

Accepting Alternative Realities

To write about other worlds- other worlds of meaning, knowing those other worlds have been punished, and dismissed is to revisit painful times. In writing this paper I find myself engaging in avoidance tactics like checking emails and other distracting tasks. Can we honour these other worlds not by glamorising them but by acknowledging their place in our lives and in our communities?

Reflecting on my own experience of alternative realities as well as my experience as a psychologist helping others, I will consider how we best assist people experiencing other worlds of reality we find hard to relate to. I will first consider the philosophy of assisting people with unusual beliefs and ways of incorporating self help approaches into daily living to promote healing. This will be followed by looking at:

- 1) How to help people live more freely with their unusual beliefs.
- 2) The importance of increasing social connectedness and creating safety.
- 3) Reducing anxiety related to unusual beliefs.
- 4) Understanding the social and emotional meanings that the unusual beliefs represent. In the examples I will discuss the ways psychotherapeutic work can be helpful in understanding and addressing unusual beliefs.

The two most common ‘symptom types’ in psychosis are firstly ‘auditory hallucinations’ and secondly ‘delusions’. Over the last twenty years the Hearing Voices Movement has helped challenge conventional approaches to “auditory hallucinations” by reframing them as “voice-hearing experiences”. The Hearing Voices Movement has demonstrated the broad range of ways to integrate voice hearing into one’s life. Due to this there has been great progress in developing research on the experience of voice hearing and self-help networks. This has led to innovations in both psychotherapeutic and self help knowledge for voice hearing (see Romme et al. 2009).

Delusions (or perhaps more respectful terms such as alternative realities or unusual beliefs), the second major group of psychotic experiences, have not had as much energy devoted to them in terms of self help initiatives as voice hearing. Cognitive behavioural therapy has focused on the problem of ‘delusional thinking’, and has sought to change it to more rational thinking, through teaching people to test out their theories against empirical evidence. However this therapy movement has been largely unable to translate this into collaborations with self help groups and has limitations when working with people who value their belief systems and who are not motivated to challenge them.

My personal experience

I trained as a psychologist in the 1990s keen to promote psychological approaches to experiences that are labelled psychosis and in particular what is termed “delusional thinking”. I prefer to use terms like unusual beliefs, paranoia and alternative realities because they are terms people find less judgemental.

I felt sure that if we really listened to people and helped them find activities where they would feel valued, both their unusual beliefs would be shown to have a logic to them, and people would be more likely to find ways to connect with others and recover a valued life. This was influenced by my own experience of psychosis when I was eighteen years old. I had witnessed and experienced how institutions and social isolation did a lot more damage than unusual beliefs that were seen by professionals as ‘delusions’.

Unusual beliefs are meaningful and symbolic, they are not merely the bizarre mis-firings of a faulty brain

I became fascinated with unusual or psychotic beliefs after my experiences as an eighteen year old where I became convinced that I was a spy for the British (working against the Russians) and that I was involved in a battle between good and evil.

The psychiatric treatment I experienced was unhelpful, in that it focused on the form of my confusion but not the content.

I was diagnosed with Hebephrenic schizophrenia, hospitalised several times and put on a long-term neuroleptic drug regime. It always seemed to me that my beliefs were meaningful and possessed an internal logic and had they been listened to sympathetically, this would have been the greatest aid to recovery. Looking back this time period was one of emotional complexity. My first girlfriend had left me and this culminated in a great deal of grief. This, in turn, related to unresolved feelings concerning my mother’s illness when I was eleven: my mother had had a brain haemorrhage and an operation that had resulted in physical and mental disability. I believe that I experienced emotional problems after this time, which I had buried and that were only re-awoken when my relationship with my first girlfriend broke up.

Possible meanings of my beliefs

There are many possible layers of meaning to my own beliefs. For example, I believed I had a gadget in my chest that was being used to control me and I also believed that a lot of adults around me were robot-like automatons. This may have reflected my fears of losing my sense of self and drowning in social conformity. I felt a lot of pressure to be someone interesting and yet I had found myself in a dull and boring career and without friends or a social life.

Secondly, the robot fantasy may have also been a dream-like flashback to my mother’s illness. During my mother’s operation, she had a metal plate placed in her skull. I remember the first time I saw her after her operation, she seemed to resemble a robot with her shaved head, and pipes which were drips emanating from her body. The first time I saw her post-operation, she tried to wink at me and her eye got stuck like a rusty machine.

I also had beliefs about being involved in a cold war between two different cultures, East and West. My girlfriend had been from an African Caribbean background and her mother had not been in favour of the relationship, so I had wondered about

tensions between cultural groups being the reason for the relationship break up. Perhaps my East West cold war beliefs reflected this conflict. In retrospect, I feel that these beliefs represent powerful metaphors in my quest to find out who I was and how to understand my past and present.

Like powerful dreams, my unusual beliefs or delusions have subsequently influenced who I have become without taking over my life. I believe this is because I was fortunate enough to get away from psychiatric services and find valued social relationships where I could develop my social skills and responsibilities.

Principles of the Hearing Voices Movement that can be applied to Unusual Beliefs

The social category of delusions is different to that of hearing voices because very (often amongst people seeking help) voice hearing is seen as problematic by the individual, whereas one's unusual beliefs are not. So for example, when I believed I was a spy, it was other people such as family members who saw these beliefs as problematic, not myself.

