

# Paranoia Support Groups and Working With The Experience

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## History of paranoia

The word paranoia was coined by Hippocrates who is commonly described as the founder of Medicine who was born around the year 460BC on the Greek island of Kos.

He used the word paranoia to describe people's experiences when they had a very high temperature.

He did this by putting together the Greek words (Para) beside and (Nous) mind, to create a word 'out of ones mind'.

How many CCTV cameras are there in England?

5 million 20% of the worlds population

1. What does paranoia mean to you?

2. How do you recognise when someone is paranoid?

## FEAR INVENTORY

What am I most frightened about?

Do my fears restrict my movements outside the house?

Are there places you refuse to go to because you are frightened?

Do your fears inhibit you from taking a job or advancing in your job?

## Consequences

Which of these is the starting point? (triggers).

We need to deal with **stress, anger, people, life experience**  
and **situations.**

Group members will bring a variety of feelings, emotions and beliefs  
to the group

**Think about these experiences as fear free**

What is paranoia without fear?

What are voices without fear?

What is anxiety without fear?

Can you have a panic attack without fear?

# **FEAR**

Is the master emotion



## Traditional assumptions about paranoia and paranoid delusions

- An irrational and false belief
- Belonging to an individual (or, more rarely, a couple or group)
  - A sign of pathology
- The content and context of which are meaningless

### Aims of intervention

- To reduce distress by eliminating the belief in some way (e.g. through the
  - use of psychiatric medication)
- To make the person more 'rational'

## Problems with traditional assumptions

- They are based on a naively realist view of the world, but....
  - Most people are diagnosed without empirical investigations taking place
    - Agreement between diagnoses are poor
    - We do not have 'objective' evidence for many beliefs
      - (e.g. political, ethical, religious etc.)
- Conventional theories see 'delusions' as abnormal in some way but ....
- Surveys of general public show high rates of belief in supposedly
    - irrational phenomena

A Gallup survey (1995) found the following rates of belief:

Telepathy	45%
Ability to predict the future	45%
Hypnotism	42%
Life after death	39%
Faith healing	39%
Ghosts	31%
Alien abduction	70%
U.F.O's	35%

- Studies find it hard to differentiate between 'normal' and 'deluded' people
- There is evidence that people vary in their conviction in supposedly delusional beliefs

Delusions are seen as meaningless but....

- There is evidence that 'delusional beliefs' may relate to purpose and meaning in life
- Links may be found between themes in a person's 'delusions' and in their life
  - Surveys report a link between paranoid beliefs and social positions characterised by powerlessness and the threat of victimisation and exploitation

# Alternative ways of working

## Key principles

human rights (people should be free to believe whatever they want)

for those who are distressed by their beliefs, focus on the 'fit' between their beliefs and the lives they wish to lead rather than on necessarily changing the belief itself

## Paranoia as the perception of an alternative reality

- Within this viewpoint, a paranoid belief might be seen as a legitimate way of seeing the world
- It might also be seen as the result of having a heightened sense of awareness or an increased sensitivity to the reactions of others as part of the variation of human experience (like hearing voices)
- **Preferred intervention:** To be left alone! Or to meet or network with others who accept their ideas and help them explore them in a non-judgemental atmosphere. The others may or may not share the ideas

# Paranoia as a response to past victimisation:

## Pros

- ▣ Can help to make sense of bewildering experiences by making sense of and sharing the experiences with like-minded people in a safe and non judgemental atmosphere
- ▣ Helps people to develop a story to understand their journey from the past to now
- ▣ Relates people's feelings and approach to the world, in relation to their experience of power which helps people break down feelings of powerlessness and isolation

## Paranoia as a response to past victimisation:

### Cons

- It is not known whether all those who experience paranoia have been victimised
- People may not feel ready to discuss past trauma
- Handled badly, discussions can leave the person re-traumatised



## Trauma is prevalent in mental health

- Sexual
- Physical
- Emotional
- Often found in the narrative

We should be asking what has happened to  
you?

Not what is wrong with you?

Do we ask?

