

# **Self Help for Paranoia**

For most people with schizophrenia, paranoia either from paranoid delusions or from hallucinations like hearing voices is a fact of life. There is more about the causes and nature of paranoia on our information sheets on <a href="Understanding Paranoia"><u>Understanding Paranoia</u></a> and more on treatments on our information sheet on <a href="Irreatments for Paranoia"><u>Irreatments for Paranoia</u></a>.

However, conventional treatments with antipsychotic drugs and talking therapies often only provide part of the answer and for many people with schizophrenia paranoia is still a very painful part of their life despite the medication. It is at this point that self-help techniques can play an invaluable role in promoting a fuller recovery and help the person with schizophrenia back to a mainstream lifestyle.

## **Avoid Drugs and Alcohol**

Setting aside the question of whether street drug use actually causes schizophrenia (which is discussed in more detail in our information sheet on <u>Causes</u>) the issue of street drug use and alcohol abuse by people who are already diagnosed with schizophrenia is an important one. Certain street drugs such as cannabis, cocaine, ecstacy and amphetamines are all known to cause paranoid thinking even in people who do not have schizophrenia or any other psychosis. In people with schizophrenia it is known that use of these drugs can cause a relapse of symptoms. In addition street drugs do tend to predict types of dangerous behaviour such as violence and self harm that often have their roots in paranoid thinking in people with schizophrenia.<sup>1</sup>

Over half of people with a diagnosis of schizophrenia also have a concurrent drug or alcohol abuse problem.<sup>2</sup> The reasons for this are complex: it is widely believed in some circles that the problem arises from an attempt on the part of the person to self-medicate. This may in some cases be true but the wider reason may be more prosaic: that is that people with schizophrenia use street drugs for the same reason that other people do, because it makes them feel good.

Whatever the reasons, it is clear that using street drugs will, in addition to other problems that it causes (such as poverty and physical health problems) lead to more paranoid thinking not less and increase the incidence of dangerous behaviour and relapse. For these reasons it is vital that people with schizophrenia stay well clear of street drugs and use alcohol strictly in moderation.

#### Try to Sleep Well

Sleep problems (called insomnia) are not only a problem for people with schizophrenia: in fact about one in four of the general population experiences problems with sleeping well. However in schizophrenia the problem is more significant since long periods without sleep or with insufficient sleep will lead to an increase in paranoid thinking. This is no great surprise since sleep deprivation is known to cause paranoia even in people who do not have any mental ill health. Many people with schizophrenia comment that periods of sleeplessness often precede a relapse in their symptoms. As one person with schizophrenia put it:

"I know the only time I get unwell is when I am sleep deprived so this is an important marker in keeping me well" Catrina.

There is more information about sleep problems and what to do about them on our information sheet: <u>Sleep Problems</u>.

In addition the problems of sleep and substance abuse are often related. Many people with insomnia often resort to cannabis or alcohol to help them get to sleep and certainly severe insomnia is usually a problem for people trying to come off drugs or alcohol (in fact around five times higher than the rate in the general population).<sup>3</sup>

## When You Start to Recover Some Insight:

When you start to recover some insight into your paranoia and begin to doubt the false messages from the delusions it is then possible to acquire some useful skills to help cope with your problems. Here are a few.

#### Avoid Folie à Deux

When you are in the mental health system you will make new friends amongst the other patients (or service users as some people refer to them) and some of these friendships will run very deep and may last a life time. After all these people understand better than anyone else the problems that you are having and the unique challenges that schizophrenia presents you with. However there is also the danger that your social circle will become restricted to other people in the mental health system and that you will be deprived of other role models and outlooks on life. You may find that opinions and attitudes that are counter productive tend to get reinforced within this circle which is necessarily quite inward looking. This is called a folie à deux.

For this reason it is a good idea to try to broaden your circle of friends and acquaintances as soon as your condition improves sufficiently for you to do so. Many people find that joining social groups such as a gym or a local walking group, adult education classes or doing voluntary work for a local good cause is an ideal way of doing this. See our information sheets on <u>Exercise</u> and <u>Volunteering</u> for more details on this.<sup>4</sup>

#### **Reality Testing**

Reality testing is a technique pioneered by Gwen Howe, a mental health nurse who wrote widely on schizophrenia in the 1980s. The technique is best employed by people who are just beginning to develop insight into their paranoid thinking and beginning to doubt the content of the false messages received from the delusions or hallucinations. Using this technique an agreement is struck between the sufferer and those people around them (carers or relatives etc) so that:

- 1. Every time the sufferer has a strange thought or idea they will immediately question it with the carer or relative to ascertain whether it is accurate.
- 2. The carer or relative will take the time to respond to the concern in a matter of fact way and provide reassurance that the idea or thought is not true.

Howe stresses that the technique can only work really well if "the sufferer's courage and honesty is met by a correspondingly responsible attitude in the carer".

This may of course be difficult at times and will require great patience and understanding but has clear advantages over the other options of either colluding with the delusional thinking or ridiculing it.<sup>5</sup>

#### Mindfulness

Mindfulness is a form of meditation practice whose theories have proliferated in recent years and practitioners have advocated its efficacy for a wide range of mental health problems. It is now widely available in most areas of the UK although not usually on the NHS.