Even so many of the principles of the Hearing Voices movement can be applied to unusual beliefs:

- *Commonality of alternative beliefs* Studies have shown that all sorts of beliefs Psychiatric professional might see as irrational including beliefs in magic, aliens, telepathy and spiritualist beliefs are extremely common in the general population (Peters et al. 1999a).
- *Embracing different frames of reference:* Within the hearing voices movement different understandings of voice hearing are respected, including spiritual and paranormal interpretations (e.g. Romme and Escher 1993, 2000). Psychological and social understandings are seen as complementary to other understandings, rather than seeking usurp them. This is very helpful for working with unusual beliefs where there has been a history of seeking to persuade people to give up their beliefs and view them as a product of “mental illness”.
- *Community education:* If communities can accept and become more understanding towards unusual beliefs, people will be at less risk of social exclusion processes.
- *Reducing Social isolation:* People's beliefs are likely to be held more strongly and be more inflexible if they are socially isolated. Having respectful relationships to relate to others is likely to be empowering.
- *An emphasis on the importance of social relationships:* By encouraging people to talk about their relationships with others and collaborating with them on different ways to improve these relationships people can regain their independence and take responsibility for their actions.

- *Meaning:* Unusual beliefs are likely to meaningfully relate to people's present and/or past social relationships.
- *Living with:* It may be useful to move away from an illness model where unusual beliefs are seen as fundamentally pathological. Rather we should assume that what is important is not what one believes but how one lives with those beliefs and negotiates them in the wider world.
- *Giving people back responsibility:* If someone acts anti-socially, educating people that they have a choice and responsibility to act ethically even where they are responding to beliefs others do not share. So if someone believes that a nurse is really an assassin, it is not acceptable for them to hit the nurse; they are responsible if they do so, and should be encouraged to address their concerns in ways that do not infringe upon the rights of others.
- *Emotional and Socio political Dynamics:* It may be helpful to think about the relationship between beliefs and emotions. It may be helpful to think about the relationship between beliefs and emotions and social and political processes.

Many Realities

Many Buddhists believe none of us see the true nature of reality, that we all hold delusional beliefs about our self and about the world. One of the purposes of meditation and practices such as mindfulness is to become less attached to beliefs and perceptions that we generate about the world. Western approaches to rationality also value detachment from thoughts but this detachment seems more repressive; the emphasis on being objective means that emotional feelings are often not acknowledged or denied. Traditional Western (modernist) perspectives assume that there is a correct scientific view of the world, that there is one truth. But many post-modern thinkers have since argued that actually there is not one superior view of the world, rather there are a broad range of perspectives. In other words there are many different realities or versions of reality. From this position, it follows we should value different perspectives and have a dialogue where we can learn from these different positions.

If we are able to achieve some detachment from our beliefs in the knowledge they are just one way of seeing the world, we become more aware that 'the map' (i.e. our beliefs) is not the territory; and that different maps tell us about different aspects of the territory. It seems helpful to adopt a relational perspective towards our beliefs, thoughts and perceptions so that we both detach from them and try to relate to them.

The Social Context of Delusions

Escaping into delusions is something we all do to varying degrees. For a start we all do it in our dreams. In the majority of our dreams we accept weird and wonderful situations without question. But also in waking life our theories about the world are inherently biased and subjective. We develop our own theories about what is going on and why and how.

We update these as we meet people or new problems. We will develop some core

beliefs about the world. These beliefs can only become a problem to our freedom when they are held to a degree where we begin to act in ways that disturb others. If no-one else shares these beliefs they can be described by others as mad or delusions. This approach then is likely to lead to psychiatric services being sought on behalf of the 'deluded person'. However, it is important to consider that madness is relative: *if you believe you are a messiah and you can persuade other people of this, you can start a sect but if you cannot persuade anyone else you may be sectioned!* To take this one step further, within a religious community an atheist could very possibly be perceived as mad. The important political aspect of the social definition of madness was observed by the playwright Nathaniel Lee when he was detained in Bethlem hospital in 1684: "I called them mad, they called me mad, damn them they outvoted me!"

Delusions are in 'the eye of the beholder'

Many spiritual and political beliefs that are commonly held can be seen as a way of life to the holders but to the outside observers who wish to dismiss the values of these beliefs, they can be seen as 'collectively held delusions'.

For example, some women may think many men are deluded about the importance of football in their lives. Many critics of American foreign policy in the early noughties described George Bush's Republican Party policies as mad. Similarly the conservative leaning English tabloid newspapers used to talk about socialist politicians in the 1980s as 'the loony left'. If an individual, rather than a group is seen as deluded and therefore in need of psychiatric help, the consequences are more serious in terms of the severity of encroachment upon their civil liberties. Richard Dawkins, author of 'The God Delusion' has implied that religious thinking is pathological. However, Dawkins' stance - that the world will be a better place if everyone believed in scientific materialism - could equally be perceived as a delusion, if seen from a different perspective (for example that of an environmentalist perspective which may blame scientific progress on leading to destroying the natural resources of the planet). Given that we are all operating in this web of competing ideologies and distorted versions of reality, how do we help people who are being targeted for their beliefs or whose beliefs about the world are causing themselves or others significant distress?

The key is to see the beliefs and experiences as something we should respect and try to understand the different meanings they represent.

Whilst it is important to recognise that extremely abstract and idiosyncratic beliefs are likely to be at least partly generated in dissociated states of consciousness during a period of sleep disturbance or voice hearing, therefore rendering them more fantastic to the outside observer, it is essential to be open to the different personal meanings in these experiences. Many people see these experiences as spiritual. Talking with many people about their beliefs using spiritual terminology therefore often proves helpful.

