

By-Products or By Design? Considering *Hearing Voices and Other Matters of the Mind*

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Abstract

Hearing Voices and Other Matters of the Mind seeks to bring the theories and discoveries of the Cognitive Science of Religion to broader discussions of mental health. In doing so, the authors introduce auditory verbal hallucinations as one example of a supposed continuity between religious experiences and mental disorder. Based on up-to-date research into the phenomenological overlap between the voice-hearing experiences of those with and without a mental health diagnosis and those who report hearing spiritually significant voices, this essay elucidates the complexity of presupposing such continuities. We critique the notion that the cognitive mechanisms implicated in religiosity are inadvertent ‘by-products’ of the mind’s operations and propose, rather, that they are the inevitable outcomes of human meaning-making.

Keywords

Voice-hearing; Auditory Verbal Hallucinations; Interdisciplinarity; Explanatory Pluralism; Continuum Hypothesis; Spiritually Significant Voices

[I heard a voice] only once in 1980 after the birth of my very premature triplets. I was driving home from the hospital and I heard a voice from behind me saying “Those little babies are going to be all right.” The experience I had felt like there was someone physically present in the back of my car...I was 35.

It was a normal voice (not one that I recognized), which gave no indication of sex; it was on the left about a couple of yards away - at least that was what it sounded like. It was clear and calm and followed immediately upon my request in prayer for help...It was not at all like a thought: it was a sound - or at least, experienced as such...It was rather impersonal, with no characteristics that suggested anything about it. Just, neutrally and dispassionately, a voice...I must have been in my early fifties.

For many years, the singular, sudden, distinct, authoritative, masculine, sound of my first name being called. Usually to one side of me, and so surprisingly as to cause me to turn in the direction of the sound... Always masculine. Authoritative but softly so...Always completely unexpected and unpredictable...Over time, I have come to a realization that it is God.

The experiences above were recounted to us by three separate individuals as part of a study investigating the phenomenology, context, and personal significance of spiritual voices (Cook et al., 2020). These three cases illustrate both the diversity of experience across this specific sample as well as some of the strikingly consistent elements of spiritual/religious voices more generally. Some recall a characterful voice, others a “neutral” voice. Many explicitly claim to have heard the voice audibly, and the majority tell of these events occurring only once. How might these features relate to cognitive scientific frameworks for understanding voice-hearing? And what light do these details shed on the apparent continuity between some forms of religious experience and the hallucinatory episodes reported by individuals struggling with psychosis?

As researchers at the intersection of religion, social science, and the psy disciplines – whose work is interdisciplinary and driven by a conviction that religion/spirituality must not be ignored either by the scientist or the clinician – we were delighted to encounter *Hearing Voices and Other Matters of the Mind* and applaud McCauley and Graham for their willingness to engage such important questions. Having recently completed several years of studies of both religious and non-religious voice-hearing experiences as members of the Hearing the Voice project at Durham University, we were also interested in McCauley and Graham’s examination of the relationship between auditory verbal hallucinations (AVHs) and aural forms of religious experience. Although the following commentary will address several points from the book, our primary focus will be on the discussion of experiences of spiritually or religiously significant voices.

Cognitive Claims, Clarifications, and Continua

McCauley and Graham’s central claim is well-stated:

...that some religious experiences share features in common with some mental disorders – including hearing voices, suffering from inconsolable depression,

feeling urgent needs to carry out exactly the same actions repeatedly – is simply a way of highlighting the possibility that theories that explain such phenomena in one of these settings might also do so in the case of the other (p.29).

The more pointed form of the argument seems to be that the tools and fruits of the cognitive science of religion (CSR) qualify it for a rightful place at the table of mental health research. The illustrative cases of religious cognition and clarifying sketches of the relevant cognitive theories is intended to serve this larger purpose. Fortunately, along the way the authors not only provide a helpful introduction to the most important insights of CSR but also acknowledge several areas of mental health research that have garnered a great deal of attention recently. For example, CSR's illumination of the "implicit cognition" operative in many religious experiences, whereby mental mechanisms and processes function in an unreflective and unconscious manner, may aid in our understanding of what Jean-Paul Sartre called the "captive consciousness" of some hallucinatory experiences (2010, p.44). As Tanya Luhrmann has more recently observed, religious experiences seem to take place in an "in-between" mental state, a sort of liminality of consciousness that is not quite the individual's inner life and not quite the external world (2020, p.80). In our own work this "implicit" element may be most clearly manifest in the difficulty with which participants describe their religious voice-hearing experiences. Being partly due to unreflective cognition, voice-hearers often struggle to articulate the qualities and emotional states accompanying these otherwise very meaningful events.

