

Commentary on Metaphoric Tasks in Psychotherapy: Case Studies of “Margie’s” Self-Image and “Amy’s” Pain

When Skill and Wisdom Merge

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ABSTRACT

Sam Hamburg’s (2018) case studies of the use of metaphoric tasks in psychotherapy take us into the storied course of therapy with “Margie” and with “Amy.” In the nuances of Hamburg’s accounts of these two sometimes similar, often different case studies, we see how metaphoric tasks can be conceived, implemented, and understood, and how the sensory-evoking, relationship-enhancing potential of metaphor can be enacted. We also see at work a deeply committed, thoughtful, and skilled practitioner-researcher who is, at once, cautious in his claims about the relation between metaphor use and therapy outcome, confident in what he knows about the practice of psychotherapy, and wise in his integration of the two.

Key words: comment; metaphoric tasks; use of metaphor in psychotherapy; case studies; clinical case studies

Like a compelling metaphor, Sam Hamburg’s (2018) case studies are elegant, evocative, multi-layered, and generative. He has written in beautifully rich detail, with care and compassion, and with convincing openness and self-reflection about his use of metaphoric tasks in each of two courses of psychotherapy. Apart from what his narratives of the two cases can tell us about the use of metaphor in psychotherapy, they exemplify elements of contemporary metaphor theorizing in action, foreground important learnings from psychotherapy research and practice, and speak to questions of evidence and knowing.

USE OF METAPHOR IN PSYCHOTHERAPY

Unlike much of the empirical research on the use of metaphor in psychotherapy that focuses on how client- or therapist-generated metaphoric language is employed (e.g., Angus & Rennie, 1988; Levitt, Korman, & Angus, 2000; McMullen & Conway, 1994; Tay, 2016), Hamburg’s case studies are in keeping with a theoretically-based, practice-oriented literature that has connections to the work of Milton Erickson. In this latter literature, the focus is on indirect messaging (e.g., use of allegory) as a way of facilitating client change and on the employment of often seemingly simple or actually paradoxical tasks or exercises designed to provoke change in entrenched patterns of behavior. Hamburg’s location in this tradition is clearly consistent with

his use of hypnotherapy, but what he says about his use of metaphorical tasks in his two cases studies illustrates much more than the simple administration of exercises.

First, in the case of “Margie,” what was initially conceived as a relatively straightforward assignment intended to boost a sense of self-efficacy, i.e., the completion of a jigsaw puzzle, came to be understood by Hamburg as a metaphor for the central problem that plagued Margie, i.e., a self-defeating discourse and a set of other behavioral patterns that prevented her from experiencing much enjoyment in life. In his narrative of Margie, Hamburg constructs his central insight about metaphor—that object lessons are (perhaps, more aptly, can be) metaphors—as having been realized through the unplanned decision to ask Margie to bring the puzzle to the session. This act, which subsequently enabled client and therapist to work in “real-time” on Margie’s central disabling behavior, speaks not only to the pervasive role of serendipity in psychotherapeutic encounters, but to what Hamburg describes as the “not self-consciously conceived” (2018, p. 284) use of metaphor in psychotherapy. While much is made of the deliberate use of metaphor in this context (e.g., Barker, 1996; Kopp, 1995), Hamburg articulates how, on occasion, we can come to understand something as metaphoric only after it is employed.

Hamburg’s narrative of Margie’s case also illustrates how the potency of the metaphorical task can be not in the use of metaphorical language, per se, but possibly in other sensory properties and in the use of non-metaphorical language. Recall that from his post-therapy conversation with Margie, he quotes her as remarking on the quality of his voice, on his physical location in relation to her while doing the puzzle (on the floor and beside), on telling her what her thoughts were. These memories of sound, of physicality and bodies in relation to each other, and of conjoining voices remind us that the power of the metaphorical is sometimes not in its linguistic aptness or conceptual entailments, but in its potential to generate and enable sensory connection and acts of doing.

