





#### Original Article

# Cognitive analysis of conceptual metaphors for depression from the perspective of clinical psychologists: A qualitative study

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#### Abstract

**Introduction:** Depression is conceptualized by metaphors, according to this point, this study aimed to analyze some of the main cognitive metaphors for depression from the perspective of clinical psychologists.

**Materials and Methods:** The method of this research was a qualitative-cognitive analysis study. In the first phase, the population of study was all the clinical psychologists who treat depressed patients in Tehran, Iran in 2021. Then, 30 clinical psychologists were selected by the purposive sampling method according to the theoretical saturation rule. Participants were asked to provide descriptions of depression that depressed patients gave them, which led to a rapid diagnosis of depression. Their conversation was recorded and collected by WhatsApp voice recording. In the second phase of this study, the population of 625 metaphorical phrases was obtained. According to the theoretical saturation rule, 200 phrases were selected purposively. Phrases and statements in which the depression and its symptoms were metaphorically expressed were manually separated and categorized.

**Results:** The results of this study demonstrated that there were 7 important source domains for depression in Persian-speaking depressed patients. They are respectively included place, container, path, direction, object, human, taste, and color. Place, container, path, and direction are the most mapping for depression.

**Conclusion:** According to the embodiment rule and like other abstract concepts, it seems that depression can be understood and conceptualized by cognitive metaphors.

Keywords: Clinical psychologists, Cognitive analysis, Depression metaphors

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#### Introduction

Depression is a mood disorder that causes persistent emotions and feelings of sadness and loss of interest (1). The American Psychiatric Association Diagnostic Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) classifies the depressive disorders into the disruptive mood, dysregulation disorder, major

depressive disorder, persistent depressive disorder (dysthymia), premenstrual dysphoric disorder, and depressive disorder due to another medical condition (2). The main criteria of all types of depressive disorders are sadness, loss of energy, or agitated mood, with or without somatic and cognitive changes that significantly affect everyday life (3). According to the types of

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elhamaraiisi@gmail.com Received: Nov. 27, 2021 Accepted: Mar. 12, 2022 depression, major depression is severe and decreases the quality of dimensions of life (4). In a neurological study, researchers found that there was a positive and robust correlation between depression and cognitive functions such as working memory and cognitive flexibility (5). In another study, the results indicated that when depressive symptoms increased, cognitive functions declined (6). Therefore, it seems that depression has a major impact on our cognitive system like schemas (7) and the main part of our schemas is metaphorical conceptualization especially body schemas (8).

Depression is a psychological term that can be expressed by metaphorical expressions because our psychological states have abstract components and abstract components can be understood by conceptual metaphors (9). According to Lakoff's theory (10), conceptual metaphors or cognitive metaphors have cognitive and embodied bases which are expressed by language (11). They are global and universal since our cognitive systems and mental processes are similar to human beings (12). As cited before, abstract concepts such as time (13), pain (14), and quality of life (15) are conceptualized by metaphors which help us to understand things better (16). Conceptual metaphors include two main features: source domains and target domains (17). We map target domains into source domains and therefore, we grasp a new meaning from the world (18).

Source domains are based on our embodied characteristics and experiences, but target domains have abstract components (19). Therefore, our abstract thinking is grounded in bodily experiences (20). In other words, our cognitive thinking is manipulated by conceptual metaphors (21). Lakoff found that the process of conceptual metaphors was placed on our brain and it had neurological reactions and bases (22).Accordingly. understanding metaphors improved gradually during personal growth (as brain development according to age) and mental development (23). In many studies especially in English, metaphors of depression and its symptoms are studied from various viewpoints. For example, in one study the results indicated eight models for depressive metaphors in psychiatric texts. These metaphors were related to chemical imbalances, degenerative conditions, toxicological syndromes, injuries, deficiency

states, obsolete categories, medical mysteries, and evolutionary vestiges (24). In another study, contextual factors including stigma, lack of communication, medical practice, and process made significant impacts on depressive metaphors in patients' conceptualization (25). Results of another study indicated that depressed people could verbalize internal states both metaphorically and literally and there is no preference for any of them (26). Also, experiences of depression as "looking on the dark and bright side" mean changing and swinging on different sides (27).

