



What Is Psychosis? What Is Schizophrenia?

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Key Points

1. Psychotic symptoms can be very understandable.
2. They can also lead to distress and be long-standing.
3. Psychosis covers quite a range of experiences and has a variety of causes.

Why Does Understanding What Psychosis Is Matter?

When unusual experiences or distressing feelings occur, understanding what they are helps in developing confidence and working out what best to do to cope with them.

Life can be confusing at times, stresses can weigh in and motives can be difficult to understand. Sounds can be misheard and strange things seem real but then may fade away. Anybody can make a mistake, but usually we can recognise that mistakes have been made and we can then change our mind. Sometimes though, the belief takes root and seems to be confirmed by other things that are going on. We tend to seek information that confirms what we believe rather than what goes against it, and this can make it even more likely that we hold on to beliefs that may not add up.

It also seems that our mood affects this. So if we are depressed, we think negatively; if happy, positively; if feeling suspicious or unsafe, then what we think fits with that – people are not on our side. We don't talk about being a bit psychotic very often, though often use terms like a 'bit crazy or mad'. With some circumstances, we are a bit 'paranoid' or 'we must be hearing things' might be said. We could be getting a bit muddled or mixed up or getting the wrong end of the stick. It's quite common to mishear things – for example, a humming sound can sometimes take the form of a song or a rustling sound, whispering. A loud noise that startles can even seem like someone shouting. This gets worse when people are stressed, but can also happen when we're just feeling tired and sleepy.

So How Can Psychosis Start?

Quite often it's a gradual process – when we're feeling stressed, a bit unsure about what is happening. We might be feeling a little bit depressed or anxious. Maybe things going on in our lives are making things difficult. We may be feeling bullied at work or at school or generally feel we've been got at. At other times, good things are happening – they can make us feel really good, proud of ourselves, positive about the world and that we have a special place in it. This should always be true to some extent – everybody has a special place in the world, but sometimes it's possible for it to get exaggerated a bit. We might

wonder if we are really designed for a very special purpose – to save the world or protect a famous person. Especially if we’ve been feeling ground down, this can be a really good feeling. This can make us feel really important – and it is important that we feel important – feeling good about ourselves is right. Something can happen to us – something said on the television, radio or lyrics of a song – can lead us to think that we do have a special purpose or mission or ability, and then it sort of sticks in the mind and becomes a particular fixed belief. It may be that when we actually talk about it for the first time, we get quite a positive reaction, but it also can be a negative one, which can either lead us to think ‘maybe I got this wrong’ or the reverse, that this must be true if people are reacting so strongly. They must have something to hide.

When we talk about someone experiencing psychosis, we are usually referring to our opinion that they are mistaken about what they are seeing, hearing or believing about the world around them. They may be seeing things that, quite simply, other people can’t see even though they are looking in the same direction at the same object, or maybe the things being seen are in space but, again, are not visible to others. Commonly these visions come and go very quickly, but sometimes they can be more persistent and can then be quite frightening and distressing.

More commonly, people can hear things that others don’t hear or don’t interpret in the same way. For example, the rumble of thunder might sound like the word of God or the hum from the fridge may be a repetitive command to harm us. On other occasions the sound may seem to come completely out of the blue with no stimulus at all. Although sometimes this can be sound which has no meaning, usually these experiences do have meaning; they sound like speech, and things said are more often negative than positive. Sometimes they can be positive – they can be complimentary, they can be reassuring and sometimes be the voice of somebody who has been a support to us in the past, for example, a grandmother or teacher.

But voices are more usually neutral or negative when related to psychosis and sometimes say things that have no meaning whatsoever. They sometimes just reflect what we have been thinking; they might even be like an echo of what we’ve been thinking. They can be quite unpleasant, especially if they are telling us to do things or are swearing at us or telling us how bad we are. Often what is said is something that has been said to us before by someone who has been in a powerful position over us. So this might be a father, stepfather, mother, teacher, care home worker or a boss at work. The memory of those things that are said can come out very vividly, as a voice. When something has a strong emotional association, like something said, but also something that happens to us, like a serious car accident, the experience is etched on our memory so it is very easy to recall or for something that is associated with the event to trigger it. This trigger can be a word, sound, smell or something we see.

