

‘More real than reality’: a study of voice hearing

Karlsson L-B. ‘More real than reality’: a study of voice hearing

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Hearing voices can be considered as elusive or illusory hallucinations in the sense that they are perceptions that have no external reason or even that they are divorced from reality. The aim of this article is to describe how participants in different focus groups account for and understand their voice-hearing experiences. The study shows that voice hearing can be such an overwhelming experience that it can even be experienced as ‘more real than reality’. Voices are strong and powerful experiences that sometimes convey memories from the past or difficulties that the voice hearer would prefer to forget but in fact has had to confront. The voices also influence how the voice hearer sees his or her future. This study contributes to our knowledge of the world and language of voice hearers from the perspective of social work.

Hearing voices can be considered as elusive or illusory hallucinations in the sense that they are perceptions that have no external reason or even that they are divorced from reality. Many people who hear voices think they are imagining it, which makes them question their own sanity. But if we are to understand the phenomenon of voices, we need to explore the voice hearing experience itself.

In research about voice hearing, there are two conflicting viewpoints depending on how researchers define the phenomenon and how they regard the patients’/clients’ own accounts of their voice hearing. The first viewpoint is to regard the phenomenon as an auditory hallucination. The definitions are often presented in accordance with the diagnostic manual DSM-IV-TR, developed by the American Psychiatric Association, which specifies that the distinctive features of pathologic hallucinations are ‘usually experienced as voices, whether familiar or unfamiliar, that are perceived as distinct from the person’s own thoughts’ (APA, 2000: 300). In the first viewpoint, very little attention is paid to how clients describe their voices, although the stories are sometimes accounted for as cases or vignettes.

The second viewpoint is to acknowledge the hearing of voices as being context-contingent. The experience and interpretation of voice hearing is, in other words, seen as being dependent on cultural and social processes. According to Leudar and Thomas (2000), however,

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there are a number of common denominators, including: only a few people experience hearing voices; the voices are heard when other people are not present; and the voices comment on what the voice hearer is doing or thinking. From this viewpoint, research on the issue takes as its point of departure how the subjects themselves describe, explain and communicate their experiences. It is by studying how people who hear voices tell their stories that researchers have gained insight into voice hearers’ reality.

The present study strives to understand subjective experiences of voice hearing. It analyses how people experience their (inner) voices in their everyday life and what meaning they give to the voices. *What is the phenomenon of (inner) voices and how does a person know that s/he hears voices?* The aim of the study is to describe how participants in different focus groups account for and understand their voice-hearing experiences.

The present study takes its point of reference from Schutz’s (1962) idea that the human being lives in several different worlds. Schutz examined human consciousness and concluded that human beings move in both an external world in time and space, and in an inner world that has its own time frames. A person crosses the border between these different worlds, e.g. when s/he falls asleep and moves into the world of dreaming. Other worlds are those of science, religion, art, pure madness etc. Human beings, in other words,

live in multiple realities. Every experience has its own existence, its own borders, and can be considered inconsistent within another world. It is for this reason that Schutz (1962) speaks of 'finite provinces of meaning'. When people talk, for example, about their (inner) voices, they are still in their everyday life, but at the same time are making the leap from their ordinary world into the world of voice hearers. The borders between the worlds can be transcended only through a leap, which can be experienced as shocking, and which Schutz (1962) regards as consciousness being changed through a stream. All these experiences become a stream in our consciousness and in our inner time.

Hearing voices and social work

The phenomenon of voice hearing is usually studied by researchers with a medical or psychological background. But social workers need to become more knowledgeable about voice hearing as well, since in their daily work they meet voice hearers as clients who need help and support. Inner voices can be a consequence of the abuse of either alcohol or of legal or illegal drugs. They also occur as a consequence of physical or mental illness, old age, crisis or trauma (Ensink, 1993; Escher, 2005; Grimby, 1995). When met without special knowledge, voice hearers run the risk of not being taken seriously, of being misunderstood and of their experiences being dismissed as imagination, whether pathological or not. The aim of this article is to contribute to knowledge about the world and language of voice hearers.