(Warne and McAndrew 2005)

- Most staff do not discuss traumatic incidents including abuse with consumers in the assessment process
- Most service user's would prefer to talk to a nurse rather than a doctor about traumatic incidences (less intimidating), and want nurses to initiate the discussion

## Why not?

Medical model

Client too disturbed (avoidance)

Creation of too much distress (Can of worms)

Clients don't want to talk about it (rationalisation)

False memory syndrome

Trauma is a cognitive fog, it stops the person thinking that the trauma has stopped, because it's 100% remembered, fogging stops a person becoming an adult because it becomes a fear to stop you seeing the person to tell them what they did was wrong

***If you dare not look you cannot see***, the trauma is in a freeze frame it hasn't stopped for them they are waiting for it to happen again

But you know ( the worker) it has stopped

Irrational logic and rational logic come from infancy. People are brainwashed into fear

A lot of infants deal with trauma with denial, experiences recurring shows that trauma is not totally over we eliminate the trauma / fear to a level to what the person needs to continue in life

As long as we repress  
traumatic memories we  
remain in the trauma

# Frozen terror stops emotional development





# 3 Main points to remember before engagement

- Truth
- Trust
- Consent

- Truth - What is really out there
- Trust - The Antidote
- Consent- Empowers

Fear is the pathogen

Trust is the antidote

# The Trauma Triad

- What you did was wrong
- I am angry at you for doing it
- I am going to stop you doing it again
- Helps unlock frozen terror

## What you need

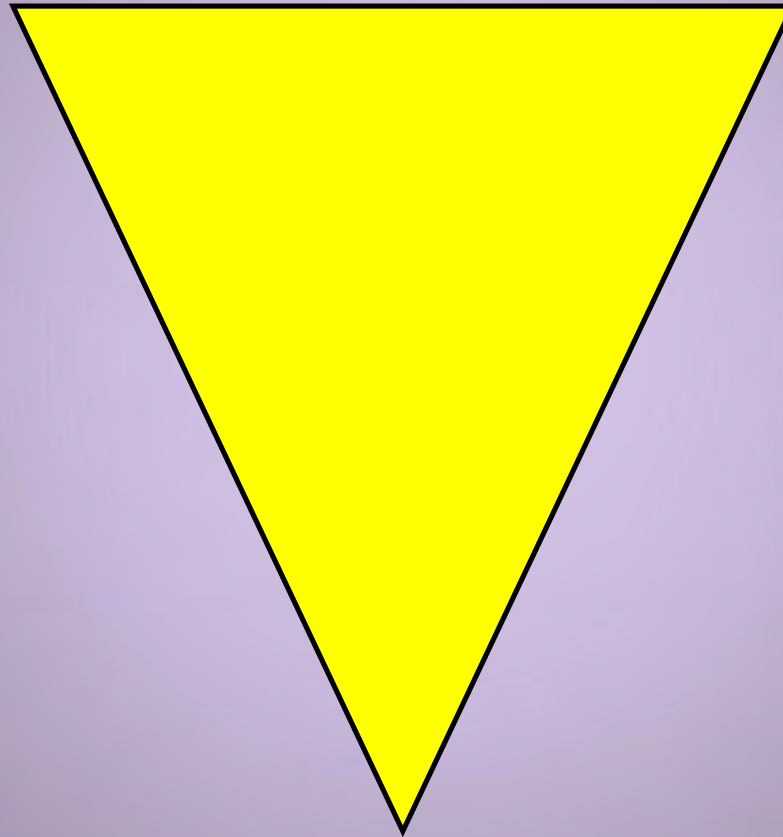
- ▣ You need to know the persons trauma is over
- ▣ Your task is to convey this fact from you to them  
(Without parenting or re-traumatising)
- ▣ So a pre-requisite on your part is to believe it yourself at least to believe that this is the problem
- ▣ Until cognitions start again ( the fog lifts)
- ▣ It releases the cognitive traction this begins to reduce painful memories, the person can see they are 40yrs old not 4yrs old

