Communicating with metaphor: A dance with many veils

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Abstract

Health practitioners face many challenges when caring for and communicating with dving persons. As truth-tellers, we search for ways to communicate with honesty, sensitivity, and compassion. Creative use of language is one aspect of caring. Metaphorical communication can be a healing modality, one consistent with communication as an art. This article suggests that metaphor is a powerful and sensitive form of language that offers a range of characteristics particularly suitable for the art and the challenge of communicating with dying people. Metaphor, as figurative language, provides a permissible way of saving one thing and meaning another. It allows us to share a truth without the glare of reality. This author contends that metaphor is mysterious, creative, invitational, safe, open to interpretation, respectful and playful. The creative and judicious use of metaphor provides health care practitioners with many veils—veils that shield the dying from the glare of their prognosis, veils particularly valuable and suited in communicating with our palliative *patient population.*

Communicating with metaphor

Facing one's diagnosis of a terminal illness has been likened to the effect of looking directly at the sun: It blinds. It is intense and it can cause damage. One can, at best, glance briefly but then must turn away to recover before glancing again.

One of the challenges of working with dying persons is to provide safety during those moments when our patients or their family dare to "look at the sun," to examine their prognosis and shrinking future. Zerwekh¹ says nurses working with dying people are truth-tellers, and so we are. But we are truth-tellers in search of ways to blend truth with compassion and honesty with gentleness. We need many tools for such sensitive communication.

Skillful use of language provides us with one such tool. All language contains power.² Language gives dignity to feelings, lends credence to the sufferer and links the listener with the speaker. Language provides boundaries for anguish and offers a safe place for patients to vent their feelings. For nurses, the use of language is one more aspect of caring.^{3,4}

Diane Ackerman, a poet, writes, "[P]oems dance with many veils. There is no one and only way to read them."⁵ This is a highly desirable trait for truth-tellers. To use the language of the *poet*, we want to dance with many veils, veils that allow our patients to peek through to their prognosis without being blinded. We want to share a truth without the glare of reality. We need a permissible way of saying one thing and possibly meaning another.

Metaphorical communications offer truth-tellers that very opportunity. Metaphor is figurative language—a powerful and evocative form of language. With metaphor, words have their literal meaning, but they can also be used so that something other than the literal meaning is implied. It permits the speaker to say one thing in terms of something else.⁶

Therapeutic metaphor has been defined as any verbal or concrete illustration, description, or reference designed to bring about perceptual and/or behavioral change. In Breslin's view,² metaphorical communication is a healing modality that provides a healing space and, in so doing, assists as one tries to contend with the threats and assaults to our bodies. Our dying clients are in much need of a healing space; they are continually assailed with uncertainties and threats to their changing, deteriorating bodies.

I would suggest that creative and judicious use of metaphor provides health care practitioners with several veils, veils particularly well suited in

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communicating with the dying. In 10 years of nursing practice in hospice, I have often witnessed the power of metaphor to move conversation swiftly to potent, honest insights.

I vividly recall an experience of caring for a woman in her late 50s who had been admitted to our local hospice for control of intense, episodic pain. She had not yet acknowledged dying. She was silent about her diagnosis and her future. One night, during the routine of evening care, we were discussing the challenges and struggles of raising children as single parents. She stated, "I thought that now with my kids raised, I was out of the woods." I replied with the metaphor, "'Till this cloud on the horizon." At this point she could have selected any number of meanings: her pain, her cancer, the admission, her future. Instead, she took a leap and blurted out "Till this big black cloud on the horizon!" Before I could decide how to respond she raced on: "I know what's happening and I can't talk about it and I can't tell my kids either." I said very little more; she was away, words tumbling out, one after another, the log jam cleared, the pressure of pent-up fears alleviated. And when she was finished, our eyes met, and we shared a long and silent hug. We shared one of those powerful moments that makes hospice care the rewarding, moving, exhilarating practice that it is.