Romme and Escher (2000) found that hearing voices in itself is not an indication of a psychiatric disease, but that the inability to cope with hearing voices is disabling. Currently, there is a shift in what is considered normal versus deviant with respect to voice hearing. Furthermore, psychiatry's de-institutionalisation project would be unsuccessful unless it adopted a revised view of what is deviant human behaviour. An international movement to normalise the idea of voice hearing is growing, originating from Europe (Romme & Escher, 2000). This has allowed voice hearers to establish a common social identity and influence others to cultivate greater understanding of voice hearing.

Over the last decade, social workers in Sweden have been involved in community-based psychiatry as a consequence of the 1995 Psychiatric Care Reform, e.g. giving support and assistance in field teams or as case managers, and helping with rehabilitation at cooperatives and day-centres. The intent of the reform was 'to define the division of responsibilities between social services and mental health care' (Arvidsson, 2003: 337). Mental health care treats acute mental disorders, while social services support those mentally ill clients who are regarded as being disabled. Evaluations show that the use of integrated language to describe daily social work

with the mentally disabled is lacking (Markstrom & Wiksten, 2000). Developing an integrated language for this purpose is necessary to legitimise the work to improve the status of persons working with mentally disabled clients, and to arrest the tendency to fall back to the traditional vocabulary of biomedical psychiatry (Markstrom & Wiksten, 2000).

Clients, or patients if you will, are also acting subjects. They, like other people, interpret their experiences using old cultural patterns, but also new ones. Knowledge of subjective experiences of voice hearing could inspire a more empathetic response and better treatment of persons who have difficulty coping with their voices. From the perspective of social work, therefore, it is important to try to understand voice hearing.

Understanding and making sense of voice hearing

Geekie (2004) states that patients' voices have been marginalised, both in clinical practice and in research. He stresses the importance of focusing on how people understand and make sense of their psychotic experiences. His patients wanted to tell their stories in order to explore their psychotic experiences and to overcome their feeling of being undervalued or rejected by others. Romme and Escher (2000) developed a questionnaire to help professionals begin to communicate with their clients about the voices. Some phenomenologically inspired researchers and their findings, which show how the interviewees describe and understand their voice-hearing experiences, are presented in this article.

Thomas, Bracken and Leudar (2004) categorise voice hearing in the form of bereavement hallucinations as phantom sensations. Both seem to occur contemporaneously. When a person hears the voice of a deceased relative, the voice hearing can be regarded as a repressed experience. Neurological disturbances, such as phantom pain, can be linked to the history of the patient, 'because memories of our past experiences are embodied' (Thomas et al., 2004: 19). Thomas and associates studied the case of a woman who heard her deceased partner's voice which, in relation to her life story, could be understood as an embodiment of certain memories (Thomas et al., 2004).

Blackman (2002) has studied how people who engaged in the Hearing Voices Network (HVN, an English network of people who hear voices) related to their experiences of voice hearing and found that they were influenced by cultural practices that depended on the context. Members of the HVN search for ways to cope with their voices as an alternative to traditional psychiatric and psychological forms of treatment. Many adopt telepathy as an explanation. In accordance with this model, some people are considered to have an unusual ability to hear voices. The HVN encourages people to work with their voices and gives voice hearers

a language to help them understand their voices rather than reject them.

Csordas (1994) studied the experiences of a young Navajo man who began hearing voices after brain surgery. The young man thought that the voices were his ancestors, the Holy People. Over time, the voices changed and during traditional religious gatherings he had 'a direct non-auditory inspiration to talk' (Csordas, 1994: 284). Later, he functioned as a traditional healer. This was apparently a way for him to cope with a difficult life situation and to find meaning in his experiences; he simply made use of the symbolic resources of his culture (Csordas, 1994).

Methods

The present study uses data from five focus groups. Morgan (1997) views focus groups as 'a research technique that collects data through group interaction on a topic determined by the researcher' (p. 6). In the present study, the purpose of letting voice hearers meet in focus groups was to collect material for a study on the phenomenon of hearing (inner) voices where both an 'inside' perspective and a communication perspective were used. The talks were expected to play down the phenomenon of voice hearing and break a taboo. I wanted to offer, within the framework of a research project, a social context where voice hearers could express themselves freely. The participants could perhaps inspire each other and the talks might enable them to become adept at describing the voice-hearing experience.