In contrast to the case of Margie, Hamburg’s illustrations of what constitutes the use of metaphor in the course of psychotherapy with “Amy” are more wide-ranging. While we again learn of the use of a metaphorical task—this time as what Hamburg presents as deliberate use—this task is embedded in a web of other metaphors that are used in the service of hypnotherapy for pain alleviation. So, the assignment of the simultaneous hand-foot tapping pattern which, according to Hamburg, was intended to “potentiate the effects of hypnosis” (2018, p. 300) and give the client “a sense of doing something active” (2018, p. 302) is connected to the metronome metaphor, which is used both to convey the message that making perceivable change occurs in imperceptibly small steps and to enable the use of a 300-point pain rating scale. The qualities of speed and sound, and, of course, control, in the metronome metaphor are connected to the metaphor of pain as a loud alarm, e.g., an alarm can ring at different speeds, at different decibels, and can be turned on or off. And these metaphors can be encompassed (with a bit of work) within the dominant computer metaphor of hypnosis as a “reprogramming” of one’s nervous system, i.e., that pain is a signal that some action needs to be taken, that it is possible to disrupt a pain signaling system, and that new patterns can be learned. In the case of Amy, then, Hamburg foregrounds the use of metaphor as (1) a conceptual frame for the client’s presenting problem; (2) the basis for devising a task as an out-of-session assignment; (3) a justification for a method of collecting evidence to monitor the course of psychotherapy; and (4) a contemporary,

culturally-resonant (at least in the Western world) explanation of the curative potential of a particular psychotherapeutic approach.

We also see the use of a client-generated metaphor by the therapist, along with the weaving together of client-generated and therapist-generated metaphors in this case example. In Section E of the script of the hypnotic induction, Hamburg deftly juxtaposes suggestions about decreasing speed and loudness embedded in his metronome metaphor for pain intensity with suggestions about decreasing size embedded in Amy's "little creature," or what Hamburg calls her "homunculus" metaphor for the pain. Such juxtapositions illustrate that it is possible to align seamlessly even seemingly diverse metaphors, and thereby bring together a client's and a therapist's contribution to sense-making.

In sum, Hamburg's case studies take us beyond what has often been a rather narrow empirical focus on the linguistic and/or conceptual features of metaphor use in the context of psychotherapy by showing its sensory-evoking, action-enabling, relationship-enhancing potential.

METAPHOR THEORY

Hamburg situates his understanding of metaphor in the seminal work of Lakoff and Johnson (1980). In the highly influential *Metaphors We Live By*, Lakoff and Johnson shifted the focus on metaphor as a linguistic, rhetorical, often extraordinary device to an understanding of metaphor as the fundamental organizing property of our everyday conceptual system. Through numerous familiar examples of metaphorical concepts and their entailments—e.g., argument is war, time is money, and happy is up and sad is down—Lakoff and Johnson showed not only how pervasive these metaphorical concepts are, but convincingly argued that they come to structure "how we perceive, how we think, and what we do" (p. 4). That is, metaphors can be determinative.

While the conceptual theory of metaphor has been taken up as an organizing framework by researchers who study metaphor use in the context of psychotherapy (e.g., Angus & Korman, 2002; McMullen & Conway, 2002), Tay (2017) claimed that both therapists and researchers in this area might benefit from embracing relevant nuances in contemporary metaphor theories that, in part, have been developed from (psycho)linguistic studies of metaphor. For example, he proposed four theoretical dimensions that could be more productively employed by therapists and researchers: (1) source domains could be simultaneously interpreted at the embodied, cultural, and idiosyncratic level so as to open up "multiple inferential possibilities for a source with respect to a target" (p. 5); (2) source-target relationships can be used variably in a client-therapist exchange and can be conceptually blended in creative ways to open up a "flow of inference between target and source" (p. 9); (3) metaphorical processes can occur at levels that are more "abstract" than words (p. 10); and (4) the study of metaphor use should be grounded in its discursive and communicative context(s).

Although Hamburg neither makes connections to recent empirical work on metaphor use as recommended by Tay (2017) nor explicitly references more recent theorizing on metaphor (e.g., the conceptual blending theory of Fauconnier and Turner [2002] or the communicative-

social emphasis elaborated by Steen [2011]), I see elements of Tay's call in Hamburg's accounts of the two cases. Consider the case of Margie. The metaphorical concept in this instance might be rather straightforwardly seen as something like 'LIFE PROBLEM-SOLVING AS JIGSAW PUZZLE.' However, Hamburg's understanding of the metaphoric power of the jigsaw puzzle—that the doing of it was both a re-enactment and an undoing of how Margie approached novel or unfamiliar situations in her life—can also be seen as illustrating how metaphor processes might work at more abstract levels and even without the actual use of metaphoric expressions by either the client or the therapist.

