

**Possible triggers to the onset of paranoia could include:**

Increased Responsibility  
Too much pressure  
Lack of sleep  
Fear of failure  
Inability to say "NO"  
Alcohol  
Strangers  
Phobias  
People in authority  
People shouting  
Coincidences  
Public transport  
Certain days or evenings

If a person can identify their triggers it is important to take action to prevent any further escalation and problems.

**Early warning signs may include:**

Racing thoughts  
Seeing things  
Increase in voices or their negativity  
Not making time to eat  
Altered sleep pattern  
Increasing isolation  
Drinking more alcohol  
Taking more drugs legal/ illegal  
Spending more time around others

When early warning signs occur, create safety, seek advice and help.

## **What can family and friends do?**

### Controllable factors

If the person is also hearing voices try to help them get control of the voices as they could be reinforcing the paranoia.

### Foresee difficulties

Try to anticipate problems rather than wait for them to happen. For example is there a stressful event coming up? Is it a certain time of year?

### Don't be confrontational

Telling the person they are talking rubbish is never effective as it damages self esteem and looks like you don't care.

### Allow independence

Try not to be over protective or over involved. Give the person space to live their life and show them love and respect.

### Sharing beliefs

It is acceptable to say to a person I don't share your beliefs but what do they mean to you. This helps us understand where the person is at this time in their life, it also helps them make sense of what can be a confusing reality.

### Avoid negativity

People who experience paranoia are often intelligent, sensitive and perfectionists. They can also be very imaginative. On occasions the paranoia can be an unfortunate misuse of the imagination. Try to look beyond the paranoia and try to identify the person's qualities outside of the paranoia.

**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?

Recent research has suggested that some sufferers feel paranoia associated with a deep sense of their 'badness' as a person, while others feel unfairly treated by their imagined persecutors and feel they are receiving harassment that they do not deserve. These two types of case are known as 'bad-me paranoia' and 'poor-me paranoia'.

## **What causes paranoia?**

### Genetic factors

Since paranoia is such a complex blend of thoughts and feelings it is unlikely to have a simple single cause. It is possible that the influences of our genes – biological building blocks we inherit from our parents – may make us more vulnerable or predisposed to paranoia. But they will not cause it.

### Childhood influences

Influences in childhood may play a part in some people. If a child is brought up to be told the world is a very unsafe place and that people are horrible it could mould their personality

### Social context

Paranoia is not always located inside the head it can be a response to the world around us and a persons thoughts, bizarre as though they may seem are often a reaction to life stresses and traumatic experiences

### The effects of drugs

Paranoia can have physical/chemical origins. As well as the effects of such illnesses such as dementia, drugs such as LSD and amphetamines all have the capacity to induce paranoid states. Some steroids taken by weightlifters and athletes, fuel, insecticides and paint have been associated with paranoid states, but these can be episodic

### Understanding the fear

When we look at paranoia and other experiences such as, anxiety, hearing voices and panic attacks, they are driven by fear, helping a person understand the causes of their fears can quiet often alleviate the impact it has on their lives.

## **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 groups are useful to share experiences.

## **What are self help groups?**

Self help groups are meetings where people who experience paranoia or unusual beliefs can get together without having to put on a mask and speak with others who have had similar experiences. The meetings can help reduce isolation which often occurs after experiencing paranoia it can provide a supportive environment where people can share their fears, worries and ways of coping with their paranoia or unusual beliefs. You will hear how people's experiences differ, but also that there are many people who have the same experiences and beliefs. This will allow you to gain support but also enable you to support others as well

***You don't have to be alone with your paranoia or unusual beliefs***

Paranoia can be viewed in different ways: 'delusions', 'unusual beliefs', 'alternative sense of reality', 'heightened sensitivity' or a response to past trauma

Each of these approaches is based on certain assumptions

These assumptions will influence how we respond to those experiencing paranoia (e.g. what we think the cause is and how best to address it)

It's important to keep a range of approaches in mind -- the Paranoia Network (which had a founding conference in Manchester in 2004) drew on the HVN philosophy of the importance of giving space to a range of views, a "festival of explanations"

## **Who is more likely to suffer from paranoia?**

The condition tends to be more common in towns and cities than rural areas, its incidence is very difficult to judge, however, as some forms of paranoia can occur in over 80 medical conditions. For example people may become paranoid as a result of ageing or depression – feeling that they have become a burden – or even through partial deafness – which can cause people to think that their friends and relatives are whispering to conceal something from them. As many as 32% of old people in geriatric wards are diagnosed with some form of paranoia.

## **Are there different forms of paranoia?**

Yes, there are. Feelings of threat and expectations of betrayal can take many different forms. Some people develop paranoid jealousy, others fear that their thoughts and actions are being controlled or monitored; still others may fear that their life is in danger – that their food or drink is being poisoned.

When people experience paranoia over a long period of time, perhaps since adolescence, they are sometimes diagnosed with paranoid personality disorder. In such cases people have little or no insight into their experience (a common problem in paranoia) and never seek treatment. Sometimes someone who functions quite well in day-to-day life may develop a singular dominating paranoid idea of great complexity that puts them at odds with all around them. This is sometimes called a delusional or paranoid disorder. People diagnosed with paranoid disorder usually do not have other symptoms, such as voice-hearing.