# Remember

- **Do not Parent**
- Parenting Keeps Kids Alive and Adults Insane

THOUGHTS

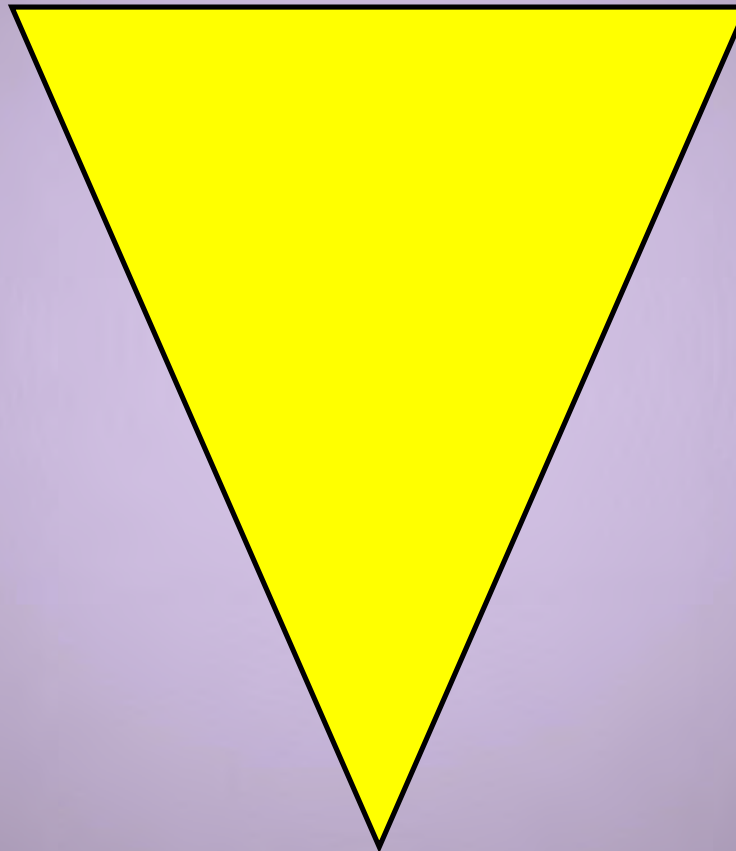
FEELINGS



BEHAVIOUR

# Making sense of paranoia

THOUGHTS  
TRIGGER



FEELINGS  
(Threat)  
CONSPIRACY

BEHAVIOUR  
CONVICTION



### Trigger / Thoughts

They have just looked at me in a strange way are they sniggering at me?

### Conspiracy/ Feelings

I don't feel safe in this situation I am getting very anxious  
I want to get away they are definitely plotting something.

### Conviction / Behaviour

I am going to hide away I don't feel safe around people

Which of the above is the main problem?

The conviction is often perceived as the most problematic because they are seen as being fixed and unshakable beliefs.

When working with people use this example:

Conviction ←————→ Story  
(What's happening now)

Conspiracy ←————→ History  
( How have you got here)

Trigger ←————→ Past/Present  
( determine relationship between  
past and present)

Look at paranoia as a kind of story.

What is happening in the persons life what does it mean to them?

It is important to make the belief safe.

Help them try to make sense of a  
confusing  
reality.

What's their history? How have they got to their present situation what brought them to the services?

How does the present relate to the past and vice versa the past to the present?

## Alarm systems

Alarm systems are related to circumstances that become the trigger. Irrational thoughts are what we first react to, but the thoughts are rational when the initial threat occurred.

Trauma goes away, but thoughts and memory remain. Fearful situations stay in the brain and are easily activated.