Spiritual approaches

I understand the term “spirituality” to refer to a search for meaning. Spirituality includes magical explanations and entertains a broad range of possibilities of connecting with ancestors, nature and other energies. A spiritual construction of unusual thinking has some advantages compared to being seen as delusional and mentally ill. One of the main problems with being socially identified as ‘delusional’ is that the person can easily become socially marginalized. One feels written off as merely ‘sick’ whereas if one’s experiences are seen as spiritual this allows them to be seen as more valuable. A spiritual framework, provided it is not too dogmatic itself, can therefore be a lot more inclusive and may enable the person to make more connections between their beliefs and others.

There is an increasing interest in understanding psychotic experiences as a form of spiritual emergence (see Randall and Argyle, 2005 for a review), and the emanation of unusual beliefs and extreme mind states as a psychologically transformative experience. Therapists such as Stanislav Grof (1989) have reflected on traditional cultures such as in Central America where extreme mind states are seen as signifying a person’s potential to become a community healer or shaman.” ,Within this framework an altered state of consciousness can be seen as a ‘spiritual emergence’. The ‘spiritual emergence’ approach focuses on the ways we can support people to go through such experiences and learn valuable lessons from them. There is also a similar type of thinking around the Kundalini energy experience in Yoga thinking and practice. Extreme states can be experienced by Yoga practioners and there is some guidance available as to how to help people resume emotional and energetic balance through exercise.

The success of the spiritual emergence approach relies on establishing a network of support around the person in need. The object is to assist that person to go through their experience and emerge with new learning about themselves and the world around them. In England a Spiritual Crisis Network has recently been established that aims to pool the resources of those with experience of spiritual emergences. The network includes both therapists and spiritual practitoners as well as volunteers.

The film *Evolving Minds* was made by Mel Gunasena who has been treated for psychosis. She wanted to discover other ways to manage journeying into other realities rather than be ‘shut down’ with medication. In the film she interviewed a Buddhist monk, a shaman, a psychologist with an interest in spiritual emergence and a nutritional therapist. This film inspired a group of us to organise public meetings looking at different approaches to emotional well-being (May, 2007). Each month around thirty people meet to discuss different understandings of the mind and healing. These consciousness raising meetings aim to empower anybody with an interest in mental health (from various communities) to think more holistically and flexibly about how to help people in distressing and extreme mind states.

How to help people live more freely

Obsessive preoccupation

Peters and colleagues (1999b) compared the beliefs of psychiatric patients who were seen as 'deluded' with a group of druids and Hare Krishna members they described as members of 'new religious movements'. They found no difference between the groups in terms of strength of beliefs or the number of unusual beliefs held. The fundamental difference they did observe was that the psychiatric group of participants were more pre-occupied with, and more distressed by their beliefs than the new religious movement group participants. This suggests that we should focus on people's relationships with their beliefs rather than target the beliefs themselves. Our help should therefore be aimed assisting people to become less dominated and more relaxed towards their beliefs. This may be about non-judgmentally supporting people to talk about their ideas and simultaneously helping the person connect with a whole range of activities.

The value of spiritual practices

Michael was someone with a psychosis diagnosis and a long history of contact with mental health services. I saw him weekly in a supported housing setting for counselling. Michael was furious about his relationship with God who he blamed for all his problems. At times he would rant at staff and at God about his predicament. I spent over a year in weekly counselling sessions listening to his angry feelings. He refused to go to activities outside where he lived because he said he did not want to mix with 'mentally ill people'. However during an inpatient admission he tried both a Tai Chi group and a Spirituality Interest group because he was bored and found he enjoyed both. In the spirituality group he tried meditation techniques he had been unwilling to try in one to one meetings and found them to be very beneficial. Michael became a lot more involved in social activities and self help groups. He also moved to a different accommodation, where he was more content. This illustrates the power of group activities. However, current mental health services are generally biased towards individualised services.

Accepting Obsessions

I know from my work with people treated for obsessive compulsions, the importance of focusing on wider roles and activities. Brian was a man whose life had become dominated by checking locks and electrical appliances. We examined how these habits had filled a gap in Brian's life after being made redundant some eight years previously. We then looked into activities that could channel and turn into something positive Brian's ability to concertedly focus, and that would prove more rewarding in the long term. He decided join a fuchsia growing society and gradually Brian became more involved in their activity. He began to win awards and became very socially involved in the society. His degree of checking and obsessing over appliances reduced as he found more productive activities to focus upon, his ability to concentrate and do things in a detailed way and has his level of friendships increased.

Supporting people with isolated campaigning missions

There are times to challenge the way people are responding to their beliefs. However this will only ever be likely to be helpful if it is done from the basis of a strong relationship and the timing will also be important. I have met and tried to help a number of people who were involved in missions to address some kind of injustice, usually where some form of abuse is being perpetrated by the authorities or a network of some kind. I know from my own experience of campaigning how nourishing it is to be involved in a righteous campaign. However some campaigns from the outside look doomed to failure if the protagonists insist on a very individualistic campaign that does not connect with other's concerns. Recently I worked with a lady called Karen who had trained in counselling and other therapies. She was intent on bringing a human rights action against mental health services about her experiences of coercion and brutality from state officials. However her angry behaviour towards services was contributing to her being admitted compulsorily to psychiatric hospital, with increasing frequency and length of detainment. I had had many letters emails and phone messages about her campaign against mental health services over the previous year and I wondered about how I could help her break the pattern that seemed to be ensnaring her more and more in coercive psychiatric treatment. After receiving an email listing all the violence she had experienced from mental health services which included restraints forcible injections and assault I wrote her this email:

“Dear Karen

My gut feeling is: You are caught in a war with services you need to make peace, with yourself and later with services. You are venting all your frustration on them and they are punishing you for it. You have to choose a different approach, a more peaceful approach, you have to lead the way. You are a very good person but you need to be more of a gentle warrior, a warrior of light. You have so much to offer the world don't waste it on a battle that creates more misunderstanding and more emotional violence.

