“Ordinary people with extraordinary lives”
Epidemiological research on voice hearing

Eleanor Longden
World Hearing Voices Congress 2011
What do the following have in common?
One Out Of Four People In This Country Is Mentally Unbalanced.

Think Of Your 3 Closest Friends... If They Seem Okay, Then You're The One.
Eleanor LONGDEN (continued)

and deliberate self-harm.

Mental state examination on admission: Mood – objective, reactive; subjective, “despairing”, “hopeless”, fearful about future and of unspecified threat of harm. Abnormal experiences – reports auditory hallucinations, including Schneiderian-type voices and command hallucinations. Some evidence of delusional ideation regarding the origin of these voices, which she claims are possibly
Schizophrenia (and voice hearing) in DSM-IV

Diagnosis requires two of the following:

1. Hallucinations
2. Delusions
3. Thought Disorder
4. Catatonia
5. Negative Symptoms

Or just one if voices are commenting and/or conversing or delusions are ‘bizarre’
Emil Kraepelin (1856 – 1926)

• His research with *dementia praecox* was the precursor for schizophrenia.

• Voice hearing was not “a principle attribute” of dementia praecox.
Eugen Bleuler (1857 – 1939)

- Bleuler coined the term ‘schizophrenia’ in 1911.
- He minimised voice hearing even more than Kraepelin.
- Voice hearing was a by-product of “loosened associations,” not a major psychotic symptom.
Kurt Schneider (1887 – 1967)

• His “first-rank symptoms” are still used for diagnosing schizophrenia (e.g., “Schneiderian-type” voices.)

• However, agreed with Kraepelin and Bleuler that voices were not “crucially important features” of schizophrenia.
Voice Hearing in Human History

Socrates
(469BC – 399BC)

Joan of Arc
(1412 – 1431)

Teresa of Ávila
(1515 – 1582)
Julian Jaynes

“The Origin of Consciousness in the Breakdown of the Bicameral Mind”

- Voice hearing and the evolution of human consciousness?
- Self-awareness and introspection.
Voice Hearing and Spirituality

• Ancient civilisations
• Islam
• The Judaeo-Christian tradition
• Spiritualism
• Shamanism

Scenarios Where Voices Might be Heard ….

- Before falling asleep or waking up
- Bereavement
- Hypnosis
- Meditation
- Imaginary childhood companions
- Solitary confinement
- Using certain drugs (e.g., cocaine, amphetamines)
- Sleep deprivation
- After general anaesthetic
- Having a fever or high temperature
- Spiritual experience
Samples From the General Population

<table>
<thead>
<tr>
<th>Investigators</th>
<th>Sample &amp; Location</th>
<th>Psychosis Screening</th>
<th>Dimensions of Voice Hearing</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sidgewick et al. (1894)</td>
<td>17,000 (UK, Russia, Brazil)</td>
<td>Yes</td>
<td>“Hearing a voice which is not due to any external physical cause”</td>
<td>3%</td>
</tr>
<tr>
<td>Eaton et al. (1991)</td>
<td>810 (USA)</td>
<td>Yes</td>
<td>“True” psychiatrist-rated hallucinations</td>
<td>5%</td>
</tr>
<tr>
<td>Verdoux et al. (1998)</td>
<td>462 (France)</td>
<td>Yes</td>
<td>Audible human speech from a single voice; one or more voices conversing; voices commanding</td>
<td>5 – 16%</td>
</tr>
<tr>
<td>Tien (1991)</td>
<td>18,000 (USA)</td>
<td>Yes</td>
<td>“A vivid impression of hearing a voice which is not due to any external physical cause”</td>
<td>2 – 3%</td>
</tr>
<tr>
<td>van Os et al. (2000)</td>
<td>7,076 (Netherlands)</td>
<td>Yes</td>
<td>“True” psychiatrist-rated hallucinations</td>
<td>8%</td>
</tr>
<tr>
<td>Johns et al. (2002)</td>
<td>8,000 (UK)</td>
<td>Yes</td>
<td>“Voices saying quite a few words or sentences when there was no one around that might account for it”</td>
<td>0.6 – 3%</td>
</tr>
<tr>
<td>Preti et al. (2007)</td>
<td>250 (Italy)</td>
<td>Yes</td>
<td>“I have been troubled by hearing voices in my head”</td>
<td>3 – 6%</td>
</tr>
</tbody>
</table>
## Student and/or Adolescent Samples

