

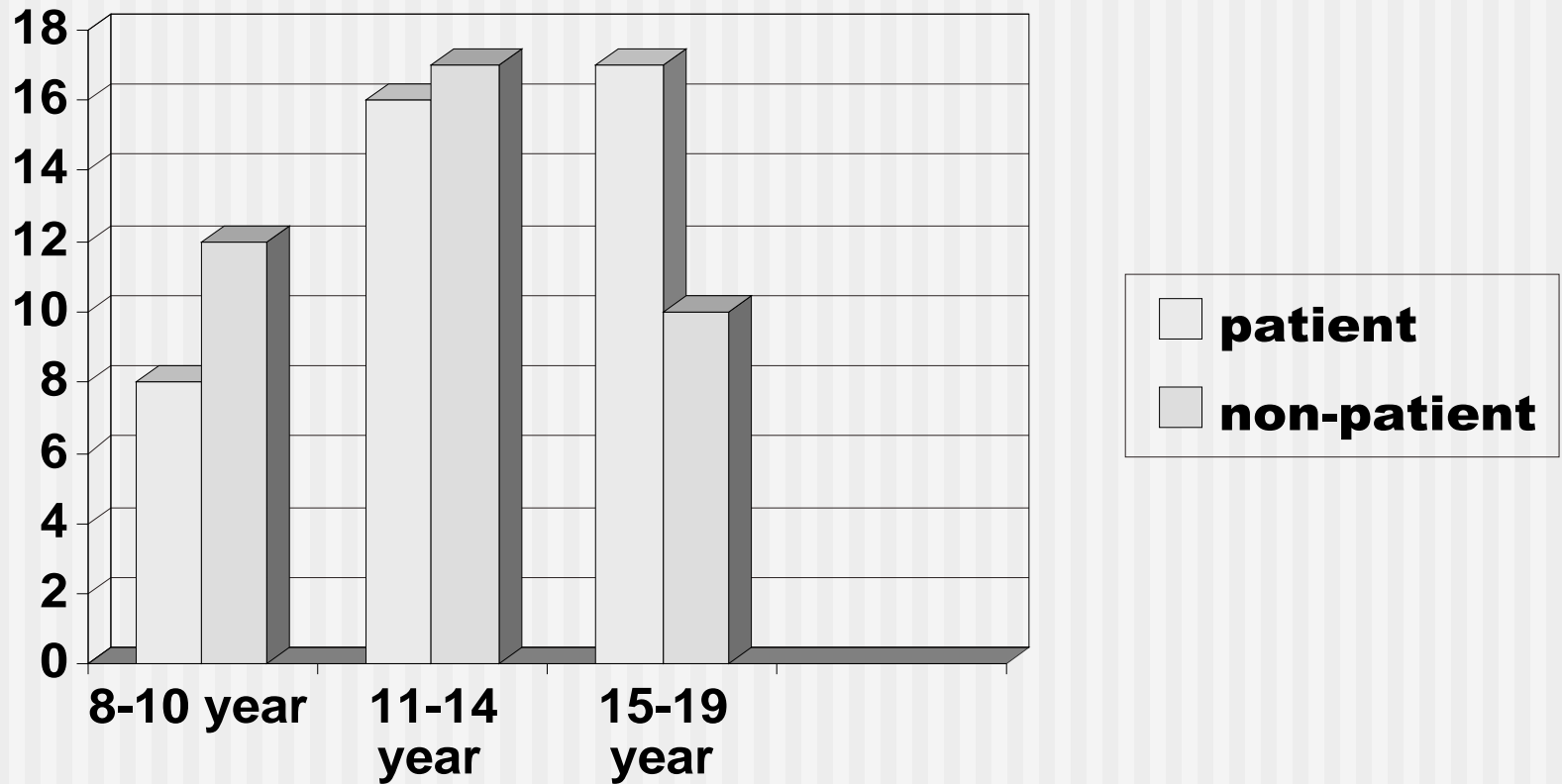
The message of the voices: some results from a 3-year follow-up study on 80 children hearing voices