Regards,
Rufus”

A few weeks later I received a message from Karen that had a very different tone to the many I had previously received from her. Karen was enthusiastically telling me about her plans to help others and complete her Reiki training.

Taking a wider view

Working with unusual beliefs we need to be very aware of our own values and assumptions. A collectivist perspective argues for the wider group to take some responsibility if someone is behaving in a strange way. Crucially, we should look at our own role in that process and consider what we can do differently to re-integrate the person back into the community. If we merely take an individual perspective towards delusions and unusual beliefs, we risk assuming the world is sane and the individual with unusual thinking needs to be changed to fit back into a just and sane world. This can feel very oppressive to the person on the receiving end. The notion “I am sick and most people are not” leads to intense feelings of inadequacy and shame.

But the reality is that the world is a confused mass of competing ideologies and systems. There are systems that aim to educate and empower but these same systems can be controlling, oppressive and exploitative. If we accept wider society is sick, this can alleviate the sense of not being “good enough” that so often accompanies the role of psychiatric patient. As Krishnamurti asked, ‘how healthy is it to be well adapted to a sick society?’ From this perspective it follows that to create healing and healthy community we all have to do our bit – we all have to change. I work from the premise that society is sick and we need to learn how to survive it and thrive in it and make it a better place. It is important to understand belief systems in this context as ways of trying to make sense of a mad world. This then enables us to focus on the work of how to help people to live freer and more sociable lives. In helping someone, I am challenged to be empathic and genuinely curious about their world view and experiences; to be creative, to think about my own beliefs and values; and to think about how I and others around him or her can change to help the person as much as what the person can do to change themselves.

How to relate to unusual beliefs

What seems to be important in my work in the last thirteen years in this area is not what beliefs people hold but how they negotiate them in the context of their social lives. This is best shown within the context of non-psychiatrised social groups such as the Tibetan Buddhist tradition who hold the belief that everybody they meet at some point in a former life has been their mother. This belief is used to generate compassion for those towards whom the person feels indifference or dislike. Of course, the belief from a Western rational perspective appears bizarre and mad. If the Tibetan Buddhist practitioner went round calling everyone they came across “Mother” they may be attacked or ostracised and be likely to receive psychiatric treatment. However in general, the meditation practitioners who hold this belief do so in a way in which they avoid bringing attention to themselves. This demonstrates that it is not how you see the world that is important so much as how you relate to those beliefs and the wider world that matters.

The importance of building social connections

Prioritising social relationships

Social isolation is a big problem in Western societies in particular. If one has unusual beliefs, the isolation that can result from this can be a vicious cycle. If other people do not find someone’s beliefs acceptable they tend to avoid them.

If your beliefs are rejected and they offer you some means of protection and self-esteem, you may choose to reinforce them. At the same time after experiencing social rejection or avoidance the person may develop fears of others that lead themselves to avoid social contact. Such patterns can exacerbate persecutory ideas. However rather than see these ideas as the problem, we can see them as a way of coping in a disconnected and fragmented society.

When I was eighteen I became more and more immersed in a world where I believed I was a spy and I had special spiritual powers. I believed I was caught up in a battle between East and West and one between good and evil. Hospitalisation, a diagnosis of schizophrenia and being coercively given neuroleptic medication were generally

quite alienating experiences. I did my best to resist these traditional psychiatric approaches seeing them as oppressive practices. However what was helpful was that over a number of months I gradually found valued social roles and relationships. As I did so these beliefs became less important and were increasingly sidelined. I was able to adapt my original beliefs by getting involved in spiritual communities and community volunteering. It was also helpful when I experienced being accepted by friends rather than being dismissed as mad. I remember a friend visiting me and saying to me “You are not mad, you are just a bit paranoid!” This felt very reassuring and normalising. My espionage and spiritual beliefs had the function of making me feel special and connected to a web of meaning and community. I remember that when I was treated in a more clinical fashion where my beliefs were dismissed as mental illness or ignored while people tried to distract me with board games, I tended to invest more heavily into my beliefs because they made me feel less alone, whereas being treated as mentally ill person made me feel powerless and dismissed. In this way beliefs about being part of a special network or having an important mission protected me; they were like a warm blanket I could wrap around me, and only the warm rays of acceptance and appreciation would make me less dependent on that blanket. I gradually replaced my notion of myself as a spy to a being a covert human rights mental health campaigner. My ‘delusions’ had become a powerful metaphor for finding a sense of purpose in my life.

I also think they carried metaphors for difficult life experiences I had had, and concerns I had about the culture I was living in (see earlier section for more on this).

