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**ANGELS AT OUR TABLES:
NEW ZEALANDERS' EXPERIENCES OF HEARING VOICES**

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A thesis submitted in partial fulfilment of the requirements for the degree of
Doctor of Philosophy in Psychology

University of Auckland

2007

ABSTRACT

The aim of this study was to explore the experience of hearing voices in the general New Zealand adult population. This included mapping the topography of voices and the impact of the experience on participants' lives, exploring participants' explanatory models, investigating coping strategies and support structures, and developing a model of the essence of hearing voices. Quantitative and qualitative analyses of questionnaire (n=154) and interview (n=50) data revealed a great diversity of experiences, both within and among participants. Of all topographical variables significantly related to emotional impact (content, form, duration, intrusiveness and control), voice content was the only significant predictor variable, accurately predicting the emotional response of 93.3% of participants. Overall, participants who valued their voice experiences tended to have spiritual beliefs, a more positive emotional reaction and less contact with mental health services. In contrast, participants who experienced mostly unwanted voices tended to have biological and/or psychological understandings of their voice experiences, a more negative emotional reaction to them, and increased contact with mental health services. Participants reported using a vast array of coping strategies, with varying degrees of success. Individualised techniques were reported to be the most effective, followed by setting aside a time to listen to the voices. In terms of help and support, participants called for a model of intervention that accepted their voice experiences as real, took an holistic approach incorporating contextual, cultural and spiritual factors, and worked with voice-hearers, their families and the public to provide information about voice phenomena and normalise the experience. Using a phenomenological approach, a model of the essential structure of hearing voices is proposed, comprising five components: the content of the voices is personally meaningful to the voice-hearer; the voices have a characterised identity; the person has a relationship with their voices; the experience has a significant impact on the voice-hearer's life; and the experience has a compelling sense of reality. The implications of this research include validating voice-hearers' perspectives of the experience, informing clinical work with voice-hearers, and informing the development of local and national-level services, such as a New Zealand Hearing Voices Network.

ACKNOWLEDGEMENTS

Thank you:

All of the participants who took part in this study, for the gift of your stories and for trusting me to do them justice.

John Read, for inspiring me to challenge the conventional ways of viewing psychosis, walking beside me throughout this journey, and offering just what I needed when I needed it.

Arana Pearson, Ron Coleman and Debra Lampshire, for your continued support of this project.

Patsy Hage, for having the courage to speak publicly about your voice experiences, and Marius Romme and Sandra Escher, for supporting her in this and setting the groundwork for the present study.

Melissa Taitimu and Angus Maxwell, for sharing my passion for better understanding “psychosis” and what it means to those who experience it.

Claire Cartwright, for sharing your expertise in qualitative research.

Dylan Rogers, Margaret Francis, Raj Dabhi and Wei Kim, for your I.T. knowledge and support.

The University of Auckland, for your financial assistance via the University of Auckland Doctoral Scholarship and the Graduate Research Fund; and the Freemasons of New Zealand, for your generous financial support via a Freemasons Postgraduate Scholarship.

Mum and dad, for your support, encouragement and practical help with this project.

And David, my husband, for loving me through it all. Je t’aime la folie!

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