Cultural issues, like our environment, mental framework or schemas, child-rearing styles, parenting styles, and stereotypes about mental disorders or mood disorders produce powerful effects on the description of depression literally or metaphorically (28).

Many studies in the literature of this research have examined some metaphorical expressions of depression. But according to this study, researchers try to find a corpus of metaphors for depression because it seems that metaphors of any conceptual domains can play important roles in our verbal and cognitive system which forms the basis of our interventions for clinical problems (29) and also it looks measurable by metaphorical instruments as "Time Metaphorical Perception Pattern Questionnaire" (30).

According to these issues, this study is a cognitive analysis of conceptual metaphors of depression and its symptoms as a psychological disorder or mood disorder that is described by clinical psychologists treating depression via psychological treatment approaches. Researchers believe that depression cannot be explained directly and without metaphors. In another word, we cannot understand the symptoms of depression without conceptual metaphors and conceptual mapping among Farsi speakers.

#### **Materials and Methods**

This study was a qualitative-cognitive analysis study and it had two stages. In the first stage, the statistical population was all of the clinical psychologists who treated depressed people with cognitive and behavioral therapies in Tehran city, in 2021. According to this purpose, 30 clinical psychologists participated in this study voluntarily from June to December. Inclusion criteria were: having experience in the field of treatment of all

kinds of depression for 5 years and mastering one of the psychological therapies for depression, such as schema therapy or cognitive therapy. Exclusion criteria were the non-cooperation of psychologists during the study and psychologists who used other therapies besides the mentioned treatments. Also, a demographic questionnaire that includes gender, age, grade, and marital status was completed by psychologists. In this study, all ethical principles are respected. Written consent was obtained from all participants and the purpose of the study was explained to them.

The statistical population in the second stage was all metaphorical phrases or sentences expressed by psychologists.

We asked them the main questions; "How do patients describe their experiences of depression to you?", "How do you know if your client is depressed?" and "What are their description of depression symptoms remarkably similar to?". Finally, 625 phrases and statements were expressed and recorded via WhatsApp voice recording. The sample size of this stage was 200 phrases or statements that were analyzed purposively. In another word, the unit of meaning in this stage was metaphorical phrases or statements. According to Saunders et al., the determination of the sample size in both stages was based on the law of theoretical saturation (31).

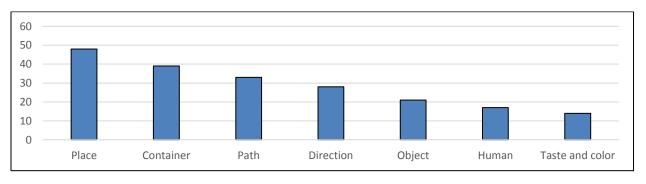
Due to the Corona pandemic, psychologists were asked to answer questions via WhatsApp voice recording. Their conversation was collected. Phrases and statements in which the depression and its symptoms were metaphorically expressed were manually separated and categorized. Then, frequencies and percentages of metaphors and source domains were calculated. The types of depression mappings were extracted. We encoded the phrases and statements in the serial number. It is important to point out that in this study the classification of metaphors as source domains, target domains, and mapping between these two domains is based on the Kövecses metaphorical categorization (17).

#### **Results**

Among the 30 clinical psychologists who participated in this study, 6 (20%) were male and 24 (80%) were female. Their mean age was 37.02 ± 2.13 year. In this study, 18 psychologists had master's degrees and 12 had a doctorate in clinical psychology. Metaphorical source domains of depression and its symptoms according to clinical psychologists` statements and phrases include: depression is place, depression is the container, depression is the path, depression is direction, depression is an object, depression is human and depression is taste and color(Table 1 and Figure 1).