The composition of the focus groups was purposely shifted during the course of the study in the hope that the experiences and the social and cultural contexts would be more varied (see Appendix). The participants were recruited through advertisements in scientific journals and newspapers, and through personal contacts. The prospective informants decided themselves whether or not they heard voices. The youngest was 30 years old and the oldest 60. Altogether, 22 persons took part in the study, 12 women and 10 men. At the first meeting of the focus groups, the participants were given both oral and written information concerning the background and aim of the research project, and were informed that they had the right to terminate their participation whenever they wished. Written agreements were signed and the participants were asked not to disclose what was said during the focus group sessions. All names used in this article are fictitious and certain personal information has been altered to protect the participants' anonymity.

According to Polkinghorne (1989: 50), a phenomenological analysis of data means starting from a naive description of studied experiences to reach 'a description of the essential features of that experience'. The analysis proceeded step by step and began by my reading

through the transcripts looking for recurrent themes. Wertz (1985: 164) stressed the importance of becoming well-acquainted with the described experiences, to put oneself into the other person's situation in order to capture 'the meanings the subject has expressed'. The next step involved categorising the participants' statements/utterances in order to differentiate the 'meaning units'. Wertz (1985: 165) defined a meaning unit as 'a part of the description whose phrases require each other to stand as a distinguishable moment'. One thereby obtains an overview using the following coding elements: *Description and explanation of the voices; Comparisons between thoughts, feelings and voices; Experiencing 'voices' without hearing; Voices between fantasy and reality; and Demarcation towards other extraordinary phenomena*. In the third step, the concrete descriptions under each coding element were organised at a higher level of abstraction. In the fourth step, each code group was summarised. The original transcripts were read through a second time to ensure that no valuable information was lost during the coding process.

Participating in a focus group tends to encourage conversation – if the topic is perceived as important. Such groups are also excellent opportunities to gather data from exposed and vulnerable people who would otherwise never have the opportunity to express themselves (Madriz, 2003). The talks in the focus groups were liberating and empowering. All the participants expressed their joy and relief at having the possibility to talk with like-minded people about something that they had kept to themselves for so long, even though they had been psychiatric patients for years. An understanding of one another's experiences grew, but also an understanding of the phenomenon of voice hearing.

Describing and explaining the phenomenon

The participants in the focus groups said that the voices were 'heard' through one or both ears, or in the head, the stomach, the back or as pulsating messages in the blood stream. Voices could speak using only a few words or many words, or they just laughed. They sounded like 'roaring monotonous sounds' or like 'a cheering crowd', or they were heard 'through a particular wall' in the person's dwelling. The frequency of the voices varied from seldom, often and always. Often the voices disappeared when the person left his/her home or spent time in the company of other people.

The participants designated their voice hearing in different ways, e.g. to hear voices, my/mine (inner) voice/s, voice/s, (voice) perceptions, voice hearing and auditions. The word *hallucination* was never used to name the phenomenon. The often used personal pronoun my/mine indicated the subjective character of the experience. Occasionally, participants used their

own words or expressions, such as 'thought-voices', '(biggest) voices heard', 'a voice in the head', hearing with one's 'inner ear' or hearing (something) 'ear-close'. The phenomenon was characterised as 'an awakening', as 'getting someone on the line', as 'getting in contact with the voices', as having 'something that speaks inside the head', as 'all this weird stuff' or as 'a bloody attack'. Something or somebody might be responsible for the voice/s, such as 'the astral bird/girl', 'the cruel bird', 'the spirit/s', 'the murderer/s' or 'the power/s'. The voices belonged to both fictitious and real-life persons, to the living and the dead, or were considered to be the voices of gods, demons, evil or good spirits.

The explanations for the voices varied. The voices were 'the consciousness of the voice hearer', 'human and natural reactions to stress', 'loneliness', 'sorrow', 'a life crisis', 'symptoms of a psychiatric illness', 'telepathy', 'paranormal or occult phenomena', or 'ghosts', 'spectres', 'demons' or 'spiritual guides'. The voices were 'memories from the past', caused by 'the subconscious', 'the unconscious' or emanated from the 'independent working human brain'. The voices might mean that the voice hearer was on a 'higher level of consciousness', '[an] astral level of consciousness'. One participant happened to 'get in on another frequency' and was able to listen to telephone calls between other people. The voices could be sounds that were 'retransformed into voices', e.g. from 'air pockets' or 'the vibrations of a railway track'. Ordinary sounds changed character and spoke to the voice hearer: 'The birds talked to me and when I let the water run [the voices] talked to me, and the garbage truck outside; these small roaring monotonous sounds, they spoke to me'. Several of the participants considered voice hearing to be a natural human ability that usually disappeared when a person grew up but that voice hearers retain. Not all the participants gave an explanation of their voices. In these cases the voice hearer spoke of being 'struck' or 'hit' by the voices.