I can think of quite a few examples where people with unusual beliefs have improved the quality of their lives by increasing their social activities. A young man who believed postal workers were sending him abusive messages became much less preoccupied with his beliefs once he trained as a mental health advocate; a woman who believed neighbours were communicating with her telepathically got a job as a shop assistant and again her beliefs diminished significantly. Once people have other relationships to focus on they may be able to look at their beliefs more flexibly. However ongoing support should be available should these new social endeavours founder.

Self help groups for unusual beliefs

In Bradford we have been running a self help group for unusual beliefs called ‘Believe It or Not!’. The aim of the group is to be safe place to talk about unusual beliefs where different versions of reality are seen as acceptable. An important ground rule is that the group respects these different versions of reality. If someone tries to convert everyone about their belief being “the right way” this ground rule is highlighted.

Inviting different guest speakers from different faith back grounds and socio-political and philosophical backgrounds reinforces this multicultural atmosphere and this more flexible, irreverent attitude towards versions of reality. For example, we have had everyone from African shamans, Buddhists and Druids to Spiritualists, Pagans, Reiki practitioners and Quakers, all come as guest speakers to the group and share their perspectives.

Group members have shared conspiracy beliefs, persecutory beliefs, evangelical Christian beliefs, new age spiritual beliefs, spiritual possession beliefs, UFO beliefs and telepathy beliefs to name but a few.

There is an emphasis on sharing similar experiences, and group discussions looking at different solutions to problems group members are having. The group tries to look at different ways to deal with oppression assertively and/or collectively. Thus for people who have been isolated it could be a place where they can experience some sense of community. Regularly attending such groups helps one take a more reflexive view towards beliefs and assumptions knowing that there is not one clear, superior version of reality. We have looked at the social and economic factors that might lead to paranoia, as well as cultural explanations for the isolation and sense of being watched that is so common in Western society. Perspectives are shared but not promoted as 'the truth' but rather a host of different views each with their own strengths and weaknesses.

Knight (2009) recounts the benefits of support groups that share similar beliefs: "One young man I spoke to during my research believed that he had been abducted by aliens who had implanted him with a chip that would monitor his activities and thoughts. He was annoyed about the invasion of his privacy, and afraid that he might be abducted again and not brought back. By joining an online support group for alien abductees, and talking about his concerns to others who accepted his experience as being real, he was able to receive emotional support and practical strategies to enable him to deal more effectively with his situation – thereby managing to avoid contact with the psychiatric services and get on with his life." Knight points out that for many people their unusual beliefs can be an important part of their identity: "Viewing oneself as for example, successfully managing to cope with persecution would understandably lead to a better self identity than seeing oneself as having a mental illness or as being vulnerable to interpreting the world wrongly."

Whilst this may be a way of someone reducing a sense of aloneness, Knight does not suggest that we should encourage the person to become purely focused on their beliefs to the exclusion of other interests and activities. This approach of helping people meet others with similar beliefs needs to be balanced with encouraging social activities that do not directly relate to their unusual beliefs. In this way encouraging a broadening of interests and an increased awareness of different social realities and practices. As Knight observes: "Alternative or unusual beliefs only usually become a problem when individuals become preoccupied by them. Encouraging people to expand other aspects of their lives can be helpful in distancing themselves from, and becoming less distressed by, their unusual or alternative beliefs. Similarly helping people to raise their self esteem and self worth can enable them to be less bothered and more able to cope with their unusual beliefs."

Safety

Perhaps most important of all are relationships that are based on honesty, trust and transparency. I also think that relationships become safer where dialogue, personal responsibility and awareness of self and others is encouraged. Many practitioners who have created therapeutic communities for psychotic experiences (e.g. Podvoll, 2003 and Mosher, 2004) have emphasised the value of 'basic attendance' or 'being with' people in extreme states – essentially being present and not judging them. The literature on mindfulness is important to actualise here: ways to be non-judgmental (non-critical), appreciative of the other person and grounded in the present so as to

create a safe and stabilising atmosphere.

How to reduce anxiety related to unusual beliefs

Reflections on staying in control of the meaning-making process

In psychiatric literature, the process of finding special signs in the environment has been termed “ideas of reference”. This is the ability to find special messages in the environment. If this is done intensely and without consensus from a spiritual group, it can be seen as psychotic. One can look for special messages in nature - an activity spiritual practitioners such as shamans and priests have done for thousands of years whether it be finding special meaning in cloud formations, stones, or the shaking of trees in the wind. Applied in a more urban environment, randomly opening books or magazines, advertising hoardings or other mass media can all be consulted for special messages. During sleep deprivation this way of thinking can become more intense. Television and radio for example can be experienced as reflecting one’s thoughts or responding to them. Key words can leap out to us. We can also give special meaning to body movements, colours or registration plates. Communicating with the world like this can become something we get very attached to, allowing us to access other worlds of meaning. At other times it can be quite frightening. Such ‘magical thinking’ can help us to feel less lonely and more connected or important to others. In helping people who are investing in this way of thinking and interacting with the environment, it is important to discuss the ideas and themes they are considering, simultaneously taking them seriously as well as at times suggesting that there may be other ways of interpreting what they are perceiving. People can, if they wish, learn to step back from the experience of the television ‘talking to them’ so they do not get drawn in and can instead let go of this stream of thoughts. To help people reflect on staying in control of these processes I will share examples of my own or others’ experiences with this ‘meaning making’.