Source domains	Frequency (%)
Place	48 (24)
Container	39 (19.5)
Path	33 (16.5)
Direction	18 (14)
Object	21 (10.5)
Human	17 (8.5)
Taste and color	14 (7)

Table 1. Depression source domains



**Figure 1.** Depression source domains (frequency)

According to the metaphorical analysis of the statements of clinical psychologists, several important mappings were obtained for each source domain of depression respectively. First, the most important and salient source domain for depression is placed as bounded space and dark place. Second, the most prominent mappings for depression are a container like a deep well or an enclosed container like a cage. Third, the most important map for depression is the path as

irreversible and endless path and a bad trip. Forth, the most dominant mapping for depression is a direction like moving down and growing toward the bad thing. Fifth, the most important mappings of depression are an object as worthless life and a frozen mind. Sixth, the most noticeable mappings of depression are humans as captors and inner enemies. The last important mappings for depression are taste and color like bitter and dark or gray (Table 2).

**Table 2.** The main source domains and their mappings of depression

Source domains	Mapping
Depression is place	Depression is a bounded space.
	Depression is dark-side of mind.
Depression is container	Depression is trapped in well.
	Depression is narrow cage.
Depression is path	Depression is a bad trip.
	Depression is endless sadness.
	Depression is irreversible path.
Depression is direction	Depression is moving down.
	Depression is growing.
Depression is object	Depression is worthless life.
	Depression is frozen mind.
Depression is human	Depression is captor.
	Depression is inner enemy.
Depression is taste and color	Depression is bitter.
	Depression is dark and gray.

There are many examples for source domains of depression and their related examples according to the order of mappings and codes presented by clinical psychologists who reported the metaphors helping them to diagnose the symptoms of depression. These examples include:

- Depression is place.

Example: "My frustrations and sorrows have bound my hand from somewhere and do not allow me to move" [P 8].

Meaning of metaphor: Depression and its symptoms are conceptualized as if they are in a place and do not allow a person to do anything else.

- Depression is container.

Example: "I have fallen into a deep well that I cannot come out of it, no matter how hard I try" [P 3].

Meaning of metaphor: The depressed person considers his/herself as a captive in the prison of his/her depressing thoughts and has

conceptualized it as a well from which it is impossible to be released.

- Depression is path.

Example: "It's as if I'm rolled down the slope" [P 16].

Meaning of metaphor: The depressed patient interprets his/her condition as descending a sloping path.

- Depression is direction.

Example: "My symptoms are getting worse every day" [P 26].

Meaning of metaphor: The depressed patient interprets his/her symptoms of depression as if they increase.

- Depression is object.

Example: "Something is destroying my brain from inside" [P 24].

Meaning of metaphor: A depressed patient conceptualizes depression as a damaging object.

- Depression is human.

Example: "This great sorrow will kill me" [P 4].

Meaning of metaphor: Grief and sadness caused by depression is conceptualized like a brutal killer. - Depression is taste and color.

Example 1: "I see the whole world in black" [P 21].

Meaning of metaphor: Depression casts a black shadow over the patient's entire life.

Example 2: "A gray cloud is crying inside me" [P 13].

Meaning of metaphor: Depression is conceptualized as a gray cloud.

#### **Discussion**

The purpose of this study was a cognitive analysis of conceptual metaphors of depression and its symptoms from the perspective of clinical psychologists. the metaphorical conceptualization of depression as the place is more frequent than in other source domains, and depression as taste and color is less than in the others. The results of this study are consistent with the studies by Coll-Florit, et al. (25), Kauschke, et al. (26), and Patten (24). In the study of Coll-Florit, et al. (25), conceptual metaphors of depression were analyzed based on 23 blogs of written statements obtained from people with major depressive disorder. This study introduced several metaphors for living with depression and the potentially empowering of depression (25).

In Kauschke, et al. study, two behavioral approaches were used: a sentence completion task and elicited speech production. In this study on 26 depressed patients and 32 healthy controls, the results showed that healthy people prefer to describe their internal moods and emotions literally. But depressed people use metaphors to verbalize their emotions and effects (26). There are no similar studies in this field in Farsi. But in this study, we found and demonstrated the main source domains by which Persian depressed patients describe their low moods and depressed emotions according to clinical psychologists` viewpoints and metaphorical hints that help them to diagnose depression. It seems that depression, such as other psychological states, is a transcultural concept and shows similar metaphorical conceptualization among different language speakers because depression is based on our emotions and emotions that have similar expressions in human beings. In a study, all depressed people in Chinese and English cultures explained their depression as direct descent (32). In another word, psychological distress such as depression, anxiety, and stress provide similar mental frameworks and experiences which are similar in all cultures and languages. So, metaphors for depression are almost the same from one culture to another.

