

Using Metaphors To Reduce The Uncertainty In Play Therapy Room

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Article

Submitted: 18-01-2024
Reviewed: 07-03-2024
Accepted: 23-05-2024
Published: 30-06-2024

DOI:

10.32509/wacana.v23i1.3737



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Volume : 23
No. : 1
Month : June
Year : 2024
Page : 142 - 151

Abstract

This article aims to describe how the strategy of reducing uncertainty occurs in the play therapy room. As a method in psychotherapy, a play and creative arts therapist must be able to establish a good relationship with the client so that the client feels safe and comfortable during the therapy process. To establish a safe and comfortable relationship, a process of reducing uncertainty is needed between the therapist and client when communicating in the therapy room. Berger and Calabrese consider that reducing uncertainty will result in self-disclosure which can strengthen the source-receiver relationship in the communication process. After conducting observation in Client ANA's case for 24 sessions, it is found that in play therapy, the reduction of uncertainty occurred uniquely by using various metaphors chosen by the client independently. In ANA's case, the uncertainty reduction strategy started with an active strategy, followed by simultaneous use of passive and interactive strategies.

Keywords: Health communication; interpersonal communication; uncertainty reduction; self-disclosure; play therapy

Abstrak

Artikel ini bertujuan untuk mendeskripsikan bagaimana strategi pengurangan ketidakpastian yang terjadi di ruang terapi bermain. Sebagai salah satu metode dalam psikoterapi, seorang terapis permainan dan seni kreatif harus mampu menjalin hubungan baik dengan klien agar klien merasa aman dan nyaman selama proses terapi. Untuk menjalin hubungan yang aman dan nyaman, diperlukan proses pengurangan ketidakpastian antara terapis dan klien saat berkomunikasi di ruang terapi. Berger dan Calabrese menilai bahwa mengurangi ketidakpastian akan menghasilkan keterbukaan diri yang dapat memperkuat hubungan sumber-penerima dalam proses komunikasi. Setelah melakukan observasi pada kasus Klien ANA selama 24 sesi, ditemukan bahwa dalam terapi bermain, pengurangan ketidakpastian terjadi secara unik dengan menggunakan berbagai metafora yang dipilih klien secara mandiri. Dalam kasus ANA, strategi pengurangan ketidakpastian dimulai dengan strategi aktif, diikuti dengan penggunaan strategi pasif dan interaktif secara simultan.

Kata Kunci: Komunikasi kesehatan; komunikasi interpersonal; pengurangan ketidakpastian; keterbukaan diri; terapi bermain

INTRODUCTION

Uncertainty reduction is one of the keys to successful development of sender-receiver relationships when conducting interpersonal communication. Reducing uncertainty is believed to make an interpersonal relationship more certain because both parties who communicate can get to know each other. Usually, the process of reducing uncertainty will begin by asking each other questions regarding general matters and then progress to more personal questions. Everyone has subjectivity in determining which questions are general and which are personal. It is possible when communicating with someone a question like, "Where do you live?" Felt by receiver as a personal question. Meanwhile, for others, the question is considered a general question.

The process of reducing uncertainty is needed in all forms of interpersonal communication. This includes client and therapist communication in play and creative arts therapy. Play and creative arts therapy is a method of psychotherapy to intervene individuals with psychological, emotional, & social issues. Initially this method was used for child clients. In its development, play and creative arts therapy can also be used as an intervention for adults. During the session, the client chooses the tools they want to use while the therapist follows the client's process and joins to play. During the session, clients generally send more nonverbal messages and use various metaphors through the tools they choose. The therapist's job desk is to accompany and capture the messages sent by the child during the session so that he/she feels safe, heard, understood, and accepted for who he/she is (CAE, 2021). This was emphasized by Axline (1981) in one of the principles of play therapy, in which the client is free to express his feelings and respects the client's ability to solve his problems independently. In the therapy room, clients express their behavior and emotions using various tools, including Arts, sand, clay, puppet and mask, therapeutic story, creative visualization, music, movement and dance. While the therapist will accompany the client while reflecting and equating his energy with the client's energy. Thus, the client and therapist relationship can become in tune and make the client find a better version of him/herself.