Suspicion is also something that can develop into a psychotic symptom. It is reasonable to be suspicious of people we don’t know and to be careful about how much we trust them. It’s actually very important that we aren’t too trusting because people unfortunately can be deceitful and take advantage of us. Whilst most people probably wouldn’t do this, it’s nevertheless important that we develop relationships before we put our trust fully in somebody. It is reasonable not to trust strangers unless there is a good reason to do so – for example, we would probably trust a bank manager or doctor because of their status, but not somebody we had met for the first time in a pub or on a train. They might seem very pleasant and trustworthy, but first impressions can be wrong. However, this can go too far and because we’ve been taken advantage of or bullied, we can end up not trusting anybody and develop the belief that everybody is against us. When we break it

down, think it through, it usually is only a particular group of people we have reason to be suspicious of and generalising to everyone, or almost everyone, can interfere with life significantly. We talk about people becoming paranoid in this instance. Again it is important to be sensible about who we trust, but it's also reasonable to accept people's positive motives if they've demonstrated them and not to expect them to be out to get us when the evidence really doesn't add up to that. Sometimes there may be particular reasons why we might feel that people in general have got it in for us, but it's really important to work this through and take a balanced look at whether this is the case or not. Specifically, it is worth trying to work out what it is that leads us to believe that people can be trusted or not. This includes governments, employers and other organisations.

Sometimes these beliefs about other people can take the form of feeling that they are trying to control us. There is, of course, some degree of truth in this – governments, police and others do have power and influence over us, but they should use this according to the laws that we, as a society, agree to and give them. They certainly shouldn't use it in a way that picks out an individual unfairly. Also, it is possible sometimes to believe that they have special powers and ways of controlling us involving surveillance or technological devices. Certainly it is known that organisations like the CIA, MI5 or the Russian secret service have in the past experimented with all sorts of devices to manipulate people, but not a lot of evidence that they have been successful in this yet, and even in these circumstances, there is generally some control exerted by government, and the uses to which these powers are put will be related to national security. Certainly the use of such powers with civilians seems very well controlled – or at least that is what most of us believe. If we think otherwise, it's important to work through the reasons why and what benefits there might be for an organisation, such as government, in trying to control an individual who is not in a position to threaten national security. Why should we be picked out? What makes it worth investing lots of time and resources in surveillance or control of us?

It's also possible to believe that our thoughts might be controlled or that thoughts are being put in our mind, perhaps by some sort of telepathy or mind control. Telepathy is interesting, and there are a lot of descriptions of twins, for example, being convinced that they can communicate feelings and thoughts. There have also been experiments to try and demonstrate that it is possible to transmit thoughts between people in separate places, but the evidence isn't very good that this is possible. Similarly mind control sounds possible, at least in science fiction films, but again there doesn't seem to be any clear scientific evidence that this can happen. People can strongly influence others, but the idea that the mind can be controlled or movements controlled by an external force again is interesting, but there seems to be nobody who is very clearly claiming and demonstrating they can do it. If we think it is happening to us, it can be very worrying, but there doesn't seem any evidence that it can happen.

Another common and distressing thought is that people can know what we're thinking – they can read our minds. That is particularly distressing if what we're thinking at the time is something we might be ashamed of or feel guilty about. Our mind responds to all sorts of things going on and triggers in the environment – things we see or hear – and so thoughts that are sexual or violent or just strange come and go very easily. Usually we just let them pass and don't pay too much attention to them, but if we feel they are being broadcast to other people, as it were, that can certainly be distressing. But again this sort of telepathic transmission may happen in the movies, but there is no evidence that anybody has been able to make it happen in real life. What can happen is that we recognise somebody is feeling upset, distressed or happy in response to something they are

thinking or is happening around them. The way they react, their expressions, movements and ‘body language’ can tell you a lot about what they feel, but that’s different from being able to have our thoughts read.