In the psychologists` viewpoints, it seems that patients perceive depression fundamentally as a part of themselves and as an inner speech. So, they expose their depression not only to biological factors but also to psychosocial factors. The result of our study shows that the first dominant metaphor is "depression is like descent or falling into an unknown place" or "getting stuck in somewhere" which means descending into a physical space or place from a high point to a low point. These places are usually dark, black, gray, and deep well or cage which are unknown and terrible places that cannot be escaped. Also, the patients in Farsi use this metaphor: "depression is a captor" frequently.

According to the theory of Lakoff, conceptual metaphors convey human conceptualization and emotions. But this mechanism is unconscious. In another word, we consistently use metaphors in everyday life and shape our emotions and metaphorical psychological states into statements, but we are not aware of this process right now (10). It seems that cognitive psychotherapies such as schema therapy, which have a significant effect on different types of depression, target conceptual metaphors. As said before, conceptual metaphors are our cognitive containers and their mechanism is embedded in our cognitive system. In another word, cognitive therapies, especially schema therapy changes and improves our cognitive system. Therefore, our conceptual metaphors can be changed. In this regard, we can mention some conceptual metaphors such as health metaphors which can develop and promote our quality of life and mental health or psychological states (33). Although this study is new and multidisciplinary and paves the way for new research, it has some limitations. For example, psychologists who participated in this study, were not familiar with metaphors, because metaphors belong to the cognitive-linguistic field. Online via WhatsApp voice recording was another problem of this study and we could not communicate face to face.

At last, we suggest other qualitative and qualitative methods in this field for future studies. For example, researchers are proposed to build valid scales based on the data of this study so that they can better examine the metaphorical opinions of experts, even depressed patients.

#### Conclusion

This study showed that there were seven important source domains for depression and its

symptoms. They are respectively included: place, container, path, direction, object, human, and taste and color. Place, container, path, and direction are the most mappings for depression in Persian depressed patients.

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## References

- 1. Chand SP, Arif H, Kutlenios RM. Depression (Nursing). 2021 Jul 26. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2021.
- 2. Sekhon S, Gupta V. Mood disorder. 2021 May 8. In: StatPearls. Treasure Island (FL): StatPearls Publishing; 2021.
- 3. Bains N, Abdijadid S. Major Depressive Disorder. 2021 Apr 20. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2021. PMID: 32644504.
- 4. Malhi GS, Mann JJ. Depression. Lancet 2018; 392(10161): 2299-312.
- 5. Maramis MM, Mahajudin MS, Khotib J. Impaired cognitive flexibility and working memory precedes depression: A Rat model to study depression. Neuro-psychobiology 2021; 80(3): 225-33.
- 6. Formánek T, Csajbók Z, Wolfová K, Kučera M, Tom S, Aarsland D, Cermakova P. Trajectories of depressive symptoms and associated patterns of cognitive decline. Sci Rep 2020; 10(1): 20888.
- 7. Negt P, Brakemeier EL, Michalak J, Winter L, Bleich S, Kahl KG. The treatment of chronic depression with cognitive behavioral analysis system of psychotherapy: a systematic review and meta-analysis of randomized-controlled clinical trials. Brain Behav 2016; 6(8): e00486.
- 8. Liu D, Mo Q. Conceptual metaphors and image schemas: A corpus analysis of the development of the on track/off track idiom pair. J Eng Linguis 2020; 48(2): 137-65.
- 9. Müller N, Nagels A, Kauschke C. Metaphorical expressions originating from human senses: Psycholinguistic and affective norms for German metaphors for internal state terms (MIST database). Behav Res Methods 2022; 54: 365-77.
- 10. Lakoff G. The contemporary theory of metaphor. In: Ortony A. (editor). Metaphor and thought. Cambridge: Cambridge University; 1993: 202-51.
- 11. Gibbs Jr RW, editor. The Cambridge handbook of metaphor and thought. Cambridge: Cambridge University;
- 12. Kövecses K. Metaphor universals in literature. Argumentum 2019; 15: 264-76.
- 13. Raiisi F, Afrashi A, Nematzadeh SH, Moghadasin M. [Conceptual metaphors of time in Persian: A cognitive and corpus-based approach]. Journal of Western Iranian languages and dialects 2020; 8: 15-29. (Persian)
- 14. Raiisi F. Conceptual metaphors of pain in Persian: A cognitive analysis. International journal of musculoskeletal pain prevention 2021; 6(2): 496-501.
- 15. Raiisi F. Cognitive analysis of quality of life metaphors from the perspective of health promotion students. Health education and health promotion 2022; 10(2): 1-8.
- 16. Kövecses Z. Levels of metaphor. Cogn Linguist 2017; 28(2): 321-47.
- 17. Kövecses Z. Where metaphors come from. Reconsidering context in metaphor. Oxford: Oxford University; 2015.
- 18. Lakoff G, Johnson M. Philosophy in the flesh: The embodied mind and its challenge to Western philosophy. New York: Basic Books; 1999.
- 19. Kövecses Z. Perception and metaphor. Perception metaphors 2019; 19: 327.
- 20. Kövecses Z. Metaphor and emotion: Language, culture, and body in human feeling. Cambridge: Cambridge University; 2000.
- 21. Kiseleva S, Trofimova N. Metaphor as a device for understanding cognitive concepts. Revista de Lenguas para Fines Específicos 2017; 23(2): 226-46.
- 22. Johnson M. The body in the mind. Chicago: University of Chicago; 1987.
- 23. Raiisi F, Afrashi A, Moghadasin M, Hajkaram A, Nematzadeh SH. [Understanding of metaphorical time pattern among medical and paramedical students. based on gender, age and academic status]. Scientific journal of Kurdistan University of Medical Sciences 2019; 24(4): 56-67. (Persian)

