

Essay 10

Two Fools...

Mood creation, dominance and oppression, physical presence, compulsion, addiction and paranoia, together with aspects of manic depression. All of these, according to Roy Vincent, can be included with voice hearing as the unwanted effects of spiritual intrusion. In this article he leaves out hearing voices, having described his experiences thoroughly in his book *Listening to the Silences*, and concentrates on the remainder, the 'silent intrusions' - trying to promote understanding and ways of coping and supporting.

“I am two fools, I know...”

The greatest act of foolishness was to let these things happen to myself in the first place. The second folly is continuous and ongoing, and it is in my spending so much time and concentrated effort in writing and publicising, and trying to inform and convince a seemingly indifferent world, when there are many other, and much more inviting activities that I would rather pursue.

My title paraphrases a line from a poem by John Donne, a poet who, apart from a few memorable quotes, has largely passed my by - as has the poem from which the phrase comes. It is entitled “The Triple Fool”.

Having acknowledged my own dual claims to foolishness, where do I find the third? Donne ultimately found his in himself: by contrast, I am looking elsewhere, and to others, and the potential source is, frankly, large.

“Silence is the virtue of fools”, declares Francis Bacon. That does not seem to inform or deter the many foolish voices that proclaim the unthinking beliefs of an unthinking population, to whom a voice hearer is, at best, a ‘nutter’, or, at worst, ‘psychotic’, a ‘paranoid schizophrenic’ - even the ‘violent paranoid schizophrenic’ beloved of the tabloid media.

Yes, ‘voice hearer’, for it is about these that I write, with myself definitely included in their number. And the writing to which I refer is the book and varied articles and essays through which I have tried to inform and educate. Not to publish and reap untold wealth, for the book is free, but to try to relieve the distress and misery of the misunderstood voice hearer - misery that in many cases can end in suicide.

Beginning in Chapter Six of that book, I describe all of my experiences from the onset of voice hearing until very nearly the present day. This is how I portray the actual moment in which 'voices' entered my life:

A presence that I could not see, moved from the space in front of me into me, and immediately my mind was charged with another 'voice' or provoker of thoughts, thoughts over which, then, I had no control, and which were not initiated by me. In my head began conversation as between two separate people, one of whom was me.

I began to 'hear voices'.

What will stand out for most individuals on reading that introduction will be the phrase in bold type. Not because it is so visually prominent, but because 'hearing voices' is the expression that usually covers the whole phenomenon that many, if not most, then proceed to associate with mental illness.

For myself, the most important emphasis should be:

'A presence that I could not see, moved from the space in front of me into me'.

I have doubly emphasised 'presence', for it is about that that I intend to write. And as I begin to write, I have to make a further emphasis - namely that it is now more than twenty-seven years since that initial and particularly significant moment: twenty-seven years in which I have never been free from intruding voices or physical presence. And yet further emphasis - I have never been ill from this cause, and have never sought help from any source, because I knew from the very outset just what was the origin of all of this intrusion.

Yes, ***intrusion*** - again more emphasis - for that is what I experience. And here we enter what is probably the greatest foolishness of all, for the choice of words and definitions - delusion, hallucination and the like - the choice is that made by people who themselves do not hear voices. They are not words that are used by the voice hearers, for what they experience is real; whereas 'delusion' and 'hallucination' suggest something that is illusory; a figment of a diseased or malfunctioning mind.

The moment that someone admits that they hear voices, they land themselves on a well-oiled conveyor belt of definitions, diagnoses, drugs, and a probable destination. One cannot truly blame the practitioners, for undoubtedly they will have been thoroughly indoctrinated and will have no reasonable cause to deviate from the well-worn and well signposted paths of their training. Since the days of my teens, maps and charts have figured large in my life and activities - particularly since coming to live in the Lake District where Ordnance Maps really come into their own. I know these maps are true and accurate, because I have used them and explored the features that they represent, and have done so with confidence. My confidence has always been enhanced greatly by the sight of Ordnance Surveyors, with map board hung around neck, and on foot in the wildest parts, physically checking the features, or looking for new ones to be recorded.

Probably the most famous map of its day was that of Ptolemy, whose representation of the known world was accepted for 1,500 years. He introduced order and famously devised the concept of latitude and longitude. However, unlike the Ordnance Surveyors, he had not himself been to the lands and features that he showed, and, although much that he represented was accurate within the limits of its time, he underestimated key dimensions, and notoriously *added* features as he imagined them.

Two of the best-known early mappers of the human mind and analysers of aberrant behaviour, Freud and Jung, undoubtedly added much in the way of innovative thought and categorisation. However, they, like Ptolemy, had not 'set foot' in the 'alien territories' - the aberrant minds that they were studying and cataloguing. They had not themselves experienced the conditions that they were defining and diagnosing; but, rather like early astronomers, were looking from outside into these individual mini-universes with the basic 'telescopes' of their time. Also mirroring Ptolemy, they inferred much and added interpretations that may have originated from within their own extraordinary and sometimes disturbed lives.

The Universe is being explored using the utmost sophistication of our time, and individuals are or have been 'out there' bringing first hand knowledge that will put some of the observations into human context. Likewise, the universe of the human mind continues to be explored and cognitive functions identified and located also in very sophisticated ways. But where are the first hand accounts from those who have found themselves in the dark convoluted byways of the mind within which mental disturbance and illness thrive? There are undoubtedly many for whom the state of depression has been a turning point in their lives and who have written fully and revealingly (although unfortunately the books do not seem to stay for long in the public arena, nor do they appear to have much influence on the treatment of others who find themselves in the same state.)

First hand accounts of the experiences of voice hearers are very much more rare, for apart from those who have found a creative 'muse' within the experience, most hearers seem to become withdrawn and inarticulate, and are unable to describe coherently the onset and inner workings of these 'things' within their minds; 'things' that do not exist, so they are told.