What about Thought Disorder and Negative Symptoms?

Another event that we talk about as being related to psychosis is that thoughts can get jumbled up (‘thought disorder’) or perhaps, more accurately, the way they are communicated, how they are spoken, can seem unclear. This can mean that people seem to be making jumps from one topic to another without it being clear what the link is, or sometimes they seem to be saying things that don’t make sense, using words that seem to be made up of other words put together. This can get quite confusing and make people wonder what the person is trying to say. Again this can happen in other circumstances where we don’t even think of psychosis. Some people do tend to talk in a way that can be difficult to follow, although they may be very clear about what they mean. If we stop them and ask some questions, they can explain this – and this is actually exactly the same with people when we talk about them having ‘thought disorder’. So thought disorder is really just an exaggeration of speech that is a bit garbled and difficult to follow. We often find that someone who is speaking in a way that is difficult to understand is understood by family members or friends who know them.

Another group of problems needs to be considered. When we’re feeling stressed and anxious, a common response is to withdraw and get away from the stress. If we feel people are talking negatively about us or are getting at us, again a simple way to deal with that is to avoid seeing people and, similarly, if we feel they are interfering with our thinking in some way. But this can then mean that we get isolated and it can be difficult to get back into meeting people again. Stress can certainly worsen voices and the way we feel in general, so avoiding stress is quite natural. All this can be quite demoralising and depressing such that we feel less and less likely to do anything. And if we don’t do anything and don’t go out that becomes depressing and we get into a vicious circle rather easily. If we feel criticised, it’s quite natural not to say much, and we can seem to appear more and more blank and expressionless to others. We can also end up speaking less and less, especially if we are not seeing people very often. These ways of reacting have been described as negative symptoms but are really about reacting to circumstances which can be difficult and where avoiding stress makes sense, at least in the short term. The problem is that in the long term it limits our lives very significantly and can stop us doing the things that we want to do in life like developing relationships, being independent and doing things that can be interesting and productive.

The other things that can happen with psychosis include being depressed, anxious, obsessed and confused; having sleeping problems or eating problems; and being angry and frustrated. All these can be reactions to what is happening but also problems in themselves that can be helped.

How Common Are Psychotic Experiences?

The best attempts to look at this have been through surveys of people in their own homes. These have sampled populations with interviewers literally knocking on doors asking people about what they feel, their experiences and what they do. They’ve used screening questionnaires to ask about experiences that seem to relate to psychosis and then followed these up with more detailed interviews where appropriate. There are, of course, problems with such surveys, and people who are particularly withdrawn or suspicious are less likely

to respond, answer the door and agree to an interview, so it's likely that these methods underestimate the number of people in the population who do suffer from psychosis. Some surveys (e.g. in Scandinavia) have added other routes to identify people with psychosis, such as using housing department, hospital and general practice records. From these surveys it looks likely that at any time 15 to 20 per cent of people are having experiences that are like psychosis and that perhaps 3 to 5 per cent are experiencing psychotic symptoms, but these are not necessarily persistent and tend to come and go. Then maybe 1 per cent of people or possibly more have beliefs that have been in place for quite a while and who can benefit from help. This is the end of the spectrum of psychotic experiences which is given the label of schizophrenia.

What Causes Psychosis and Schizophrenia?

A number of things seem to make it more likely that people will have beliefs and experiences that are related to psychosis. These include using illegal drugs such as cannabis, amphetamine and cocaine, although this is not the case with opiates – heroin or morphine. It does seem that when people move house or country, this can make them more vulnerable, and there is something about being the second generation whose parents have moved to the country and then had children, who then seem to be more vulnerable. It's not at all clear why this happens and may have something to do with feeling rejected by that society, especially through experiences of racism. Poverty and living in a city also make psychotic beliefs more likely, and there is some relationship with levels of intelligence, but it remains the case that anybody can develop psychosis – you can't be too clever for it. This has included Nobel Prize winners in the past.