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<tr>
<td>Posey &amp; Losch (1984)</td>
<td>375 (USA)</td>
<td>Yes</td>
<td>Hearing: whole phrases; voices speaking one’s thoughts aloud; an absent friend or the voice of a dead relative; God’s voice; a comforting or advising voice; conducting conversations with voices</td>
<td>5 – 39%</td>
</tr>
<tr>
<td>Barrett &amp; Etheridge (1992)</td>
<td>586 (USA)</td>
<td>Yes</td>
<td>Hearing the following: whole phrases; voices speaking one’s thoughts aloud; an absent friend or the voice of a dead relative; a conversation whilst driving</td>
<td>6 – 37%</td>
</tr>
<tr>
<td>Dhossche et al. (2002)</td>
<td>914 (Holland)</td>
<td>Yes</td>
<td>“I hear sounds or voices that other people think aren't there”</td>
<td>5%</td>
</tr>
<tr>
<td>Glicksohn &amp; Barrett (2003)</td>
<td>656 (Israel)</td>
<td>No</td>
<td>Hearing the following: whole phrases; voices speaking one’s thoughts aloud; an absent friend or the voice of a dead relative; the voice of God; a conversation whilst driving</td>
<td>9 – 28%</td>
</tr>
<tr>
<td>Pearson et al. (2008)</td>
<td>500 (UK)</td>
<td>No</td>
<td>Hearing the following: whole phrases; voices speaking one’s thoughts aloud; an absent friend or the voice of a dead relative; the voice of God; a conversation whilst driving</td>
<td>2 – 41%</td>
</tr>
<tr>
<td>Horwood et al. (2008)</td>
<td>6356 (UK)</td>
<td>No</td>
<td>Auditory hallucinations in a conscious state, including Schniederian-type hallucinations</td>
<td>3.6 – 11.6%</td>
</tr>
</tbody>
</table>
“The prevalence of voice-hearers in the general population: A literature review”
Beavan et al. (2011)

“These findings support the current movement away from pathological models of unusual experiences and towards understanding voice hearing as occurring on a continuum in the general population, and having meaning in relation to the voice-hearer’s life experiences.” (p.281)
Hearing Voices and Human Variation

*Data limited to Western, industrialised nations*
So…do Different “Types” of Voice Hearing Exist?

• No! There are no valid associations between voice characteristics and diagnostic categories.

• For example, see: Adams & Sanders, 2011; Barrett & Caylor, 1998; Honig et al., 1998; Jessop et al., 2008; Kingdon et al., 2010; Longden et al., in press; Moskowitz & Corstens, 2007; Scott et al., 2007.
Distressed and Non-Distressed Voice Hearers

Traumatic life events are a common feature for both patient and non-patient voice hearers.

• However, non-patient voice hearers:
  – Are more likely to engage with their voices (even if the content is negative).
  – More likely to accept voice presence.
  – More likely to have developed coherent, meaningful explanations for their voices.
  – More likely to have resolved and worked through the reasons for voice presence (e.g., childhood abuse).
  – e.g., Andrew et al., 2008; Honig et al., 1998; Longden et al., in press; Romme & Escher, 1993, 2000, 2010; Romme et al., 2009.
Voices symbolize both the crisis - and efforts to overcome it.

- *Deconstructing* “symptoms” into real experiences and conflicts.
- Relating voices to individual *solvable* problems.
“[Hearing voices is] an experience that, when considered in good faith, is as profound and complex as human consciousness itself.”

Smith (2007)
"Actually, I became a psychiatrist because the voices told me to."
Further Reading