Hamburg goes further by bringing to our attention the embodied and social elements of metaphorical concept deployment. His use of 'LIFE PROBLEM-SOLVING AS JIGSAW PUZZLE' in the form of a physical task in the therapy session literally opened up a space for the kinesthetic experience of picking up puzzle pieces and of touching them together; for the visual experience of pattern searching, matching, and recognition; for the auditory experience of giving and receiving a running commentary of Margie's experiential flow; for the joining of two bodies in the same spatial plane; and for the successful doing of something not thought possible by Margie. Margie's statements "We were on the floor doing a puzzle" and "I had no patience, and as we did it, you told me what my thought process was" (Hamburg, 2018, p. 295) can be understood as literal descriptions of what transpired, but, additionally, as signifying the coming together of two people in a joint venture and the attuning of each person to the embodied experiences of the other. This enacting of the metaphorical concept in the session and in real-time can be seen, then, as an illustration of what Tay (2014) presented as the empathy-building, intersubjective understanding that can occur when metaphor use (even that which is not understood as metaphorical in the moment) involves embodied simulation and shared experience between client and therapist. Similarly, it can be seen as illustrative of the move toward a social approach to understanding and studying metaphor advocated by Steen (2011), i.e., that metaphor can be found "in behavior between individuals" (p. 49).

In the case of Amy, Hamburg's use of metaphors from different source domains speaks both to Steen's (2011) focus on the communicative dimension of metaphor, particularly its deliberate use, and to Tay's (2017) highlighting of variable source-target relations in the use of metaphor. His presentation of pain "as a loud alarm, as a rapidly ticking metronome, and as a little 3-D homunculus" (2018, p. 302) encapsulates features of the pain experience, of pain control, of the tasks of therapy, and of the client-therapist relationship. Specifically, Hamburg's introduction of "PAIN AS A LOUD ALARM," which was designed as a corrective to Amy's notion of pain as damage, can be seen as an example of the deliberate use of metaphor, i.e., "an overt invitation on the part of the sender for the addressee to step outside the dominant target domain of the discourse and look at it from an alien source domain" (Steen, 2011, p. 37). While this way of using metaphor is a common and dominant focus in much of the practice-oriented writings on the use of metaphor in psychotherapy, it does remind us of the possible power of a simple discursive move. As foregrounded by Steen (2011), this move can be seen as demonstrating three aspects of metaphors: (1) its linguistic function, i.e., the naming of the disturbing and signaling properties of pain; (2) its conceptual function, i.e., the framing of pain as something of varying intensities, that can be turned on or off; and (3) its communicative function, i.e., pain as something that can be thought of in a distinctively different way (see Steen, 2011, p. 59).

In addition, Hamburg's bundling together of three quite disparate metaphors for pain—a loud alarm, a rapidly ticking metronome, and a little 3-D homunculus—illustrates the creative employment of variable source-target relations. While Hamburg's conceptualization is that it would have been possible for Amy to integrate these three disparate metaphors due to the loosened associations of the hypnotic trance state, it is also possible that these metaphors can be thought of as fulfilling both overlapping and different functions in the particular context in which they were employed. As outlined in the previous paragraph, the use of a loud alarm as a metaphor for pain can fairly easily be seen as exemplifying all three aspects of metaphor outlined by Steen (2011). By comparison, the metaphor of the rapidly ticking metronome might be understood as speaking less to the naming of the pain than the metaphor of the loud alarm, but more to a means by which to frame or conceptualize the monitoring of pain intensity and control. Similarly, the metaphor of the little 3-D homunculus can be seen as an instance of Hamburg taking up and slightly re-working Amy's metaphor of the little creature inside her, i.e., of the social sharing and transformative capacity of metaphor use between two persons.

And what of the hand-foot tapping sequence that Hamburg understands as a metaphoric task? Although presented to Amy as a means by which she could “reprogram her nervous system” (2018, p. 302) and thereby alter her pain experience, I find Hamburg's rationale for this task, i.e., that it might “potentiate the effects of the hypnosis and also give [Amy] a sense of doing something active to help herself” (2018, p. 302) to be the least well-developed and compelling part of the two case studies. In addition, neither the logic with respect to a theory of metaphor, nor a convincing interpretation of how it might have functioned in Amy's therapy, is clear to me. Hamburg, too, refreshingly confesses his uncertainty as to whether this task functioned in the way he originally intended it to.