### Negative response

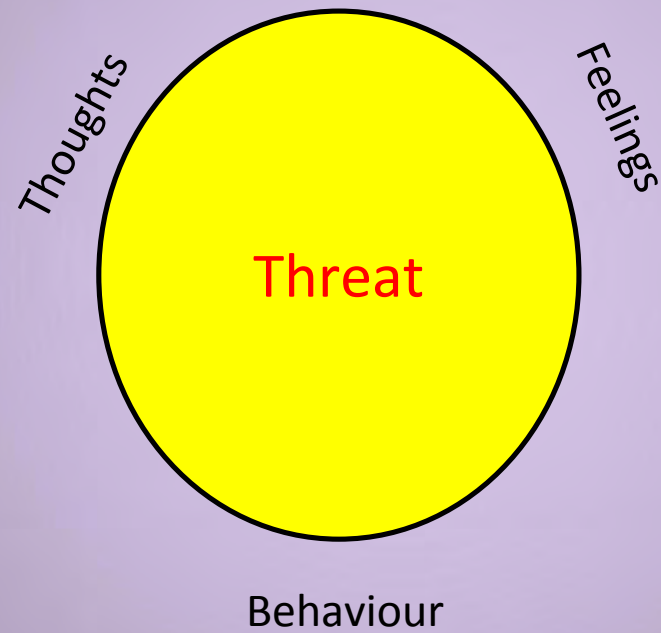
People saying your thoughts are not real.

### Positive response

When were your thoughts and beliefs more real? When did they start?

The relationship is more important than the therapy.

# Vicious circle



# Help break the cycle

Increased arousal/ hyper vigilant



Emotional overload



Social withdrawal acts as retreat & protection



Response

Help break



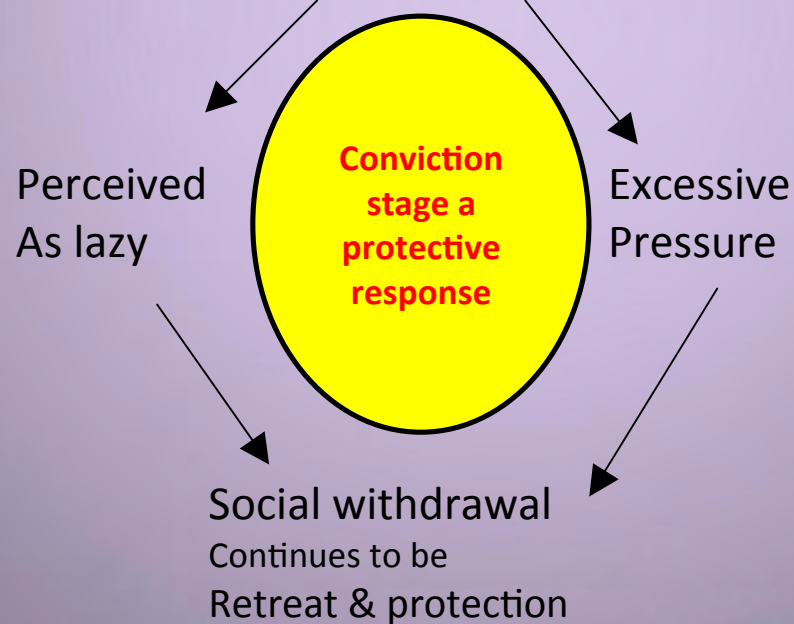
Clear supportive, positive  
Communication



Help try and make sense of  
Ideas and beliefs



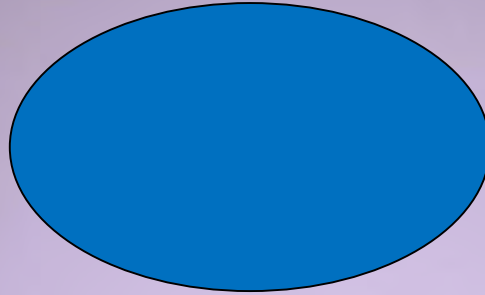
Break cycle of  
threat





Some of the feelings and emotions that people will bring to the group

PARANOIA



VOICES

SELF DOUBT

INSECURITIES

HOW PARANOIA MAKES US FEEL

People are talking about me

Frightened

Isolated/alone

Guilty

Feelings of grandeur

I take things personally

Anxious

Betrayed

Exposed/ Take these thoughts away

Insecure

Vulnerable

HOW PARANOIA AFFECTS OUR BEHAVIOUR

Avoiding places/situations

Want to be safe

Withdraw

## Managing paranoia

Medication (Use wisely)

Talking therapy (why am I thinking this way)

Accept it is part of the human condition

It's OK to have a bad day

Acknowledge progress

Exercise/ Endorphins

Practice positive thinking/ not negative/Look at mood

Rationalise thoughts and ideas/why are people talking about me?