As a play and creative arts therapist, one of the cases that I handle is the case of ANA. ANA are referred to attend sessions by their parents with the aim of being more mentally prepared, having better focus, and being able to share and be more patient. When attending therapy the client was 5 years 8 months old and was in 1st grade. The process of human growth and development occurs in three processes: Biological, cognitive, & social-emotional (Santrock, 2011). Based on the three processes of development, the most notes on clients are social-emotional processes. Based on the explanations of parents, teachers, and sensory integration therapists who also treat client, ANA is prone to mood swings when compared to other children of her age. According to his parents, he also often admits to having stomach aches, dizziness, and bedwetting when worried.

One of the obstacles in the therapy process that occurs is in the process of reducing uncertainty. Berger and Calabrese believe increasing predictability when strangers meet for the first time, will be their primary concern. By increasing predictability sender-receiver communication process will become smoother and making sense of what is communicate will be easier for both parties (West & Turner, 2010). A lack of information will develop uncertainty in interpersonal communication process. Uncertainty itself will undermine your ability to communicate. The more uncertainty exists, the more difficult it is to set goals for the conversation, to plan a course of action, and to enact verbal and nonverbal messages. Berger and Calabrese explained our initial interactions with other people usually focused on gathering information that will help us communicate (Solomon & Theiss, 2013) This is the process they called uncertainty reduction. Berger and Calabrese explained the more uncertainty felt by persons that communicate will increase strategy to reduce the uncertainty (Palomares & Wingate, 2020). This strategy will make the one that feels uncertain to obtain more information about the other person that they communicate with. Berger explains four strategies in seeking information to reduce uncertainty: Passive, active, interactive extractive (Griffin et al., 2018). Passive strategy is when a person observes others to reduce the uncertainty. In a play therapy session, this might occur when the therapist accompanies the client. While playing together, the therapist will give full attention

to what verbal and nonverbal cues clients use. Active strategy happens when a person asks a third party about another person, he/she intends to reduce the uncertainty. Initial interview with client's parents and teachers or other caregivers to know more about client is one of the examples of active strategy. The third strategy is interactive strategy, in play therapy session this happens when the therapist asks the client about his/her personal information. For example, where does he/she go to school, what after school activities does the client enjoy? Interactive strategy rarely exists in play therapy sessions because the nature of this method is non-directive, meaning the therapist will let the child lead and minimize asking questions especially when it is related to personal matters. The last strategy is extractive strategy which is conducted by searching the Internet for information about a person. Extractive strategy also rarely will happen since most play therapy clients are underage children that normally do not have personal access to the internet. Unless the client is exposed by parents or caregivers to the internet.

To rise the certainty in the formative stages of relationship development, we exchange information. At first, it can occur through self-disclosure. Self-disclosure will strongly develop when interactive strategy apply (Cabrera, 2020). Similar statements also mentioned by Griffin et al. (2018): and West & Turner (2010). Self-disclosure is the activity of telling another person about our characteristics, experiences, feelings, attitudes, or beliefs. Within initial interactions, your self-disclosures focus on public information, such as name, age, and hometown (Greene, Derlega, & Mathews, in Solomon & Theiss (2013). Self-disclosure will help us navigate initial interactions. To cope with uncertainty about how to communicate in initial interactions, people follow a norm of reciprocity, the tendency to match our own disclosures to those made by our partner (for example, use of explicit language, humor, or politeness).

In play and creative arts therapy sessions, client will also reduce uncertainty when meeting the therapist. Uniquely, because this psychotherapy method is conducted in a non-directive way, the question and answer process which is usually done to increase certainty rarely occurs. To understand why this therapy method considers the importance of non-directive processes, can be explained by understanding the Axline Principles (1981). Virginia Axline explained eight basic principles in play therapy. The eight principles are: (1) The therapist must create a warm, friendly relationship to create a good relationship with the child as soon as possible. (2) The therapist accepts the child as it is. (3) The therapist creates freedom in children, so that children feel free to express their feelings. (4) The therapist has to be able to recognize the feelings expressed by the child and reflect back on those feelings so the child has the ability to gain insight from his/her behavior. (5) Therapist respects the child's capacity to solve his/her own problems and also their responsibility for making choices and changes that the child considers as important. (6) The therapist does not direct the child's actions or conversations in any form. (7) The therapist has to believe that therapy is a process that do not need to be done in a rush. (8) The therapist has to establish boundaries. The key of successful therapy process is building relationships and trust between therapist and client. This is also explained by Herna & Sari (2023) If those communicating feel the benefits of the relationship, then information shared will show intimacy (mutual understanding and support), although not all areas of life they share consistently and openly.