Yet, as a growing body of literature demonstrates (Larøi, et al., 2014), cultural influence is as crucial to our understanding of extraordinary religious experiences as is "implicit cognition". McCauley and Graham recognize this, considering at some length the role of cultural forms and inheritances in the nature and content of religiosity as well as the implications this has for attempts to devise general diagnostic criteria within clinical practice. Getting from context-dependent religious forms to critiques of the Diagnostic and Statistical Manual (DSM) of Mental Disorders (critiques we largely share) comes by way of embracing another recent development in mental health research – the possibility of a continuum or spectrum of mental/quasi-sensory phenomena such as voice-hearing. McCauley and Graham desire to highlight the supposed continuity between religiosity and mental disorder but, to their credit and to the benefit of the reader, they address other continuities as well – acknowledging, for example, the mounting evidence that "normal" and "abnormal" cognition

is not separated by an impermeable neurological, mental, or phenomenological line but by subtle qualitative gradations.

The continuum hypothesis (Luhmann, 2017) suggests that there is cognitive and phenomenological overlap between experiences sometimes considered pathological and those considered non-pathological, a contention with substantial implications for mental health research. For example, McCauley & Graham seem to assume from the outset that thought insertion is a delusion, whereas in fact this phenomenon may be understood as existing on a spectrum with AVHs, more concerned with agency and ownership of thoughts than with content of thought (Humpton & Broome, 2015). This does not in any way detract from the continuity hypothesis that McCauley & Graham assert, in fact it reinforces it, but it moves the discussion on thought insertion away from the topic of delusion back to the observation, in our research and in other studies, that AVHs often have thought like qualities, are characterful, and are experienced as having agency.

A continuum would not only indicate that there may be cognitive overlap between the types of experiences reported by religious adherents and those reported by people experiencing psychosis but also that that overlap may result from an inescapable finitude to human cognition and lived experience. For this reason, we would question the use of the term “normal” as opposed to “religious”, when to be religious is in fact normal worldwide. In other words, one key element of McCauley and Graham’s argument, that universal and evolutionarily advantageous cognitive mechanisms underly both religious experiences and “mental abnormalities” (to use the language of their subtitle), may actually negate their assumption that there is anything rightly labelled “abnormal” in the first place. To talk of “cognition associated with mental disorders” is also a gross overgeneralization. Abnormalities of cognition are not the same in different mental disorders. In any case, why should categorically different or discontinuous cognitive processes be found in the three groups? Why should we expect anything other than a continuum (or – more precisely – continua)?

By-products or By Design?¹

The chapter on autism begins with the contention that exceptions do not prove the rules. We agree. Exceptions, in fact, call the rules into question – not by “proving” anything

¹ Our use of “design” in the remainder of the essay is not a reference to “Intelligent Design” debates in theological circles, but simply reflects our contention that cognitive mechanisms have evolved to perform certain functions the outcomes of which are predictable if not inevitable.

but by complicating the picture, by foregrounding nuance and questioning the scope and utility of the rules. The “by-product” theory of religiosity is a sort of cognitive-based theoretical skeleton meant to support the flesh and vital organs of a vast swath of human experience (of “Hearing Voices and Other Matters of the Mind”). Here, we would like not only to introduce several exceptions related to voice-hearing but also to express a bit of concern over the ability of the skeleton to bear the weight placed upon it.

Some sections of *Hearing Voices and Other Matters of the Mind* argue convincingly about the growing evidence that religious cognition and those thoughts and behaviors historically deemed pathological have more in common than once believed. It is one of the veritable strengths of the volume. Yet, those same sections of the book also undermine the distinction between normal everyday cognition and the religious or pathological forms. For example, the book begins with an anecdote concerning glossolalia. The reader is confronted by an illustration of the manner in which individuals may engage in deeply meaningful, but aberrant, speech acts. In this case, speaking in incomprehensible utterances is compared with psychosis sufferers muttering to themselves (or to no one in particular). The idea, of course, is that both appear to have forgone the rules of grammar and syntax as they speak without concern for effective communication with others. McCauley and Graham assert that the religionist had no addressee for his utterances (which is questionable) nor were those vocalizations spoken in any recognizable language, implying perhaps some error or deviation in both source monitoring and language processing. However, within the cultural context of charismatic Christianity, such behavior is both recognized (as biblical) and affirmed (as a sign of spiritual flourishing) and is neither erroneous nor deviant.