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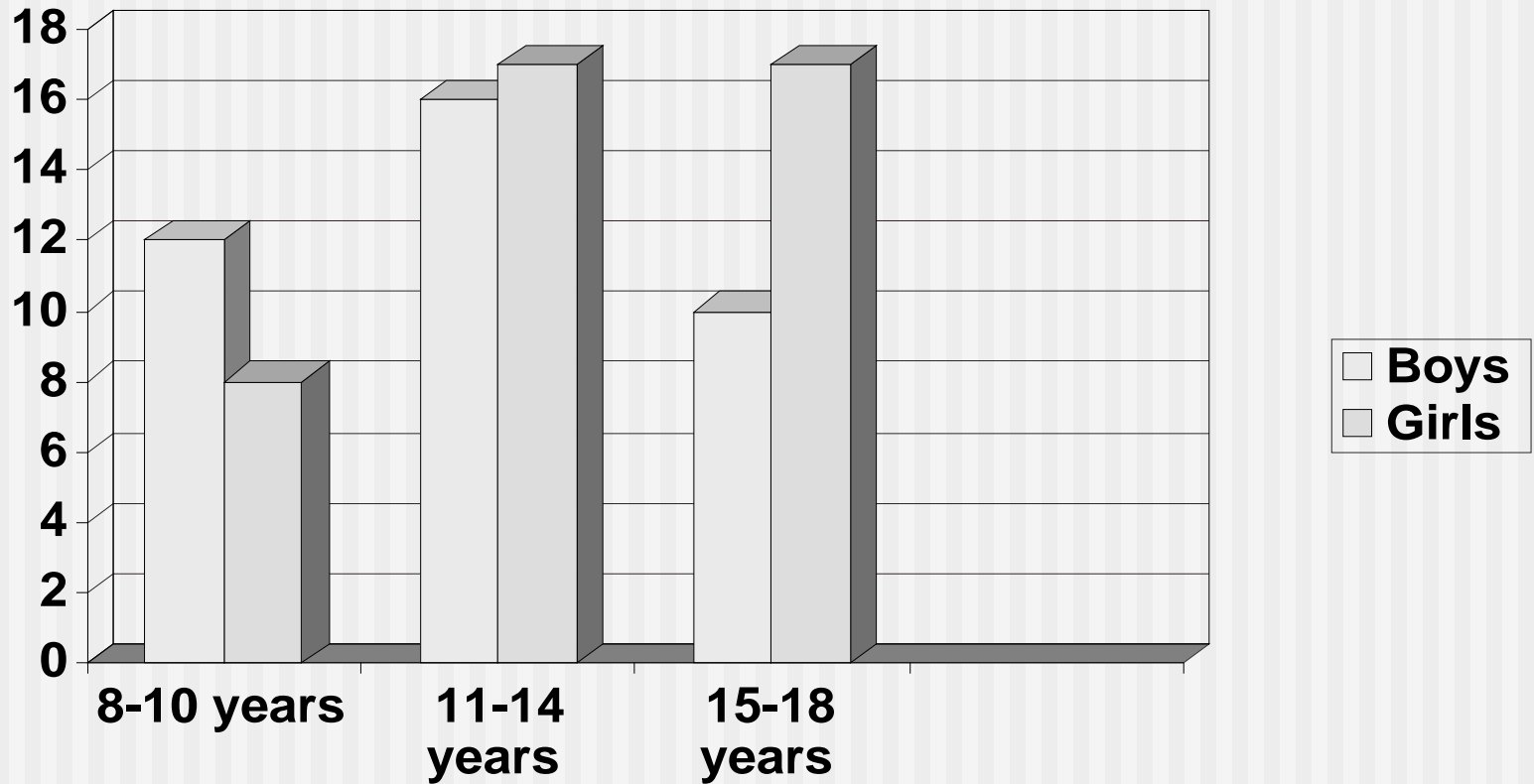
Prof. Dr. Marius Romme