Knight (2009) also talks about the value of giving people hope and supporting them to feel in control of their lives. “There is a strong role here for helping someone who has been isolated with unusual beliefs to develop their role in the community, through interest groups, education and other vocational activity. Gordon believed he had died and come back to life and had special healing powers. He also had a long-standing desire to manage a restaurant in the center of the city where he lived. He tried going to an unusual beliefs support group but did not feel comfortable in that setting. A few months later his recovery support worker did some work looking at how he could work towards fulfilling his goals and dreams. Together they broke down his dream into manageable steps. One of the first steps was to go to college and learn basic numeracy and literacy. For the first time in twenty-five years Gordon went to an educational establishment and after years of social isolation became a part-time student. The first day of college he was trembling with fear because his memories of school were largely about being bullied and written off as incapable. He did this with the support of his recovery worker who gradually reduced her support accompanying him to college till he was going independently. In his first term he was given

feedback about the good standard of his work and his friendly nature toward the other students.

Working within belief systems

Knight's (2009) research has focussed on how people can make themselves feel safe within their belief systems. She interviewed people and found that there were many ways people could reduce their anxiety without changing their beliefs. She suggests that many people live with unusual beliefs (such as beliefs about telepathy, spiritual possession, alien abduction, global conspiracy) without coming to the attention of psychiatry because they can cope with their beliefs. Therefore in helping people we should not focus on removing their beliefs but on helping them cope better with their beliefs. For example one of Knight's research participants who was frightened of going outside due to a fear of being stabbed was able to go outside by wearing a stab-proof vest. People who had beliefs about contamination had found ways to eat and drink (e/g drinking bottled water or using surgical gloves to prepare food) that allowed them to cope with periods of intense anxiety without directly challenging their belief. A final example was someone who wore protective foil under a hat to protect them if they felt they are being targeted by radiation.

Being given choice about investigating the evidence behind intense feelings of persecution

It is very important to give someone a number of choices of ways of seeing their difficulties and ways forward (May 2004). With intense feelings of persecution, many people find it helpful to face their fears and see if they are as frightening as they seem. Ann, a self help group member decided to call the police out when she thought her neighbour had her under surveillance. She suggested to the police that her neighbour was filming her secretly using a camera hidden in an outside light. The policeman investigated this and invited her to inspect the light demonstrating that it was not concealing a camera. However it was found that one of her neighbour's security cameras was pointing at her property and this was addressed. Ann had found it very helpful that her concerns had been taken seriously and she had been supported to check out the truth of her suspicions. For others the sense of being persecuted is a familiar and convincing one they do not wish to challenge. It is important to enable people to choose other ways to cope with beliefs that feel attached to. I tend to offer people a choice such as: "Do you wish to investigate the evidence for your beliefs or do you want to accept them as true and work on building up your sense of who you are and what you want to do with your life?"

Testing out one's beliefs

Testing out one's beliefs to see how real they are is an area well documented in the cognitive behavioural literature that many people find helpful at times when beliefs are anxiety provoking. In my individual work people sometimes tell me they are beginning to get a sense that I might be working against them. I encourage them to check out the facts and create a climate of openness about my intentions role and

responsibilities, for example showing people any notes I have written offering them copies and negotiating any official recording processes.

At times self help group members have found it helpful to brainstorm together ways to investigate whether their suspicions were founded or not. One group member who felt he was being monitored by MI5 decided to put it to the test in quite a dramatic fashion by telling his brother on the phone he had a bomb in his basement. When security services did not arrive at his house to investigate he felt reassured he was not under the level of scrutiny he had imagined. Another member suspected cars for sale in her street were secret surveillance vehicles. She posed as a potential buyer with a friend and had a good look inside the cars, which alleviated her fears. It is clearly helpful to recruit others into looking into and addressing ones concerns. Finally a group member came to the group with a special message he believed had picked up for a woman he kept seeing in his local community. He felt a strong sense that he needed to warn of impending danger but he did not want to frighten her or get into trouble with the police for harassment. Over a period of time by sharing his observations and feelings with several family members he managed to get family members to discover where she worked and a cousin who worked at the same factory anonymously delivered a note from him warning the woman about his spiritual insight. He was then able to let go of his preoccupation about the woman's welfare.

Groups can be good places for people with peer status to offer alternative perspectives to each other. In one self help group a member who believed his mind was being monitored by the government challenged someone else who thought he was being plotted against by the Mafia "I'm not being funny but you are not that important!" He told him, the other group member laughed and responded that he thought exactly the same about the other's belief about the government reading his mind saying: "I am not sure you represent a major threat to national security!"

Working respectfully with a long standing belief to increase safety, emotional resilience and to increase motivation and understanding

Diana believed that she was born evil and that she was possessed by demons. She was attending an unusual beliefs group. Although I was open with the fact that I did not share her belief I respected it and offered to support her with a volunteer to seek some spiritual help. Diana agreed and we contacted a Catholic priest who took responsibility for spiritual possession work. Diana asked for me and the volunteer to accompany her which we did. The priest was very calm and showed us into his study which was scented with incense. He asked Diana about the nature of the demonic experiences. Diana described the demon she had seen and regularly hears. The priest told Diana that in his view it was a form of possession but not a bad possession. He said some prayers for her and offered to see her again. He also gave her prayers she could say at times when she felt any evil presence in her house. He encouraged her to be very assertive and command "In the name of God (or Jesus) get out!" Diana felt that this meeting with the priest was extremely validating. She had been previously told by a mental health professional that her beliefs about possession were non-western and therefore a cognitive behavioural approach to her difficulties was not suitable. Over time Diana started to build trust with myself as the self help group professional facilitator. I also offered her some limited one to one support.

