Abstract

Purpose – This Research Watch seeks to summarise two recent research papers. The first examines the case for understanding hearing voices as part of normal experience, while the second looks at befriending schemes.

Design/methodology/approach – A search was carried out for research papers with a mental health and social inclusion focus published within the previous 12 months.

Findings – Studies spanning more than 100 years suggest that hearing voices is more common than usually thought. There is a case for viewing this experience more positively than at present. Interviews involving eight people with mental health conditions and their befriencers suggested that demonstrating empathy and being non-judgmental helped people with mental health conditions to talk things through with both parties learning from one another. Going out together helped befrienees gain greater confidence to participate in further activities and feel less isolated.

Originality/value – This paper summarises research relating to mental health and social inclusion that has emerged within the previous 12 months.

Keywords Hearing voices, Mental health services, Befriending, Social inclusion

Paper type Research paper

Hearing voices is very rare . . . or is it?

Beavan et al. (2011) start by pointing out that people usually think of hearing voices as very rare and that it must indicate a mental health condition. They set out to test these assumptions by drawing together findings from a number of studies, including one as far back as 1894. A major issue was to try to understand why different studies have quoted such vastly different proportions of people hearing voices, ranging from 1 to 71 percent!

The authors defined hearing voices as when someone hears a voice that others cannot hear, but not when they see, feel or smell something without hearing a voice. The voice had to sound like a real voice, rather than the thoughts we all “hear” in our heads. They identified seventeen studies that covered experiences fitting these criteria.

Older studies done by people interested in ghosts were less reliable

The oldest study was by Sidgwick et al. (1894) and included an impressive sample of 17,000 people, most of whom were resident in the UK. However, Beavan et al. (2011, p. 283) suggest that this study may have been biased as “many of the interviewers belonged to the Society for Psychical Research.” Many Society members may have lacked a sufficient degree of scepticism about reports of ghostly and paranormal phenomena. Sidgwick et al. (1894, p. 283) reported that 3.6 percent of this sample heard “human voices when in a conscious wakeful state.” A similar study by West (1948) reported a figure of 8 percent, but was also biased: some interviewers only included people who said they did hear voices, which would make their sample unrepresentative of the wider population.
The number hearing voices depends on the definition, but distress is not common
Where studies used the tightest definition of hearing voices (excluding experiences when on
the edge of sleep, intoxicated, experiencing psychosis, noisy environments, and so on),
estimates were generally lower (2-4 percent). It appears, however, that individuals in these
studies tended to report being unconcerned by their experiences. At the other end of the
spectrum, where the definition of voice-hearing was wider, most people had some
experience of it, for example, a staggering 84 percent of a sample of 55 mental health nurses
in the USA (Millham and Easton, 1998).

Ethnic background seems to make a difference
Several studies suggested that minority ethnic groups were slightly more likely to report
hearing voices than majority populations, and studies undertaken in some countries around
the world also reported higher rates. For example, 17 percent of people originating from
Brazil but residing in the UK reported voice hearing in the Sidgwick et al. (1894) study, while
13.3 percent of residents who lived in a village in the Philippines heard voices and 21 percent
reported visions (Jocano, 1971). Beavan et al. (2011) point out that some cultures value
these kinds of experiences, in contrast to negative media portrayals of them in Western
societies.

Hearing voices is more common after loss and trauma, but not intrinsically linked to
mental distress
Beavan et al. (2011) discuss two studies of bereaved people: the proportion of people
hearing the voice of the person recently lost was 30 percent within one month of the loss
(Grimby, 1993), and decreased as time went on. Rees (1971) reported a similar pattern.
Regarding trauma, Beavan et al. note that people who have experienced sexual abuse and
traumatic events are more likely to hear voices, and also that psychosis is associated with trauma. However, they discuss several studies showing that psychosis and hearing voices are not correlated (Barrett and Etheridge, 1992; Dhossche et al., 2002; Johns et al., 2002; Posey and Losch, 1983). That is, experiencing psychosis and hearing voices can happen separately as much as or more often than they happen together. People can also hear voices that do not distress them. Thus, hearing voices is not an intrinsic part of severe mental distress. Beavan et al. (2011) suggest that this should be more widely known so that stigma can be reduced. This might leave open the possibility of still stigmatizing mental distress, which of course, should not be stigmatized, but neither should hearing voices.

The value of befriending schemes
In their paper on befriending, Mitchell and Pistrang (2011) begin by explaining that research
suggests good outcomes for befriending schemes, but this does not tell us how these results
come about. Befriending schemes often involve volunteers, who are paired with someone
with a mental health diagnosis with whom they have common interests, and they meet
regularly to enjoy activities together. Mitchell and Pistrang (2011) report on one controlled
study suggesting that 72 percent of women with a diagnosis of depression became
symptom-free when they had a befriender, compared to only 39 percent of women on a
waiting list (Harris et al., 1999). Another large controlled study (Davidson et al., 2004, p. 152)
also suggested “improvements in functioning and self-esteem.” Mitchell and Pistrang set
out to find out more about what happens during befriending, as opposed to the outcomes,
by undertaking a qualitative interview study with eight pairs of befriender and befriended.