Every therapy session will start by therapist greeting and informing client about the session rules: Session lasts for 45 minutes. Anything in the room stays in the room. Client, therapist, and all the things around the room always must be in safe condition. Then the rest of the session will follow leads by the client, while therapist accompany client by reflecting on what client say or do that consider might lead client to his/her better psychological, mental, and or social condition. Between the two parties that communicate, there is a need of openness, understanding and simultaneous coordination of meaning (Riyantie & Barizki, 2020).

Most of the time client will communicate nonverbally and use many metaphors. This metaphor can be communicated through client's nonverbal message, activities they choose, and also the typical tools they desired to use. Mills & Crowley (2014) summarize some definitions of metaphor from many

experts. Kopp, consider metaphor as a means of communicating in which one thing is expressed in terms of another. Metaphor as a new expression, however, cannot be fully understood by the conscious mind. Erickson and Rossi theorizing about the important link between metaphor, symptoms, and therapeutic intervention (Mills & Crowley, 2014). Since the right hemisphere is also more involved than the left in mediating emotional and imagistic processes, it is believed likely that psychosomatic symptoms are processed by predominantly right-brain functions. This means, the right brain may be the “home” of both metaphorical language and psychosomatic symptomatology. Erickson and Rossi theorized that since “symptoms are expressions in the language of the right hemisphere, our use of mythopoetic language may thus be a means of communicating directly with the right hemisphere in its own language” They believe that this right-hemispheric mediation of both symptomatology and metaphorical meaning would explain why metaphorical approaches to therapy were less time-consuming than psychoanalytically oriented approaches.

The power of metaphor in therapeutic processes can be found in many literature. Metaphors may provide people in pain with therapeutic value when used carefully by professionals (Stewart & Ryan, 2019). Similar conclusions also stated by Haen (2020) explain that by exploring metaphor and imagination as transtheoretical elements that cut across therapy modalities, clinicians might ultimately sharpen their effectiveness in helping children heal from the traumatic events in their lives. While Zatloukal et al. (2019), acknowledge though the therapeutic work with metaphors represents a real creative challenge, it creates something new and potentially transformative for clients. In the case of pregnancy loss, Littlemore & Turner (2019) found that metaphor is a useful tool in providing insights into people’s experiences of pregnancy loss. And Nardon & Hari (2021) conclude that imaginative metaphors allow participants to explore feelings, assumptions, and behaviors in non-threatening ways and facilitate introspection and self-awareness. The power of metaphor is not only proven in one on one therapy but also works in couples therapy (Omoboye, Eneh, & Titor-Addingi, 2024) and poetry therapy group (Maanmieli & Ihanus, 2021). Though studies suggested the use of metaphor as powerful tools in client’s therapy process, Malkomsen et al. (2022) found some therapists expressed strong negative feelings towards some of the metaphors used by patients. Interestingly, in another publication, Malkomsen et al. (2021) concluded listening carefully to client’s metaphorical expressions can reveal lived experiences of great importance and shed light on what patients want from therapy and how they experience the therapeutic process.

Mills & Crowley (2014) highlighted that the most important information therapists can elicit from the child is that of positive experiences (hobbies, movies, cartoon characters, playmates, animals, events, memories, and so others), which have had a beneficial effect. They focus on eliciting positive experiences. This is contrary to traditional approaches in which emphasis is placed on the problem area. In the traditional approach most therapists are trained to be aware of the power wielded by painful memories and traumas. Most attention has been accorded the negative side of the scale. Mills and Crowley suggested to give balance on understanding the metaphor that is used by the client, so that the client’s journey of going into his/her unique inner world can be easier. In addition, Brink (1982) in Mills & Crowley (2014) believed that focusing on a client's positive experience will help them to form the “background structure” of the metaphor, using scenes, activities, and occurrences already familiar to the child.

