

# Children/Youth Who Hear Voices: Information for Family and Caregivers



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**Summary:** Hearing voices is actually quite a common experience and it is estimated that 5-15% of people will hear voices at some point in their lives. If you or a loved one are hearing voices, it is important to speak with a health professional to ensure that it is not a sign of more severe problems. However, in most cases, hearing voices does not indicate severe psychiatric illness. Because people with voices are often experiencing stress, one can start by being grateful to the voices for letting us know that there is stress. There are many ways to deal with voices, such as listening to the feelings that they express, and grounding techniques (focusing on one's senses such as seeing, hearing and touch).

## Dave's Story

Dave is a 10-yo boy who has started to hear voices. He has always been somewhat quiet, and not been that talkative about his thoughts and feelings. The voices appear triggered when he is under more stress, e.g. conflicts with classmates or not understanding work at school. When he is angry, the voices are angry. When he is feeling good, the voices are nice...

## How Common are Voices?

Studies show that voices are quite common, though the exact numbers vary depending on the study:  
At a single point in time

- About 2-3% of the general population hears voices (Tien, 1991)
- In children, a study showed that 8% of children reported hearing voices.

At any point in one's life

- 5-15% of people will report hearing voices (Romme & Escher, 2001)

Most people who hear voices do not require mental health care.

Of the people who hear voices:

- Most (2/3) are able to cope well enough that they do not require psychiatric care, nor do they receive any psychiatric diagnosis. In these individuals, a common theme is that they accept the voices, and see them as

advisors and messengers of some feeling or stress.

- Some (1/3) end up being seen by mental health services and become patients. In patients, voices are generally not accepted and seen as troublesome, distressing symptoms to be eliminated.

## Who Hears Voices?

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Hearing voices can occur in many situations such as:

- Children who are otherwise fine.
- Schizophrenia
- Anxiety
- Depression
- Trauma and dissociative disorders
- Migraine

Even amongst professionals, there is often a misconception that voices automatically mean a condition such as schizophrenia, but it is important to realize that voices can occur in many different situations.

## What People Say About Their Voices

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According to a study of 153 people who heard voices (Woods, 2015):

- Most (80% in one study) report hearing more than one voice, with 70% stating that they heard specific characters
- 50% report their voices were sounds that they had heard
- 50% felt the voices were more like thoughts, or somewhere between sounds and thoughts
- 50% felt the voices were more like a voice
- 66% reported feeling bodily sensations (e.g. tingling or hot sensations in the hands or feet) while hearing voices)

## Self-Help for Voices: How to Support Your Child/Youth with Voices

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Lifestyle strategies.

Help your child/youth by ensuring that they:

- Get enough sleep. The average person in modern society does not get enough sleep. Ensure that your child is handing in the electronics to parents and getting to sleep at an early enough time.
- Avoid caffeine or stimulants. Stimulants such as caffeine or nicotine (from cigarettes) can worsen voices.
- Have a healthy diet, without too much sugar or artificial processed foods. In some individuals, artificial sweeteners, or food enhancers (such as monosodium glutamate) can be overstimulating for the brain. Try avoiding processed foods to see if it makes a difference.
- Avoid sensory overload or situations that cause stress. In people with voices, often things are worsened if it is too loud, too bright, too stimulating. Help create a quiet, calm environment for the person.
- Nature. Get outside with your loved one as nature is soothing for the brain, ideally at least 1-hr outside daily.

Validation and acceptance

- Accept that the voices may carry some message, such as expressing a feeling, or distress. Some people may have troubles being aware of how they feel. The voices might be a way of expressing that which people are unaware, or unable to express.
  - If the voice is an angry voice, consider that perhaps your loved one may be feeling angry about something (or worried about feeling angry), but been unable to express that.
  - If the voice is a critical voice, consider that perhaps your loved one feels judged and worries about not being good enough.
  - Gently ask your loved one if they might be having a certain feeling, and validate that it is okay to

have those feelings. It is true that certain behaviours are not good (e.g. harming yourself), but you can always validate the feelings (e.g. that everyone feels sad, or angry or overwhelmed at times).

### Dealing with stresses

- Help your loved one identify and cope better with stresses/triggers and emotions in general. In the beginning, it can seem like voices come out of nowhere. However, often there are specific stresses or triggers for the voices, and it helps to identify those.
- You might ask:
  - “When do the voices happen?” For example, if the voices always happen at school, it suggests there may be a stress with school.
  - “What else is happening around the time when the voices happen?”
  - “Is it possible that \_\_\_ might be a trigger?”
  - “Everyone has stresses. What stresses are you under at school? Work? Relationships?”
    - Once you have identified the stresses, try to come up with a way to deal with each stress.

### Non-talking / environmental strategies

- Reduce sensory overload. Some people are sensitive if things are too bright, too cluttered, too loud, too stimulating. Especially if your loved one is getting upset, it may be helpful to:
- Reduce background noise
- Keep your voice quiet -- many people are exquisitely sensitive and can be triggered if others raise their voice, or even change their tone of voice.
- Ask others to give some space.
- Try soothing sensory input, such as cuddling a pet, a heavy blanket, giving a back rub. Its best to do this after you've already discussed this ahead of time.