Childhood experiences also seem to be very important for many people who experience psychosis. There is now a lot of evidence that physical, sexual or emotional abuse in childhood makes people much more likely to develop mental health problems, including psychosis, but it is also the case that many people who have such experiences can live happy and fulfilling lives. It's also the case that even where the experiences have caused distress, it is still possible, with help, to learn to cope much better with them, recognise that they are not at fault for what happened and move on with their lives.

Psychosis is a very broad set of conditions, and the reasons why it develops varies. The events that happen to us interact with our family upbringing and the genetic coding that comes from our parents. Genes undoubtedly affect areas such as our appearance and our personality. These are very important in the way that we respond to the world and the world responds to us. For some people, traumatic events or drug use do not have a major effect on them, as they have a degree of resilience that, along with the circumstances they find themselves in, protects them. For others this can lead to them becoming confused, suspicious and seriously affected in terms of the way they feel about themselves and about those around them. Also it is possible, because of the way we've grown up, we may have been relatively isolated or bullied and therefore become more suspicious and detached from the world. This can mean that when things do go wrong, suspicion can turn into paranoia and beliefs develop that people are against us.

Cultural beliefs can also lead to confusion, as many beliefs held by different societies and cultures are appropriate for one but seem strange or irrational to another. This has led to considerable problems in assessing whether somebody has psychosis and is a very

important consideration now whenever an assessment is being made. Family members, friends and community leaders can be incredibly helpful in deciding when somebody has appropriate cultural beliefs or when it has gone beyond what is normally the case.

So suspicious and confusing beliefs are pretty much universal, especially when we are stressed; psychosis involves experiences that have developed past this into paranoia, thought disorder and hallucinations (hearing voices or having visions), but these are less common – they can become very distressing and get in the way of living our lives. This is the subgroup of people with psychotic experiences who carry the diagnostic label of schizophrenia. Understanding these experiences and discussing them can make a big difference.

Personal Disclosure

Hearing voices is a very common experience and one which I remember occurring when I was a teenager on one specific occasion when I'd been watching TV one evening. I heard my mother shout 'David', startled and then realised that she was not in the house. What I heard sounded completely real, but could not have been from her despite it being her voice.

There have also been times when I have been very suspicious of others and their motives, especially in relation to being turned down for grants or publication – not necessarily being paranoid but certainly having the feeling at times that others around you do not have your best interests at heart. Of course, I might be right about that, but probably in retrospect, it was possible – maybe even probable – that the grant applications or papers simply weren't good enough!

Example

John had worked in a large firm but gradually became more irritable, difficult and angry. It took a long time for him to express what the problem was, but in an outburst one day, he accused his employers and work mates of ganging up on him and making his life a misery. It took time to explore why this belief had developed, but it traced back to a number of years before when the system of appraisal within the firm had changed and after getting good appraisals, his assessments became much more average with some criticisms of his performance. He ruminated on this and eventually came to the conclusion that this was related to a conspiracy targeting him. Discussion with him reduced his level of distress and allowed him to re-engage with his family, and the beliefs themselves reduced in intensity over time.

Complex Example

June presented with distress, self-harm and anger. She was actively hallucinating and was very paranoid. The voices she heard were of her brother threatening her and God telling her to kill herself. She was very fearful of others and isolating herself, but repeatedly presented to emergency services with self-harm. Work with her enabled her to understand the relationship of the voices to abusive experiences in childhood, but work on these experiences and the beliefs about herself required sustained support from a multidisciplinary team, crisis planning and therapeutic involvement over a number of years.

Further Reading

- Emotional wellbeing site (information about mental health). <https://emwb.org.uk/>
- Freeman, D. Freeman, J. & Garety, P. (2016) *Overcoming Paranoid and Suspicious Thoughts* (2nd edition). Hachette, London.
- Gumley, A. & Schwannauer, M. (2006) *Staying Well after Psychosis: A Cognitive Interpersonal Approach to Recovery and Relapse Prevention*. Wiley, London.
- Hayward, M., Strauss, C. & Kingdon, D. (2012) *Overcoming Distressing Voices*. Hachette, London.
- Longden, E. Learning from the voices in my head (TED talk). www.ted.com/speakers/eleanor_longden
- Morrison, A. P., Renton, J. C., French, P. et al. (2008) *Think You're Crazy? Think Again*. Routledge, London.
- Mueser, K. & Gingerich, S. (2006) *The Complete Family Guide to Schizophrenia*. Guilford, New York.
- Romme, M., Escher, S., Dillon, J. et al. (2009) *Living with Voices: 50 Stories of Recovery*. PCCS Books, Manchester.