My 'things' do exist. Of that, I have no doubt - not the remotest shadow. I remember well the initial moment, and what I was and had been doing when the 'presence' moved into me. Now as Spring of 2007 begins to unroll - only today, the wild geese have arrived to begin their nesting in a field that adjoins one of mine - I think back twenty-seven years, to the same time in 1980, when I was beginning to take stock and move on from the brief, but powerful disturbances that I had weathered. Although I did not know what use I would ultimately make of them, I began to make notes and keep records of all that had happened and was continuing to occur. At the time I only had a 'steam' typewriter, and would never have contemplated beginning any form of serious writing, until in 1996, when I began to become computer literate - and 160,000 words now stand together to describe the events and what I have done and learned in the intervening years.

If allowed, I can become quite a bore on the subject of 'The Book'. But I do not put myself forward on my own merits. Rather do I do so by virtue of those who say 'the book is beautifully written' (television producer): 'he pours

water over many unhelpful myths and writes clearly in a way that will probably save someone's life' (contributor to a chat line). A carer wrote 'First of all a warm thank you for making your remarkable book available free on the Internet...', while from a voice-hearer there came 'I want to say thanks for writing about your experience. I found it to be the only true version of what I feel happened to myself last year. I had been looking for books to read on the subject, but I found nothing useful until I came to your account'. The mother of a voice-hearer completes this brief snapshot as she wrote to an organisation that aims to support sufferers - 'After reading Roy's book, I was very impressed, and it has helped me to understand what is happening to my son at this very moment. He has always said that it is a spiritual thing, not a mental illness. He described it word for word like Roy. At the moment he is in hospital on psychotic drugs which don't seem to be helping...I need to help my son, and I think Roy's experience could help me to advise and understand more of what my son is trying to tell me.'

'A spiritual thing, not a mental illness' - and there you have it, Dear Reader. That simple phrase, those few words, contain everything that I have written, everything that I have said on the subject of voice hearing during the last twenty-seven years. Yet the very word 'spiritual' can be difficult for many to swallow - might even stick in their throats, and make them decide to read no further. 'Spiritual' to many implies 'religion', and that has become a turn-off for large numbers of people. Please forget the association, and please read on as I try to demonstrate how an acceptance and an understanding of the reality of spiritual existence and interaction with humanity can reveal much about voice hearing. But not just 'hearing voices', for the same phenomenon can include physical presence, mood creation, dominance and oppression, compulsion, addiction and paranoia, and aspects of manic depression - on reflection, one might even consider 'multiple personality' as well. (I have to use 'voice hearing' as a convenient blanket term, but I try to separate the individual phenomena without, hopefully, becoming too convoluted in my writing.)

However, before quitting religion entirely, it does well to acknowledge that from every culture that has ever existed and that has left a coherent record, there has come the recognition of the existence of a parallel world of inherent goodness as well as the one that is the source of the undesirable and malign. The whole of my writing has been aimed at demonstrating and describing the reality of unwelcome intrusion and its involvement in the creation of the conditions that I have listed above, while at the same time I have been at pains to point out and illustrate the immense power for good that exists, and the help that has come to me from unquestionably benevolent sources.

My command of language and its ability to describe the indescribable has been stretched to its limit when my aim has been to convey to others an understanding of the reality of physical movement into my body. Likewise, it has been difficult to portray the awareness of 'ambience' and of mood creation around oneself. The original 'entry' into my body was obvious because never before had I experienced anything similar, and indeed that initial awareness has been the marker and datum for all that has followed. What could not have been any more obvious at the other extreme, was the sequence that I describe

in my book, when my body was manipulated 'ethereally' in a very skilful manner, as by physiotherapists or chiropractors – and obvious was the reality of the pain as my limbs and joints found their new alignment.

These are my two extremes – at one end, the exquisite subtlety, and at the other, the power of spiritual 'hands on'.

My brother is an Anglican clergyman, still in active ministry even though this very day he celebrates his eighty-third birthday. Our lives took very different paths in our teens during WWII, when I joined the Royal Navy while he continued in his essential war-work, and our paths have been different ever since. It was not until he read some initial drafts of my book that, recognising what I was trying to describe, he told me of his own experiences. Since his late teens he has had a dedicated prayer life, and each time he settled to his evening prayer, and also, following ordination, during the Eucharist, he experienced spiritual movement into himself. His mental reaction has always been "If you are from God, you are welcome. If not, please go."

Speaking to him a moment ago, he described again the physical, almost electrical frisson that is created, and, as another instance, the almost indescribable 'ambience' such as was made manifest in a particularly special service yesterday. Many examples of these phenomena run through different parts of my book and are there described in their particular milieux. For a variety of purposes, I have extracted what I call these 'ploys', and in each I refer to the intruders as *they* rather than *it*, for it is impossible to be certain whether I am dealing with a single one or several. It will soon become obvious, if it is not obvious already, that I am concentrating upon the adverse and malign intrusions. Again citing my book, I describe the many occasions when I have had significant assistance, encouragement and support from benevolent sources, and further describe how this usually arrives subliminally, again in ways that verge upon the indescribable.

Very odd was the occasion when I had a life-long friend staying here. She asked me to attend to something intimate that she could not achieve because of the problems of simultaneously looking and reaching. Having been married more than once, and having brought up a daughter and stepdaughter, I have no problems with female anatomy or exposure. However, while I was delicately engaged, I experienced an obvious intrusion, and was immediately suffused with someone else's embarrassment – and *female* embarrassment at that. I have no idea *who* had been persuaded to intrude, but 'her' reaction was exceedingly strong and has remained as a potent memory.

