This wasn't expected in terms of a fight or a flight.*

Appendix 9: Participant's Key Feedback About the Interview Experience**Participant 1**

"...I was more touched by it than I thought I would be actually...particularly...when we were talking about the space that's created and that kind of raised a bit of a tear really, I suppose, in a pleasant way. It's a very special thing that happens when you really get going with this, when someone's sharing, it can be very touching... Yeah that was different. I try to keep my questions as clean as I can when I'm interviewing [for his own research], but I don't go down the clean investigative route quite as much as you have, which was interesting to see....I quite enjoyed that!"

Participant 2

"...it was nice...it's nice to have done it, ...take a bit of time out and reflect and go "yeah, you know, why do I do this?"...it's gone quickly! Question were fine, you kind of – it flowed...yeah [...] kind of nice..."

Participant 3

"It was quite strange being in the client's seat...it was good, it was interesting. And I didn't find that the Clean language...although it is prescribed it didn't get in the way. I enjoyed it...thank you very much."

Participant 4

"...for me it was really interesting being asked questions in that kind of [research] context...kind of not knowing whether to go into metaphor or not. And then...you have to go with whatever I say...and it was interesting actually getting new information as you were asking questions. ...it was really hard for me not to add on little bits to your questions so I could focus myself. The questions have to really direct someone and...that was interesting ...cause I'm an assessor for Clean [Language], so I've got that ear...And...if I believe that it [Clean Language] never doesn't work, then...what's my evidence for that? So quite rightly - you did actually help me really think about it."

Participant 5

"I didn't find it easy because I found it somewhat difficult to answer some of the question... because as much as I am reflective on the way I work with my clients, I'm not sure if I am as reflective, in terms of when do I dip in and out."

Appendix 10: 2nd Researchers Reflections About her Transcript Analysis Experience

“How I felt reading /analysing this data:

When Lara first asked me to look through the data she had generated from her interviews in order to highlight any key aspects or themes, I thought “yeah, why not, it should be easy” as I've had some experience of doing this type of process with my own studies.

Little did I know that I would be thrown into a world of psychotherapy babble and metaphor mayhem! To explore human behaviour is hard enough, but to try to help an individual understand why they feel the way they do is a whole 'new ball game' (pardon the metaphor).

Not knowing anything about clean language or the theory surrounding the use of metaphors, I was very excited to look through the data. This approach seems to be very creative and something that I could see working well with a large number of individuals. I even had a go at it myself, trying to use metaphors to explain how I was feeling at the time. I found it to be quite revealing, and the discussion helped me tune in to deeper emotions quickly.

Analysing the data was actually much harder than I thought it would be as the participants are, I believe, all practising therapists. Their style of talking seemed very balanced and controlled and sometimes it felt like I was trying to analyse a computer; all processes and outcomes. Others seemed more human. It felt like some of them were more focused on themselves, perhaps thinking more about what next to do or which direction to go in, rather than just taking the time to listen to their clients.

After reading through them a number of times highlighted themes (ideas I believe are common across them all), seem to pop out:

- Clean language used to generate a rapport with the client
- One of many tools - which can be used solely or in conjunction with another approaches
- A way to explore, express, understand and perceive information in a different way
- To generate conscious shifts towards change
- Personal preference

These core themes seem to run through the majority of the transcripts and may shed new light on how clean language is becoming more popular in the psychotherapists 'toolbox'. I have enjoyed the experience of getting to know this research and the opportunity it has offered me to understand a little more about the way we can process symbolic meanings.”

Sabina Fernandez Msc

Appendix 11: Undertaking this research was like what...?

My personal metaphor for the undertaken research project:

It was like going into a great big forest. At first I did not quite know where I was or where to go. Later after exploring, I found familiar sites and I started to get to know a nice area of this forest. There was a particular tree which looked very unique and interesting. Various animals and creatures visited it and made use of it. I started to get to know some of them and even find some gardeners. They taught me about their special ways with this special tree, and how it affected the roots and its seeds which connected to the whole wide forest. I made friends with that tree and managed to climb into its crown, with the help of some friendly creatures. I finally felt the wind in my hair, smelling the sea far away, overlooking the beautiful forest into the far. I long to travel further and feel a farewell has come, but feeling solidly supported and encouraged by the friends of the forest. They provide me with food and tools on the way and I am excited to go forth and explore and play.

In form some Haiku style poems (5-7-5 rhythm):

*Like discovering
A tree among the forest
Roots and crown and more*

*Great depth of its fruits
The highest peak overlooks
Diverse rich fauna*

*Seeking out one tree
Animals from far and wide
Giving growth and tide*