Based on the literature above, it is clear that in play therapy session uncertainty reduction is very important to apply. Therefore the purpose of this article is to find out the uncertainty reduction strategies used by play therapists when conducting intervention to children. And because in the sessions the communication process mostly will use metaphor, so it is also important to find out the metaphors used by children in reducing uncertainty during the therapy process.

METHOD

This research is a descriptive case study with observational data collection techniques. In this research researcher acts as a therapist involved in handling client ANA cases. ANA is a 5 years and 8

months old girl that considers having difficulties in some psychological and social aspect of her development. Client ANA was chosen because she had the longest session. Based on this, the research can have longer observation time so that it can produce in-depth data. In addition, the ANA is also considered as one of the challenging clients in the process of reducing uncertainty. Stake and Yin (in Creswell, 2014) explains in case study the researcher develops an in-depth analysis of a case. For this article, the case study is based on the session's client ANA attended in her play therapy sessions where I, as a therapist, observed and documented all the activities thoroughly. As a complete participant observer, I also documented the important process, especially the ones that related with what metaphor the client chose to reduce the uncertainty. Creswell (2014) mentioned as a complete participant, observer might felt intrusive for the client. To make sure this is not happen, I conducted a play therapy session based on the ethical standard of Play Therapy UK stated in <https://playtherapy.org/ethical-system/>, where therapist has to conduct session with full respect to the child and family including asked parents to sign the consent form to give therapist full access to use the sessions data for clinical and academic research (PTI, 2024).

RESULTS AND DISCUSSION

Results

During therapy sessions, more often the sessions are conducted in a non-directive way. Until session 14, ANA tends to give many directions. It feels like she tried to dominate the session. She is very playful, even though she often directs the therapist a lot. The intensity of directing while playing also decreases as the session increases. From the 14th session onwards, clients can be said to be able to work together well and at the same time be able to play independently.

In the process of reducing uncertainty, various literature states that self-disclosure is required to increase certainty by conducting question and answer. This did not happen in play and creative arts therapy sessions because the method used was non-directive. Therefore reducing client and therapist uncertainty can only be done by using various available tools. Even though ANA talks a lot during their activities, the nonverbal messages she sends are much deeper and help the therapist in reducing uncertainty.

One of the things that clients do in the process of reducing uncertainty is through arts activities in the fifth session. ANA drew a house and a tree based on my suggestion. The first time she drew a house. When about to start drawing ANA said that she will draw a castle. After the main frame of the house was finished, she looked at the drawing for a while, then said that this palace needed lots of windows. Then she made windows. Lots of windows with a grid. Just like a prison. The castle she made has three towers, also with a grid on its windows. Each tower has a closed door. So, in total there are 3 doors in her castle. Below is the drawing created by ANA.



Picture 1
ANA's Drawing, Session 5 (2019).

Initially, ANA drew only two large windows with grid. Then she added lots of small windows with grid because she said the castle needed more windows. When I reflect by saying, "I heard ANA said the castle needs more windows." ANA answered firmly while looking at the resulting drawings and said, "Yeah...the castle needs lots of windows."

The client took a long time to draw the castle. After the castle finished, ANA seemed to suddenly remember something. "Oh..we need to put a mark on the drawing." At first, I did not understand what she meant. So, I reflect by saying, "ANA said it is necessary to put a mark on the drawing." ANA nodded then she wrote the word "Mark: 100". When seeing this writing, I realized that she felt the need to give an assessment of her drawing. Then I reflected again by saying: "I see you wrote Mark 100 on the paper." ANA replied by saying, "Mark is very important."