Which raises several issues that I shall try to analyse and use to further my arguments. Physical movement and presence immediately preceded the embarrassment. Other emotions and inner reactions can be initiated when there is no obvious presence. 'Censure' is difficult to describe when it comes from no apparent source. Many will be aware of situations – school, work, family life – where there is an unspoken atmosphere of disapproval; a mental 'drawing in of skirts', coldness and nothing outgoing. . Anyone who is a driver will be familiar with the situation in which there has been a near miss. If there are passengers, they will, in all probability, remain silent, but there will be no doubt about their feelings – particularly if you, as driver, had been at fault. The 'atmosphere' will be all too familiar to need description.

This selfsame environment can be generated silently around an individual without there having been a previous 'triggering' incident and in

such a way as to create a 'hang dog' feeling, and accompanying 'cringe' posture. A feature of this ploy is that there may be, at an almost subliminal level, intrusion into the mind of single words that increasingly add to the hunted, 'guilty' feeling. Words such as 'disgrace', 'apology', 'criticise', 'humiliate'. Words that may cause an individual to rake through his mind for recollections of past events or situations to which the words might apply. And the 'back seat driver' in the mind will be pumping out a 'mood' cloud in increasing amounts. Some might recognise the commonly accepted meaning of 'paranoia'. The victim won't care what it is called; the whole sequence is indescribable - and I am an articulate person with most of my marbles - and my mind is not clouded with the effects of anti-psychotic drugs - and yet still I find it to be virtually impossible to achieve the description myself.

Once the phenomenon of 'ambience' creation is recognised for what it is, it may be identified in other, different situations. I am sure that most individuals wash their hands after using the toilet. We have become so conditioned over the years that not to do so may leave one with a constantly ringing 'bell' in the mind that reminds one of the omission. I actually get a *physical* feeling in my hands and wrists that persists until the water sluices over them. Again a feeling that is most difficult to describe, but one that I have identified frequently over a long time.

That same sensation can actually be *created*. Yes, when there is absolutely no need to wash my hands, the 'dirty hands' feeling may be generated so strongly that were I not aware of all the circumstances about which I am writing here, I would feel obliged to wash, and, probably, wash... and wash...

There are so many ways and circumstances in which obsessive thoughts and subsequent compulsive reactions may be generated. It is commonsense to double check that your wallet or purse is in its place before setting out. Likewise, it is no bad thing to make sure that the outer doors are locked before going to bed, or leaving the house - even to double check. But a third, fourth, fifth time...? Yet the urge to do just that can be created subliminally, and doubt can be generated that says, "Are you *sure*? Better make sure, eh?"

The elusive book, screwdriver, pair of glasses, scissors... as you hunt, a picture can be fed into the mind that definitely shows the object in this drawer, on that shelf, in the car, the conservatory, in the bedroom... And when you draw a blank in those locations, another image comes in that says "Of course! The shed! That's where I left the screwdriver, scissors, book etc." and off you dash, completely convinced. But no! "Did I *really* look properly in the drawer, car, conservatory...?" and back you go to do an *extremely thorough* search this time; determined to eliminate this location from the search - until even more doubt is dripped into your now frantic mind and off you go to the - wherever...

Do you recognise the sequence? Again, just another simple example of how obsession can be built up, stoked up, until the obsessed one is just like a puppet in the control of - Who? Why? *I don't know!* In virtually every culture that one can name, one can find philosophies and practices that recognise the same things about which I write, and each culture will have developed its own way of helping the disturbed individuals. In the Indian sub-continent, for example, in the sphere of Ayurvedic medicine, there is recognition of 'possession'. Quoting from a modern book by a highly respected Western author, Dr. David Frawley, he writes: "In most ancient culture, mental disorders

were attributed to various sorts of ghosts or evil spirits, and some sort of exorcism was prescribed. Ayurveda shares this view, but in a more sophisticated way... This view is not a naïve superstition, but reflects a scientific knowledge of the occult worlds. Our physical world is intimately linked with the subtler worlds and has a constant interplay of energies with them.

Ayurveda distinguishes different forms of possession... it is most common in individuals who are passive, dependent, vulnerable, open and impressionable. There is often low self-esteem, an extreme sensitivity and a capacity to take on the influences of the environment... people who suffer from trauma, depression, low vitality or insomnia become vulnerable..."

I had a brief correspondence with an Indian mother, Monica, who was deeply concerned about her voice-hearing son, and suggested to her that they might find remedies in their own tradition rather than modern drug based psychiatry. She acknowledged the thought and replied that undoubtedly many individuals had gone to ashrams and had got better, but such was not possible in the heart of Mumbai and "...anyway, the doctors terrify you!"

It is quite possible that as you read you may wonder why it is that I should claim to be able to identify my subtle interplay with what I refer to as intrusions. As with all that I am writing about, it is only by analogy that I can proceed. I liken myself to someone who has served for many years at sea and in sail. Such a person develops an awareness of wind and sea that will sense minute changes, wind shifts and the like almost before they have happened, and will be adjusting sail long before the majority of individuals feel any change themselves. Likewise, someone who, over a lifetime, is in tune with the countryside, its weather and its subtleties, will sense impending changes some time before any significant change is apparent to the average person. And so, having had twenty-seven years in which to hone my senses, I am certain that these manifestations about which I write are in fact reality.

There have been times, now fortunately long past, when the build up of hatred against the 'thing' within has become so intense, that murder would be the logical outcome - if only there was a throat to lock one's hands around. I can truly understand why an individual might seriously harm himself or herself in an attempt to reach and silence this provocateur. The very presence can create a deep sense of inner pollution, which, together with the constant strategy of belittlement, can combine to make a sufferer feel so worthless and befouled as to seek, by whatever means, to get at and silence it. I shall never know if this was the reason why someone whom I knew plunged a kitchen knife, handle deep into his abdomen. Past tense, for he is now dead, though not from the knife, which he survived. A G.P. who could practise no longer, he suffered over a long period from manic-depression, although his behaviour during some of his 'manic' episodes made one think that 'possession' would be a more appropriate description. That description, rather than the 'official' manic-depression, was also applied by his friends to describe the actions of a fairly well known artist, who appeared naked in his local church with a sword with which he decapitated the altar candles.