In sum, while the yields of attempts to marry recent theorizing and empirical research on metaphor for the purposes of studying its use in the context of psychotherapy are, as yet, largely undetermined, Hamburg's case studies suggest that the context of psychotherapy might be more illustrative of this marriage than researchers or psychotherapists are aware.

RESEARCH ON THE USE OF METAPHOR AND PSYCHOTHERAPY OUTCOME

In an earlier review of both the practice-based and empirical literature on the use of metaphor in psychotherapy (McMullen, 2008), I argued that much of the practice-based literature could be characterized as containing expansive claims about how particular uses of metaphor could promote positive outcomes for clients, while the empirical literature could be characterized as a set of varying, sometimes contradictory, findings that enable us to conclude very little about the relation between metaphor use and psychotherapy outcome. While Hamburg presents his description of how metaphor was employed in both the case of Margie and of Amy, as well as his conceptualization of how it might have functioned in the two cases, he is (at times) careful not to claim much about its relation to outcome. In the case of Amy, he quite straightforwardly admits that he does not know whether the metaphoric hand-foot tapping task potentiated the hypnosis, as he intended it to, and he is silent on the possible role(s) that the tri-partite metaphors for pain might have played in what he deems the partially successful (tentatively concluded) outcome.

In the case of Margie, Hamburg acknowledges that he cannot say with certainty that doing the jigsaw puzzle contributed to positive changes in her life or that, if it did, what specifically about engaging in this task potentiated change. He does, however, claim on the basis of his own and Margie's testimony that the task was "illuminating and instructive" for both of them and that it is these outcomes that attest to the "value" of the task (2018, p. 293). That a move in psychotherapy can be seen as having value without necessarily needing to be clearly linked to outcome is an important distinction. Occurring alongside these claims, however, is Hamburg's admission that, in fact, he does believe that Margie's positive strides were caused by her successful process of completing the puzzle, despite his not being able to say with certainty that this is the case. Indeed, in the abstract of his article he characterizes the doing of the puzzle as having "therapeutic power." What can we make of this apparent contradiction? While it would be easy to dismiss Hamburg's belief in the cause-effect relation of puzzle completion to therapeutic outcomes as not evidence-based, it might also be seen as a refreshingly open statement that illustrates how we, as therapists, can simultaneously occupy spaces that are defined by what are often conceptualized as competing standards of evidence and ways of knowing.

THE QUALITY OF THE CASE STUDIES

Hamburg's case studies are primarily qualitative and narrative in nature. For the most part, they are constructed on the basis of session notes, reported speech from Margie and Amy that was presumably captured in these notes (or remembered by Hamburg), and notes from post-therapy follow-up meetings and interviews. Some quantitative data related to outcome are presented in Amy's case, and while they are neither systematically collected nor analyzed, they do provide another source of evidence. As readers, we also have access to Hamburg's generalized suggestion for rapid change (Table 1) and the script of his hypnotic induction employed with Amy (Table 2). However, other than the short phrases or excerpts that are attributed to Hamburg or to either Margie or Amy, very few primary data in the form of transcribed passages from sessions are available to us.

Despite the fact that session notes are inevitably selective both in their production and in their use as a data source, I find these case studies compelling for several reasons. First, Hamburg uses his session notes to provide process data from several sessions for each case, and embedded in these notes is evidence of "little-o's" and, on occasion, "big-O's" (little and big outcomes; see Marmar, 1990) (at least as constructed through Hamburg's eyes). So, I have the sense that he is working from reasonably adequate sets of data.

Second, his analyses are set up as chronologies that proceed from a brief introduction to the client and to selective, but seemingly salient, features of the life story of each. A focus on some of these features is sustained throughout the descriptions of the individual sessions, which provides continuity to the narratives. The case studies proceed either to the end of therapy (and beyond in the case of Margie) or to a break in therapy (in the case of Amy), so there is a completeness of sorts without finality. In both cases, Hamburg provides enough detail of the life history and course of therapy to engage, but not mire, the reader. Simply put, he tells two good stories.