Share my fears with trusted person

Keep busy

Reflect on past experiences (what happened)

Guard against seduction of madness

Reinforce positives/ reflect on achievements-

I got through another day

Use your intelligence to understand it

Work with people you trust

Create safety



PEOPLE I  
TRUST WHEN  
IN  
CRISIS...

SAFE HOUSING

# Belief Systems

- Never attack beliefs systems

## **Belief systems**

**Q1- What does this person want or need?**

I want a drink.

**Q2- What is stopping them from getting what they need**

I cannot because voices tell me water in my area has been poisoned and only I realise this.

**Q3- What is the ultimate aim of the thing they cannot do?**

The ultimate aim is to get them a drink – not necessarily from the local area.

**Q4- What things can the person do to get around the belief and achieve the ultimate aim?**

They can drink by only using bottled water from other areas or abroad.

## **Example Two Positive Belief**

**Q1- What does this person want or need?**

This person needs to eat.

**Q2- What is stopping them from getting what they need?**

He says “I don’t need to eat because I am invincible”.

**Q3- What is the ultimate aim of the thing they cannot do?**

Ultimate aim is to get him to eat.

**Q4- What things can the person do to get around the belief and achieve the ultimate aim?**

Encourage them to realise that even if they are invincible there is no harm in eating anyway; at least it will stop everyone else worrying. Alternatively the person could be encouraged to eat out or eat things they would prefer to eat.

## Protection strategies

John was convinced that people would attack him with knives so he became very isolated refusing to leave the house.

1 How would you get him out of the house?

2 How would you make him feel safe when leaving the house?

### How protection strategies helped John

I was living in a nightmare world at first, I had no way of dealing with the situation I acted “normally” but my inner world was filled with terror words I cannot describe. I then started using (Protection Strategies) and my distress reduced considerably and I felt much more able to cope, yet because I was acting oddly the professionals said I was getting worse.

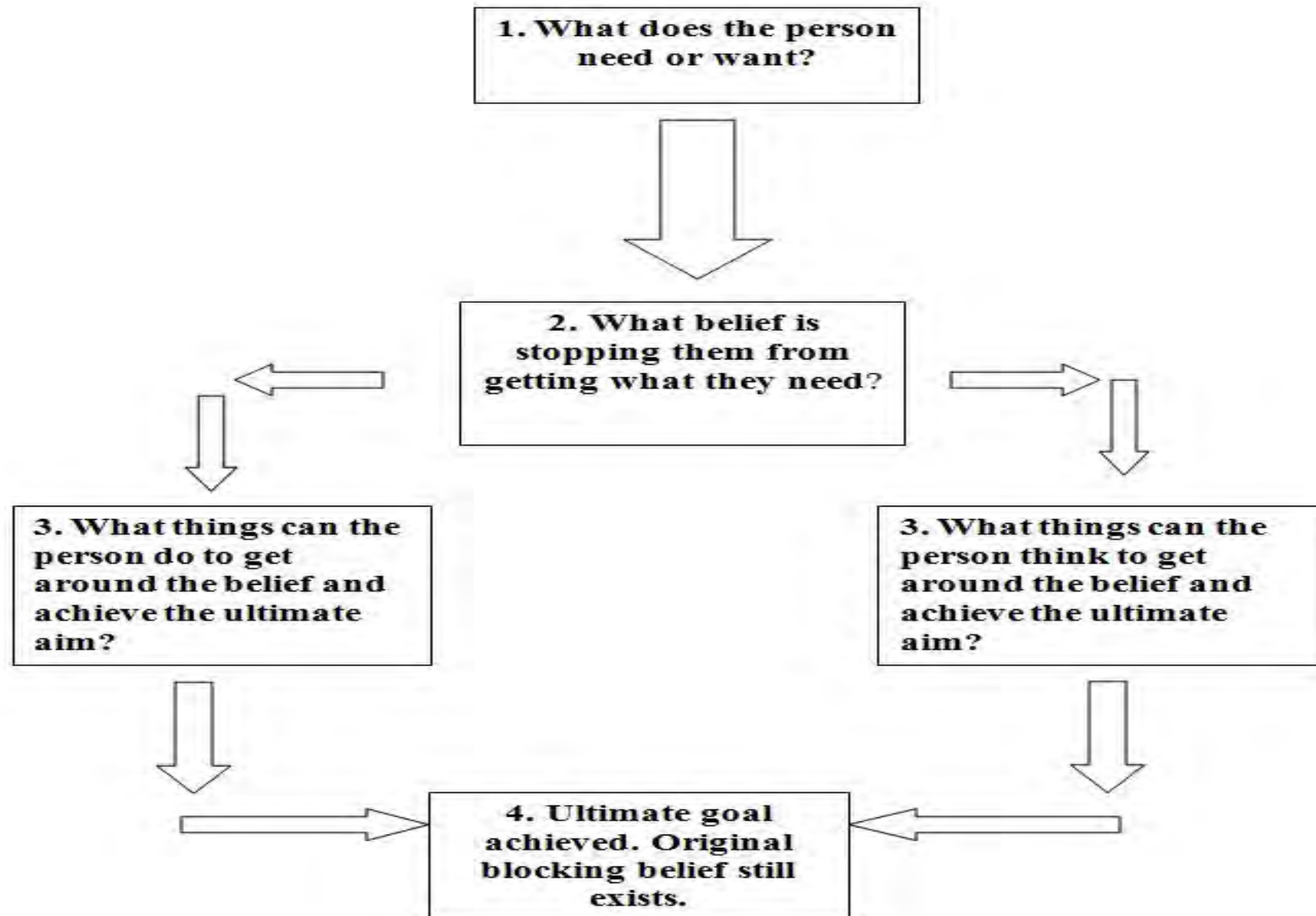
If I didn't use protection strategies my health would deteriorate at an astronomical rate I would start having Blackouts and be paralysed with fear.