Someone else whom I had known for a number of years was caught shoplifting in London, in the oddest circumstances - in fact, the whole episode was odd, for he was very well paid, and had no need to steal. He was classed

as manic-depressive, but this incident was completely outside the normally accepted 'form' for his type of the illness, and his descriptions of the event might also come within the scope of possession.

It may seem so glaringly obvious, but you only hear voices if you actually listen to them. Spring, as I wrote, is most definitely here. Whether it comes early by virtue of global warming, I don't know, but this is one of the early spring days when the sky is a clear blue, there is no breeze, and, where I live, not a single manmade sound. Like a lizard on a rock, I just open myself to the sun. I close my eyes, and open wide my ears to the bird song - and think of nothing. And as I close down the thinking, concentrating, imagining, ruminating functions of my 'right brain', so I close down the very channels that are used by the intrusions.

On a day such as this, if I stroll around the quiet by-roads of my neighbourhood, I can do so in ruminative, imaginative thought - and I see enough to enjoy my walk, and likewise, I hear enough. If on the other hand, I actually *look* at my surroundings, and focus on them; if I actually *listen* to the bird song and other welcome sounds, my mind has space for nothing else, and no voice can intrude. If, alternatively, I take up my gouges and mallet to continue with one of my carvings, I can be sure that with the complete focus of my hands and eyes and concentration on the form that I am creating, there is little chance of intrusion into my mind.

Would that that was the full story. For nothing that I have been able to do will prevent the *physical* intrusion of 'someone' *into* me. This voiceless presence is there, determined, if I would let it, to take charge of the design and execution of the work. Had I not been aware of all that has gone before - had I not been sensitive to intrusion, and alert to the movement, I might have accepted willingly the presence as an ally, particularly as a knowledgeable one.

This is the manner in which a 'Muse' will enter into the life and work of someone who is engaged in creative work. The worlds of literature, art and music as well as other creative activities, produce many examples of those individuals who are aware of the presence within of this creative 'other'. They acknowledge that without their so-called Muse being in attendance, they themselves are capable of producing only mediocre work. *The Unknown Guest* by Brian Inglis introduces a number of such individuals, while undoubtedly there are other books existing or in the process of being written that add to the list of the 'inspired' ones. But, and at the risk of beating on a single drum, these are books *about* other peoples' experiences as imagined by the author; and almost invariably, they embody a 'theory', also conceived by the author.

How I wish beyond measure that such authors would desist, for while it is undoubtedly a fascinating field of interest, in the main their work does little or nothing to promote real understanding of what goes on in the mind and senses of the voice hearer. The new book provides the author with professional recognition, financial reward and kudos; the well-meaning research project furnishes the student with a doctorate - and all at the expense of the 'specimens' - the individuals who mostly are suffering in ways that the authors/researchers cannot conceive. The latter move on to other projects, but now as undoubted 'experts' in this particular field, while for the 'hearers', little if anything changes in the ways in which they are understood or treated by the world at large.

One musician who has spoken frequently about his experiences, is concert pianist John Lill. At the start of his career, and when in Moscow practicing before competing in the prestigious Tsaichowsky Prize, he had visions and communication concerning the outcome of the contest. Subsequently and frequently, he has had the experience of playing well beyond his acknowledged skill, and sometimes has seen himself playing from *outside* his own body. In private correspondence, he has acknowledged that there is a fine line between accepting a gift of collaboration, and giving oneself entirely to the control of the muse. It is a loss of personal control that can rebound with unpleasant consequences.

The history of the arts is littered with the tales of unfortunate individuals who have given themselves entirely into the hand of their muse, and have lost their own identity. Some have ended up mad, and others in suicide.

In this general context, it is worth mentioning briefly the strange changes in character that have been reported by the recipients of major organs by transplant. One man who received a heart in recent times has developed a strong artistic talent, never previously having shown any flair or inclination to draw or paint. The deceased donor of the heart had, in life, been a very competent artist. To me, with the experience and acquired knowledge that I have, the obvious explanation relates to the fact that the donor would have died in an accident or other traumatic event. In many cultures, including parts of our own, it is strongly believed that in such circumstances the released and highly disturbed spirit would remain close to its body, and thus would proceed to where the transplant would take place. Logically, therefore, seeking reattachment to the living, it would join the recipient and contribute to the latter's overall persona.

Moving on, I remember very well an occasion when I was still at work, and I had attended a course devoted to a particular maintenance strategy. I had a need to train first-line staff to be able to do initial fault-finding in equipment that normally required the attention of craftsmen of several different disciplines. The course was interesting and to some degree innovative. Following the final lecture, I sat at the small bar endeavouring to unwind, when it turned out that the course leader wanted us all to take a test on the training that we had received. When I had put down my pen after completing the final paper of my degree Finals, I had made a firm resolution that never again would I sit an exam or test, unless it was in my own interest to do so. This was not in my interest, and so I stayed with my drink while the others went albeit reluctantly to take this test. Approached by the course leader, I firmly refused to go in. He persisted, I refused. Eventually running out of argument, he stood beside me trying to dominate me and willing me to comply. I didn't go in, and he left.

Silent domination. This is a ploy that is used frequently, possibly even with a sub-plot of voiceless 'cajoling'. I recognise these for what they are, but even so, being subjected to the ploy is very undermining and distracting, particularly if one finds oneself marshalling mental 'arguments' in an effort to counter the domination. In the book, I describe certain natural environmental conditions that in themselves are able to undermine sensitive individuals, and this type of ploy is often used when these conditions are at their most intense.

