

FREQUENTLY ASKED QUESTIONS

What do the therapy sessions focus on?

The therapy focusses on (1) psychosocial education around normalising and coping with voice hearing, (2) psychological formulation of voices, and (3) dialogical engagement, where a therapist asks the voice(s) questions and requests the voice hearer to repeat the responses aloud.

What if a participant finds therapy unhelpful or distressing?

Participants are advised that they are free to withdraw from the trial at any time without needing to give a reason why. Experienced therapists will provide ongoing support and will monitor any issues relating to risk or to deterioration in mental state and inform the client's responsible clinician as needed.

How do you support people who are randomised into treatment as usual, as it may be disappointing for them to not receive TwV?

It is our job to ensure people fully understand the randomised nature of the trial before consenting to take part. We take participants' safety extremely seriously and will signpost people to services/professionals if we feel they need extra support. With the participant's consent, we can also provide feedback from assessments to their care team or GP, which can be very helpful in informing care throughout services.

Where do you meet with participants?

We take an active outreach approach and ensure we meet participants at the most convenient and comfortable location for them, such as their homes or their GP surgery.

Can participants take medication during the trial?

Yes, the responsible psychiatrist can manage antipsychotics and other medication as they would if the participant was not involved in the trial.



TALKING WITH VOICES

INFORMATION FOR REFERRERS

HOW TO REFER

To discuss the trial further or to make a referral please contact:

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A novel dialogical therapy (Talking With Voices) in comparison to treatment as usual in adults with auditory hallucinations: A randomised controlled trial

BACKGROUND & PURPOSE OF THE STUDY

Talking With Voices (TwV) is a new form of therapy for voice hearers that comes from the work of the International Hearing Voices Movement. It is based on the idea that voices often reflect conflicts and difficulties and can draw attention to problems in the person's life that may have happened in the past or be reoccurring in the present.

TwV believes that understanding more about the links between voices and negative emotions can provide useful information for helping the person make sense of their experiences. In the long-term, this can also be helpful for learning new ways to cope with the voices and become less distressed by them.

TwV involves a therapist 'talking' to the voice by asking it questions. The voice hearer then listens to the responses and repeats them aloud to the therapist. Over time, the therapist learns more about the voice(s) in order to support the voice(s) and voice hearer to develop a more peaceful, constructive relationship. In addition, the therapist and voice hearer work together to try and understand how the voices may relate to particular problems in the person's life.

We have already run a small study amongst 50 voice-hearers which showed that TwV was seen as an acceptable form of support and could be delivered in the NHS. However, we now want to run a much larger trial to understand whether TwV is an effective treatment and, if so, what aspects of it may be particularly helpful for people.

WHO ARE WE LOOKING FOR?

We are looking for (1) adults aged 16 and over, (2) who have heard voices for a minimum of one year of at least moderate severity (we will assess this using the Psychotic Symptom Rating Scale (PSYRATS-AH)), (3) who have been in mental health services for at least 6 months and are not receiving individual psychological therapy, (4) who are actively help-seeking in relation to distressing voices, and (5) who have the ability and inclination for a therapist to engage with their voices using dialoguing techniques.



WHAT HAPPENS IF I MAKE A REFERRAL?

When receiving a referral, we will:

- Send the potential participant some information and organise a visit at a place that is convenient for them.
- If the potential participant consents to the study, we will carry out a baseline assessment to determine their eligibility and administer an additional series of clinical questionnaires.
- Eligible participants will be randomly allocated to one of two trial arms:

Psychological Intervention (treatment group)

Up to 26 sessions of TWV plus the participants' usual mental healthcare.

OR

Treatment as usual & monitoring (control group)

People will receive standard treatment. This way, no one is deprived of resources that would otherwise be available if they had not taken part in the study.

- All participants will be invited to two follow-up research assessments at 8 and 14 months after randomisation. They will be compensated £20 for each assessment (£60 in total).
- Referrers will be informed of the outcome of the baseline assessment and allocation, and we will keep in touch over the course of the trial.

EXCLUSION CRITERIA

Individuals are not eligible to participate if they are (1) at immediate risk of harm to self or others, (2) are non-English speaking, (3) have a primary diagnosis of alcohol/substance dependence or autism spectrum disorder, (4) have a moderate/severe learning disability, (5) report voice hearing related to organic brain injury or illness, (6) are homeless and/or of no fixed abode.