Hearing voices: What can we learn from them?

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OPINION PIECE

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This article is an exploration of how auditory hallucinations have been experienced as meaningful to individuals diagnosed with schizophrenia. This perspective is supported by the survey of the literature, which suggests that for many centuries, individuals experiencing auditory hallucinations have been given much more credence than their counterparts in modern society. Using case studies from the author’s own work, as well as drawing from other researchers and theorists, the article provides concrete illustrations of how individuals have derived insight from their auditory hallucinations.

Keywords: hallucinations; hearing voices; schizophrenia

Note: Names and identifying information have been changed to protect identities. I have received permission from my client for the quotes to be included.

In the Fall of 2008, Lisa walked through the doors of my private clinical practice. A 28-year-old female, she was diagnosed with paranoid schizophrenia and was told that she had an incurable disease for which she was to be dependent on a lifetime of medications. Lisa had active auditory hallucinations, most of which were horrifying and disturbing. She would often hear voices saying, “Kill yourself, kill yourself.” In her initial description of her auditory hallucinations, she said:

They were very terrorizing to me. I was raised a real strict Catholic so I thought maybe it was the devil or something like that. And I couldn’t understand them; I couldn’t understand why I was hearing voices to kill people, to kill myself, my mom and my younger sister.

As we worked through the voices and what they possibly meant to her, she discovered that the voices were a disembodied part of herself; feelings of guilt and anger that she had suppressed for several years. She realized that the voices were invariably trying to communicate to her feelings that she was unable to articulate. They were a reflection of her profound anger with herself, and anger with her family for not allowing her to be herself during her adolescent years. Through intense clinical work and therapy, we discovered that in commanding her to kill herself, the voices were actually instructing her to kill the parts of herself that were outraged by all that she had suffered as a young child. When she was able to understand and integrate this, the voices gradually faded away, although they re-surface when under great stress as a reminder to protect herself and be aware of her present circumstances.

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The significance of this vignette can be understood from its impact of exploring and understanding auditory hallucinations or voices at a deeper, more symbolic level. Lisa was able to make sense or meaning of her voices and utilize them to her advantage. As she said during our final weeks of clinical work:

I was able to look at them in a new way and see that they were actually trying to warn me; they were trying to make me aware of things that weren’t going right, the anger and the stuffing, etc. They were trying to make me aware ...

This idea – of finding meaning or value in the voices – is of grave relevance in a country, such as the USA, where schizophrenia is one of the most prevalent psychological illnesses. According to the National Institute of Mental Health (NIMH) (2008), approximately 2.4 million adults are diagnosed with schizophrenia. Many of these individuals have dealt with their voices by eliminating them via neuroleptic medications. Like Lisa, that is what they have been led to believe: medications are the only route in eradicating auditory hallucinations, a phenomenon that is considered irrelevant and meaningless in an individual’s life.

However, a small but growing number of researchers believe otherwise. These theorists and researchers promote a more holistic view of auditory hallucinations, suggesting that they are a significant part of the individual’s experience, and therefore should not be eliminated. The proponents of this paradigm include Bentall (2003), Dorman (2003), Hornstein (2009), Jung (1989), Laing (1960), Romme and Escher (1993), Smith (2007) and Steinman (2009), among others. These individuals have indicated that auditory hallucinations may have a purpose in a person’s life, and may have meaning or relevance for the individual concerned. The most current literature has been based on the work of Romme and Escher (1993), and is pertinent in attaining a broader understanding of the value or meaningfulness of auditory hallucinations. Romme and Escher (1993), on speaking of the importance of accepting auditory hallucinations states:

hearing voices has been considered solely as a symptom of illness, and the psychiatric intervention has paid no attention to the possible meaning of voices to the patient’s life history. (p. 8)

The above concept is further illustrated through the words of the American psychiatrist Dorman (2003), who describes his patient Catherine Penny. Penny was diagnosed with schizophrenia at the age of 17. On his experiences regarding Catherine’s auditory hallucinations, Dorman states, “her voices were not just hallucinations – meaningless symptoms; they spoke the rage she dared not acknowledge” (p. 242).

The exploration of auditory hallucinations in schizophrenia, as being meaningful, has two implications. First, the simple act of acknowledging that auditory hallucinations may have some meaning or symbolism in the individual’s life can be healing or therapeutic in and of itself. As Hillman (1977) points out, we need to approach the concept of auditory hallucinations afresh. In fact, he describes symptoms, such as auditory hallucinations, as the psyche’s yearning to heal and says that pathology, in the deepest sense, speaks to “the psyche’s autonomous ability to create illness, morbidity, disorder, abnormality, and suffering in any aspect of its behavior” (p. 57).

Second, in merely acknowledging and exploring auditory hallucinations or voices, it may be expected that the individual may develop a relationship with their auditory hallucinations, making it part of their recovery process from schizophrenia. It is
crucial to state that recovery does not necessarily equate to cure, but is more related to the individual developing a new understanding of his/her life circumstances, and living a satisfying and hopeful life (Anthony, 1993).

The exploration of auditory hallucinations is gaining more momentum and acceptance than it did a decade ago. However, it needs to be delved into and researched a lot further. As Gray (2008) states, studies of auditory hallucinations, particularly in schizophrenia, have been very limited. He encourages more qualitative studies because that would provide an avenue for understanding auditory hallucinations as “more valid and meaningful” (p. 1006).

Based on the existing research and evidence, isn’t it about time we re-view auditory hallucinations as a possible clue to the human psyche instead of simply dismissing them as a pathology?

References