If one persists and refuses to do what one is being pressed to do, an ambience of 'burning resentment' may settle as a cloud around one.

I am sure that most people will have experienced these conditions in their dealing with others whether at home or work, but then the 'other' is real and visible. Just try to picture the same without a visible 'other', and then you may get an inkling of the trials that beset some individuals, interminably. Reading about these ploys and the others that I describe, they, individually, may not seem such a big deal and 'surely they should be easy to ignore?' But then, remember, it goes on and on and on... 24-7-365/6... and on.... Christmas... New Year... summer holidays.... and on...

And when it is not there, it is still there. The silence, the previously occupied 'space' within your body, both are difficult to cope with. The person being tortured is still being tortured when back in his cell, and the pain has eased. The torturer is still there - somewhere, and can easily return. It is not a theme that I wish to follow, only to give a brief insight. For more thoughts on this topic, read something such as *Prisoner Without a Name; Cell Without a Number*. Unfortunately, I forget the author's name; he was incarcerated and tortured in Argentina during Peron's early years.

If I breathe, I cannot listen. Seriously. If I breathe in a deep and relaxed manner, I cannot *listen*. I can hear, but I cannot listen. It is all part of our mammalian evolution. Hearing is part of our early warning system - probably one of the prime elements, for it is the one that would be most important after dark. If, in our wild state, we heard an unusual or threatening sound, normally we would shift into 'listening' mode. And our breathing would become shallow - might almost cease as we concentrated. But more than that, for additionally we suspend a number of vital body functions. Usually described simply as 'flight/fight' responses, there is a complex interaction that we do well to study if we are to understand the ways in which the constant listener is undermined - physically as well as mentally.

In my book I try to be specific about the variety of inner responses that may take place. For example, there is a complex tensing of the genitals, and the bladder and anal sphincters. These together have a close response into the base of the throat; while the sacrum and coccyx - our residual tail - react in such a way that would depress and clamp down the tail - if we still had one. At the same time, arms, shoulders, buttocks and legs are preparing for the action for which the 'listening' is preparing us. Except that there is no flight/fight situation. The listening goes on and on, and the various tensions and resultant inner reactions also go on and on.

One of the prime objectives of the complex inner readjustments is the diversion of blood away from unnecessary functions into those that will be fully committed to the life-saving responses implied by 'flight/fight'. Thus the 'locking' of the throat will result in diminution of the blood supply to the brain, with what consequences to the permanent 'listener' one can only guess. The tensions within the genitals may cause functional problems such as impotence, lack of sensitivity and frigidity; those in the sphincters may be the cause of such unwelcome by-products as haemorrhoids, or a dysfunctional prostate. Permanent stresses within muscles and joints may be the source of constant pain, of no known cause. I had a lifelong friend who, from his late teens,

suffered from a persistent one-sided headache and accompanying pain in the buttock and hip on the same side. Analysing him from a breadth of knowledge of his life and way of thinking, and with the knowledge that I now possess, I can see (all too late, for he is, alas, dead) the probable cause. He endeavoured to lead an exemplary Christian life, and fought successfully against what he saw as a major defect, but which most of us would regard as a minor peccadillo.

The discomfort was a distraction in his prayer life, made all the worse by the fact that he was being tormented in his mind by malevolent presences that said that they were the actual cause of his pain and it was a punishment, and so on. In like manner, those with 'sexual performance' problems might easily be derided in their minds, thereby multiplying the anxiety and likelihood of failure. I am using these as examples to illustrate a common ploy even though it may seem to be an extreme one. It is a ploy that has a number of variants that are all aimed at trying to reinforce the dominance of the intruding presences. Wilson Van Dusen wrote of some of these in his chapter entitled "The Presence of Spirits in Madness", citing intrusive entities that claimed to be the source of the constant pain that the particular patient experienced. (The chapter is reproduced in full in Chapter 16 of my book).

Another source to which I return frequently is the book *Silent Music*. Written by a Jesuit, William Johnston, who integrates certain Buddhist thinking and explores the inner realm of the mind in meditation, his book has a chapter headed 'A Perilous Journey'. This is a fruitful source for the study of intrusions into the mind and body of individuals, and refers to "...indigenous beings that under normal circumstances pay little attention to human beings...they are psychologically no better than the average man himself. They are of many natures and some are malicious, cruel and cunning... they can obsess him (the victim) with various compulsions for their own amusement, and in extreme cases can even disrupt the normally automatic functioning of the nervous system, by controlling the brain through the *chakras*. Many mental patients have made the claim of being controlled by subjective entities, *but the doctors in general regard these statements as part of the behavioural aberration, pure subconscious projection, and do not investigate further*".

Kenneth McAll was a missionary surgeon who began his career in China in the 1930's. He and his wife were interned by the Japanese for the whole of the war, returning to Britain following the defeat of Japan. He changed disciplines to that of psychiatry, and worked for the remainder of his career as a Consultant psychiatrist. In time, Dr. McAll realised that the illness of some of his patients might be the result of what the Chinese tradition recognised, namely the attachment of the disturbed spirits of deceased relatives. Having had distressed, possibly abused lives themselves, in death they attached to those whom they knew, and created mental trauma in the latter. In some ways this is a complex relationship that is difficult to describe lucidly, and even more difficult of resolution. As a committed Christian, for Dr. McAll there was only one path, and that was to appeal to 'Higher Authority'. He described a number of cases to which he applied his method in the book *Healing the Family Tree*, and, with others, founded the 'Family Tree Ministry'. This organisation, which has ceased to function following Dr. McAll's death, provided help for those who accepted his understanding of this aspect of mental illness.