## John (Solutions)

1. Arrange to go with John when leaving the house but plan the route first work out where there will be only a few people about.
2. Get him to wear a stab proof vest and carry a attack alarm.



## The stages involved in this technique



## DECODING

Sometimes people tell us about their experiences and they are viewed as bizarre but if we decode them they have a meaning often related to their emotions below are some examples of what people often say and how we can decode them.

- I am an alien
  - They are saying I feel like an alien I don't fit in society
- I am being poisoned
  - I don't feel like I can trust people right now medication is making me feel sick
- I am a prophet
  - I have to be a prophet or I am just a crazy person
    - Someone is watching me
      - Why am I being observed on the ward
      - There is a secret army out to get me
- People/ family keeping secrets about your problems

Don't just accept your suspicious thoughts  
question them.

Challenge the thoughts weighing up for and  
against the evidence.

- Is there anything that might suggest paranoid thoughts could be wrong?
- What would I say to a friend who came to me with a similar problem?
- Are there any alternative explanations for what seems to have happened ?
- If I was feeling happier would I still think in the same way ?
- Are my past experiences getting in the way of me seeing the present situation clearly?

# Body state info

Little witch

Diabetes Lesions in eyes

Sex machine

IBS

Thought insertion

Ego/Dystonic intrusions thoughts outside the personality

Possessed

Peripheral neuropathy glue and alcohol abuse desensitises feelings in hands etc

The Devil

Respiratory alchosis loss of breath, Taking in to much oxygen without breathing out also known as lobstering (limbs stiffen)

# Ego Dystonic Thoughts / Thought Insertion

Ego dystonic thoughts are thoughts outside of the personality, they are thoughts that everyone experience's, commonly known as automatic thoughts. We don't know why they occur, but what we do know is that they show us things that we will never do. For example you could be walking behind your young child on the stairs and suddenly think what would happen if I pushed them down the stairs, you would be alarmed to think that way, but its the mind showing us things we would never do. If a person doesn't understand these thoughts they can cause great distress. If a person experiences voice hearing he may describe them as thought insertion ( someone putting the ideas in their head) this can also be seen by some people as being telepathic. A thought could be that the person has an in pure thought about a under age child and if the cannot dismiss it, their voices may call them an abuser or paedophile. This could lead them to believe that someone else is putting the thoughts in their head because they know they are not an abuser. Its very important to help the person understand that everyone has these experiences and it does not mean they are a bad person

Starting groups our history

# Discuss with person next to you

- Why start a paranoia support group?
- Aims of group?