### Grounding strategies.

- Grounding techniques help the brain to get focused on compelling sensory input rather than the hallucinations. When you notice your loved one starting to get stressed, consider grounding strategies such as:
  - “5-4-3-2-1” exercise.
    - If your child is upset, here are some things that parents can say to guide them through the grounding exercise:
      - Orient your child in case your child is disoriented
      - Parent: “Hello (person’s name)... I’m here... It’s your mom.... It’s Saturday... We’re at home....”
      - Parent: “Let’s think about 5 things that we can see...”
        - E.g. other people, things in the room or outside

### Distraction

Do something to get your loved one's mind off the voices and onto something else, such as:

- Listening to music
- Physical activity such as going for a walk with your loved one.
- Mental activity such as playing a game, doing a puzzle, doing coloring, etc.

### Mindfulness and relaxation activities

- Do mindfulness and relaxation activities to feel calmer, which can reduce stress and thus can reduce voices such as
  - Yoga
  - Apps such as Calm.com.
- Other strategies that people with voices have reported as helpful are:
  - Agreeing to listen to the voices at certain times
  - Listening selectively, e.g. accepting the things you like, and ignoring other things
  - Sending the voices away, e.g. “Thank you. I will listen to you later!”

Review when things are calm what is working or not working to help

- Do try to talk ahead of time about how you will support your child/youth when they are upset.

## Don'ts

- Don't use a strategy if it isn't working -- Don't use a strategy if it gets your loved one more upset.
  - Sometimes people are too overwhelmed to be able to use a strategy such as deep breathing, grounding, etc.
  - If so, then back off, let them know you'll check in later. Later, when the incident has subsided, problem-solve for the next time.
- Don't tell your loved one to "just ignore them"; most likely, if it were that simple, your loved one wouldn't be complaining about having voices.
- Don't ignore the feelings or stress that are connected to the voices.
- Don't try to fight the voices or to argue with them. The voices are coming from the person's brain, and often represent parts of the person's own worries or fears.

## What Happens with Voices over Time?

During one study where children hearing voices were monitored over four years, it was discovered that most (64%) of the voices disappeared as children learned to cope with their emotions and stress (Romme & Escher, 2006).

## When and Where to Get Help

Is your child hearing voices, but other than appears perfectly fine?

- It is still recommended to speak to a health professional at some point, in order to further explore and see if other help might be required, or if it is fine to just keep an eye on things.
- See if there is a local Hearing Voices Network chapter. If not, learn about the Hearing Voices Movement, and the coping strategies espoused by the movement.

Are the voices causing distress? Are there other symptoms such as:

- Visual hallucinations, such as seeing things;
- Paranoia (i.e. worries that s/he is unsafe or in danger);
- Troubles functioning at home, school or work.
- Disorganized thinking or speech that doesn't make sense.

If so, then it is highly recommended to seek help sooner than later.

- Contact your family physician, a mental health walk-in clinic, or even a crisis line (in order to learn about where to find help in your area.)

## How are Voices Treated?

Are the voices causing problems, and haven't responded to various strategies such as talk therapy and coping strategies?

- If so, then medications may be prescribed by a primary care provider (e.g. family physician), psychiatrist or paediatrician.

## Dave's Story, Part 2

Dave is a 10-yo boy who has started to hear voices.

Dave receives help from parents on identifying what his stresses are. It turns out that he has been upset at his father, but afraid to tell his father. He has also had some troubles with some classmates at school that have been

mean to him. Now that he is able to express some of his stresses more easily, his parents are more easily able to support him. They learn together about what triggers his voices, and he learns to express when he is starting to get upset or stressed. Through openly talking to parents about his problems, and by seeing that parents accept him despite his problems, he learns to accept himself as well, i.e. self-compassion. Dave is doing much better now -- the angry voices haven't been around for a long time, and when there is a voice, it is a gentle, kind forgiving voice that helps him regulate his feelings -- for example, if he makes a mistake, the voice will say, "It's okay, everyone makes mistakes."

## For Resources

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Hearing Voices Network - self-help group for people hearing voices. Although originally based in the United Kingdom, there are a growing number of chapters outside the UK.

<http://www.hearing-voices.org.uk/>

Self-Compassion for Voices - Wonderful video illustrating a self-compassionate approach to dealing with voices

<https://www.youtube.com/watch?v=VRqI4lxuXAw>

## References

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Eaton, W., Romanoski, A., Anthony, J., Nestadt, G. (1991) Screening for psychosis in the general population with a self report interview, *Journal of Nervous and Mental Disease*. 179(11), pp 689-693. About 4% of the population has prolonged auditory hallucinations, with 16% meeting diagnosis of schizophrenia, and 45% having psychiatric diagnosis. Most (55%) cases of hearing voices did not meet the criteria for a psychiatric diagnosis.

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Romme M. A. J., Escher S. D. M. (2006). Trauma and hearing voices, in *Trauma and Psychosis: New Directions for Theory and Therapy*, eds Morrison A., Larkin W., editors, p 162-192.

Tien, A et al. (1991). Distribution of hallucinations in the population, *Journal of Social Psychiatry and Psychiatric Epidemiology*, No.26, pp. 287-292. Survey of 15,000 people in Baltimore, St Louis and Los Angeles showed prolonged auditory hallucinations (i.e. voices heard regularly and continuously) by 2-4% of the general population.

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