Some participants did not or could not distinguish between their voices, sights, visions, touches and smells. They were all designated as voices, used as a generic term. The participants had often experienced other extraordinary phenomena, such as premonitions, close-to-death experiences, out-of-body experiences, regression to earlier lives or telepathy. The participants described their voice experiences sometimes in sweeping terms, sometimes in great detail. The voices could change character and number over time. The talks also concerned phenomena such as glossolalia (speaking in tongues, in a religious sense), which the participants could not always explain or which were not a part of everyday life. Altogether, the experiences varied widely, as did the explanations and terms used to describe them.

Thoughts, feelings and voices

How do human beings distinguish between their (inner) voices and their *thoughts*? The difference between thoughts and voices was often clear to the participants in the present study, especially to those who had received psychiatric care. The voices and the thoughts had different origins, commented one participant, since his voices came from the *outside* but manifested themselves *inside* him; his thoughts were his 'own, but the voice [was] not'. Another participant defined voices as 'something outside that was communicating inside' her. A third said that she *knew* if a thought was hers or not. A fourth had an 'inbuilt mechanism' for distinguishing between his thoughts and his voices. Difficulties appeared if he experienced 'an echo effect', i.e. if 'the voice' repeated his thoughts, which was also a way for the voice to start a conversation.

Anna knew for sure *when* she heard (inner) voices. She knew the difference between the *speech* of another human and her *own thoughts*. The voices were strange occurrences that were separated from her as a person:

Thoughts I have inside me. I know that the thought is mine; yes, I absolutely feel it, when I am thinking that thought. But the voice I feel, that is absolutely not mine; I feel that it is not mine, and that it is a voice inside me. I know for sure that it is someone else's voice. It is not integrated in my self. Or that I hear from outside; I mean, that I know when you talk and when I think.

Here Anna is trying to define the two phenomena using ordinary language, with the prepositions *inside/outside*, possessive pronoun *my/mine*, with the opposing concepts of *to feel* and *to know*. Her point of departure is her *I* and her *me* which could decide whether a voice belonged to her or not because it was *inside* or *outside* her *self*. If a voice belonged to her, it was a thought, and if not, then it was a voice.

Destructive voices were sometimes related to *compulsive thoughts*. For example, Peter was unsure if he heard voices, i.e. 'something that talked in his head', or if he experienced obsessions. To summarise, we can say that (inner) voices and thoughts had different origins. The voices were strange and the thoughts belonged to the self. Usually the participants were sure that they heard voices that 'came from the outside'. They could distinguish between them and their own thoughts. But sometimes they described the voices as compulsive thoughts or as resembling feelings.

To experience voices without hearing them

Some of the participants commented that they really heard voices in the same way as they heard people talk. Others heard their voices in the same way as they

'heard' their thoughts. Still others did not want to say that they heard either the one or the other, rather that they experienced strange thoughts or perceptions.

Some participants could even experience 'voices' with their other senses, e.g. by sight, or they could sense them in a certain part of the body such as the stomach or the back. Eve said that she sometimes apprehended unfamiliar thoughts that did not come from herself, but were 'something from the outside that was communicating' with her. They were more experienced than heard, like pulsating messages in her bloodstream. Anna distinguished between speaking voices, which she called hearing-voices, and experienced voices. She described how her dead mother sent messages through her gazes: She 'spoke to me through her eyes, with expressive eyes, [. . .] something like just before a *car crash* when you experience your whole life [. . .] through one gaze she could say twenty sentences to me'. Anna experienced a sensory impression that influenced another of her senses, i.e. she *saw* her mother's 'ghastly' voices. The voices could also communicate through pictures or strips of text, which, for the participants, indicated how creative the voices were.

Some participants had experiences of receiving signals in their back, which Martha called 'a rush' that always came as a 'confirmation'. Others received answers from their voices through bodily signals. Samuel not only heard but also communicated with his voice during an existential crisis: 'If I've heard right, [the voice answers] with a soft embrace, then I get all warm inside'.