## What are self help groups?

Self help groups are meetings where people with similar experiences can get together without having to “put on a mask” and speak with others who have been “there”.

Self help groups should not be viewed as therapy but as a place where you can receive encouragement, reassurance, support and a listening ear.



## How can they help?

The meetings can help reduce the terrible feelings of isolation which can often follow the “experience of paranoia or hearing voices” It can provide a supportive, informal environment where people can share their fears, worries and ways of coping with their experiences that have worked for them.

You will hear how each person’s experiences are different but also see that there are many feelings and themes that are common.

This will allow you to support others as well as get support yourself.

This may well help to counteract the negative approach to life so frequently associated with the experience of paranoia or hearing voices.

## Think about why you want to start a group

Be very clear about what kind of a group you are setting up. During the planning and process of setting up, you may be asked questions by various people. If you have thought through why you want to set up a group, you will be able to answer their questions easily. Get together with the people who are going to help and support you and talk through your plans. Some questions you may be asked are:

What are the group aims?

What type of group is it and what will it do?

What is the group for?

What do you think people will gain from the group?

What do you want the group to do?

What will members gain by joining the group?

What will members do?

## Advertising the group

When you have made a decision to run a support group letting people know about it is crucial.

You can make a flyer with the venue, time and date also a telephone number for a contact person. It is really important that you advertise the group everywhere. Some good places are Hospitals, Accident and Emergency, Hostels, Day Centre's, Drop Ins, Community mental health teams, Libraries, Internet, Voluntary Sector Organisations, Drug and Alcohol Services.

When deciding on the venue for the group always make sure that it is accessible by public transport, it is also useful to put bus or tram routes on the flyer.

## Checklist for meetings

### Accessibility

- For people who use wheelchairs
- Have trouble climbing stairs
- Visual difficulties
- Public transport, lonely/isolated

### Timing

- Is it the right time?
- Daytime/ evening (Evaluation)
- What about people who work? (Info packs)
- Parents with young children

### Equality

- How do you reach different groups of people?
- Minority groups
- People who live alone
- Is your publicity in different languages?
- Knowledge of different cultures (Learning about persecution from them)

### Length of meeting

- Too long
- Too short
- Open closed
- Time limited
- Ongoing

## Getting into the group

*Joining a new group like this can be nerve wracking. Some ways of helping you to join are*

- Before joining the group meet with one of the facilitators to find out more about how the group might help you, it has to be *your choice* to attend not your workers.
- Before joining the group meet with one of the group members (male or female) who have experiences of paranoia or hearing voices to let you know how the group has helped them, this is known as a buddy system.
- Bring someone with you to support you, this can be a family member, friend or worker, should they want to come into the group the other group members should be asked first.
- Remember that everyone in the group has experienced paranoia or heard voices and understands how upsetting it can be.
- It is also important not to worry if you cannot attend every week. You will always be welcome when you visit.

# Contact details of members

# **FACILITATOR'S ROLE**

The aim of group facilitator's is to lead by listening. This means that wherever possible, the group as a collective makes decisions about direction, activities, changes etc. It is the facilitator's role to enable this process.



A key part of this role is to magnify the voices of people who are not normally listened to, by emphasizing the belief that each person in the group has a deep wisdom and expertise about ways of managing and dealing with problems.

The aim of group facilitator's is to show respect for the reality of the trauma and suffering that people have experienced, and a keen awareness of how these experiences may limit their expression of feelings, ability to think clearly, etc.

Validation and support for people's resilience, creativity, stamina, and emotional strengths, even when they themselves doubt that these exist.

A relaxed, informal, improvisational tone in facilitating the discussion, allowing what happens naturally to occur instead of imposing a predetermined or fixed agenda or plan upon the situation.