Over a year later Diana told me that her voice had said to her to ‘take a long good look in the mirror’. A few months later she recalled a memory of her mother telling her to stare in the mirror and see the evil in her eyes. We began to consider that her voice which Diana saw as demonic, had been a messenger about abusive treatment from her mother she herself had dissociated from. Diana started to reconsider her belief that she was born evil and speculate that this was a belief that her mother had programmed her to adopt. While Diana retained many of her spiritual beliefs alongside this she began to develop a narrative of herself as a survivor of an abusive childhood and many of her beliefs and voices were clues about this past.

Knight (2009) writes: “Those working in mental health will find they are more likely to get engagement with their clients if the clients are helped what they want assistance with. Emma is a woman I spoke to as part of my research who believes she is being poisoned. As she doesn’t consider herself to have mental health problems she is seen as lacking insight. However, she wants help - she wants to know what she can do to protect herself from the poison and wants help to cope with her situation. Unfortunately, the only help she has been offered has been medication and various professionals trying to convince her that there is no poison. As a result she now refuses to speak about her experiences to those working in mental health. It was only because I was prepared to accept her experiences as being real and willing to work within her reality that she would speak to me.”

Focussing on self esteem and a sense of purpose so that one is not bothered about the perception that others are watching or commenting about one is a strategy many people have found helpful. In self help groups we have called this the ‘*Don’t Let The Bastards Get To You!*’ approach.

Understanding the social and emotional meanings of unusual beliefs

Emotional work

One of my first clients was Helen, a 32 year old woman who was an in-patient in a psychiatric hospital. She had had multiple hospital admissions in the previous ten years. Helen believed her body was not hers and required operations to correct some of the anomalies. She was thought to be ‘thought disordered’ there had been several recorded events of her being violent towards other women. Our therapy meetings focussed on me sympathetically listening to her concerns and writing notes on each session, which I would summarise at the beginning of the next session in order to aid her memory and sense of coherence. Gradually as trust was built she was able to tell me about how she had had a daughter taken away from her by social services. I then focussed on this emotional loss and offered her counselling for this. The meetings were interrupted when she was moved from an acute ward to a secure ward due to a violent incident. I then began meeting with her on the secure ward. I was clear with her that I thought she was responsible for the violence she had committed. Our counselling sessions continued until she was discharged from hospital.

The effect of the emotional bereavement counselling seemed to have a remarkable effect on Helen’s well being and social functioning. She became significantly less pre-occupied with her body parts beliefs and determined to find employment once she

was discharged. When she was discharged she found a fulltime job in catering which she sustained for a six month period. Helen was reluctant to carry on meeting once she was discharged, which was understandable given her negative experiences of hospital treatment over the years. However if she had been able to continue to meet with me she may have had a longer period of stability and integration.

This shows how 'delusional thinking' may be a way of defending against overwhelming feelings of inadequacy and grief. When these feelings were validated and allowed the function of the alternative beliefs was not required to the same degree. Symbolically her child was a part of her that had been removed. This may be one of the symbolic meanings of her beliefs but I felt at the time this was not necessary to discuss with Helen.

Paranoia as a reflection of experiences of persecution and injustice

Mirowsky and Ross (1983) carried out a survey of paranoid thoughts amongst the American population. They found that working class women Mexican women reported the highest levels of paranoia. This suggests that paranoia is linked to real experiences of social inequality and powerlessness (Cronby And Harper, 2005). Within my work I am keen to look at socio economic and political understandings of how power operates and is experienced by individuals in our society. By introducing models to people they are able to see their own beliefs in social and cultural contexts. One group member who had developed the idea that nearly all politicians were corrupt and mainly self interested found it helpful to read the speeches of Tony Benn and think what he would say to such ideas. We have also used the community theatre approaches of Augustus Boal (Theatre of the Oppressed) to help people role play struggles with health professionals or benefits officials.

Projection and the meaning of persecutory ideas

Where someone is willing to be more introspective and reflective about their beliefs, some psychological work can be done looking at possible symbolic meanings of the beliefs. I have found that people are more receptive to this approach if they have good social networks of support and activities that are not all focused around their beliefs. One approach I suggest to people who want to understand and cope better with feelings of paranoia from a psychological perspective is to realise that often we project frustrations, guilty feelings and other painful emotions onto others when these feelings are overwhelming for ourselves. So rather than deal with our own feelings we put them into the environment and experience others as directing negative intentions towards us (Bentall 2003); our own difficult feelings that have been repressed may feed our sense of being persecuted or under surveillance. It can therefore be helpful to help the person develop other ways to acknowledge and express such feelings, thus taking away the fuel that the persecutory feelings rely on. Exercise, creative expression, writing letters about one's feelings and finding collective ways to address injustices are some examples. However I find it important to balance this psychological understanding with an appreciation that this sense of persecution usually has some element of truth to it both in the present, (mental health services and other social institutions *do* seek to control people by monitoring them) and in the past. The experience of being watched and plotted against is very likely to reflect past times in the person's life, which have been persecutory. Finally, the

person may have had parents or grand parents who felt very persecuted and these feelings can be handed on across generations.

Jenny, for example, was a woman who for many years had had a strong sense of a conspiracy, living with the conviction that people were being disappeared and driven off on trains to their death. Her father had been in concentration camps in Russia. He had not talked about his experiences directly but had displayed an explosive anger at various times during her childhood. He had also scolded his children when they were upset, saying they did not know truly what it was like to suffer. I wondered if Jenny's persecutory world made her feel alive and legitimate, in the sense that now she was experiencing a conspiracy as frightening and oppressive as her father's. By the time I started working with her she was unwilling to participate in any family meetings which may have at an earlier life stage been helpful in reconciling understandings across the generations of her family.