Although the 'voices' did not always communicate through hearing, but were 'experienced' in the body or by other senses, they were considered to be voices since they were apprehended as coming from the outside and not belonging to one's own self. This could be interpreted as having a special awareness of or sensitivity to inner and bodily perceptions. Thus, to be able to communicate with and interpret (inner) voices requires creativity, or kind of magical thinking.

Relationship with the voices

The participants described their relationships with the voices. Sometimes the voices were depicted as 'life-long companions' or as 'tormentors' who commented on or governed everything the voice hearer did. The communications of the voices were considered very personal and sometimes obtrusive. They were either destructive or constructive. They could criticise, belittle, command or use abusive language. The voices were also characterised at times as being tiresome, even painful, not least during psychosis, which could create inner chaos and the need for psychiatric care. Then the voice hearer was prevented from living an ordinary life in 'reality' or the real world.

But voices could also be companions, or a help or comfort to the voice hearer; they could alleviate suffering, tell truths or predict the voice hearer's future or the future of other people. They gave advice or were supportive in difficult situations, such as giving reminders or even providing arguments against prescribed medications. They were sometimes regarded as being fascinating in that they came from earlier unknown worlds. But the participants also said that they sometimes felt ambivalent towards the voices.

Because of pain caused by a back injury, May often preferred to sit in a certain way that could be regarded as indecent, and which the voices commented on:

I love to crouch down or fling one leg up on the table or do something like that, which is not house-trained, but then that's when I sit quite comfortably, or to put my feet up on the backrest. But I've learned during my life that I shouldn't do this, it provokes people. [. . .] So I've thought that it might be memories from the past that have gone together in two voices, that I will recognise them.

The voices expressed what other people had earlier pointed out to her. They also reminded her that other people thought her arrogant. May thought that what the voices expressed was not coincidental, but wondered if her two voices could be 'memories from the past', i.e. the voices expressed in present time what May had experienced earlier in life. Earlier experiences that had influenced her emotionally made their presence known through the voices. The voices tormented her so that she would not forget that she was not allowed to behave in a certain way or to sit as she liked. May's reasoning elucidated what happened to her and why she heard voices. Her past offered a solution.

The voices influenced not only how the participants regarded their past, but also how they saw their future. For Patricia, it was a question of 'reappraising what (one) earlier felt important'. She described her experience as 'becoming a whole human being', which she tries to accomplish by changing her attitude towards life. For Anna, hearing voices was 'unavoidable'; she 'became complete' as a human being. She had to go through the voice hearing in order to get through the traumatic experiences of her childhood; 'the psyche knows best what it needs, and if it needs voices then you get voices. I needed voices.'

The voices of Yolanda came during a life crisis, after she had separated from her boyfriend. The voices started because she had to 'observe that the body was so tired'. She had to take hold of the pain she had felt during childhood as the only child of alcoholic parents. The voice hearing became a way of developing an inner strength. There is a meaning why people hear voices, she thought, which in her case was related to her body, and the voices strengthened her to enable her to believe

in other people. She thought that 'the body makes things' so that in the future she would be able to 'survive':

I believe that the body makes things because you have to change something; you have to do something in order to survive, in the future. There is a reason why you hear voices. There is a reason why you are psychotic; me, I believe that the voices were so bloody evil, that it has very much to do with [. . .] that you have to dare to trust other people. I dare to trust that when you say you're going to serve me pancakes, you want to do it, and that you will do it.

Voice hearing is a continuum of experiences

According to the participants, inner voices could be heard without the person being psychotic. They were experienced as real, sometimes even as 'more real than reality'. To be psychotic, on the other hand, did not always mean that one was enclosed in one's own world. Patricia thought that she was in a special state 'of enormously sharpened senses' when she heard and saw what normally is impossible to discern, e.g. what other people at a long distance from her were talking about or what others were thinking. This state was excruciating since it meant 'tremendously [many] impressions'. Samuel said that the voices reinforced his senses 'more than normal', so that he experienced, e.g. all colours, more intensely. Anna said that during a crisis in her life she received extra sensory information and could more clearly perceive the body language of other people. Because of her vulnerability, or 'skinless' state, Anna was overpowered by information, which meant that she 'took inside other channels than what ordinary people do'.