First year

80 children hearing voices



Participating children first year



Research instruments

- Maastrichts Interview for children hearing voices (MIC)
 - **Escher, Romme (1987; 1995)**

- Brief Psychiatric Rating Scale (BPRS)
 - **Ventura ea. (1993)**

- Dissociatieve Ervaringen Scaal (DES)
 - **Bernstein and Puttman (1986)**

- Youth Self Report (YSR)
 - **Achenbach 1982**

- Children's Global Assessment Scale (CGAS)
 - **Shaffer ea (1983)**

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- 60% of the children lost their voices
 - 85% of the children began to hear voices in relation to one or more traumatic events.

Are there factors that influence the course ?

Are there difference between patients and non-patients?

- BPRS

- High score on anxiety
- High score on depression
- High frequency of the voices

- Des

- High score on dissociation

Trauma

- Confrontation with the death
22% (18)
- Problems around the home situation
23% (19)
- Problems around the school situation
23% (19)
- Other kind of trauma
15% (12)

Problems around the home situation

19 children

- Tension within the family 10
- Divorce 6
- Moving houses 3

Problems around the school situation

19 children

- Mental disabilities 8
- Changing schools 7
- Being bullied 4

Other kind of trauma

12 children

■ Sexual abuse	4
■ Birth trauma	2
■ Physical illnesses	2
■ anaesthesia	2
■ Rejection in love	1
■ Abortion	1

Two sorts of information

- The general data, which become reduced to codes and worked on with statistics.
So called objective information.
- The individual stories, which cannot be generalised as the voices have an individual meaning.
so called subjective information

Voices as a source

- Not using the voice is a missing a helpful source.
- The voices can be talked to or given a message.
- Voices have a message.

Message of the voices

- Onset of the voice hearing
- Characteristics of the voices
- The content
- The triggers
- The influence of the voices

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- The voice of the abuser
 - You better be dead; you better make you home work now; tell your friend he is a fag;you are an outsider
 - The circumstances, places where the voice come or do not come.

MAX

The onset

- From his 6th year on, from the moment he started to hear voices, his work at school began to decline. Max has a very nice 16 year old brother. Max always tries to live up to the standard of his big successful brother, who is not troubled by voices or anything else. My wife and I also do not hear voices.

trigger

- Max seems to be troubled a lot by negative voices as soon as he **feels the pressure to do something.**
- Max becomes afraid and is than gruffly and unreasonable. This happens mostly when he has to go to school, specially when there are difficult examinations.

Trigger

- Max does not hear voices when he is on vacation, or during an outing. Than he is a very nice, sportive, spontaneous boy full of humour with no health or social problems.

Influence of the voices

- When there are for example examinations with **mathematics his voices order him to write down the wrong figures** and he feels that he has to obey.

Content of the voices

- The nature of the voices is extremely destructive. When he wakes up a male voice mostly tells him **he better be dead.**

During the day the voices tell all kind of horrible things I do not dare to mention but the overall message is that **he is a total failure.**

Situation at this moment

- Max does not want help, because he feels he is not a nutter.
- We keep Max voices strictly in the family.
- We will do anything to help Max, if necessary change our behaviour.

Mental health is regaining a balance in daily life with emotions and social actions.

Conclusions regarding mental health care.

- Voices were not accepted
- Voices were not used in therapy
 - Characteristics
 - Triggers
 - Content
- Parents and children were forbidden to talk about something that disrupted their daily life. The child was singled out.

Regarding mental health care

- Voices are only seen as negative.
- Voices are not talked about or talked to.
- Medical theories force voice hearers on a medical road they are not familiar with.
- Medical concepts force voice hearers to submit to or to lie.