Chapter

2

Psychosis Usually Has a Natural Tendency towards Recovery

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Key Points

1. ‘Psychotic’ experiences such as hearing voices, holding beliefs not held by others and feeling paranoid are all much more common than we might think.
2. These experiences are usually an understandable reaction to what’s happening in our lives. Often factors like sleep deprivation, trauma, isolation, substance misuse and stress are precursors.
3. For most people, psychotic experiences are often brief and do not cause any major disruption or distress.
4. Even when these experiences are more prolonged, many people live with them without any negative impact on their lives. In fact, many people value these experiences, feeling that they have learnt something from them, that they enrich their lives and that they have helped them in some way.
5. For many, however, these experiences can be frightening and can have a devastating impact. However, even with a chronic history, some degree of recovery is the most common outcome.
6. Lastly, what do we mean by ‘recovery’? It means different things to different people. In other words, it’s a journey that is defined by the individual themselves.

Introduction

In this chapter we will explore the notion that for many people ‘psychotic’ experiences, such as holding unusual beliefs or hallucinating, are brief, do not necessarily have a negative impact and can even provide an enriching experience. Of course, this may come as a surprise to many others for whom such experiences are scary, confusing and overwhelming. It begs a key question: What can help us understand, cope and even thrive with psychosis? Later in the chapter, two case studies will be described, each illustrating some Cognitive Behavioural Therapy (CBT) techniques that can aid recovery in those struggling with experiences like these.

Psychotic Experiences as a Common Part of the Human Condition

Hearing different voices in our heads is a normal part of the human experience, widely accepted throughout society and not a sign of mental illness at all. According to Julian Jaynes, author of 1976’s *The Origin of Consciousness in the Breakdown of the Bicameral Mind*, this was how we humans viewed voice hearing before 1300 BC, before we coined

the term ‘consciousness.’ For those who hear voices, Jayne’s theory can be an attractive one. It provides a reassuring message: that hearing voices does not mean you are ill or different. It also raises a potentially helpful implication too: after all, if these are entirely natural experiences for a human being, can this provide us with a clue about how we cope with them?

It was in 1987 that Jayne’s work took a more public turn. Two Dutch researchers, Marius Romme and Alexandre Escher, invited one of their patients onto a television chat show in Holland. Patient X was a voice hearer who spoke of Jayne’s work and how helpful and reassuring he had found it. After being interviewed on the television, a request was put out for other voice hearers to get in contact. They were inundated. Of the 450 voice hearers who got in contact, 150 people reported being able to cope with their voices. Although initially startled and frightened by the initial presence of a voice, people had a range of understanding about their experiences, and many felt they were not ill or disabled by them at all. Coping seemed to align with some accommodation of the voice as part of themselves. According to Jayne, this may be how we all viewed such experiences pre-1300 BC.