Here, the book introduces “popularity exceptionalism”, a helpful term capturing the general acceptance of some behaviors and beliefs that enjoy cultural sanction even when other similar behaviors and beliefs are pathologized. The tacit assumption, however, is that glossolalia and the confused speech of schizophrenia may be compared based on sound categorical criteria developed by the psy disciplines for distinguishing normal from pathological mental states/processes. Yet, as McCauley and Graham persuasively argue amidst their discussion of glossolalia as well as later in the book, the limits of cognition and potency of cultural norms means that many experiences once classified and stigmatized as pathological are increasingly understood as normal aspects of human experience separated only by degrees. In that light, by what criteria are glossolalia and the disorders of speech observed in schizophrenia appropriately compared as forms of “abnormal” or “disordered” cognition?

For the individual speaking in tongues, there was an addressee: God. The empirical physical presence or absence of that addressee surely is not the distinguishing feature of a misfiring or deficiency in the speaker's cognitive functioning – lest we identify all imaginary companions, inner dialogues, creative writings, dreams, and countless other mundane phenomena as disordered mentation. We return to this below, but it is worth mentioning here that the “implicit” or pre-conscious mental mechanisms of the individual engaged in glossolalia may have been operating as they would in any other scenario – in a sense, functioning “by design” rather than as a “by-product”. His epistemological presuppositions, however, likely differed markedly from those of his onlookers.

As the discussion moves beyond anecdote to a closer look at the phenomenon of voice-hearing, these *a priori* categories and criteria become even more problematic. We argue that many who hear voices, including those who report spiritually significant voices, do make the unequivocal claim of having been directly addressed by the audible speech of an unambiguous but materially absent speaker. Indeed, the immaterial other – whether a spirit, deity, or a voice from one's traumatic past – figures quite largely in religious experiences as well as in AVHs. However, the perceptions and processes by which an individual comes to attribute their auditory experiences to that immaterial other may be quite complicated and, at times, vary strikingly from those employed by others. The complexity belies easy formulations of “ordered” versus “disordered” or “normal” versus “abnormal”, particularly when considering the sheer magnitude and ubiquity of human religiosity across time and place. Somewhat similarly, to rely heavily on assumptions of the “implicit” or “passive” quality of voice-hearing is to risk ignoring fulsome accounts of the experience and its integration into the life narrative of the experiencer that may clarify how “practiced naturalness” is relevant and why source-monitoring or agency detection is engaged differently in different cases. In our view, in-depth qualitative investigations of voice-hearing illuminate crucial phenomenological and contextual similarities/differences across a range of auditory experiences, allowing researchers to question previous essentialist assumptions about mental illness and to begin plotting the salient points on a theoretical spectrum.

Phenomenology and Practice

The second chapter of *Hearing Voices and Other Matters of the Mind* introduces voice-hearing and thought insertion as “sources of religious experience and symptoms of illness.” To represent the former, religious experience, two historical figures are intermittently discussed: Teresa of Ávila and Joan of Arc. Both figures claimed to have

received direct revelatory communications; in Teresa's case from God, and in Joan's case from the archangel Michael and saints Margaret and Catherine. Teresa, to borrow Max Weber's terms, was more of a charismatic individualist than a religious virtuoso. Her theological endeavors and claims of ecstatic mystical experiences were often rejected by her co-religionists and possessed unique socio-political potency because of her context. The Catholic Church sought clarity on topics such as personal communion with God, and Teresa's eccentricities served as a lightning rod for ecclesiastical upheaval. Put simply, Teresa was a remarkable outlier. Over the past few decades, some scholars have even entertained the notion that she may have suffered from epilepsy (Barton, 1982; García-Albea, 2003).

As for Joan of Arc, the records that we have of her encounters with the saints were recounted with detail in response to hostile interrogation in court. In these, she describes multi-sensory experiences, including auditory voices heard with the ears. What is more remarkable about Joan is her apparent ability to persuade others of the significance of her voices, and to muster patriotic support. As popular history tends to preserve the extraordinary, one wonders about the extent to which either Teresa or Joan are suitable exemplars of religious voice-hearing.

Recent studies of people who have heard voices² – clinical and non-clinical, religious and otherwise – shed supplemental light on the phenomenon. For example, the participants in our own research on spiritually significant voices, like the individuals quoted at the opening of the present essay, are contemporary and, in many ways, much more ordinary (as was Joan before her rise to fame) and representative than either Teresa or Joan. When combined with the latest data on AVHs our qualitative examinations begin to paint a much clearer aggregate landscape of religious voices.