For Lily, her psychosis meant 'an awakening'. She could communicate with the voices, which sometimes initiated communication. They were then 'just as real as any human being'. At the same time, there was something unreal about it; 'I still have to pinch myself because life is working in this way'. Ida thought that during her psychosis she found herself 'in her own world'. She came into 'another kind of reality than what reality is', and she used an analogy to understand what was happening; it was 'almost like dreaming during the daytime'. But to dream is different, after all, from voice hearing, which Martha made clear when she said that early one morning she woke up with her whole body in pain and then heard a voice. She explained that she was 'completely awake, so it was not a question of dreaming; I dream a lot and I know what dreams are'. Thus, with the exception of Eric, all the participants heard their voices while awake. Eric heard them in his dreams as well.

Hearing voices was considered to be a subjective experience, but also a real phenomenon. The voice hearers did not say that they heard or saw phenomena

that did not exist, but that they could fall into an unusual state of great sensibility. Several of the participants related their experiences to 'reality', as something opposite to a fantasy or which could be rejected as a lie. The reality was that the phenomena really existed. They made their presence known, they were even importune. To hear voices was not an unproblematic experience. It meant moving into the outer edges of what human beings can 'really' perceive with their senses. It also has to do with taking a stand as to whether one should take part in other worlds and whether, then, this meant that one was crazy or not, especially if one continued to assert that it really was voices that spoke. The participants considered inner voices to be realities, even as 'more real than reality'. The voices could have other qualities/characteristics than the experiences of everyday life. Then they belonged to 'another reality'.

Voice hearing is a continuum of experiences

The talks in the focus groups showed that voice hearing is a complex phenomenon with many different aspects. The participants used ordinary language to order and give meaning to their experiences and, in this context, started from their bodies. Sometimes the descriptions of the voices resembled each other, sometimes not. There was no consensus on how the voices should be defined other than that they were experienced as unusual, strange and coming from the outside, regardless of whether they were perceived in one's own body or were heard through the ears. Voice hearing can be understood as a continuum of various experiences, including thoughts about the self, the inner and the outer world (see Figure 1). The voices could come from the outside, from the outer world, and then they belonged to others – living or deceased people or strange entities. They were not recognised as belonging to the self of the voice hearer, but could manifest themselves in the body as physical messages or in the mind as thoughts or feelings.

The participants described how the voice hearing was enacted in another reality, or in an enclave of the ordinary life that the participants spiritually visited. Then the (inner) voice was considered to be an existence with whom they met or communicated. Yet the participants always returned from the world of the voices to everyday life. When the voice hearers spoke about a voice, they found themselves in the ordinary world, while they, at the same time, made a leap back into the world of the voices. The human being lives both in an outer world in time and space and in an inner world (Schutz, 1962). Some voice hearers cross over the border between the different worlds, e.g. when they step across the threshold of their home and then hear the voices. For others, the voices began speaking as soon as they woke up. The voices came when the voice hearers were alone, and could sometimes make them