In a like manner, the 'Spirit Release Foundation' attempts to provide a similar means of support to individuals and families who believe that the attachment of disturbed and undesirable entities can cause mental disturbance. With two Consultants among its founding members, there are growing numbers of practitioner members who offer help based upon this understanding.

From the time that humanity devised an alphabet and learned to write, individuals and groups have endeavoured to describe what I am trying to describe. Not generally in relation to mental health, but wholly in recognition of the existence of a spiritual state of being – a spiritual existence that is parallel to our own. It has never been my intention to join the throng of these writers, but rather do I find myself in the rôle of the blind man who is trying to describe just that bit of the elephant that he can touch. Do not underestimate the size of the 'elephant', nor the intelligence and power that reside within it. In fact, be prepared to find that the 'elephant' – the overarching realm of 'Spirit' – embraces more power, intelligence and resource than ever we can imagine.

Recognition of this by peoples in the past has inevitably resulted in the creation and development of a religion. And with religion have come doctrine and dogma, ceremonial and sacrifice, priesthoods and acolytes, schisms, persecutions and wars. The last three helping the 'cause' of what all peoples have recognised, namely the 'cause' that is the antithesis of what religion should be promoting – the 'cause' of malevolence and evil. Many individuals have been driven away from their native religions because they do not know – have never seen or been introduced to – the reality of 'Spirit' and the possibilities that flow from working in harmony with it.

At some stage of my own development that flowed from the onset of 'voices', I told one priest of my experiences, to be met with "Oh you poor fellow, you've had a breakdown – but you're obviously alright now. Get the kettle on, there's a god chap." Another reacted by saying "You must beware of private revelation." And that was it – no exploration, discussion or follow-up of any sort. As you may imagine, I have proceeded subsequently by trying to share my experiences and insights directly through my writing. My 'religion'? It is within me, and gives me the resource and the direction and the confidence to continue writing, but it is private. However, it is what it is by virtue of the unquestionable spiritual experiences that have befallen me – experiences that leave me no room for doubt.

Inevitably, I have concentrated in this essay upon all that is negative, and all that derives from the interaction with the malign intrusions. Inevitably, I have to turn to someone who wrote from the heart about all the good that befell him by way of the Spirit. And thus, in looking for the positive, for the hope that can come from interaction with the benign, who better can I ask than Saint Paul? Writing in one of his famous letters, he describes the so-called fruits of the Spirit. He writes: "What the Spirit brings is very different: love, joy, peace, patience, kindness, goodness, trustfulness and self-control..."

I know: to many at the far end of voice-hearing, to those who have been abused, to those whose minds have been invaded as a consequence of drug or similar abuse – I know that to many the above will appear as so much pious pie in the sky. The probability is that they have never been at the receiving end of

these qualities; have never known the life that may result from their presence. Yet the knowledge that this void might exist in these lives provides a starting point for their healing.

But before the starting point can even be reached, from what I have written it has to be recognised that no existing drugs or those yet to be invented will ever 'cure' voice hearing. The most that they can achieve is the suppression of mental function to such an extent that the intrusive presences cannot penetrate. But at what price? Have you ever read the list of contra-indications and side effects of the major anti-psychotic drugs? Open a copy of the British National Formulary and read - and pray that *your* mind and body never finds themselves the victims of this witches catalogue and inventory of adverse conditions. The whole list should be chanted like a litany by the medical staff and patients at the start of every day. "From extrapyramidal symptoms and tardive dyskinesia - Lord save us. From drowsiness, apathy, pallor, nightmares, insomnia, depression (and more rarely agitation) - Lord preserve us. From gallorrhoea, gynaecomastia, impotence and weight gain - Lord protect us. From headache and dizziness, urinary incontinence, priapism and delirium; from neutropenia and potentially fatal agranulocytosis - may the good Lord deliver us." And so on...

Withdrawal from the drugs presents many potential problems, all of which are listed in the BNF, but when one reads that "...the need for continuation of treatment may not become immediately evident because relapse is often delayed by several weeks after cessation of treatment" something else becomes evident. A mind that has been suppressed by prescribed drugs may be inaccessible to undesirable intrusion. However, once the treatment has ceased, and several weeks have elapsed, the mental channels are clear once again, and intrusion begins again - i.e. the patient has a 'relapse'.

It is most interesting how sharing my thoughts on the phone with my brother can help me to bridge an impasse in my writing. I had reached the point where I was trying here to illustrate the ambience that one should endeavour to create in the environment and life of the disturbed voice hearer and victim of intrusions. In my mind, I was comparing the vast disparity between the spiritual 'presence' within the ancient cathedrals and places of pilgrimage, and the malign and disturbed milieux of some of the ancient jails. I was further trying to bring these down to a manageable size to fit into the everyday lives of those whom we are endeavouring to 'rescue'.

Discussing with Bruce what I was trying to say and the difficulty I was finding in putting it cogently and lucidly, he recounted an event from this morning within his church. (This is several days since I wrote earlier of his comments). Not in the context of an actual service, but while he walked up the aisle he became conscious of someone walking behind. Turning he met a man who introduced himself and who went on to say that he often came into the church to pray 'because the spirituality of the place wrapped itself around him like a soft blanket, and made it so much easier to become absorbed in praying'.

That, effectively, brings my cathedral down to size, and brings the context into the everyday, and the everywhere. And the questions resolve themselves into "How do you create a sense of personal worth in someone who

has been so belittled by the unseen presences within their lives that any concept of self-esteem is totally lacking?" "How do you bring them back in touch with their own bodies and minds, elements of themselves that have been undermined and neglected?" "How do you do this without themselves having to be aware of these aspects of 'the spiritual' in the process - at least until they are sufficiently in control again to appreciate the reasons?"