It is not only voice hearing that we can view as a natural and common part of the human condition. It seems that feeling unsafe and paranoid is also commonplace. Freeman and Freeman provide examples in their 2008 book *‘Paranoia’: Did you know that 40 per cent of UK adults believe that 14 is the earliest age at which children should be allowed out unsupervised? It’s not just that we are feeling less safe; we also feel less trusting of authority. For example, nearly 50 per cent of people in New York believe that the terrorist attacks of 9/11 were known about in advance and deliberately ignored by US leaders. The proportion of people who believe in phenomena that have not been scientifically validated is also striking, with many polls reporting high proportions of people believing in ghosts, unidentified flying objects and extrasensory perception. Of course, the vast majority who hold these beliefs are not ‘unwell’ or unduly distressed by them. In fact, many would say that they take pleasure from them and that they don’t interfere with their daily lives. Likewise, studies have shown that many find voice hearing to be valuable, helpful and enriching, providing companionship, comfort and support. For example, nearly 50 per cent of the ‘good copers’ who contacted Romme and Escher in response to the television programme saw their voices as a ‘special gift’. Many famous, successful and artistic people experience voices or delusions too. Modern examples include Anthony Hopkins, John Frusciante (guitarist from the Red Hot Chili Peppers) and Nobel Prize-winning mathematician John Nash (made famous in the film *A Beautiful Mind*)’. An older example is Charles Dickens. He famously heard the voice of Mrs Gamp, from his novel *Mrs Chuzzlewit*. She would tell him rude stories in church, making him laugh out loud! It also seems that culture can make a big difference to how we view hallucinations and unusual beliefs. For example, a number of Amazon tribes, such as the Cashinahua, view hallucinations positively, as phenomena that help guide them on a spiritual journey.*

Personal Disclosure

Missing My Train

A few years ago, I was asked to represent the northeast contingent of the British Psychological Society at their national meeting in London. The meeting was at 10 a.m., meaning I had to catch the 6 a.m. train from Newcastle upon Tyne. I slept in, missed my train and arrived at the meeting, oh only about four hours late! I rather sheepishly introduced

myself to my colleagues and promised myself I'd never let this happen again. Skip forward three months to the next meeting. Well, this time, I set three alarms and swore I'd make my morning train! Trouble was, I was so anxious, I didn't sleep at all. I made the train, the meeting went fine, and I travelled back north later that day on a very busy connection. As I sat there, feeling pretty exhausted, I heard the train hospitality attendant ask me, 'Tea?' 'Yes please,' I replied, 'milk, no sugar'. I turned around, but no one was there! Everyone was staring at me, somewhat concerned. What had happened? I looked again to check, but again, no one was there, and I was now only attracting more looks. As I sat in my chair, I quite frankly panicked. But then gradually I began piecing it together: I had just experienced a brief hallucination, sometimes referred to as a BLIP (brief limited intermittent psychosis).

Questions

- 1. What factors do you think may have led to my BLIP?
- 2. How common are BLIPS like this?
- 3. What was it about the experience that made me panic?

In hindsight, it's clear to me that my levels of stress and lack of sleep had made me exhausted. We all know that we're not at our best when we're stressed and tired, but did you know that this is also when our perception can become 'fuzzy', often leading us to have odd ideas and brief hallucinations? These BLIPs are actually incredibly common: just ask any sleep-deprived new parent or night-shift worker. Why did I panic though? Perhaps because I didn't have a frame of reference for what was happening to me. In our Western culture, we don't speak of these experiences, and they are often stigmatised, associated with mental illness, hospitalisation and words such as 'mad'. Contrast my hallucination with another reality-bending experience that we all have: dreams. Dreams are so powerful, strange and feel so real at the time. Yet most of us are able to experience them nightly and get on with daily business without a second thought. How? Maybe, in contrast to hallucinations, modern Western culture views dreams as understandable, acceptable and even enriching parts of the human experience.

Question

How would we feel and cope with these experiences if our culture viewed them as common and understandable as dreams?
So far we've seen how psychotic experiences are common, often fleeting and can be manageable and viewed positively. But what can help recovery if they are more frequent, distressing and prolonged? Let's learn from two examples of recovery, based on real service users' stories (anonymised and amalgamated to protect confidentiality). First, the story of a young man who entered an early intervention in psychosis (EIP) service, troubled by voices.

A Simple Example

James was a 17-year-old young man who lived with his mum and dad and two older sisters. They were a close and supportive family, who regularly attended church together. Over the previous six months, James had felt under tremendous pressure to do well at his upcoming exams. He was revising every night until late and worrying all day that he wouldn't get the grades to get to a top university to study medicine. This had begun to badly affect his sleep, as he was lying in bed worrying for hours, sometimes sleeping as