- 24. Patten S. Medical models and metaphors for depression. Epidemiol Psychiatr Sci 2015; 24(4): 303-8.
- 25. Coll-Florit M, Climent S, Sanfilippo M, Hernández-Encuentra E. Metaphors of depression. Studying first person accounts of life with depression published in blogs. Metaphor Symb 2021; 36(1): 1-19.
- 26. Kauschke C, Mueller N, Kircher T, Nagels A. Do patients with depression prefer literal or metaphorical expressions for internal states? Evidence from sentence completion and elicited production. Front Psychol 2018; 9: 1326.
- 27. Refaie EE. Looking on the dark and bright side: Creative metaphors of depression in two graphic memoirs, a/b. Autobiogr Stud 2014; 29(1): 149-74.
- 28. Schoeneman TJ, Schoeneman KA, Stallings S. The black struggle: Metaphors of depression in Styron's darkness visible. J Soc Clin Psychol 2004; 23(3): 325-46.
- 29. Riyassi M. [The effectiveness of computerized working memory training and integrated computerized working memory program with direct language intervention (based on time metaphor) on linguistic-cognitive skills of children with cochlear implant]. Ph.D. Dissertation. Institute for Cognitive Science Studies (ICSS); 2021. (Persian)
- 30. Raiisi F, Moghadasin M. [Designing, making, and evaluating psychometric characteristics of the time perception pattern as metaphorical questionnaire based on cognitive-dataset analysis in Persians]. Journal of cognitive psychology 2020; 8(2): 76-86. (Persian)
- 31. Saunders B, Sim J, Kingstone T, Baker S, Waterfield J, Bartlam B, et al. Saturation in qualitative research: Exploring its conceptualization and operationalization. Qual Quant 2018; 52(4): 1893-907.
- 32. Fahlenbrach K. Audiovisual metaphors and metonymies of emotions and depression in moving images. In: Ervas F, et al. (editors). Metaphor in communication, science and education. Berlin: Mouton de Gruyter; 2017: 95-117.
- 33. Levitt H, Korman Y, Angus L. A metaphor analysis in treatments of depression: Metaphor as a marker of change. Counseling psychology quarterly 2000; 13(1): 23-35.