And most important of all - "How do you provide the answers when everyone whom you are trying to help is, first and foremost, an individual?" Yes, an individual. In everything that I have written, whether it be the book or various articles and essays, repeatedly I have stressed and emphasized this. In my article entitled 'I Don't Believe It', I take it as a core issue, particularly in relation to the ten-year Swedish study of 50,000 conscripts, when their use of cannabis and its effects upon their mental health were examined. My case for criticism is that unless one is dealing with 50,000 clones, it is unwise to draw any conclusions that relate specifically to any one individual. I also point out that cannabis, along with peyote/mescaline and 'magic mushrooms' are the hypnotics of choice of the shaman figures worldwide when they seek the presence of their spiritual 'other'. In other words, 'recreational' users of these substances may open themselves unwittingly to unexpected, and definitely unwelcome spiritual intrusion.

For an entirely different purpose, I began to re-read a book that I am sure I haven't opened for twenty years. It deals with a topic that was well to the fore then, but which I haven't heard mentioned for a number of years. It is all about 'burn out' - the depletion in an individual of the resources - psychological, emotional, spiritual and physical - that make a person whole and able to function well in every sphere of daily life. There are strategies described that assume that the burned out individual is able to follow through self-motivation. Many of these could be applicable to someone who is completely undermined by voices and presences; but self-motivation is signally lacking when even facing the present day can be a daunting task.

It is acknowledged at the outset and subsequently taken for granted "that the person in burnout has a need for bodily care, proper nutrition, adequate sleep, cleanliness, sufficient physical exercise, regular periods of rest, vacations, a physician's care, along with the usual psychological and emotional supports of friends, family and professionals. In short, for staying fully alive we (the Authors) emphasize the need for the burned out person to maximize all the normal energy resources available to them."

I wish! The point that I am trying to make is that the undermined voice hearer needs all of these, but has to be 'partnered' to be able to achieve many of them. In another piece of writing, I use the analogy of the three-legged race - of how each individual has to be supported and motivated. I found such a partnership in a different sphere when I visited some of the 'Camphill' communities in Scotland. I was acting as a sort of guardian to a young woman who had come to stay with me. She needed a secure and tranquil environment within which to stabilise her life, and these communities appeared to be ideal. Founded by Dr. Karl König, an eminent Viennese paediatrician, a Camphill community is created by a group of people who live, learn and work together according to Christian ideals and deriving inspiration from the philosophy of

Rudolf Steiner. The co-workers and those with special needs who come to communities live together in an atmosphere of mutual respect.

Somehow, the structure and strategy of communities such as these, and of the 'ashram' of India, must be created in the wider community, and here one has to face the greatest change that has to take place. The vast sums of money spent on drugs must be applied instead to the development of human resources, to the employment of support workers for whom this is a *vocation*, not a profession. The provision of halfway houses for individuals making the transition between hospital and the everyday world may appear to be ideal. However, having had contact with some who have passed through them, the constant presence of others within the house with mental health problems can be stultifying. Unless there is a 'dynamic' created, the environment can descend into a glorified and desultory 'wallow'. Equally, there is the prospect of relationships developing between residents that may appear suitable and sustainable within the unnatural confines of the 'safe house' but which may collapse under the stresses experienced in the wider community and result in psychiatric readmission. Additionally, 'safe' may be a misnomer, as one young woman of my acquaintance discovered when she was raped by a fellow resident.

In the Camphill Communities, those with special needs live within normal families, some of whose members follow general occupations, while others work within the Community as teachers, nurses and the like. More than other factors, it is this integration that appears to be at the heart of the success of the Community strategy.

Several weeks have elapsed since I wrote that paragraph, and I had thought at the time that I was in sight of the finishing line. However, recent events in the lives of two young friends have given me much to think about, and I could not move forward.

Ruth and Elizabeth are both in their thirties, and are friends of mine whom I see or speak to from time to time. Both have long histories of hearing voices and experiencing all the other phenomena that I write about, and each could write a book that would probably be as long as mine. Their experiences within 'The System' and - particularly Elizabeth - at the hands of the mental health professionals would fill several chapters of their books, and it was the effect upon me of knowledge of these experiences, that really brought me up short. My article was following a logical progression to its end, and I was ready to propound my ideals, when I realised that such ideals are useless in the face of the intransigence and closed minds of many of these same professionals. Theories abound, and they, together with the lists of available drugs, seem to form the core around which many a closed or cement-set professional mind functions.

And not just mental health professional minds. Elizabeth has recognised in her own experiences much of what I write concerning mine, and the consequences of spiritual intrusion. Further, she could easily find a place in the work by Wilson Van Dusen entitled *The Presence of Spirits in Madness*. However, when she tried to have a discussion in this vein with someone who should be alert to things spiritual, namely her parish priest, he dismissed her analysis and declared adamantly that it is all due to 'a chemical imbalance in the brain'. This is the belief of many, although I would defy anyone holding this

belief, to explain why this chemical imbalance should on one occasion so dominate Elizabeth that she lost all ability to resist and, totally cowed, did as instructed by the voices in her mind – namely she drank some white spirit.

But then, the psychiatrist under whose charge she has been for a long time, is doing his damndest to alter the delicate chemical framework of her brain. No doubt with the best of intentions, but she has been his patient for so long that he appears to have lost sight of her as an individual. Elizabeth is classed as ‘psychotic’, and so has to have an ‘antipsychotic’ drug. The consultant decides that she is depressed as well, so prescribes an antidepressant. He is obviously ignoring the fact that one of the many side effects of the first drug is to cause depression! Naturally, the antidepressant also has many side effects - one of which is to cause hallucinations - which is one of the problems experienced by ‘psychotics’, I believe. And moreover, the two drugs in question *should not be taken simultaneously!* Elizabeth, of her own choice, decided to stop taking the drugs, but was persuaded to restart by her GP, on the grounds that the antipsychotic one ‘would help her to sleep’, as she was experiencing difficulty - except that another of the side effects of the antipsychotic drug is to cause insomnia.

