



### CONSUMER UPDATE

## A narrative review of psychological theories of post-traumatic stress disorder, voice hearing, and other psychotic symptoms

### What was the aim of this research?

Hearing voices can be a distressing experience. While voice hearing is a common symptom of psychosis, many people who have other diagnoses, such as post-traumatic stress disorder (PTSD) or no diagnosis at all, also experience voice hearing. There is an established relationship between trauma and voice hearing. Many voice hearers experience PTSD symptoms, and likewise, many individuals who have PTSD experience voice hearing. Also, in trauma-related voices, the voices either take on the persona of someone who hurt the person and say the exact same things, or say similar things, such as teasing or bullying them. Studies have shown that traditional treatments for PTSD, such as cognitive behavioural therapy (CBT), have no effectiveness in reducing voices and are associated with small reductions in PTSD symptoms amongst voice hearers. However, a recent case series found that a newer PTSD treatment, called Imagery Rescripting, led to large reductions in PTSD symptoms and voices. These findings suggest that there may be similarities and differences in the factors that underlie voices and PTSD symptoms. Identifying and understanding such similarities and differences may guide future research in this area, which may lead to more effective treatments for trauma-affected voice hearers.

### What were the outcomes?

- The paper reviewed 10 theoretical models of PTSD, 4 models of positive symptoms (including voice hearing), and 2 trauma-informed models of voice hearing.
- From the theoretical models reviewed, we identified 6 factors common to both PTSD and voices, 6 factors that are unique to PTSD, and 9 factors that are unique to voices.
- Stand-alone models of PTSD and voices do not adequately explain voices in trauma-affected individuals.
- No existing model includes all common and unique factors.
- Futures studies are needed to develop a model that includes all factors and explains how common/unique factors may interact to maintain trauma-related voices.
- Psychological treatments that are individualised to target common factors (e.g., negative schemas, appraisals, and disrupted memory processes) may be the most effective treatments for trauma-affected voice hearers.
- Routine assessment of voices in clients with post-traumatic stress, and of post-traumatic stress symptoms in voice hearers, may facilitate thorough case conceptualisation and treatment planning.

### What does this mean for future research?

This review was the first to comprehensively review models of PTSD and positive symptoms (including voice hearing) and determine factors that are common and unique across both sets of symptoms. This review offers the foundations needed to guide the development a model that integrates factors that are common and unique to PTSD and voice hearing, which may guide novel research of trauma related voices that may lead to more effective treatments for trauma-affected voice hearers.

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*Original report:* Strachan, Paulik, G., & McEvoy, P. M. (2022). A narrative review of psychological theories of post-traumatic stress disorder, voice hearing, and other psychotic symptoms. *Clinical Psychology & Psychotherapy*. <https://doi.org/10.1002/cpp.2754>