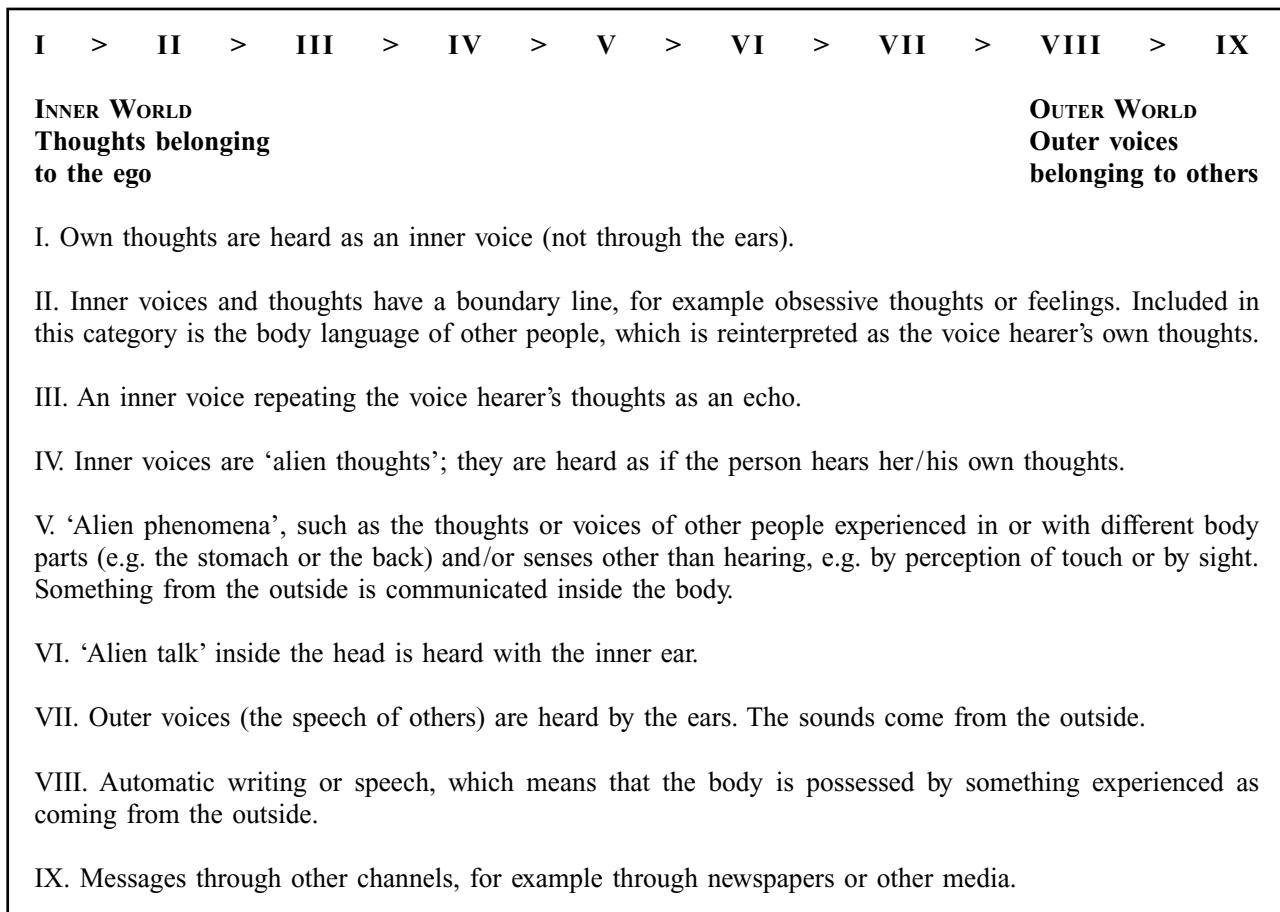


Figure 1. Continuum of voice hearing.

feel even lonelier since they prevented communication with other people. The passage between the worlds could be shocking. The participants described how the voice hearing was enacted in another reality or enclave apart from ordinary life, which the participants spiritually visited. Then the (inner) voice was considered to be an existence that they met or communicated with.

From the stories of the voice hearers, a continuum can be constructed, running from *an inner world* where the voices belonged to the self, to *an outer world* where the voices belonged to others. All the experiences of the participants (see Appendix) can be placed on the continuum. At one end of the continuum are the cases where the person's own thoughts are heard as 'inner' voices (I)¹. Several of the cases were difficult to place because they were in-between; it was unclear if the voices were obsessive thoughts or feelings (II). The voices could also repeat the thoughts of the voice hearer (III). Sometimes 'alien' thoughts were experienced that were clearly separate from the thoughts of the person him/herself (IV). Several participants also spoke about a strange phenomenon that was situated in different

parts of the body, and it was obvious that someone or something from an outer world was communicating with them (V). Strange speech could be heard either inside the head or with one's 'inner ear' (VI), or as something coming from the outside and heard with the ears (VII). Messages from the outer world could be mediated through voices that took possession of the body of the voice hearer, so that s/he could speak or write words or sentences unrestrained (VIII) or they were expressed as messages in the media (IX). The latter two variants were not characterised as voice hearing, but as related phenomena since they were alien messages that were manifesting themselves. Voice hearing can thus be considered to be a continuum of different experiences which thoughts about the self and the inner and outer world encompass.