Most people have read the ‘Alice’ stories – In Wonderland and Through the Looking Glass – and will be familiar with the ‘Caucus Race’. Everyone runs in a circle and keeps running until they stop – there is no start and no finish – and everyone is a winner. Except in the case of someone such as Elizabeth who appears to have long been kept running in circles, and who has lost out thereby through being deprived of opportunities to display and develop her many and varied talents. Fortunately, she has persisted in rejecting the drugs, and while she has explicable ups and downs, as do most people, she is rapidly becoming alert and bright and liberated.

Many people have been seduced by the writing of Julian Jaynes and his theory of the ‘bicameral mind’ – simplistically, the concept of the mind having two ‘chambers’ that are capable of independent action and are capable of ‘talking’ to each other. In the case of Ruth, it appears that one ‘chamber’ had decided that it was God, and ‘God’ was immensely displeased with Ruth, and hounded her into believing that she was not fit to live and could only purge her nastiness by committing suicide. First, ‘God’ urged her to throw herself under a bus or lorry, but when Ruth quailed at this, demanded that she should jump into the river, which she did. At which point, the other ‘chamber’ took over, and in a calm and steadfast ‘voice’, directed her to swim towards the shore, and then, when she tried to walk through the deep mud, instructed her to crawl. Covered from head to toe in mud, and naked from the waist down, she arrived at the door of someone who is a good friend of us both, and was given succour.

Ruth is convinced that she is the victim of adverse spiritual intrusion – but how do you convince the psychiatrist or psychologist who, from lack of personal acceptance of anything remotely ‘spiritual’, resolutely refuses to work within the patient’s own understanding? I could digress at length on The Retreat Hospital in York, where ‘the spiritual’ is fully incorporated in the life of the hospital and the treatment of patients. Or on such organisations as The Spirit Release Foundation, dedicated as it is to the support of individuals through recognition of the existence of ‘attached’ spiritual entities. Or on a

book such as *Remarkable Healings* by psychiatrist Dr. Shakuntala Modi, in which the author describes many instances of illness attributable to spiritual intrusion. However, such digression or enlargement appears fully in my book, and I will not indulge in repetition, but to conclude with the 'picture' of Elizabeth sitting in frequent sessions with a psychologist who doggedly, to the point of bloody-mindedness, will not acknowledge the existence of *anything* spiritual.

Let me say, I would not, *could not*, be a mental health professional, particularly one wedded to the accepted forms of mental health practice. I could not sit in frequent sessions with 'George', whom I have met, repeating regularly "I'm going to top meself. I'm going to top meself" without thinking "For God's sake go and do it and don't make a mess". I could not, if I had any conscience, prescribe some of the vile concoctions that pass as 'therapeutic' agents, concoctions that have side effects that are far worse than many 'natural' illnesses. (Development of the incurable neurological disorder *tardive dyskinesia* is a significant risk with.... Recently the FDA warned that *hyperglycaemia* and *diabetes* may result from atypical antipsychotic drugs...)

How would you feel if you lost control of your bladder? There are times when it happens to Elizabeth, and she describes graphically certain events and incidents - and I try to picture the distress and *humiliation* of someone who dresses well and is fastidious, yet has leakage or greater in such places as a shop, library, lecture room or canteen. Yet this is a 'side effect that usually does not require medical attention', but should be reported "if it becomes bothersome" !!

An 'acceptable' side effect! Who decides what acceptability is? Certainly not the patients, and certainly not those receiving 'coercive' psychiatric intervention. I am far from my starting point, but the digression has been forced upon me as I reflect upon the lives of my two young friends. And yet, in a way, I have been brought back to the beginning, for Elizabeth has become a frequent visitor to my home, either by herself or with her young daughter, and while she is here, she is no different from any 'normal' human being. In fact, she is more articulate and has a wider range of interests with a matching vocabulary than many individuals that I know. She smiles and laughs, *and is happy*. And her presence here demonstrates the reality and truth of what I have written above.

On her most recent visit, Elizabeth expressed concern that she was suffering from 'bi-polar disorder' (Lord, how the terminology appears out of her long sojourn in the world of psychiatry!) because on the previous visit she had been happy and engulfed in laughter, which she put down to 'euphoria' - in stark contrast to the dark cloud that envelops her when in her everyday situation. I had to explain that what she had experienced was normal, natural human joy and happiness - experiences quite foreign to her over many years. Yet there is nothing miraculous in what I do. Everything stems from my seeing her as an individual, and providing support and understanding that derive from all of my own experiences. Support that is made easy in this tranquil, 'healing' environment in which I live, but which should be at the core of all that is done to improve the lives of those who are plagued by intrusion into their minds and bodies, and who, effectively, have no lives that they can call their own.

There are several other ways in which Elizabeth's life has improved - changes of attitudes in certain groups or individuals; help coming from

unexpected quarters - and so on. And with the improvements, one can recognise the effects of the one therapy that exceeds all others, namely prayer; for many groups and individuals have been, and still are including her in their prayers. Over the many years since I had my own spiritual awakening, I have learned that, in the main, prayer is not answered as one might expect, i.e. by a dramatic intervention. Rather does it happen slowly and subtly as minds and attitudes are influenced, and in other ways that are too numerous to record. And just as the ice-locked land slowly thaws and the buds of spring begin to open to that day when one looks out in the morning and detects the first flush of green, so the life that has been locked in the winter of misery and defeat, shows the first smile upon its face - and can't say exactly why.

Normally when I write an essay or article, I am able to arrive at a well-planned conclusion. With this work, I cannot, and it has to remain open ended...