Third, the case studies are afforded believability by the inclusion of the planned and unplanned along with the almost inevitable ups and downs of a course of therapy. The reported progress is neither linear, nor predictable, in either case, and Hamburg's decisions to implement both planned and spur-of-the-moment interventions were reported as being understood as sometimes successful and sometimes unsuccessful. So, his case studies "ring true" as reasonable accounts of the often rather messy, circuitous, and unpredictable course of psychotherapy.

Fourth, Hamburg's writing is self-reflexive on several occasions. He does not shy away from acknowledging his trepidations, admitting what he understands as his mistakes, and expressing self-gratitude and pride. For me, this uncommon mixture of self-positionings in academic writing served to create a verisimilitude that enhanced the credibility of his accounts.

Fifth, the use of two cases enables comparison and the articulation of both obvious and subtle differences in how the metaphoric tasks were formulated, understood, implemented, and possibly received. While Hamburg does not engage in a formal discrepant case analysis, his drawing out of these differences speaks again to the adequacy of his data set and to the trustworthiness of his analytic claims. After having read these two case studies, I am left not with pat conclusions but with intriguing questions and unsettled possibilities.

Sixth, Hamburg does not claim too much with respect to the theoretical generalizability of his analyses. Apart from his drawing out at the end of his article a commonality between the two cases, i.e., the side-by-side placement of client and therapist during at least part of the enactment of the metaphoric task, he leaves it to the reader to take from his analyses what she or he wants. In other words, he does not prescribe the message. So, I see in Hamburg's case studies evidence of several of the markers of trustworthiness that have come to define what constitutes "good" qualitative research (see, for example, Morrow [2005]). And, as a result, I see the case studies, themselves, as a powerful exemplar of the valuing and expert use of practice-based evidence (see Greenhalgh, Howick, and Maskrey [2014] for an antidote to what has become an often narrowly defined understanding of evidence-based practice).

THE WISDOM IN, AND AFFORDED BY, THE CASE STUDIES

Apart from what the two case studies can tell us about the use of metaphoric tasks in psychotherapy, they provide Hamburg with fertile space for bringing to life two important understandings about psychotherapy. Practitioners and theorists have long-since known that change in human behavior is multiply determined. Even if change appears to occur during the time a person is participating in psychotherapy, we often do not know what, if anything, about the course of therapy contributed to this change. Hamburg aptly reminds us of this point by drawing out threads of possible contributors to change and repeatedly saying that he does not know whether, or to what extent, any of these possibilities is implicated in the changes observed in, and reported by, Margie and Amy. Similarly, in articulating his insight that "technique is inextricable from relationship" (2018, p. 296), Hamburg reminds us that the much-emphasized distinction between so-called "specific vs. non-specific factors" in the empirical literature on psychotherapy is a false binary. Through his analyses, he makes the case that even the implementation of what is considered a discrete task (working on a jigsaw puzzle; learning a

hand-foot tapping rhythm) is embedded in the relationship between a client and a therapist, and that this relationship can be changed through the use of such a task.

And what can be said of the wisdom afforded by *PCSP* editor Dan Fishman's invitation to Sam Hamburg to speak about how he has developed his model of psychotherapy over many years of practice? After reading Hamburg's account, I was left with a sense of awe: with a deep respect for how Hamburg sees the process of therapy and a feeling of wonder with regard to what beginning students of psychotherapy might take from his account. They might, for example, learn a great deal from Hamburg's pithy articulation of a set of experiential propositions and from his behavioral principles. Or they might find useful tips in the listing of the mechanics of his practice. However, the more I thought about it, the more I came to believe that seasoned therapists might actually take away the most from Hamburg's account. They might resonate to how Hamburg understands the influence of his own experiences as a patient, of his engagement with academic psychology, and of his early days in practice. And they might remember the phrase or two that has stuck with them for years, their clinical failures and mistakes, what they have learned from others over a career, the profundity of fellow-feeling, and the life lesson of trying hard.

CONCLUSION

After having reviewed the empirical, theory-informed, and practice-based literatures on the use of metaphor in psychotherapy, I argued in 2008 that "Much is made of metaphor, and little has been learned" (p. 397). With respect to Hamburg's case studies of the use of metaphoric tasks in psychotherapy and the account of his development of a model of psychotherapy, I say "Little is made of metaphor, and much has been learned."