This arts activity is a recommended activity by therapist. This activity was chosen as a way to reduce uncertainty. Through drawing activities therapist can get a general idea about ANA without asking questions. From ANA's drawing and the reflection by therapist, I can recognize ANA as a cheerful, enthusiastic, and imaginative child. This can be concluded through the energy and pace ANA used while she drew her house. ANA drew in a fast pace. She did not give time to reflect on what she drew. She just kept picking new color and creating more object while busy explaining this and that. Her huge energy can be identified by how she can manage to draw while talking simultaneously. Her multitasking activities made her lost focus sometime. For example, when the time almost finished she realize that I asked her to draw house, tree, and person. Not only house. When she realized this, she seems a bit disappointed. It is shown by her nonverbal messages. Her eyes look a bit teary, her voice getting lower, and her shoulders dropped. Another interesting finding based on this activity is that the importance of marking the drawing. As we can see on the drawing she gave a marking on her own drawing. This might tell us how she feels important to have good grades or the importance to be always in perfect condition.

Based on the picture, I sense that client felt her family is sort of divided. This is indicated by the picture of the house which seems to be divided into three parts: the main house, the first tower, and the second tower. Even though the color of the castle looked cheerful, these seem to tell the story in the client's family there are firm boundaries. The number of windows can be a picture that the client needs the understanding of others to be able to understand himself and his family. Another thing that is also interesting was all the grided windows. It could be that this illustrates that ANA needs clear boundaries when other people try to get to know her and her family. On the other side, the grided window might also meant that ANA feels confined by the rules given to them in their environment.

On the sixth session, ANA chose to play with figurine. These are the figurine she chose.



Picture 2
ANA's Figurine. Session 6. (2019).

In picture 2 it is shown that ANA chose several human figurine, British Castle Guard figurine, and food. She also picked table and house. She also made some "food" from playdough. While playing with the figurine ANA build a storyline. The storyline is pretty similar with what she told me when she drew the castle on the fifth session. There is a beautiful huge castle where everyone can come for a ballroom dance party. In that castle lives a princess that tortured to clean and cooked everyday by the evil stepmother and stepsisters.



Picture 3
ANA's Sand Tray. Session 13. (2019)

Picture 3 showed ANA activity in session 13th. She still chose the same storyline while playing: Ballroom dance party. But this time she chose to put the food in the sandtray. Some of the food are buried in the sand because there were a fight between the princesses in order to get attention of the prince.

These activities gave therapist more information on ANA. The metaphor she chose mostly related with family, disagreement, and food. In some cases food is a metaphor that chose to reflect the nurturing needs of a client. In ANA case this might exist because the absence of a mother figure in her daily life. Her Mom is there, taking care of her, but not completely there. This condition is acknowledge by her mother on the pre session interview. She mentioned that she frequently felt overwhelmed for taking care of ANA. The family figurine and the act of disagreement ANA chose might reflect her daily life that full of family affair which usually full of argumentation. From the pre session interview, ANA has to join the daily family ritual before sleeping at night. Everyday this family will connected through video conference to chit chat and praying together with her brothers that live outside Jakarta.

Other uncertainty reduction process that ANA chose is through drama or roleplay. In almost all session she always open her special time playing in the room by doing a roleplay. The most frequently chosen roleplay is the supermarket and hairdresser scene. In all roleplay, she always acting as the dominant character. Sometime she became a mean supermarket staff. Another time she became a nasty hairdresser that correcting the consumer looks that she thought as not pretty. Or she might chose to be an angry mother who is very occupied with many activities and got angry with the supermarket or beauty parlour staff. Based on the roleplay therapist can get more information and raising certainty towards ANA. In this activity, ANA might be a girl that need a warm, motherly figure to comfort her. Therapist suspected that she frequently saw an adult around her acting like what she did when she do the roleplay.

Discussion

Based on the findings in ANA's case, play and creative arts therapy sessions uncertainty reduction most likely will happen through nonverbal message and the chosen of metaphor by client. Compared to other interpersonal communication settings, in therapy room the uncertainty reduction process will take much longer time. In other interpersonal activities probably by first meeting, sender-receiver can reduce the uncertainty level. Self-disclosure in other interpersonal activities also might occur easily because both sender-receiver can ask and answering question consciously. In play and creative arts therapy the question-and-answer process for reducing uncertainty cannot be trusted. Because this therapy method believes that using metaphor is a lot more effective to communicate and explore a client's emotional, mental, and social condition. In sessions, ANA frequently mentioned she is in a fine condition. But from the nonverbal message and the metaphor she chose, it is very clear she is in an unhappy or uncomfortable state of mood. Moreover, communicating through metaphors also help ANA found insights and help her exploring her feelings and behavior in a safe condition. This is similar with what Littlemore & Turner (2019) and Nardon & Hari (2021) found in their research.