***“The couple next door is listening in on me, I know it. I saw her in the street yesterday and she looked away”***

***“The postman is reading my mail. One of my letters last week was not stuck down. He knows all my secrets.”***

***“My son’s behaving so strangely, he suspects everyone of plotting against him. The thing is I daren’t talk about it when he’s in the house in case he overhears. I’m getting paranoid about his paranoia.”***

## **What is 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 beside (Para) and mind (nous) to create a word out of one’s mind.

Extreme paranoia can be one of the symptoms leading to a diagnosis of schizophrenia. A person said to be suffering from paranoid schizophrenia, in addition to being very paranoid, will also hear voices commenting on their behaviour, echoing thoughts of giving commands. Paranoia is a very isolating condition – the person feels they can depend on nobody. Sufferers feel angry, fearful, guilt-ridden, suspicious, vengeful and ostracized. They can also become depressed.

Paranoia is a blend of feelings and thoughts directed more towards the future than the past. Paranoid people therefore may be forever anticipating things and trying to ‘second guess’ their adversaries. This is because they dread some awful future event such as violent attack or betrayal.

## **Useful Organisations**

Asylum Associates

Hearing Voices Network

National Paranoia Network

*The above organisations can be contacted at The Limbrick Centre, Limbrick Road, Sheffield, S6 2PE Tel. 0114 271 8210, Peter Bullimore 07714 930740, Tori Reeve 07590 837017, Kate Crawford 07590 837359 Email. [peterbullimore@yahoo.co.uk](mailto:peterbullimore@yahoo.co.uk) [nhvn@hotmail.co.uk](mailto:nhvn@hotmail.co.uk)*

## **Further reading and orders from**

Accepting Voices Romme and Escher, PCCS Books

Living with Voices Romme and Escher, PCCS Books

Coping with Voices and Visions, Downes, Hearing Voices Network

Starting and Sustaining Paranoia and Hearing Voices Groups, Bullimore, Crawford, Reeve, National Paranoia Network.

Male Survivors, a Self Help Pack, Warwick, Bateman, Asylum Associates

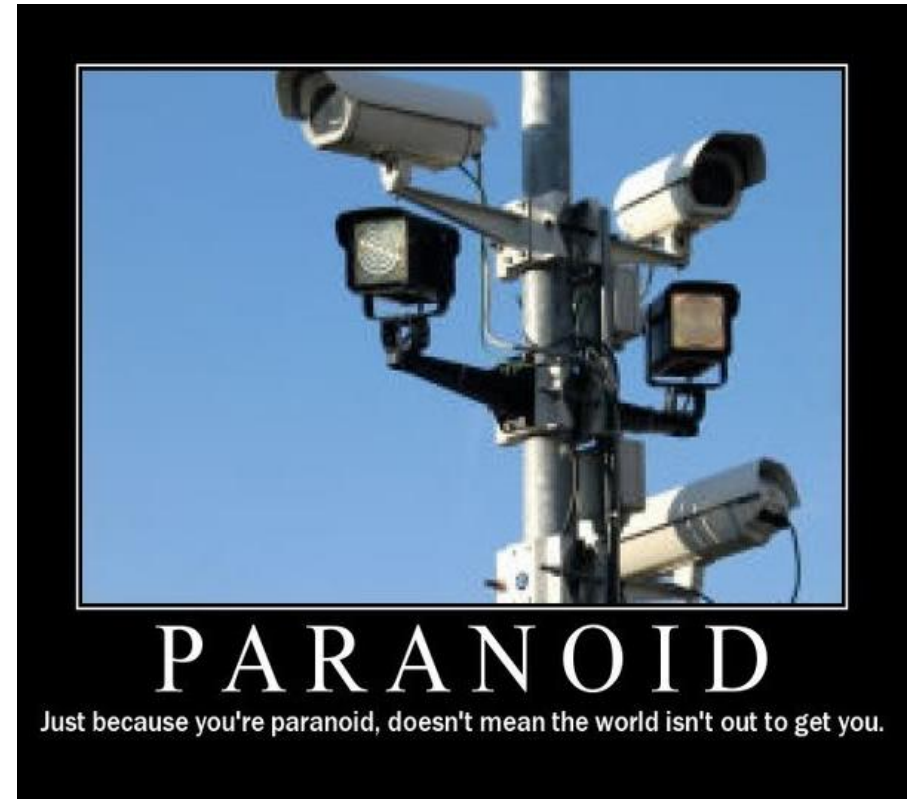
Asking the Question, Childhood Sexual Abuse and Trauma, Enquiry and Response, a Workbook for Mental Health Care Workers, Read, Bullimore, Hammersley, Asylum Associates

Listening to the Silences in a World of Hearing Voices, Vincent, Chipmunkpublishing

# Understanding Paranoia

**The Maastricht Interview on paranoia or hearing voices, a guide for workers and professionals is available from Peter Bullimore at [peterbullimore@yahoo.co.uk](mailto:peterbullimore@yahoo.co.uk)**

*Asylum Publishing*



**Peter Bullimore**

**&**

**Tori Reeve**