Jenny was very attached to her persecutory views of the world and it seemed that the more it had been challenged by professionals over the years, the more she had adopted a siege like mentality which strengthened her beliefs. Our Mental Health Outreach team tried to support her to live independently whilst holding her unusual beliefs. This also involved educating concerned members of the public and police etc that she had the right to have these beliefs and she was not offending anyone by having these beliefs. Jenny also valued doing stress management exercises with myself such as guided imagery exercise relaxation and mindfulness exercises.

The Time Machine

Matthew, who had been in contact with mental health services for twenty years and had a psychosis diagnosis, believed that he could build a time machine. He had held this belief for many years. One of the main reasons he wanted to build a time machine was to go back to a time before his mother had died. He had felt an urge to go and see his mother before she had died and he had ignored this urge. As a consequence he blamed himself for her death. Matthew was determined to build a time machine and collected a lot of electrical equipment with this purpose in mind. Matthew was very resistant to any argument that he was not responsible for this mother's death. However Matthew began attending several self help groups over a number of months and became gradually more trusting and socially confident. Alongside this we did some individual work to increase his self-esteem and ability to manage stress.

On one occasion I asked Matthew if he had ever heard his mother's voice, and he said that he had. I invited Matthew to participate in a voice dialogue exercise where we talked to the voice representing his mother. He agreed to try this out. So we created a chair for his mother's voice, which he sat in. I then engaged in a conversation with his mother's voice. She was very engaging and keen to give Matthew moral support. She also told Matthew that he was not responsible for her death, and that even if he had been able to visit her she would still have died of Pneumonia. Matthew found her words a lot more convincing than other people's attempts to assure him he was not to blame. After doing the exercise he felt that his mother's voice was probably his mind's representation of his mother, but nevertheless he had found the conversation

very helpful and reassuring. He relinquished his obsession with building a time machine and became more focused on getting involved in spiritual and educational activities. This is not to suggest that Matthew no longer believed that he could build a time machine, simply that its creation became less important to him.

Afterwards I reflected that by using the drama voice dialogue exercise, perhaps we had together built a kind of time machine enabling Matthew to talk to the memory of his mother in a powerfully reconciliative way.

But that is just my interpretation based on my assumptions, beliefs and values.

Conclusion

In seeking to help people who speak of alternative realities, our job is to be curious and open-minded. We should not seek to make people conform to more dominant beliefs systems in our society. We need to create social spaces where people can share different perspectives and learn new ways of being with others.

References

- Bentall, R. (2003) *Madness Explained*. Penguin Books.
- Boal, A. (1979) *Theatre of the Oppressed*. Routledge.
- Cromby, J. & Harper, D. (2005). Paranoia and social inequality. *Clinical Psychology Forum*, **153**, 17-21.
- Dawkins, R. (2006) *The God Delusion*. Houghton Mifflin.
- Freeman, D. (2007). Suspicious minds: The psychology of persecutory delusions. *Clinical Psychology Review*, *27*, 425–457.
- Harper, D.J. (2004). Delusions and discourse: Moving beyond the constraints of the rationalist paradigm. *Philosophy, Psychiatry & Psychology*, **11**, 55-64. Available at: <http://www.freedom-center.org/pdf/davidharperdelusionsanddiscourse.pdf>
- Grof, S. (1989) *Spiritual Emergency: When personal transformation becomes a crisis*. New Consciousness Reader.
- Knight, T. (2009) *Beyond Belief: Alternative Ways of Working with Delusions, Obsessions and Unusual Experiences*. Peter Lehmann Publishing.
- May, R. (2004). Making Sense of Psychotic Experience and Working Towards Recovery. In J.F.M. Gleeson & P.D. McGorry (eds), *Psychological Interventions in Early Psychosis: A Treatment Handbook*. Chichester: Wiley.

May, R. (2007) Reclaiming Mad Experience: Establishing Unusual Beliefs Groups and Evolving Minds Public Meetings. In P. Lehmann (Ed) Alternatives Beyond Psychiatry. Peter Lehmann Publishing.

Mirowsky, J. & Ross, C.E. (1983). Paranoia and the structure of powerlessness. *American Sociological Review*, 48, 228-239.

Mosher, L.R. & Hendrix, V. (2004) Soteria: Through madness to deliverance. Xlibris.

Peters, E.R., Joseph, S.A. & Garety, P. (1999a). Measurement of delusional ideation in the normal population: Introducing the PDI (Peters et al. Delusions Inventory). *Schizophrenia Bulletin*, 25, 553-576.

Peters, E., Day, S., McKenna, J. & Orbach, G. (1999b). Delusional ideation in religious and psychotic populations. *British Journal of Clinical Psychology*, 38, 83-96.

Podvoll, E. (2003) Recovering Insanity: A compassionate approach to understanding and treating psychosis. Boston: Shambhala Publications.

Romme, M. and Escher, S. (1993). *Accepting Voices*. London: Mind Publications.

Romme, M. and Escher, S. (2000). *Making Sense of Voices*. London: MIND Publications.

Romme, M. Escher, S, Dillon, J. Corstens, D. Morris, M. (2009) *Living with Voices, 50 stories of Recovery* . PCCS books.