Following some early studies of people with psychosis who experienced mindfulness therapy many psychiatrists concluded that mindfulness was at best ineffective and at worst positively harmful for people with psychosis. However more recent work outlined by Paul Chadwick in the British Journal of Psychiatry and with colleagues in a subsequent publication<sup>10</sup> has suggested that mindfulness can be therapeutic in helping people with psychosis deal with paranoid thinking. Some advocates of mindfulness therapy believe that it can help the person to become more detached from their psychotic thinking and reduce the compulsion to engage with their psychotic beliefs.

It should be noted that mindfulness will not reduce the amount of paranoid thinking but will simply change the way the person reacts to it and thus make it less disabling. Bear in mind that existing research data is not large and most studies are based on small numbers of participants but clearly this is a promising area and one in which more research is needed. It should also be noted that some research has found that mindfulness therapy in people prone to paranoia may promote false memory experiences and clearly if this is a problem the therapy should not be continued.

## **Enhance Self Acceptance**

When your psychotic paranoid thinking is at its most intense the paranoid thoughts may have no relationship to reality: for instance believing that MI5 is controlling your thoughts through your mobile 'phone has no basis in fact. However as you begin to come out of the psychotic haze and develop insight

into your paranoid thinking you may notice that now the way your paranoid thoughts attack you is very closely linked to your own self view. For instance your paranoid thinking may attack your sexuality because you feel guilty over some homosexual experiences you had during adolescence. Or the paranoid thinking may focus on your family members because of some previous conflicts you have had with them. This type of thinking can often be just as difficult to deal with as it often has a link to actual experiences and is therefore more believable.

At this point it is important to reinforce your own self view and improve acceptance of who you are and your vitally important sense of self esteem. Learning to accept that we all get things wrong at times or have experiences that seem like a good idea at the time but which we later regret is just part of learning about life and it is important to be able to accept such experiences without self recrimination. Talking therapies such as CBT are useful here as is counselling.<sup>6</sup>

A regular session with a good counsellor can help you deal with problems of self acceptance and self esteem. In some areas GPs can refer you to local organisations that provide counselling services or failing that you can access counselling privately. Private rates for counselling tend to be around £30 to £50 for an hour's session depending on the area. Try to find a counsellor who comes well recommended and who is accredited with the British Association for Counselling and Psychotherapy. If you have difficulty affording a counsellor you could try applying for a Personal Health Budget through your local authority adult social care service or applying for a Personal Independence Payment.

## **Learn to Manage Anger**

Anger is an important issue for people suffering from paranoia. After all if you genuinely believe that someone is spying on you or deliberately harassing you isn't it quite a normal reaction to feel angry towards them? It is for this reason that some people suffering from paranoia do become violent when their psychosis is at its height. However, although anger may be impossible to control when there is no insight, later when some insight begins to develop the sufferer may be able to understand and control their anger in such a way as to be able to avoid conflicts with others arising.<sup>4</sup>

It is important not to make excessive demands on the people around you or to put yourself in competitive situations in which you cannot succeed. Likewise, avoiding stressful situations is also important. Learning to recognise triggers to your anger and to have in place mechanisms for controlling it are useful skills to have.

In some areas anger management courses may be available from voluntary organisations like Mind or Rethink.

## **Learn to Trust Again**

Learning to trust again after a prolonged period of paranoid thinking may be one of the biggest challenges for people with schizophrenia and may be a very slow process taking years rather than months.

Understanding that other people that we may come into contact with make mistakes or do silly things and are not always out to get us is a key skill for the person with schizophrenia to re-learn. There are no courses or books available to help with this learning, however once again it may be that a good counsellor could help.<sup>4</sup>

## Try to Challenge Suspicious Thoughts

Even if you haven't managed to access a course of cognitive behavioural therapy it is possible to work on challenging your paranoid thoughts yourself and there are some good books out there to help such as, Overcoming Paranoid and Suspicious Thoughts by Freeman, Freeman and Garety. As long as you are beginning to develop some insight and the ability to question and if possible to doubt your paranoid thinking then it is possible to learn ways to challenge the thinking as it occurs.<sup>4</sup>

#### References

- 1. Fuller Torrey E, 2013, Surviving Schizophrenia, Harper Perennial P239.
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- 3. Rosenlicht N et al, High rate of insomnia during early recovery from addiction, Journal of Addiction Medicine November/December 2014.
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- 5. Howe G, 1986, Schizophrenia: A Fresh Approach, David and Charles. P90.

- 6. Kantor M, 2008, Understanding Paranoia, Praeger. P225.
- 7. Chadwick Paul, 2014, Mindfulness for Psychosis, British Journal of Psychiatry.
- 8. Kantor M, 2008, Understanding Paranoia, Praeger P228.
- 9. Van Dijk D, Koeter MW, Hijman R, et al. Effect of cannabis use on the course of schizophrenia in male patients: a prospective cohort study. Schizophrenia Research 2012; 137:50–57.
- 10. Lopez-Navarro E, Del Canto C, Belber M, Mayol A, Fernnadez-Alonzo O, Luis J, Munar E, Chadwick P, 2015, Mindfulness improves psychological quality of life in community-based patients with severe mental health problems: A pilot randomized clinical trial. Schizophrenia research October 2015.

## **Further Reading**

1. Overcoming Paranoid and Suspicious Thoughts, A self help guide using cognitive behavioural techniques, Daniel Freeman, Jason Freeman and Philippa Garety, Pub. Robinson.