It is important for therapist to be aware that understanding a metaphor is a hard and might be subjective process. To build a good understanding of the client, a therapist needs to gain more knowledge on the background of the client, equip with more understanding on universal metaphor, and practice reflecting when accompanying the client in the session. In ANA's case because the parents are very open, so it is quite easy to understand the metaphor ANA chose. For example, to understand why she drew all her windows with a grid and gave marks to the drawing is not that hard to tell the reason why. Therapist understanding on the universal metaphor (in ANA case: food and the needs of nurture) helps a lot to understand ANA better. Reflecting on what client did or what the therapist might see, hear, and feel is also crucial. If I did not reflect when ANA looked nervous when she forgot to mark her drawing, I might not realize that frequently being judge is what ANA feels.

In ANA's case, the first uncertainty reduction strategy carried out is an active strategy. This strategy was carried out by interviewing ANA's parents and teachers. The aim of the active strategy is to equalize perceptions between parties who feel that ANA needs therapy and determine the goals of therapy, as well as knowing ANA's character and growth and development in general. This strategy is carried out before the session starts. The next strategy used is a passive strategy. Passive strategy is

carried out when ANA starts attending therapy sessions. In the case of ANA, the passive strategy with the aim of reducing uncertainty lasted quite a long time. Further observations need to be made with other clients, whether it really takes as long as ANA needs to reduce uncertainty.

Simultaneously, while applying passive strategies the therapist also uses interactive strategies. When interactive strategy applied, in ANA's case, self-disclosure starts to develop. Exactly what mentioned by Cabrera (2020), self-disclosure will strongly develop when interactive strategy applies. The difference with other interpersonal communication, in the therapy room, interactions are carried out using metaphors that feel comfortable and safe for ANA. In ANA's session, she mainly uses arts, sandplay and figurines, as well as role play in conveying her metaphors. Thus, the therapist will use these metaphors to conduct questions and answers. For example, when ANA does role play while playing with figurines, the therapist asks reflective questions such as, "I heard that the princess was scolded by her stepbrother." Then ANA answered, "Yes, because they don't like princesses. They are jealous of the princess." Although interactions like this will not directly open a conversation about what is happening with ANA, it will trigger ANA to reflect on herself again and find out what problems she is facing and how to overcome them. Although the therapist may not point out ANA's problems directly, reflective questions can help ANA to slowly open more deeply in the session. This means, reflective question in the session will stimulate client to the process of self-disclosure.

In play therapy sessions with ANA, the therapist does not use an extractive strategy at all, because this strategy is done by finding out about the client via the internet. At the time of the session, ANA was not actively using the internet and her family was not actively using the internet to share family stories with a wider audience.

CONCLUSION

To reduce uncertainty in play therapy sessions, it requires implementation of uncertainty reduction strategies which sometimes need to be applied almost simultaneously. In ANA's case, the strategy stages started with an active strategy which was carried out by interviewing ANA's parents and teachers. Followed by the simultaneous use of passive and interactive strategies. What is different from the use of strategies in other interpersonal communication is that, in the play therapy room with ANA, the therapist, while observing ANA's verbal and nonverbal communication and the metaphors used, also uses interactive strategies. Usually in other interpersonal communications, each strategy is carried out at a different time. Thus, the therapist's understanding skills, mindfulness, and insight into metaphor need to be very deep.

For further research, it would be interesting to examine how extractive strategies are used to reduce uncertainty in the play therapy room. This has become necessary, because recently more and more families are using social media as a medium for documenting their families. So perhaps social media content can be used to carry out extractive strategies. Another area of research that still needs to be explored is conducting similar research with different clients. considering that this study is a case study, it cannot be stated that what is concluded in the ANA case will also apply to the cases of other children.

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