Characteristics of metaphor

I would submit that metaphors offer a range of characteristics that are uniquely suitable for the art and challenge of communicating with dying people. Metaphor can be:

- mysterious,
- creative,
- invitational,

- safe,
- open to interpretation,
- respectful, and
- playful.

Metaphor is mysterious. A wellchosen metaphor hints or alludes to something but it does not state anything. It allows us to say and, yet, not say. This leaves the recipient with ideas to ponder or to reject.

Metaphor is creative. It allows both persons in the dialogue to draw from their own reservoir of experience, their intuition. One can tailor it to the uniqueness of the other. Whatever the patient's earlier roles included whether the patient was a forester, a sailor, a gardener, a writer, a seamstress—one can draw from their unique background for metaphors. Some authors view metaphor as an inventive act.² Invention invites creativity on the part of both therapist and client.

Metaphor is invitational. It provides an invitation to the dying person to pursue or decline. One can move deeper into honesty or scuttle behind a veil. It allows the opportunity for reciprocal interaction to progress or to stall. My patient used it as a springboard into greater honesty.

Metaphor is safe. It allows us to allude to a truth without the glare of reality.⁴ Metaphor offers the recipient the chance to stop the dialogue with dignity. After all, the patient or family can select and respond to the meaning of their choice. They are still in control of the agenda. As caregivers, we are less likely to thrust something on them they do not feel ready to handle. It provides an avenue of psychological safety. That "cloud on the horizon" could have referred to less threatening significance.

Metaphor is open to interpretation and multiple meanings. Robert Frost said, "[P]oetry provides the permissible way of saying one thing and meaning another."⁶ Multiple meanings stretch out before your patient. They can reach out and select one, and the dialogue continues. In many forms of communication, such as negotiations, contracts, and physicians' orders, ambiguity is not desirable. However, when "staring at the sun," ambiguity is highly desirable. Being able to choose one's own interpretation allows one choice and distance and veils.

Metaphor is respectful of the dying. It allows us to respect our clients' fears, limitations, anxieties, courage and bravery. It tells our client that we will go with them wherever they have the courage to go, but we will not force it. We will not state the truth in an unprotected way.

Metaphor is playful. It blends well with wit and humor. It offers a safe banter that can move quickly to a meeting of the minds that so often leads to a meeting of the hearts. We are encouraged to listen for the metaphors used by the patient, for their own linguistically embedded metaphor. As the patient tosses us a metaphor, we now have to select a meaning, to respond and, sometimes, to play.

Listening with metaphor

Metaphor is not just a tool we bring to interactions with our patients. Metaphor provides practitioners with a keen ear for listening. In Final Gifts, Callanan and Kelley⁷ explain that it is not uncommon for dying persons to speak metaphorically in reference to their impending death. They encourage families and caregivers to listen carefully for the person's own linguistically embedded metaphors. Dying people know they are dying, even when no one has acknowledged it or told them. They attempt to share this information with others by using a symbolic language to indicate preparation for their journey. Travel is a clear metaphor often used to describe this next stage of their life journey. Common metaphors include maps, a compass, a boat, a trip, a train ride, a journey. If we do not listen with the ear of metaphor, we may miss the meaning. We may miss the opportunity to reassure our patients of our understanding or to provide permission for them to die. As communicators, therefore, we are encouraged to both listen with metaphor and speak with metaphor.

Conclusion

It is a challenge for even the most experienced hospice practitioner to listen and to speak sensitively and intuitively. As truth-tellers, we search for ways to communicate with honesty and compassion. Creative use of language is one more aspect of caring, one more healing modality. Metaphor can be a powerful and sensitive form of language that offers a range of characteristics particularly suitable for the art and the challenge of communicating with dying people. By adding the creative and judicious use of metaphor to our language skills, the hospice practitioner employs one more veil to shield and protect our dying clients during those powerful moments when they turn bravely toward the sun.

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