Never giving people false hope, or making them think that situations over which they have no control will in fact turn out in one way rather than another.

Showing a genuine interest in the range of people's inner, subjective experiences, regardless of whether you yourself have ever experienced anything like them yourself.

A willingness to share some details of your own experience when these are relevant, so that people have some sense of you as an individual person, without, on the other hand, taking up too much time talking about yourself when what is needed is a focus on group members.

A careful preservation of the group meetings as a safe space, with clear beginning and ending times, protection from intrusions, respect for confidentiality, needs for boundaries, etc.



Being able to share useful coping strategies or other elements of the Paranoia Network approach in a natural way - rather than being preachy or judgmental if people don't find these useful or have other approaches of their own.

A facilitator has to be fully committed to the group,  
it is not a six month project

## Conflict Management, Coping with Difficult Members and Understanding Behaviour

Keeping things civilised

- Respect other people
- Challenge constructively and sensitively
- Don't make assumptions about other people
- Consult before acting
- Encourage healthy debate
- Avoid and discourage personal attacks on others
- Enable people to back down with dignity

Resolving Conflict

- Establishing common goals
- Restructuring the group or the meeting
- Integrative ('win-win' or agree to disagree) bargaining
- Communication

REMEMBER:

Disagreement can either be healthy or destructive.

## Coping with difficult members – Understanding the behaviour

- How does this person make me feel?
- How is this person affecting other group members?
- What 'pay off' does this individual get from their behaviour?

When looking at how to manage difficult behaviour, ask yourself:

- If we are aware of our own negative feelings we can deal with them more constructively
- Do they look bored/threatened/embarrassed etc? Am I feeling unnecessarily threatened because of lack of self-confidence? Do I need to intervene as group facilitator, to prevent the group from being obstructed? Other group members are an important source of allies in handling difficult behaviour
- People do not behave without reason. Recognising why a person behaves in a certain way reduces the threat. Can you help them to achieve the same thing in a different way?

## Some behaviours which might be seen as *difficult* include:

- People who overtly/covertly criticise other group members
- People who question everything that is said
- People who challenge the value of the group or what it is doing
- People who refuse to do group tasks
- People who do not say anything
- People who talk continuously
- People who talk about everything in an abstract/intellectual way
- People who tell irrelevant stories
- People who challenge the status of the group facilitator

Group facilitators may think that a group member is difficult because; they feel threatened in some way or they obstruct the working of the group in some way.

## Possible strategies when working with difficult members

- Don't be defensive when criticised
  - Never put the individual down
  - Draw on support from other group members
  - Be aware of group dynamics and be flexible within a group session
  - Encourage critical individuals to be more specific
  - Use your co-facilitator and/or supervisor
  - Actively listen and accept that this is how the individual feels.
- 
- Make links to past comments if possible and turn it into a positive contribution to the group (E.g. dealing with a person's anger)
  - Allow the group to constructively challenge the difficult member.
  - If two or three people are dominating the discussion, try breaking into pairs with specific tasks. When the group come back together the dynamics will have changed
- 
- You may realise that the person was actually making a query rather than a criticism
  - If the difficulties persist, seek advice and feedback.

## **Building links**

**This is the skill of being able to make connections between what a person says and something else they have said or done, or between one individual's contribution and another individuals. E.g. One person may say that their voices are worse at night, other person's may have previously mentioned this; the facilitator can then say to the members 'has anyone else experienced this?'**

## Reviewing the group

From time to time ask each member what they think they are getting from the group

What do they want from the group?

Does it meet their needs?

What makes it work and why?

What would make it better?

What don't people like?

Talk to people one on one & in group to be sure people aren't just being *polite*



# Support for facilitators

- For groups to be sustainable, it is important that facilitators are supported in order to do the work.
- It is valuable to meet with other facilitators to share experiences in order to gain mutual support and to develop ideas and good practise.
- In England, we set up Paranoia Group Facilitator forums.
- Forums meet every 6 weeks.
- Facilitators network with each other, share difficulties, concerns, triumphs and good news.
- These forums will now be developed nationally.



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