For instance, our colleagues conducted a study of 153 voice-hearers (Woods et al., 2015), which was open to both clinical (having received a mental health diagnosis) and non-clinical (never having received a diagnosis) participants. Among the overall sample, only 9% reported having “thought-like” voices – the remainder reported either purely auditory (44%) or a mixture of the two (37%). When responses were broken into clinical and non-clinical groupings, the results showed that non-clinical voice-hearers were much more likely to hear voices audibly than clinical voice-hearers. Notably, only 16% of participants had made any

² It is important to note that not all such people would consider themselves “voice-hearers” and that to be a “voice-hearer” is also, for many, to assert a certain social identity (Woods, 2013)

sort of spiritual attribution for their voices. In comparison, our study (Cook et al., 2020) of spiritually-significant voices, in a predominantly Christian sample, demonstrated quite different results. In this group, 52% reported solely auditory voices and nearly a quarter (24%) also reported solely thought-like voices, with the remainder being mixed. Both Woods et al. (2015) and Cook et al. (2020) found a near 50/50 split between those who reported voices inside versus outside the head.

Subjects in the two studies differed dramatically on several points. For example, compared to the larger (and far less spiritual/religious) sample of Woods et al, hearers of spiritually significant voices were far more likely to describe: 1) Having experienced only a single voice, 2) Having experienced voices fewer than 4 times, and 3) Having experienced the voice in adulthood (Cook et al., 2020). They were much less likely to report abusive voices, be able to predict the onset of a voice, or report experiencing bodily sensations accompanying their voices. They were also explicit and unequivocal in stating the positive significance of their voices, commonly asserting that these few experiences were “life-enhancing”, “foundational”, and “meant everything” to them.

One of us conducted a similar survey of clairaudient spiritualist mediums (Powell & Moseley, 2021) – that is, individuals who describe receiving auditory communications from the spirits of the deceased. Like non-spiritual voice-hearers, the clairaudient mediums heard many different voices and heard them frequently. Corroborating other studies of clairaudient mediums (Cardaña et al., 2015; Powers et al., 2017), the spiritualists began, on average, hearing voices in childhood not adulthood. They were also much more likely (69%) than subjects in the studies by Cook et al (52%) or Woods et al (44%) to state that their voices originated inside their heads.

It also seems pertinent to mention that less than one-third (29%) of spiritualist participants had encountered Spiritualism prior to their first auditory spiritual experience. Thus, while studies comparing mediumship with mental disorders (Powers et al., 2017; Taylor & Murray, 2012) rightly note the level of control that spiritualists seem to possess over their voices after time spent practicing spirit communication techniques in ritual contexts, Powell & Mosely found that attributing auditory phenomena to spirits often occurs as a *post hoc* interpretation of an early and unexpected childhood event. In other words, not only is it difficult to make generalizations about whether or not religious or spiritual experiences overlap phenomenologically with those of non-spiritual voice-hearers, it is similarly increasingly unfitting to assume that desire is stoked by a religious ritual context to confuse source monitoring and thus engender a religious experience – as McCauley and

Graham do (p.69). In fact, it may be both, as the latest literature on “multiple pathways” submits (Luhmann et al., 2019).

That some similar underlying cognitive mechanisms are at work across all of these groups seems incontrovertible – if agents are detected, agents are detected. However, that the diversity of phenomena and lived experiences captured by different categories of experiences of voices also entail a wide range of disparate cognitive processes would seem unsurprising. How those processes work within and for each group remains unclear. The individuals whose comments opened our essay show us that spiritually significant voices are sometimes distinctive and characterful, they are heard audibly and have specific attributes such as masculinity. In other instances, they are “neutral”. Sometimes voices are many; other times they are one. Sometimes voices are spiritual; many times, they are not. Why not? If source monitoring, agency detection, or language processing hold the answers, they must account for such diversity within as well as between individual groups. They must, for instance, explain why at least 30% of psychosis patients have been shown to recognize themselves as the source of their voices while still being distressed by and “talking back to” those voices (Powers et al., 2017). Similarly, the “by-product” theory of religious cognition must clarify how disruptions or breakdowns in one or more adaptive cognitive mechanisms leads the voice-hearing episodes of some to be attributed to religious agents when the episodes of others receive no such attribution.