REFERENCES

- Angus, L.E., & Korman, Y. (2002). Conflict, coherence, and change in brief psychotherapy: A metaphor theme analysis. In S.R. Fussell (ed.). *The verbal communication of emotions: Interdisciplinary perspectives* (pp. 151-165). Mahwah, NJ: Lawrence Erlbaum Associates.
- Angus, L.E., & Rennie, D.L. (1988). Therapist participation in metaphor generation: Collaborative and non-collaborative styles. *Psychotherapy: Theory, Research, Practice, Training*, 25, 552-560. <http://dx.doi.org/10.1037/h0085381>
- Barker, P. (1996). *Psychotherapeutic metaphors: A guide to theory and practice*. New York: Brunner/Mazel.
- Fauconnier, G., & Turner, M. (2002). *The way we think: Conceptual blending and the mind's hidden complexities*. New York, NY: Basic Books.
- Greenhalgh, T., Howick, J., & Maskrey, N. (2014). Evidence based medicine: a movement in crisis?. *British Medical Journal*, 348, g3725. [doi: 10.1136/bmj.g3725](https://doi.org/10.1136/bmj.g3725)
- Hamburg, S. (2018). Metaphoric tasks in psychotherapy: Case studies of "Margie's" self-image and "Amy's" pain. *Pragmatic Case Studies in Psychotherapy*, 13(4), Article 1, 284-328, Available: <http://pcsp.libraries.rutgers.edu>

- Kopp, R.R. (1995). *Metaphor therapy: Using client-generated metaphors in psychotherapy*. New York: Brunner/Mazel.
- Lakoff, G., & Johnson, M. (1980). *Metaphors we live by*. Chicago, IL: The University of Chicago Press.
- Levitt, H., Korman, Y., & Angus, L. (2000). A metaphor analysis in treatments of depression: Metaphor as a marker of change. *Counselling Psychology Quarterly*, 13, 23-35. <http://dx.doi.org/10.1080/09515070050011042>
- Marmar, C. R. (1990). Psychotherapy process research: Progress, dilemmas, and future directions. *Journal of Consulting and Clinical Psychology*, 58, 265-272. <http://dx.doi.org/10.1037/0022-006X.58.3.265>
- McMullen, L.M. (2008). Putting it in context: Metaphor and psychotherapy. In R.W. Gibbs, Jr.(Ed.), *The Cambridge handbook of metaphor and thought* (pp. 397-411). Cambridge, UK: Cambridge University Press.
- McMullen, L.M., & Conway, J.B. (1994). Dominance and nurturance in the figurative expressions of psychotherapy clients. *Psychotherapy Research*, 4, 43-57. <http://dx.doi.org/10.1080/10503309412331333892>
- McMullen, L.M., & Conway, J.B. (2002). Conventional metaphors for depression. In S.R. Fussell (Ed.), *The verbal communication of emotions: Interdisciplinary perspectives* (pp. 167-181). Mahwah, NJ: Lawrence Erlbaum Associates.
- Morrow, S.L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of Counseling Psychology*, 52, 250-260. [doi: 10.1037/0022-0167.52.2.250](https://doi.org/10.1037/0022-0167.52.2.250)
- Steen, G. (2011). The contemporary theory of metaphor—Now new and improved! *Review of Cognitive Linguistics*, 9(1), 26–64. [doi: 10.1075/rcl.9.1.03ste](https://doi.org/10.1075/rcl.9.1.03ste)
- Tay, D. (2014). Metaphor theory for counselling professionals. In J. Littlemore and J.R. Taylor (Eds.), *The Bloomsbury companion to cognitive linguistics* (pp. 352-367). London, UK: Bloomsbury.
- Tay, D. (2016). Finding the middle ground between therapist-centred and client-centred metaphor research in psychotherapy. In M. O'Reilly and J.N. Lester (Eds.), *The Palgrave handbook of adult mental health* (pp. 558-576). Hampshire, UK: Palgrave Macmillan.
- Tay, D. (2017). The nuances of metaphor theory for constructivist psychotherapy. *Journal of Constructivist Psychology*, 30, 165-181. [doi: 10.1080/10720537.2016.1161571](https://doi.org/10.1080/10720537.2016.1161571)