Befrienders and befriended who took part in the study
Service users in Mitchell and Pistrang’s (2011, p. 154) sample reported experiencing the
following conditions: personality disorder (two people), depression (three), paranoia (two)
and one described a “nervous disposition.” Three of the befrienders also had experienced
mental health problems. The pairs came from five different befriending schemes across
London, and pairs had been meeting for at least four months, with the longest relationship being two years. All the schemes involved befrienders and befriendees committing to meeting once per week for at least an hour, for about a year, and none of the befrienders had professional mental health training.

How the befriending study was done

One author (Mitchell) interviewed each befriender and befriendee separately and then together. The interviews were audio-recorded, the recordings later transcribed and then analysed. The method of analysis used was thematic analysis (Braun and Clarke, 2006). The other author (Pistrang) also examined the transcripts and analysed some of them separately so that the two authors could compare notes and be open to differing interpretations of the data. Mitchell and Pistrang (2011) explain that although their themes came from the data, at a later stage they did use pre-existing concepts to organize them. This is sometimes done in thematic analysis, and the authors make the case for using the pre-existing concepts on the basis that they have helped us understand a variety of supportive and therapeutic relationships. Although Mitchell and Pistrang (2011, p. 156) do not specifically mention looking for evidence challenging these pre-existing concepts, they do mention looking for ‘’negative case examples.’’ One can assume that if such examples were found, then themes would have been modified in order to respect what came from the data rather than imposing themes onto it that do not fit.

What did the study find out about befriending?

Mitchell and Pistrang (2011) found themes that fitted the previous concepts regarding helpful relationships: that the quality of the relationship is important, that new meanings are found, and that positive changes happen.

The relationship: empathy, safety, friendship, and an eventual end

Empathy seemed to be central for both befrienders and befriendees, but seemed easier for befrienders who had themselves experienced the mental health system. However, it was also recognized that having experience that was too similar might be a disadvantage because of possible loss of perspective. The befriending relationship felt safe for befriendees because it was non-judgmental, allowing them to open up, and there was support from the scheme for both parties. Befriendees felt that befrienders were different from friends and also from professionals, but they were “quite like a friend” (p. 159). For both parties there was a sense of building their friendship, although one befriender did not share the view of his befriendee that they were friends, retaining a clear view that the befriendee was a “client” (p. 160). This fitted with a general sense from befrienders that they had their boundaries and there were limits to what they would disclose, because the relationship was for the befriendee’s well-being rather than their own. There was some anxiety in both befrienders and befriendees about the relationship ending, although this was also seen as potentially a sign of making progress.

Meanings: putting things into words, new perspectives, and learning

Being able to put things into words seemed to act as a “release” (p. 161) for befriendees, in the view of both parties, preventing things from building up. Befrienders seemed adept at enabling befriendees to see new perspectives, by using gentle enquiry, which befriendees seemed to appreciate. Mitchell and Pistrang (2011) point out how this differs from findings of previous research on the role of friends and family (Barker and Pistrang, 2002, p. 165), where there was a lot of advice-giving, which was “often not welcome or effective.’’ Of course, it is worth considering the possibility that these friends and family may not have had appropriate support or guidance for the role of informal carer in which they found themselves: a number of studies have examined this issue (Foster, 2011; Goodwin and Happell, 2007). Befrienders with and without prior mental distress experience said that they learned from the relationships, either gaining increased understanding of what it is like, or for someone who had his own experiences, coming to reassess these.
Change: doing more and experiencing a good relationship

Not only did befriendees talk about starting to go out more with the befriender, but developing more confidence and motivation to do things on their own, as well as feeling less isolated. For some befriendees, it was an opportunity to have a new kind of relationship that they saw as “healthy” (p. 163). One person felt that having “a relationship with someone other than service users” (p. 163) helped prevent readmissions because the befriender was not part of the usual set of friends.

Mitchell and Pistrang (2011) remind us that this was only a small sample, and might not represent other befriender schemes and experiences of people in them. Also their participants could possibly be those who had the most positive experiences: others with less positive experiences may not have taken part in the study. However, their study seems to illustrate some important issues relating to the process of befriending that can only be uncovered by an in-depth qualitative approach.

Summary and conclusions

Voice-hearing can be associated with mental distress and be very distressing. However, this co-occurrence seems the exception rather than the norm. Hearing voices does not appear to be central to mental distress, and can be an ordinary or positive experience for many. Befriending schemes can offer the possibility of a more equal relationship than those with professionals, while also offering something different from family and friends, although it may be worth considering whether the type of support given to befrienders may equally help those family and friends who are genuinely committed to supporting people but who do not know the best way to do so.

References


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