Finding Meaning

Perhaps, though, the mechanisms indicated by McCauley and Graham as central to religious experience and mental disorder are fundamentally the mechanisms of meaning-making more generally. Framing them as evolutionary remnants suggests that their role in locating the individual within a meaningful narrative and offering explanations of otherwise inexplicable events is somehow not their intended function. That religious thought and behavior is a “by-product” of underlying cognitive mechanisms may be taken for granted among cognitive scientists of religion, but arguably these elements of what we call religion are more aptly “products” of those cognitive tools and operations. Religion is a universal and historically immense manifestation of human meaning-making, an impulse and a process that, as McCauley and Graham ably demonstrate, relies heavily on several hallmark abilities of the human mind. Could it be otherwise? To insist that ideas or experiences of divine communication or efficacious ritual practice are unintended consequences of cognition is to divorce those cognitive mechanisms from their unequivocal function of giving order to chaos

or personal significance to the merciless vicissitudes of earthly existence. More to the point, the same cognitive mechanisms that McCauley and Graham identify as having “nothing to do with religion” (p.12) are presumably implicated in our ability to enjoy an immersive film, novel, or video game. Indeed, from taking pleasure in haunted houses at Halloween to taking in a well-rehearsed performance of Beethoven’s ninth, the human tendency or inherent faculty for intuiting agentive intentions and emotions and assembling them into stories of personal and social significance permeates much of life. Are these experiences aptly labelled “by-products”? Does the underlying cognition have nothing to do with these either?

To be fair, McCauley and Graham acknowledge that our penchant for narrative reflects our need for sure footing just as they acknowledge that processes like source monitoring easily get confused by the healthiest of individuals in the most ordinary of circumstances (p.67). Our agency detection devices operate every day to do precisely as they claim. Our language processing permits us to make sense of our own thoughts as well as nearly everything presented to us by our human environments. Yet, if these mechanisms are ordinary why is their successful employment deemed “abnormal” (as the book’s subtitle claims)? If our minds did not normally seek efficient causal relationships, did not posit intentionality rather than arbitrariness, did not erect narrative scaffolding to link random events, then it would be unusual and striking when religiosity arose. Instead, it may be that in all of the above cases, cognition is operating as designed – blending embodied behaviors with other bio-cultural possibilities to make adaptive and efficient inferences in service of personal significance and assured survival.

Conclusion

It is not desirable to limit the conversation such that “practiced naturalness”, active cognition, cultural inheritance, and disciplines beyond psychiatry, psychology, and cognitive science are excluded from the religious and pathological phenomena being discussed. Indeed, our understand of the phenomenology of such experiences has been greatly enhanced by permitting voices from the humanities and social sciences to inform research design and implementation. Getting a firm grasp on these experiences matters. For the phenomenology of experiences of the hearing of a voice relates significantly to how and why the experiences are fitted into the meaningful narratives of the individual experiencer. For example, AVHs with accompanying bodily sensations are more likely to begin amidst traumatic circumstances and to be experienced as violent or abusive (Woods et al., 2015). Violent and abusive voices, in turn, are statistically less likely to be attributed to supernatural agents.

Thus, unusual experiences as well as their subsequent interpretation and attribution seem to be products of a complex interweaving of sensory input, emotional valence, personal biography, “implicit cognition”, contextual affordances, and conscious reasoning.

Furthermore, to limit the many varieties of experiences of hearing a voice to a discussion of “passivity experiences” is to turn attention away from much of the complexity we can now appreciate – seemingly disregarding not only the growing literature on the role of practice and learning in these experiences but also the cognitive scientific evidence that, for example, voice-hearers may be searching for and finding vocal patterns in everyday auditory stimuli at a much greater rate than the general population (Alderson-Day et al., 2017).

Ultimately, nuance is the fruit we may now reap from years of widening disciplinary breadth, service user involvement, and cross-cultural comparison in the field of mental health research. We echo McCauley and Graham’s qualms over the enduring utility of the DSM and commend their acknowledgement of culture’s influence on both religiosity and mental illness. In our opinion these critiques, conversations, and calls for change are only now possible due to increasing interdisciplinary emphasis and ever-growing bodies of qualitative and quantitative data gathered by, from, and for those with first-hand experiences of the phenomena in question. However, the central claim of McCauley & Graham’s book (quoted above) is unremarkable. Of course religious experiences share some fundamental features in common with the experiences of people suffering from mental disorders, because both sets of experiences are human experiences, all equally dependent upon the same underlying cognitive, perceptual and affective mechanisms (whether functioning “normally” or otherwise).

Scientific pre-occupation with explanatory pluralism results in a focus on how meaning may be found at the expense of attention to what the meaning of human experience actually is. Spiritually significant voices are significant primarily because of what they come to mean to the individual in their cultural and religious context. Neither CSR nor ecumenical naturalism is necessarily helpful in affirming that personal quest and yet it is – we would suggest – one which is centrally important to human wellbeing. We hope that the future of research on religion and mental health will be one of creative intellectual and disciplinary inclusivity in which the intricacy of “explanatory pluralism” will be expanded by engagement with the humanities so that it might better match the intricacy of what we could call humanity’s *experiential* pluralism.

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