Conclusion

The voice hearers wanted to know the nature of the phenomenon they had to cope with, and they often compared it with other related phenomena. The participants could place their voices in an inner or an outer world or on the border in-between, and they all felt the voices to be real. However, the voices could

¹ The roman numerals indicate the position on the continuum in Figure 1.

have other qualities that distinguished them from everyday experiences and that belonged to another reality. Voice hearing forced the participants to get to know themselves because they had to observe inner processes in the body and the mind. They had to pay attention to what was happening to the body – that something could be perceived, felt or heard physically. They were aware of the struggle between inner parts that were at times in conflict. The voices could also articulate objectionable views or stir up unpleasant memories. Perhaps the body knows what it needs best, or as Yolanda in this study expressed, ‘the body does things in order to force you to change it’. The voices were born in the voice hearer so that s/he would have the possibility to experience repressed memories anew. The participants met their voices – when they dared to listen to them. Voice hearing can be such an overwhelming experience that it is even experienced as ‘more real than reality’. Voices are strong and powerful experiences that convey memories from the past or difficulties that the voice hearer would prefer to forget, but in fact has to confront. Strong or traumatic memories were, in other words, embodied.

Voice hearing can be considered to be both a mental act and a bodily act. The person finds her-/himself in a special state of voice hearing, while the mind is in another ‘world’. The voice hearer is a body subject where her/his whole being, both mind and body, is affected and has to cooperate. The participants in the present study spoke, above all, about when they experienced voice hearing as problematic and when they needed help to get into the special state where they were in touch with knowledge of the mind and body.

Blackman (2002), Csordas (1994) and Thomas et al. (2004) have studied voice hearing using the concept of embodiment as a point of departure, but from somewhat different perspectives. Blackman (2002) considers the concept of embodiment to be a synthesis of biology and psychology. Thomas et al. (2004) regard embodiment as having to do with how a person relates to time and how s/he experiences it, not least through the body. Csordas (1994) understands embodiment as bodily experience, as the existential ground of the human self and culture. Future research on voice hearing should develop the concept of embodiment by analysing personal narratives about hearing voices, i.e. study if the voices embody earlier memories and how they are connected to the voice hearer’s cultural and social settings.

This study contributes to our knowledge of the world and language of voice hearers from the perspective of social work. The data show that the participants in the study struggled with their voices, but they were not passive victims; instead, they actively explored their experiences. The talks in the focus groups also seemed to inspire the participants. It was irrelevant whether others considered the voices unreal or not, since they

were real to the participants. Whether the voices were pathological or not in a biomedical sense seemed irrelevant, too. The participants were doing on their own what inspired social workers should be helping their clients to do, i.e. to explore their inner world. The data show that it is possible to talk about such a personal experience as voice hearing. This should inspire social workers to be prepared to explore in partnership the voice-hearing experience. This is important because of the conventional stigma attached to voice hearing and the notion that the phenomenon is incurable or debilitating. Clients need help from informed social workers to help them communicate their experiences. A concrete way of doing this is to set up self-help groups for voice-hearing clients and/or to put people into contact with networks for voice hearers. It is hoped that this article will inspire an empathetic stance to help people cope with their voices in everyday life.

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Appendix: The participants in the groups and the character of their voices

Focus group 1. Male and female (ex-) patients; secularised voices

- Alex:** heard patronising impersonal voices.
Anna: heard and saw spirits and deceased relatives (also took part in FG 3).
Eric: heard pestering and evil voices.
Iris: heard impersonal voices and deceased relatives' voices.
Karl: heard occasional loud sounds and laughter.
Thomas: heard voices during a life crisis.

Focus group 2. Male (ex) patients; secularised and religious voices

Peter: heard 'telepathic' voices, both good and evil, that resembled obsessive thoughts.

Fred: heard both good and evil voices.

Mark: heard pestering and imperative voices.

Sven: heard evil voices.

Tobias: heard rude and evil voices.

Focus group 3. Female (ex-) patients; secularised and spiritual voices

Anna: heard and saw spirits and deceased relatives (also took part in the FG 1).

Eve: heard 'telepathic' voices in her bloodstream.

Louise: heard 'telepathic' thoughts and messages.

May: heard two female voices that continuously commented on her everyday life.

Yolanda: heard voices during a life crisis.

Focus group 4. Male and female (ex-) patients; religious voices

Ida: heard voices during a life crisis.

Samuel: heard voices during periods of mania.

Patricia: heard voices during her (pre)psychosis.

Focus group 5. Female non-patients; new-age inspired voices

Lily: heard voices during her spiritual reorientation.

Martha: heard voices during a long period.

Nina: heard voices on only a single occasion.

Rebecca: heard the voice of a spirit or an inner guide.